

North Central District Health
Account Code #10455220

Narrative:

The North Central District Health Department serves as the Department of Health for the Town of Vernon. The cost for these services are based on a per capita rate as follows:

\$4.67 x 29,161 population

The request reflects an increase in population from 29,122 used for the prior year's calculation, the per capita rate at \$4.67 remains the same.

Department Summary:							
Account Code	Account Classification	Actual 2013-2014 Expended	Adopted 2014-2015 Budget	Department's 2015-2016 Request	Mayor's 2015-2016 Recommended	\$ Increase (Decrease)	% Increase (Decrease)
51000	Salaries & Wages	-	-	-	-	-	0.00%
52000	Employee Benefits	-	-	-	-	-	0.00%
53000	Professional & Tech. Services	-	-	-	-	-	0.00%
54000	Property Services	-	-	-	-	-	0.00%
55000	Other Purchased Services	-	-	-	-	-	0.00%
56000	Supplies & Materials	-	-	-	-	-	0.00%
57000	Capital Outlay	-	-	-	-	-	0.00%
58000	Other/Sundry	\$ 130,251	\$ 136,000	\$ 136,182	\$ 136,182	\$ 182	0.13%
		-					
	Total:	\$ 130,251	\$ 136,000	\$ 136,182	\$ 136,182	\$ 182	0.13%
	Total Excluding Wages:	\$ 130,251	\$ 136,000	\$ 136,182	\$ 136,182	\$ 182	0.13%

TOWN OF VERNON

FISCAL YEAR 2015 - 2016 BUDGET SUMMARY

DEPARTMENT - NORTH CENTRAL DISTRICT HEALTH

FISCAL YEAR 2014-2015					FISCAL YEAR 2015-2016				
2013- 2014 ACTUAL	ORIGINAL BUDGET	REVISED 6 MO EXP BUDGET 2014-2015	EST EXP 2014-2015	DEPT CODE	OBJECT CODE	ACCOUNT DESCRIPTION	DEPT REQUEST	MAYOR'S RECMD	TOWN COUNCIL
130,251	136,000	136,001	68,000	10455220	58700	GRANTS - HUMAN SERVICES	136,182	136,182	
130,251	136,000	136,001	68,000			58000 SUB TOTAL	136,182	136,182	
130,251	136,000	136,001	68,000			DEPARTMENT TOTAL	136,182	136,182	

**TOWN OF VERNON 2015-2016
BUDGET REQUEST DETAIL**

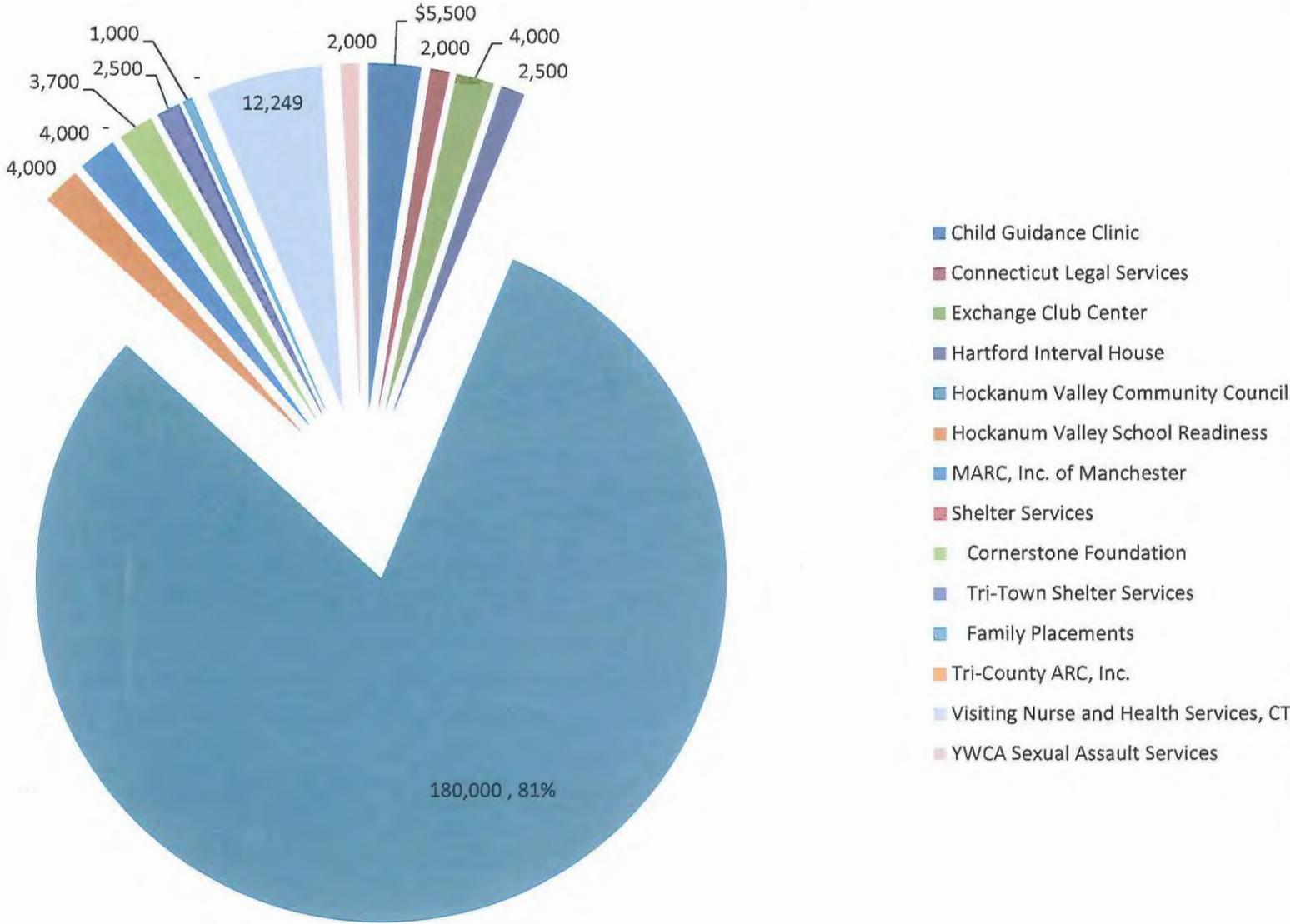
		DEPARTMENT'S REQUEST	MAYOR'S RECOMMEND	TOWN COUNCIL APPROVED
10455220	NORTH CENTRAL DISTRICT HEALTH			
58700	GRANTS - HUMAN SERVICES			
	POPULATION OF 29,161 @ \$4.67; PRIOR RATE WAS 29,122 @ \$4.67	136,182	136,182	_____
	Total Object	<u>136,182</u>	<u>136,182</u>	_____
Grand Total	10455220 NORTH CENTRAL DISTRICT HEALTH	<u><u>136,182</u></u>	<u><u>136,182</u></u>	=====

HUMAN SERVICES ADVISORY COMMISSION

FISCAL YEAR 2015 - 2016 BUDGET SUMMARY

Agency	Budget FY 2013-2014	Adopted FY 2014-2015	Fiscal Year 2015 - 2016						
			Agency Request FY 2015-2016	Agency's Total Budget	Request % of Budget	Human Services Advisory. Comm. Recommend.	Mayor Recommend.	Town Council Recommend.	Increase (Decrease)
Child Guidance Clinic	\$ 5,500	\$ 5,500	\$ 11,000	\$ 5,042,308	0.22%	\$ 5,500	\$ 5,500		\$ -
Connecticut Legal Services	1	2,000	4,000	10,743,673	0.04%	2,000	2,000		-
Exchange Club Center	4,000	4,000	4,000	705,929	0.57%	4,000	4,000		-
Hartford Interval House	2,500	2,500	2,500	1,869,001	0.13%	2,500	2,500		-
Hockanum Valley Community Council	165,000	180,000	200,000	3,688,206	5.42%	180,000	180,000		-
Hockanum Valley School Readiness	4,000	4,000	4,000	509,508	0.79%	4,000	4,000		-
MARC, Inc. of Manchester	2,000	4,000	4,000	8,767,259	0.05%	4,000	4,000		-
<u>Shelter Services</u>									-
Cornerstone Foundation	3,700	3,700	4,000	342,000	1.17%	3,700	3,700		-
Tri-Town Shelter Services	4,500	2,500	5,000	316,450	1.58%	2,500	2,500		-
Family Placements	6,000	1,000	1,000	1,000	100.00%	1,000	1,000		-
Tri-County ARC, Inc.	3,500	3,500	-	-		-	-		(3,500)
Visiting Nurse and Health Services, CT	12,249	12,249	12,249	22,861,315	0.05%	12,249	12,249		-
YWCA Sexual Assault Services	2,000	2,000	2,000	4,261,702	0.05%	2,000	2,000		-
North Central Reg. Mental Health Bd.	-	-	-	-					
TOTALS	\$ 214,950	\$ 226,949	\$ 253,749			\$ 223,449	\$ 223,449	\$ -	\$ (3,500)

Human Services - Mayor's Recommendation - Fiscal Year 2015 - 2016



Visiting Nurse & Health Services of CT
Account Code #10455221

Department Summary:							
Account Code	Account Classification	Actual 2013-2014 Expended	Adopted 2014-2015 Budget	Department's 2015-2016 Request	Mayor's 2015-2016 Recommended	\$ Increase (Decrease)	% Increase (Decrease)
51000	Salaries & Wages	-	-	-	-	-	0.00%
52000	Employee Benefits	-	-	-	-	-	0.00%
53000	Professional & Tech. Services	-	-	-	-	-	0.00%
54000	Property Services	-	-	-	-	-	0.00%
55000	Other Purchased Services	-	-	-	-	-	0.00%
56000	Supplies & Materials	-	-	-	-	-	0.00%
57000	Capital Outlay	-	-	-	-	-	0.00%
58000	Other/Sundry	\$ 12,249	\$ 12,249	\$ 12,249	\$ 12,249	\$ -	0.00%
	Total:	\$ 12,249	\$ 12,249	\$ 12,249	\$ 12,249	\$ -	0.00%
	Total Excluding Wages:	\$ 12,249	\$ 12,249	\$ 12,249	\$ 12,249	\$ -	0.00%

TOWN OF VERNON

FISCAL YEAR 2015 - 2016 BUDGET SUMMARY
 DEPARTMENT - VISITING NURSE & HEALTH SERVICE

FISCAL YEAR 2014-2015					FISCAL YEAR 2015-2016				
2013- 2014 ACTUAL	ORIGINAL BUDGET	REVISED 6 MO EXP BUDGET 2014-2015	EST EXP 2014-2015	DEPT CODE	OBJECT CODE	ACCOUNT DESCRIPTION	DEPT REQUEST	MAYOR'S RECMD	TOWN COUNCIL
12,249	12,249	12,249	-	12,249	10455221	58700	GRANTS - HUMAN SERVICES	12,249	12,249
12,249	12,249	12,249	-	12,249		58000 SUB TOTAL	12,249	12,249	
12,249	12,249	12,249	-	12,249		DEPARTMENT TOTAL	12,249	12,249	

**TOWN OF VERNON 2015-2016
BUDGET REQUEST DETAIL**

		DEPARTMENT'S REQUEST	MAYOR'S RECOMMEND	TOWN COUNCIL APPROVED
10455221	VISITING NURSE& HEALTH SERVICE			
58700	GRANTS - HUMAN SERVICES			
	WELLNESS-HOME,HOSPICE,NURSING (67 VISITS @ \$97.70 PER VISIT)	6,546	6,546	
	COMMUNITY-ELDER WELLNESS (70 @ \$48/HR.)	3,360	3,360	
	IN-HOME SUPPORT - HOME HEALTH AID (31 @ \$29.48/HR)	913	913	
	IN-HOME SUPPORT-HOMEMAKERS (34 @ \$16.32/HR)	555	555	
	IN-HOME SUPPORT - MEALS-ON-WHEELS (100 @ \$8.75 / 2 MEAL PACKET)	875	875	
	Total Object	12,249	12,249	
Grand Total	10455221 VISITING NURSE& HEALTH SERVICE	12,249	12,249	

Town of Vernon Grant Application
Fiscal Year: July 1, 2015-June 30, 2016

ATTACHMENT A

Program Description:

Complete this form for each program for which you are requesting funds. Please keep descriptions brief and be specific.

A. Program Title: Visiting Nurse & Health Services of Connecticut, Inc.

B. Name of program contact person: Todd Rose President/CEO
Name Title
Tel #: 860-870-2307

C. Name of fiscal contact person: Christine McGuire CFO
Name Title
Tel #: 860-870-2471

D. Statement of Need program will address: An analysis of demographics indicates continued growth of the elderly population; those most vulnerable to premature institutionalization. The In-Home Assisted Living Program will address short term acute care needs when third party reimbursement is not available. Community based support includes: Home Health Aides, Homemakers, and Meals-On-Wheels; services that will enable the chronically ill and frail elderly to remain in their own home. Wellness Programs are available to all community residents and are designed to optimize health through education, immunizations and life style counseling.

E. Services to be provided:
Wellness Clinics Meals-On-Wheels
Flu Immunizations Homemaker
Home Health Aide

F. Projected **unduplicated** number of Vernon residents to be served:

Adults: 900 Youth/Children: _____ Families: _____

Actual **unduplicated** number of Vernon residents served in the past 3 fiscal years:

FY 2012-13 Adults: 955 Youth/Children: _____ Families: _____

FY 2013-14 Adults: 882 Youth/Children: _____ Families: _____

FY 2014-15 Adults: 900 est. Youth/Children: _____ Families: _____

G. How do Vernon residents access services:

Residents are referred by hospital discharge planners, their physician, social service agencies or a resident may request services. Services are provided in the resident's home, at senior housing sites and at the town Senior Center.

H. Budget Summary:

Total Agency Budget:	\$22,861,315
Total Program Budget	\$22,749,419
Total Board Fund-raising:	\$58,000
Amount requested from Town of Vernon	\$12,249

List revenue by source:

(Example of possible sources: federal, state, municipal, foundation, fund raising)

SOURCE	AGENCY	PROGRAM
Federal	15,260,677	15,260,677
State	2,523,025	2,523,025
Private Insurance	2,672,911	2,672,911
Private Pay	1,979,911	1,979,911
Municipal	122,895	122,895
Grants	190,000	190,000
Fundraising	58,000	
Non-Operating Revenue	53,896	
Total	22,861,315	22,749,419

- I. What is the percentage increase in your Agency expenses this year versus last year? .65%
- J. What is the percentage increase in your Agency revenue this year versus last year? 1.30%
- K. What new revenue sources is your agency seeking this year?
- a. We have hired a 20 hour grant writer. Currently, we have been successful in obtaining a three year technology grant through the Hartford Foundation. We are also working to identify grant opportunities available as the result of the Healthcare Reform Act.
- L. What other municipalities provide funding to your organization?

Town	Amount
Manchester	\$ 84,260
Ellington	\$ 3,500
South Windsor	\$ 15,575
Tolland	\$ 8,320
Coventry	\$ 0
Bolton	\$ 5,500
East Windsor	\$ 5,740
Enfield	\$ 0
Total	\$122,895

Please contact Alan Slobodien with any questions on this form: aslobodien@vernon-ct.gov : 860-870-3557

Fiscal Year: July 1, 2015-June 30, 2016

RESULTS BASED ACCOUNTABILITY DATA

ATTACHMENT B

Visiting Nurse & Health Services of Connecticut, Inc. (VNHSC) participates in Medicare's required patient satisfaction survey process (HHCAPS). HHCAPS survey results are publicly reported and administered by an independent third party approved by Medicare. All town of Vernon patients participate in the survey process and VNHSC's goal is to consistently score higher than national and regional benchmarks. VNHSC's latest quarterly results (attached) show overall patient satisfaction of 90% which is above the state benchmark of 85%. There were 199 patients surveyed in the most recent quarter with 84 respondents (42% return rate).

VNHSC participates in Medicare's required measurement of patient outcomes. Outcomes are measured by a standardized patient assessment tool (OASIS). Our latest outcome data is attached and shows the majority of VNHSC outcome measures are above the national and State benchmarks. All Vernon patient data are included in the overall outcome scores.

For both Patient satisfaction and patient outcome measures, we are unable to provide data specific to Vernon residents.

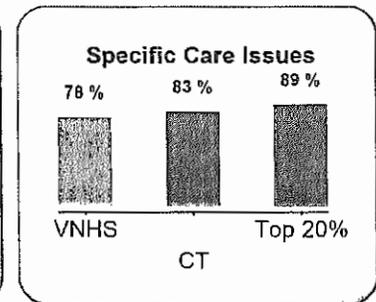
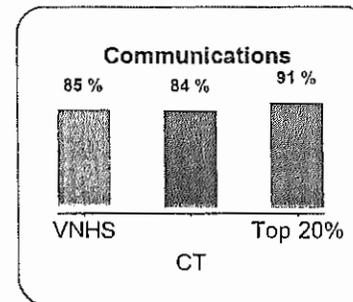
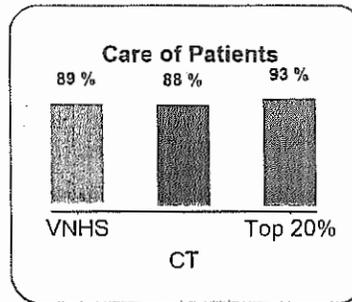
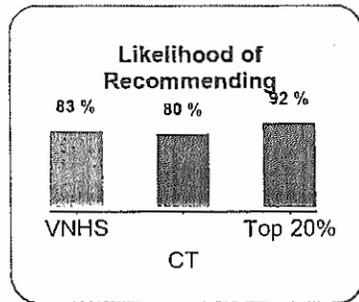
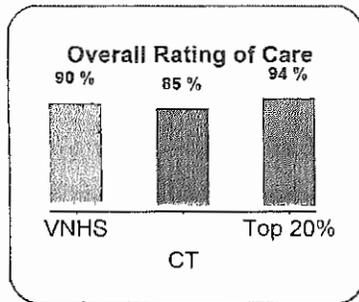


National Patient Satisfaction Benchmark System Executive Dashboard

Three month period ending September 2014 / Publicly Reported Results

Visiting Nurse and Health Services of Connecticut

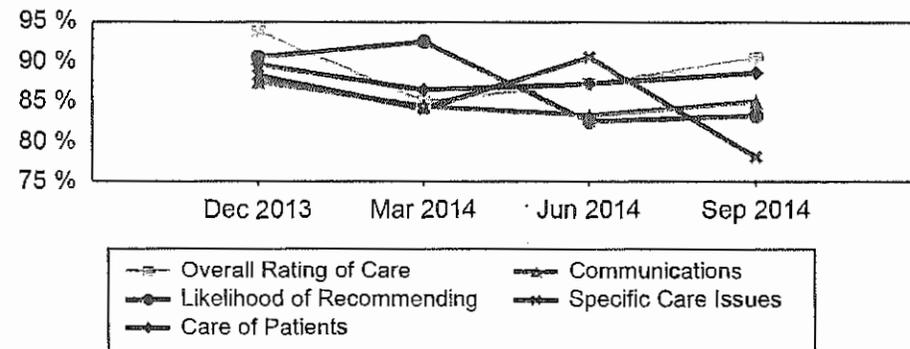
Completed Surveys = 84
Patients Surveyed = 199
Return Rate = 42 %



Your Agency Percentile Rank

	CT	Top 20%
Overall Rating of Care	N/A	N/A
Likelihood of Recommending	N/A	N/A
Care of Patients	N/A	N/A
Communications	N/A	N/A
Specific Care Issues	N/A	N/A

Agency Trend for Publicly Reported Outcomes



Visiting Nurse & Health Services of Connecticut, Inc. Q4 Reporting 2013-2014 - (July/August/September)

Source: Home Health Compare at Medicare.gov

Quality Measure results comes from Home Health Outcome & Assessment Information Set (OASIS-C)

Quality Measures	Data Collection Period July 2013 thru June 2014						State Average	National Average
	VNSHC	Masonicare	VNA Health Care	Home & Community	Gentiva	Interim HC Hartford	Q4 2013-2014	Q4 2013-2014
HIGHER PERCENTAGES ARE BETTER								
Managing Daily Activities								
How often patients got better at walking or moving around.	58%	64%	61%	51%	60%	60%	59%	62%
How often patients got better at getting in and out of bed.	62%	57%	55%	42%	48%	53%	54%	58%
How often patients go better at bathing.	69%	68%	65%	60%	63%	68%	63%	68%
Managing Pain & Treating Symptoms								
How often home health team checked patients for pain	100%	98%	98%	100%	99%	99%	97%	99%
How often home health team treated their patients pain	87%	95%	99%	97%	99%	100%	97%	98%
How often patients had less pain when moving around.	66%	56%	63%	54%	61%	68%	65%	68%
How often home health team treated heart failure (weakening of the heart) patient's symptoms	96%	95%	99%	100%	99%	98%	97%	98%
How often patients breathing improved.	61%	55%	66%	63%	67%	72%	64%	65%
Treating Wounds & Preventing Pressure Sores (Bed Sores)								
How often patients' wound improved or healed after an operation.	87%	88%	86%	90%	92%	93%	90%	89%
How often the home health team checked patients for the risk of developing pressure sores (bed sores)	100%	99%	99%	100%	99%	99%	97%	99%
How often the home health team included treatments to prevent pressure sores (bed sores) in the Plan of Care	99%	90%	100%	90%	96%	100%	94%	98%
How often the home health team took doctor-ordered action to prevent pressure sores (bed sores)	92%	92%	98%	91%	97%	99%	95%	97%
Preventing Harm								
How often the home health team began their patients care in a timely manner	90%	95%	95%	92%	90%	93%	93%	92%
How often the home health team taught patients (or their family caregivers) about their drugs	98%	92%	92%	97%	88%	99%	92%	93%
How often patients got better at taking their drugs correctly by mouth.	53%	54%	50%	45%	49%	56%	50%	52%
How often the home health team checked patients risk of falling	100%	100%	99%	100%	100%	99%	98%	98%
How often the home health team checked patient for depression	98%	99%	98%	99%	99%	99%	97%	98%
How often the home health team determined whether patients received a flu shot for the current flu season	80%	69%	76%	78%	69%	79%	70%	72%
How often the home health team determined whether patients received a pneumococcal vaccine (pneumonia shot)	69%	61%	76%	76%	59%	69%	66%	72%
For patients with diabetes, how often the home health team got doctors orders, gave foot care, and taught patient about foot care.	91%	90%	97%	96%	96%	99%	94%	94%
Preventing Unplanned Hospital Care (Lower Percentages Are Better)								
(Data Collection April 2013 thru March 2014)								
Percentage of patients who need urgent, unplanned medical care w/out being admitted.	11%	10%	13%	13%	12%	10%	13%	12%
Percentage of patients who had to be admitted to the hospital.	18%	16%	16%	17%	17%	15%	17%	16%

Hockanum Valley Community Council
Account Code #10456222

Department Summary:							
Account Code	Account Classification	Actual 2013-2014 Expended	Adopted 2014-2015 Budget	Department's 2015-2016 Request	Mayor's 2015-2016 Recommended	\$ Increase (Decrease)	% Increase (Decrease)
51000	Salaries & Wages	-	-	-	-	-	0.00%
52000	Employee Benefits	-	-	-	-	-	0.00%
53000	Professional & Tech. Services	-	-	-	-	-	0.00%
54000	Property Services	-	-	-	-	-	0.00%
55000	Other Purchased Services	-	-	-	-	-	0.00%
56000	Supplies & Materials	-	-	-	-	-	0.00%
57000	Capital Outlay	-	-	-	-	-	0.00%
58000	Other/Sundry	\$ 165,000	\$ 180,000	\$ 200,000	\$ 180,000	\$ -	0.00%
	Total:	\$ 165,000	\$ 180,000	\$ 200,000	\$ 180,000	\$ -	0.00%
	Total Excluding Wages:	\$ 165,000	\$ 180,000	\$ 200,000	\$ 180,000	\$ -	0.00%

TOWN OF VERNON

FISCAL YEAR 2015 - 2016 BUDGET SUMMARY

DEPARTMENT - HOCKANUM VALLEY COMMUNITY COUN

FISCAL YEAR 2014-2015					FISCAL YEAR 2015-2016				
2013- 2014 ACTUAL	ORIGINAL BUDGET	REVISED 6 MO EXP BUDGET 2014-2015	EST EXP 2014-2015	DEPT CODE	OBJECT CODE	ACCOUNT DESCRIPTION	DEPT REQUEST	MAYOR'S RECMD	TOWN COUNCIL
165,000	180,000	180,000	87,446	180,000	10456222	58700	GRANTS - HUMAN SERVICES	200,000	180,000
165,000	180,000	180,000	87,446	180,000		58000 SUB TOTAL	200,000	180,000	
165,000	180,000	180,000	87,446	180,000		DEPARTMENT TOTAL	200,000	180,000	

**TOWN OF VERNON 2015-2016
BUDGET REQUEST DETAIL**

		DEPARTMENT'S REQUEST	MAYOR'S RECOMMEND	TOWN COUNCIL APPROVED
10456222	HOCKANUM VALLEY COMMUNITY COUN			
58700	GRANTS - HUMAN SERVICES			
	BASIC MATERIAL NEEDS PANTRY	25,000	15,000	
	SENIOR CITIZENS & DISABLED TRANSPORTATION	117,000	107,000	
	ELDERLY OUTREACH & MANAGEMENT SERVICES	18,000	18,000	
	HVCC OUTPATIENT COUNSELING	40,000	40,000	
	Total Object	<u>200,000</u>	<u>180,000</u>	<u> </u>
Grand Total	10456222 HOCKANUM VALLEY COMMUNITY COUN	<u><u>200,000</u></u>	<u><u>180,000</u></u>	<u><u> </u></u>

Town of Vernon Grant Application
Fiscal Year July 1, 2015 - June 30, 2016

ATTACHMENT A

Program Description

Complete this form for each service area for which you are requesting funds. Use the space provided keeping descriptions brief and specific.

A. Program Title: Basic Needs

B. Name of program contact person: David O'Rourke Chief Operating Officer
 Name Title
 Tel #: 860-872-9825

C. Name of fiscal contact person: David Fowler Chief Financial Officer
 Name Title
 Tel #: 860-872-7727

D. Statement of Need program will address:

The food pantry provides emergency food for thousands of residents (1,425 families) as well as providing snacks to children, holiday food baskets and nutritional workshops. Since its inception in 2011, the case management program has helped over 1,000 clients with a variety of social services including but not limited to: clothing, entitlement assistance, referrals to other support agencies, employment assistance, housing referrals, and medication assistance. Note: In section F Case Mgmt. tracks head of household only which is represented in the families category.

E. Services to be provided:
 Emergency Food Pantry:
 Home delivery of food to homebound clients, educational and nutrition programs, comprehensive case management services, holiday baskets for Thanksgiving and Christmas, community service program, volunteer opportunities, assessment and referral

F. Projected **unduplicated** number of Vernon residents to be served:

Adults: 1,840 Youth/Children: 1,752 Families: 1,425

Actual unduplicated number of Vernon residents served in the past three (3) fiscal years:

FY 2012-13	Adults: <u>2,674</u>	Youth/Children: <u>1,401</u>	Families: <u>1,345</u>
FY 2013-14	Adults: <u>2,753</u>	Youth/Children: <u>1,253</u>	Families: <u>1,402</u>
FY 2014-15	Adults: <u>1,830</u>	Youth/Children: <u>1,605</u>	Families: <u>1,435</u>

G. How do Vernon residents access services?:

1. Registration with a Case Manager for Case Management services via walk in, referral from local and state agencies
2. Food pantry: registration with proof of residency and income. All food pantry clients must meet income requirements based upon the state of Connecticut's food stamp guidelines.

H. Budget Summary:

Total Agency Budget:	\$	3,688,206	
Total Program Budget:	\$	572,469	
Total Board Fund-Raising:	\$	544,747	

Town of Vernon Grant Application
Fiscal Year July 1, 2015 - June 30, 2016

ATTACHMENT A

List revenue by source: (Example of possible sources: federal; state; municipal; foundation; fund-raising)

SOURCE	AGENCY	PROGRAM
Municipal	\$ 754,605.00	\$ 25,000.00
Federal (NCAAA & GHTD)	\$ 79,707.00	\$
State	\$ 316,446.00	\$
Fees	\$ 1,450,801.00	\$
United Way	\$ 50,300.00	\$
Foundations	\$ 77,500.00	\$ 59,250.00
Retail / Rental	\$ 12,100.00	\$
Donations / Fundraising / In Kind	\$ 946,747.00	\$ 488,219.00
Total:	\$ 3,688,206.00	\$ 572,469.00

- I. What is the percentage increase in your Agency's expenses this year versus last year? 10.00%
- J. What is the percentage increase in your Agency's revenue this year versus last year? 10.00%
- K. What new revenue sources is your Agency seeking this year?
We are always seeking new sources of revenue. We are alerted when new grants become available locally and also seek national grants that can benefit our programs. We have also reached out to foundations for support. Numerous fundraising events, donations, food drives, and an Annual Appeal are conducted throughout the year.
- L. What other municipalities provide funding to your organization?

Town	Amount
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
Total:	\$ -

With any questions pertaining to this form, please contact: Marina Rodriguez, Tel. 860-870-3567 / mrodriguez@vernon-ct.gov; or Alan Slobodien, Tel. 860-870-3558 / aslobodien@vernon-ct.gov

Hockanum Valley Community Council, Inc.

**ATTACHMENT - CLIENT NEED
HUMAN SERVICES - TOWN PANTRY-BASIC NEEDS**

Introduction:

Clients can shop for the items they wish to have. This is a huge difference from the more restricted method of pre-packaged bags of food. The pantry increased its operating hours to accommodate more clients. The program's additional freezers / refrigerator has allowed for increased inventory of dairy, meats and frozen foods.

Individuals come to the pantry through referrals from the town of Vernon, Churches, Schools, VNA, RGH, other Community Agencies and businesses, walk-ins and also other towns.

An individual requests assistance for the first time through the following steps:

1. Face-to-face interview. Information is taken regarding family income, housing, employment, and other social service issues families may have.
2. Clients are assisted in accessing needed services; such as, energy assistance, basic needs, baby items, and clothing.

Highlights

1. Provides educational workshops on nutrition, Managed Care, budgeting, safety and other appropriate topics. Subjects vary.
2. Distributes holiday baskets and gifts at Christmas and Thanksgiving serving as the community's focal point for distribution. Communicating with other agencies on clients each is serving for no over lapping of services.
3. HVCC's pantry secures and distributes school supplies in the fall.
4. Services as work site for court referred Community Service Workers providing the agency with educating the public to the needs of the poor.
5. Distribution of hats, gloves and scarves free to low-income clients contributed by churches, scouts, schools, local businesses and individuals.
6. Snack packs to families of school children who come into the pantry.
7. Provides home delivery services to 24 home bound clients weekly.
8. Distribution of baby formula and new baby clothing to low-income moms donated by local churches.
9. Efforts to increase foods have resulted in alliances with local stores, businesses and farmers.
10. Food drives at local grocery stores.
11. Free haircuts offered through Cut Ups Hair Salon located in Vernon Connecticut.
12. Free spading and neutering of pets through Town and Country Veterinarian located in Vernon, Connecticut.
13. Medication assistance to over 100 clients in need of psychiatric medications
14. Participation in VCN, Hunger Action Committee and other community councils addressing hunger in the community.
15. Creation of and chairmanship of the Vernon Multi Disciplinary Team. A volunteer committee comprised of community leaders whose mission is to coordinate services for Vernon residents.

HOCKANUM VALLEY COMMUNITY COUNCIL

Results Based Accountability for Food Pantry

Goal Statement

The food Pantry is an emergency food source for Vernon, Tolland, Ellington and surrounding areas. It is a free service. Our primary focus is providing nutritious food items to our clients.

Who We Are and What We Do

The Pantry is comprised of 2 staff and multiple volunteers who distribute food to clients who meet our income guidelines. Each week an average of 7,000 is distributed. Food is donated by community groups, collected at food drives, or purchased at a discount at Foodshare a regional warehouse. In conjunction with our Case Management program, we connect them to other resources, arrange nutritional workshops, and collaborate with outside organizations to support our clients in a variety of other ways.

See attached copy of survey

How Well Do We Do It?

A random survey was conducted in the food pantry which polled answers from 142 clients over a 5-day period. In some cases, clients did not answer every question, and some questions required or allowed for multiple answers, so in some cases the total responses in the data tables do not sum to 142.

How Much Did We Do?

Families served	1,435
Individuals served	3,435
Total visits	17,926
Monthly Shopping visits for the year 2014	6,869
Weekly Shopping visits	9,681
Holiday Baskets Nov. and Dec.	1,319
Snack Packs for the year 2014	5,357

Pantry Results

In general, the results of the survey were overwhelmingly positive. Clients showed little to no issue with the staff or the general process of getting food at our pantry. Most issues arose with the food itself, or in the struggle of physically getting to the pantry.

Only two clients claimed that the pantry was not open during their posted hours. Only two responders claimed that they were not satisfied with the overall quality of the food pantry. They gave no reasons why this is.

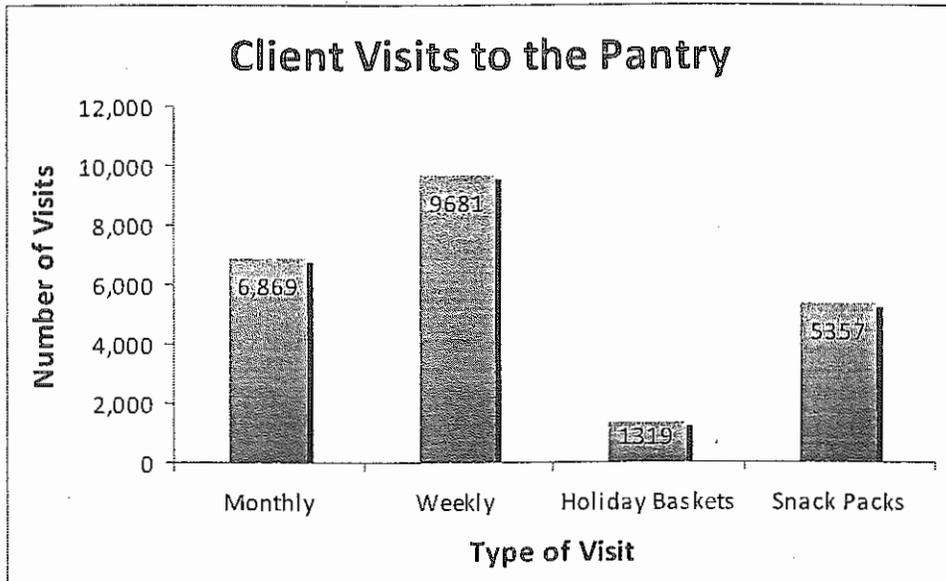
The majority of clients had no suggestions for improvements. In fact the question (question # 27 on the survey) was one of the least answered questions in the survey. However the following were the most common suggestions:

- Longer hours
- More space
- Better quality control of meat and produce

- Allow a client to shop for a set number of items, where they can choose anything they wish instead of having a set shopping list.
- Check out the weekly shoppers first so the lines go faster.

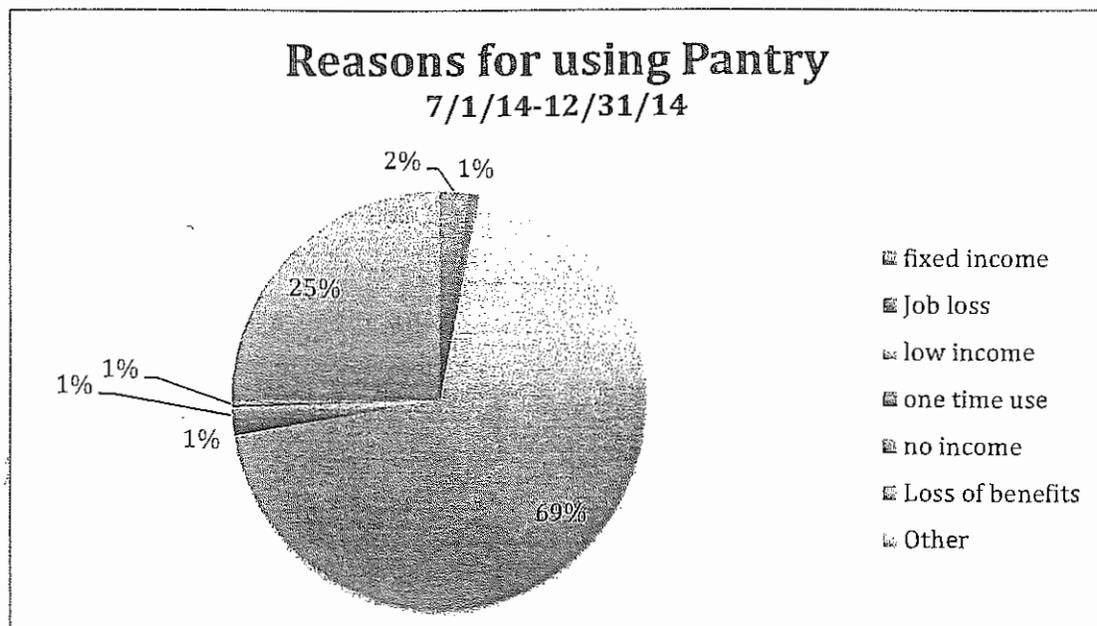
Who Is Better Off?

More than 3,400 individuals were provided with nourishment, better able manage to function mentally and physically. Dollars saved on food are diverted to other critical resources: additional food, personal items, rent, transportation, Clothing and healthcare.

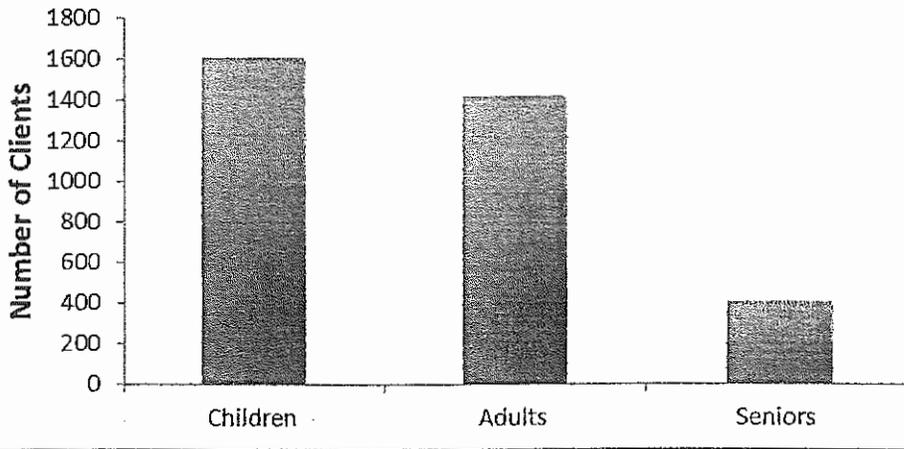


Per HVCC policy, clients can shop monthly for food estimated to last 3 days.

For a family of four, food is valued at \$92 retail.

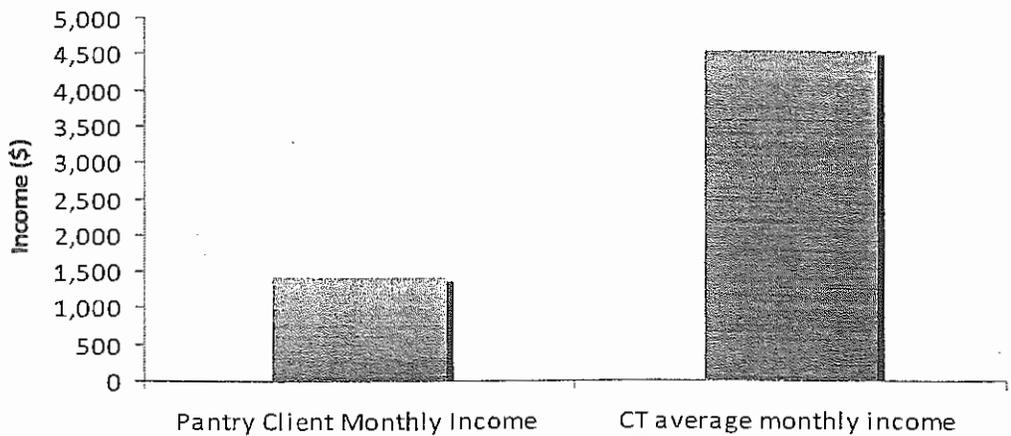


Age Breakdown of Pantry Clients 1/1/14-12/31/14



Children (0-18)	1605
Adults (19-59)	1422
Seniors (60+)	408

Household income of Average Pantry Household 1/1/14-12/31/14

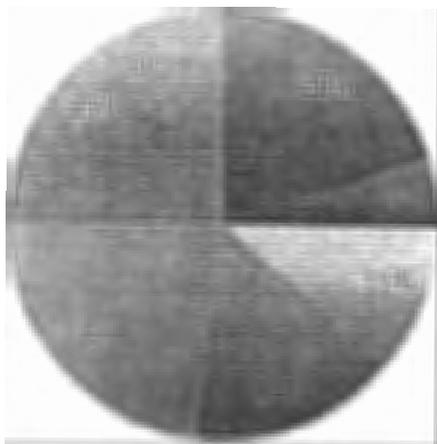


Pantry Client Monthly Income \$1,425

CT average monthly income \$4,534.20*

*Source: http://www.bls.gov/oes/current/oes_ct.htm#00-0000

Employment Status- Data Collected 7/1/14-12/31/14



- disabled
- full time
- part time
- retired
- self employed
- unemployd
- Currently unevaluated

0%

Hockanum Valley Community Council Food Pantry

Information and Satisfaction Survey

1. How did you hear about this pantry?

- a. From a friend
- b. From a church
- c. From an agency. Please specify: _____
- d. Other: _____

2. How many years have you received food at a Food Pantry?

- a. Less than 1 year
- b. Between 1 and 2 years
- c. Between 2 and 5 years
- d. More than 5 years

3. How far away do you live from the HVCC Food Pantry?

- a. Less than 1 mile
- b. Between 1 and 2 miles
- c. Between 2 and 5 miles
- d. More than 5 miles

4. How do you get to the HVCC Food Pantry?

- a. Walk
- b. Drive my own car
- c. Ride with a friend or neighbor
- d. Taxi
- e. Public transportation
- f. Other: _____

5. How easy is it for you to enter and exit the HVCC Food Pantry? (Answer all that apply.)

- a. Easy, I have no problems
- b. Difficult, too many steps outside
- c. Difficult, too many steps inside
- d. Difficult, the parking is too far away from the building

6. What is the average amount of time after the pantry opens that you wait in line for your food?

- a. 5 minutes
- b. 15 minutes
- c. 30 minutes
- d. One hour
- e. More than one hour: _____

7. Would you like for this Pantry to be open at different times?

- a. Yes, open earlier
- b. Yes, open later
- c. No, the hours are fine

8. If you cannot get to our food pantry, are you able to get food from somewhere else?
- Yes, where? _____
 - No
9. Are you relying less on a Food Pantry now than you were two years ago?
- Yes
 - No
10. How long does the food last that you receive from the HVCC Food Pantry if you don't go grocery shopping?
- Less than 3 days
 - Between 3 days and a week
 - Between 1 and 2 weeks
 - Between 2 weeks and a month
11. Are you able to use all of the food you receive from this Pantry?
- Yes
 - No, some of the food is no good when I receive it.
 - No, some of the food goes bad before I can use it.
12. Do you find useful information in the fliers, pamphlets, and newsletters that are given out at this pantry?
- Yes
 - No
 - This pantry doesn't give these out.
13. If you called for information, did you get the information you needed?
- Yes
 - No
14. Do you know people who need food but can't get it at this Pantry?
- No
 - Yes, but they don't qualify
 - Yes, but there is not enough food
 - Yes, but they are not able to get to the Pantry
15. Do you receive food stamps? (Your answer does not affect your eligibility to receive food from the Pantry)
- Yes
 - No, I am not eligible
 - No, I am eligible, but don't get them.
 - I do not know if I am eligible.
16. Is this Pantry open during posted hours?
- Yes
 - No

17. In general, are you satisfied with the quality of food you receive from this Pantry?

- a. Yes
- b. No

18. When changes are made, like hours or days of operation, are you informed?

- a. Yes, how? _____
- b. No

19. Is this Pantry kept clean?

- a. Yes
- b. No

20. Do you believe that because you receive food from this Pantry that you have more money available to use toward other monthly expenses (example: rent, utilities, medical bills, medication)?

- a. Yes
- b. No

21. Do you believe that because you received food from this Pantry that your family's overall health has improved?

- a. Yes
- b. No

22. In general, are you satisfied with how you are treated at this Pantry?

- a. Yes
- b. No. What problems have you experience? _____

23. What are some items from the HVCC Food Pantry that you enjoy the most?

24. What are some items from the HVCC Food Pantry that you could live without?

25. What food or non-food items would you like to receive from the HVCC Food Pantry that you don't receive now?

26. What problems do you face when getting food from the HVCC Food Pantry?

27. What suggestions do you have to improve your experience at this Pantry?

28. How were you treated by the staff at the HVCC Food Pantry? (Please check all that apply)

- a. I was treated courteously and with respect
- b. The staff person took his/her time to be sure I got what I needed
- c. I had trouble getting to the person I needed to talk to
- d. I was treated rudely
- e. I gave up

Thank you for completing our survey!

**Should you have any questions, please call the HVCC Food Pantry at (860) 872-7727
ext. 2930.**

HVCC Food Pantry Survey Results

The survey randomly polled answers from 142 clients over a 5-day period. In some cases, clients did not answer every question, and some questions required or allowed for multiple answers, so in some cases the total responses in the data tables do not sum to 142.

To increase participation in the survey, a raffle of two \$25 Stop and Shop gift cards was held for all clients who participated in the survey. Two winners were chosen randomly after the survey was held. While it was clear that answers to the survey had no bearing on chances of winning the raffle, it is possible that the giveaway positively affected the clients' answers. Clients may have also been swayed to answer positively out of misplaced fear that negative answers would somehow result in their not being allowed to receive service from us. However, it is unlikely that all participants shared this mindset and it is also unlikely that these factors would have prevented any serious issues or concerns from being expressed.

In general, the results of the survey were overwhelmingly positive. Clients showed little to no issue with the staff or the general process of getting food at our pantry. Most issues arose with the food itself, or in the struggle of physically getting to the pantry.

Only two clients claimed that the pantry was not open during their posted hours. This may be due to an experience with the staff's policy of giving away pre-made food bags to clients who come during the last 15 minutes. Sometimes the door is locked at this time, making the pantry seem closed.

Only two responders claimed that they were not satisfied with the overall quality of the food pantry. They gave no reasons why this is.

The majority of clients had no suggestions for improvements. In fact the question (question # 27 on the survey) was one of the least answered questions in the survey. However the following were the most common suggestions:

Longer hours

More space

Better quality control of meat and produce

Allow a client to shop for a set number of items, where they can choose anything they wish instead of having a set shopping list.

Check out the weekly shoppers first so the lines go faster.

Data Tables

How did you hear about the pantry?

FRIEND	97
OTHER	23
AGENCY	16
CHURCH	4

How Many Year Have you received food at a Food Pantry?

FIRST TIME	3
LESS THAN 1 YR	32
BTW 1 AND 2 YRS	49
BTW 2 AND 5 YRS	38
MORE THAN 5 YRS	17

What is the average amount of time after the pantry opens
that you wait in line for your food?

5 MIN	98
15 MIN	35
30 MIN	6
MORE THAN AN HR	1

How long have you been using the pantry?

LESS THAN 1 YR	12
1-2 YRS	42
3-5 YRS	65
MORE THAN 5 YRS	21

How do you get to SPCC Food Pantry?

BY CAR	30
WALK	98
WHEELCHAIR	3
OTHER	5
BY BUS	4

How easy is it for you to enter and exit the pantry?

EASY	121
DIFFICULT	21

If you cannot get to our food pantry, are you able to get food from somewhere else?

YES	17
NO	89

Are you relying less on a food pantry now than you were two years ago?

YES	41
NO	93

How long does the food that you receive from the pantry last?

ONE MONTH	25
TWO MONTHS	67
THREE MONTHS	40
FOUR MONTHS	4

Would you like for this Pantry to be open at different times?

NO	85
YES	13
OPEN EARLIER	36
OPEN LATER	4

Are you able to use all of the food that you receive from the pantry?

Yes	117
Goes bad before use	10
Spoiled when received	11

Do you find useful information posted in this pantry? Can you call for information if needed?

Yes	127
Doesn't give these out	5
Can call for info	9
No to both in pantry and calling	2
No useful info in Pantry	4

Do you know anyone who needs food but can't get to this
food pantry?

NO	85
Don't Qualify	36
Can't get to Pantry	19
Isn't enough food	3

Do you receive food stamps?

Yes	78
No, but eligible	7
Not eligible	31
Don't Know if eligible	15
No longer eligible	1

Is the Pantry open during posted hours?

Yes	135
No	2

In general, are you satisfied with the quality of food you
receive from the pantry?

Yes	133
No	2

When changes are made, are you informed? If so how?

Yes	98
No	31
Yes-Posted	36
Yes-Phone	3
Yes-Email	2
Yes-staff	19
Yes-Facebook	1
Yes-other	3

Do you believe that because you receive food from the
pantry you have more money available for other monthly
expenses?

Yes	110
No	23

Do you believe that because you receive food from this
pantry your family's health has improved?

Yes	114
No	18

What items do you enjoy the most?

Fruits	43
Vegetables	70
Meat	31
Bread	27
Pastry	24
Frozen Goods	7
Canned goods	5
Everything	11
Other	30

What items do you enjoy the least?

Nothing	45
Pastry	12
Vegetables	13
Fruit	7
Meat	3
Bread	4
Dry goods	9
Beans	6
Canned Goods	11
Other	7

What food or non-food items would you like to see HVCC
food pantry carry?

Paper Products/ toiletries	18
Dairy	19
Nothing new needed	34
More Meat	7
More produce	6
More beverages	6
Pet food	6
Other	11

What issues do you face when getting food from the pantry?

None	83
Transportation issues	6
Crowded	6

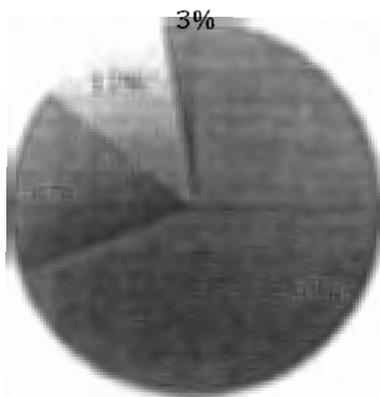
Food freshness	5
Not enough food	6
Other	3

How were you treated by the staff at HVCC food pantry?

Treated courteously and with respect	129
Staff person helped me with anything I needed	51
I had a hard time finding who I needed to talk to	1

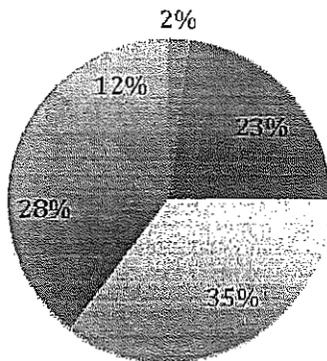
Charts

How clients hear about the pantry



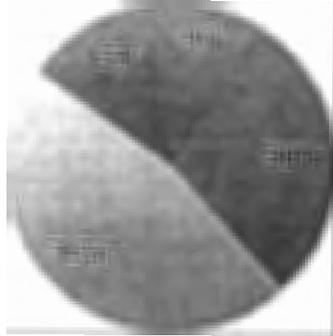
- FRIEND
- OTHER
- AGENCY
- CHURCH

Average years using the food pantry



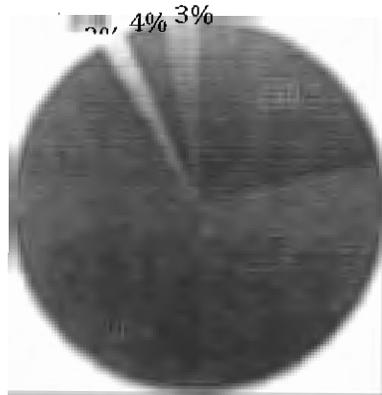
- FIRST TIME
- LESS THAN 1 YR
- BTW 1 AND 2 YRS
- BTW 2 AND 5 YRS
- MORE THAN 5 YRS

Average distance of residence from the food pantry



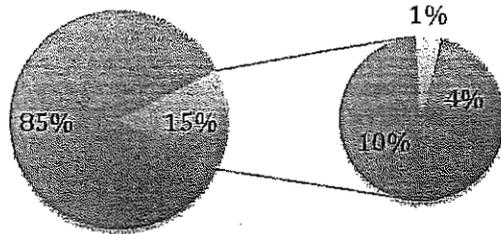
- LESS THAN 1 MI
- BTW 1 AND 2 MI
- BTW 2 AND 5 MI
- MORE THAN 5 MI

Modes of access to the pantry



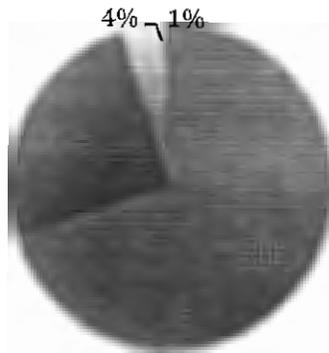
- RIDE W/
FRIEND/NEIGHBOR
- DRIVES OWN CAR
- WALK, BIKE
- PUBLIC
TRANSPORTATION
- OTHER

Ease of entry and exit to the pantry



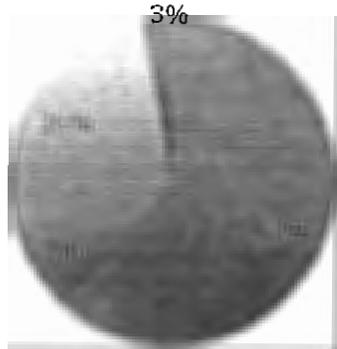
- EASY, NO PROBLEMS
- DIFFICULT-Too many steps outside of pantry
- DIFFICULT-Too many steps inside the pantry
- DIFFICULT-Parking is too far away

Average wait time for food after pantry opens



- 5 MIN
- 15 MIN
- 30 MIN
- MORE THAN AN HR

Client's requests for new pantry hours



- NO
- OPEN EARLIER
- OPEN LATER
- OPEN EARLIER & LATER

Clients who are unable to obtain food from other sources than the pantry



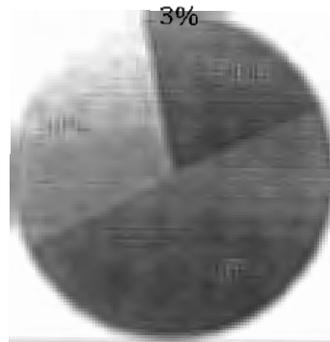
- YES
- NO

Clients relying less on the Pantry now than two years ago



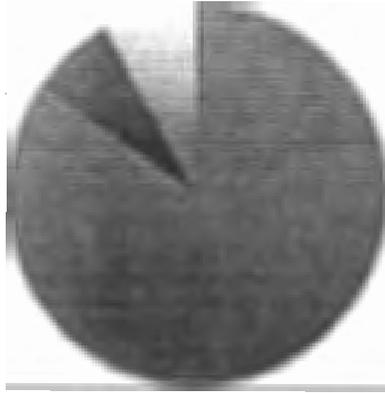
- YES
- NO

Average length of time food from the pantry lasts a client



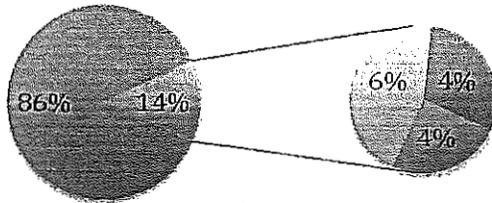
- LESS THAN 3 DAYS
- BTW 3 DAYS AND A WEEK
- BTW 1 AND 2 WEEKS
- BTW 2 WEEKS AND A MONTH

Freshness of the food recived from the pantry



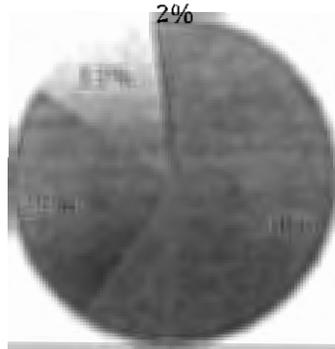
- All food is used before it goes bad
- Goes bad before use
- Spoiled when received

Client access to information in and about the pantry



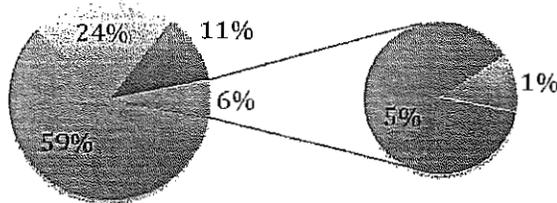
- Useful information in pantry and can call for useful info
- Doesn't give these out
- can call for info, but no useful info in pantry
- no useful info in Pantry

Clients who know someone who needs food at the food pantry



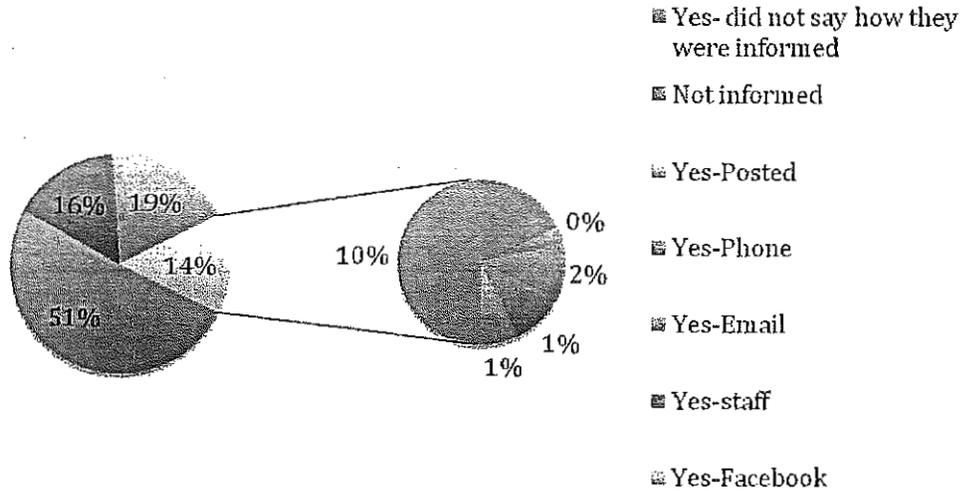
- NO
- Yes, but they don't qualify
- Yes, but they can't get to the Pantry
- Yes, but there isn't enough food

Clients who are eligible for food stamps



- Yes
- No, but eligible
- Not eligible
- Don't Know if eligible
- No longer eligible

How clients are informed of changes in the pantry



Clients who believe the food pantry helps them save money for other monthly expenses



- Yes
- No

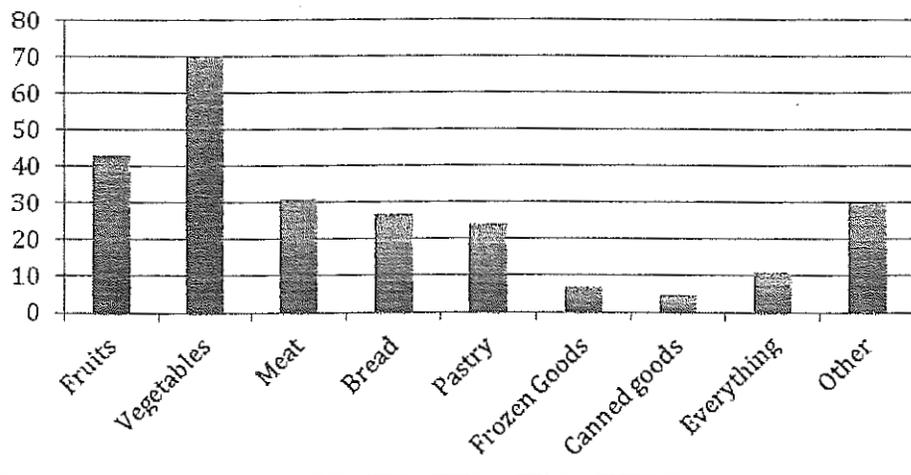
Clients who believe the food pantry has helped their family's health



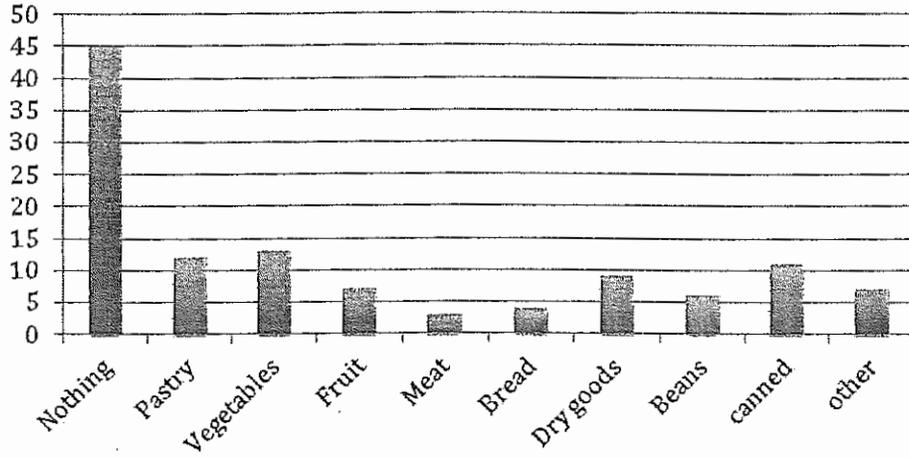
Yes

No

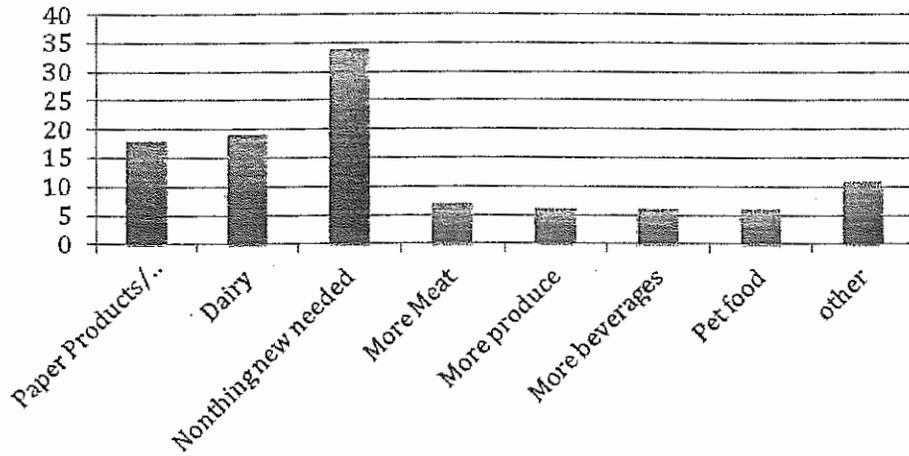
Items clients enjoy the most



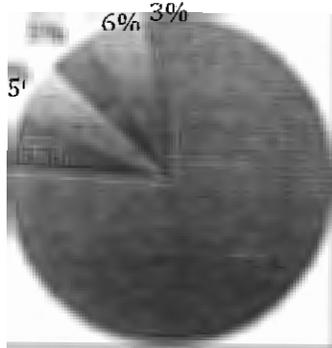
Items least enjoyed by clients



Suggestions for new items

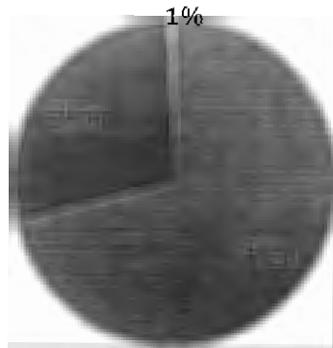


Issues faced when getting food from the pantry



- None
- Transportation issues
- Crowded
- Food freshness
- Not enough food
- other

Client feelings on thier treatment by the staff



- Treated courteously and with respect
- Staff person helped me with anything I needed
- I had a hard time finding who I needed to talk to

**Town of Vernon Grant Application
Fiscal Year July 1, 2015 - June 30, 2016**

ATTACHMENT A

Program Description

Complete this form for each service area for which you are requesting funds. Use the space provided keeping descriptions brief and specific.

A. Program Title: Transportation

B. Name of program contact person: David O'Rourke Chief Operating Officer
Name Title
Tel #: 860-872-9825

C. Name of fiscal contact person: David Fowler Interim Financial Manager
Name Title
Tel #: 860-872-7727

D. Statement of Need program will address:
Transportation is an essential service for the elderly and disabled residents of Vernon, providing access to the medical, daily living, business, and social resources needed to maintain the health, safety, and economic climate of the community. Public transportation is extremely limited in Vernon. Transportation becomes a vital element in maintaining independence for the senior or disabled citizen and in reducing the stress of families who find themselves unable to provide needed rides due to distance, job commitments or competing transportation of children.

E. Services to be provided: Transportation for elderly and / or disabled residents of Vernon who have no other way to access their community. Preference is given to medical trips, but shopping, banking, and other personal business is also essential to independent living. Many times Dial-A-Ride is the only means available for a wife or husband to visit their spouse in a nursing home. Service is provided within the towns of Vernon, Ellington, and Tolland Monday through Friday for all services mentioned and Manchester for medical appointments only.

F. Projected **unduplicated** number of Vernon residents to be served:

Adults: 532 Youth/Children: 0 Families: 0

Actual unduplicated number of Vernon residents served in the past three (3) fiscal years:

FY 2012-13	Adults: <u>470</u>	Youth/Children: <u>0</u>	Families: <u>0</u>
FY 2013-14	Adults: <u>497</u>	Youth/Children: <u>0</u>	Families: <u>0</u>
FY 2014-15	Adults: <u>490</u>	Youth/Children: <u>0</u>	Families: <u>0</u>

G. How do Vernon residents access services?:
Reservations are taken by phone.

H. Budget Summary:

Total Agency Budget:	\$	3,688,206
Total Program Budget:	\$	1,244,174
Total Board Fund-Raising:	\$	544,747

Town of Vernon Grant Application
Fiscal Year July 1, 2015 - June 30, 2016

ATTACHMENT A

List revenue by source: (Example of possible sources: federal; state; municipal; foundation; fund-raising)

SOURCE	AGENCY	PROGRAM
Municipal	\$ 754,605.00	\$ 637,867.00
Federal (NCAAA & GHTD)	\$ 79,707.00	\$ 79,707.00
State	\$ 316,446.00	\$
Fees	\$ 1,450,801.00	\$ 526,600.00
United Way	\$ 50,300.00	\$
Foundations	\$ 77,500.00	\$
Retail / Rental	\$ 12,100.00	\$
Donations / Fundraisers / In Kind	\$ 946,747.00	\$
Total:	\$ 3,688,206.00	\$ 1,244,174.00

- I. What is the percentage increase in your Agency's expenses this year versus last year? 10.00%
- J. What is the percentage increase in your Agency's revenue this year versus last year? 10.00%
- K. What new revenue sources is your Agency seeking this year?
We are always seeking new sources of revenue. We are alerted when new grants become available locally and also seek national grants that can benefit our programs. We have also reached out to foundations for support. Numerous fundraising events, donations, food drives, & an Annual Appeal are conducted throughout the year.
- L. What other municipalities provide funding to your organization?

Town	Amount
Ellington	\$ 57,023.00
Tolland	\$ 55,853.00
Manchester	\$ 180,000.00
East Hartford	\$ 209,063.00
	\$
	\$
	\$
	\$
Total:	\$ 501,939.00

With any questions pertaining to this form, please contact: Marina Rodriguez, Tel. 860-870-3567 / mrodriguez@vernon-ct.gov; or Alan Slobodien, Tel. 860-870-3558 / aslobodien@vernon-ct.gov

Hockanum Valley Community Council, Inc.

**Statement of Need Project will Address
TRANSPORTATION FOR ELDERLY AND DISABLED PEOPLE**

Transportation is an essential service for the elderly and disabled residents of Vernon, providing access to the medical, daily living, business and social resources needed to maintain the health, safety and economic climate of the community. Public transportation is extremely limited in Vernon

Elderly and/or disabled residents are frequently unable to use what public transportation does exist. They usually do not have private automobiles because of disability or income constraints. Transportation becomes a vital element in maintaining independence for the senior or disabled citizen and in reducing the stress of families who find themselves unable to provide needed rides due to distance, job commitments or competing transportation needs of children.

HVCC offers on demand pantry & counseling rides to and from Vernon to HVCC.

HVCC began assessing a \$2.00 per ride donation as of January 2012. The donation has been met with almost 100 percent acceptance and without complaint or issues.

In 2013 HVCC acquired three vans for Dial – a – Ride. One was a free 10 seat van from West Hartford, and the other two were 12 & 16 seat vans. HVCC bought them for \$114,000 with Connecticut Department of Transportation granting HVCC \$80,000 of that. Hartford Foundation for Public Giving granted HVCC the remainder to make us whole.

The transportation department is dedicated to providing the elderly and disabled with a quality service that allows for the needed mobility and ability to access the local community.

HOCKANUM VALLEY COMMUNITY COUNCIL

Results Based Accountability for Transportation

Goal Statement:

The goal of HVCC transportation is to provide the necessary transportation so that elderly and disabled people can live in their homes with dignity; visit their doctors to maintain and/or improve their health, get their own groceries, and live independently.

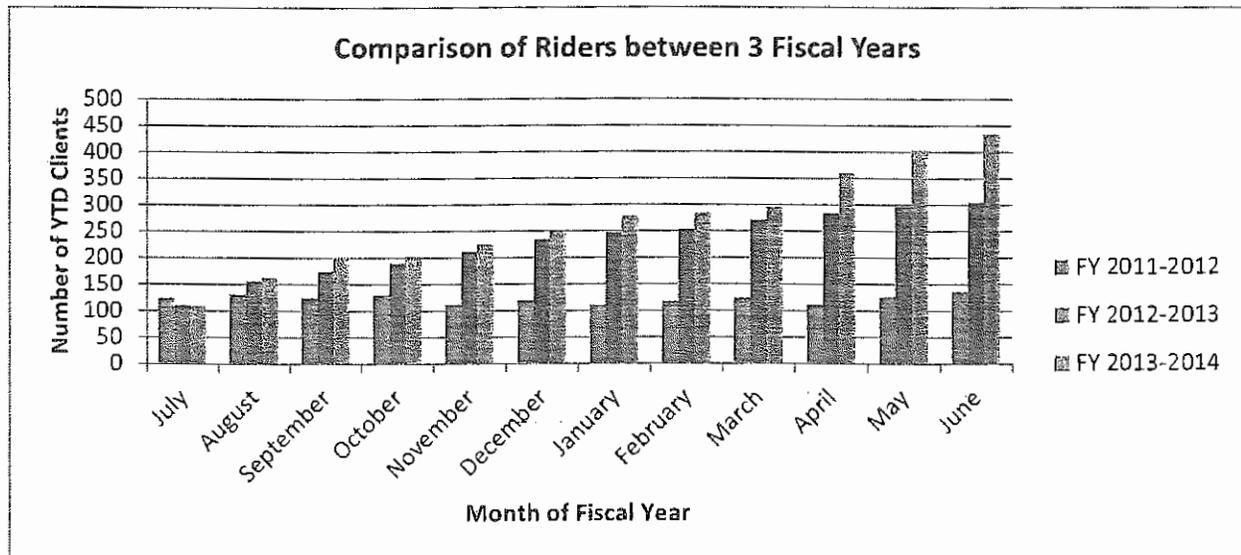
There are no other Non-Profit Organizations in the Vernon area that operate demand-Response transportation. There are no services which support elderly and/or people who cannot afford to pay for transportation.

Who we are and what we do?

Hockanum Valley Community Council Dial-A-Ride provides an expansive mix of fixed route and demand response transportation. Demand response is designed to accommodate specific individual client needs, supplying transportation based on where and when they need to travel. In addition to the person-by-person destinations, HVCC offers specific days and times designated for grocery shopping and social events in the area. We offer trips to our Pantry and Counseling service as well. Based on the graph below, the number of trips per month were roughly the same; however, during the most recent fiscal year, our winter months impacted the number of trips those months. Our Dial-A-Ride department usually provides at least 550 trips per month for the residents of Vernon.

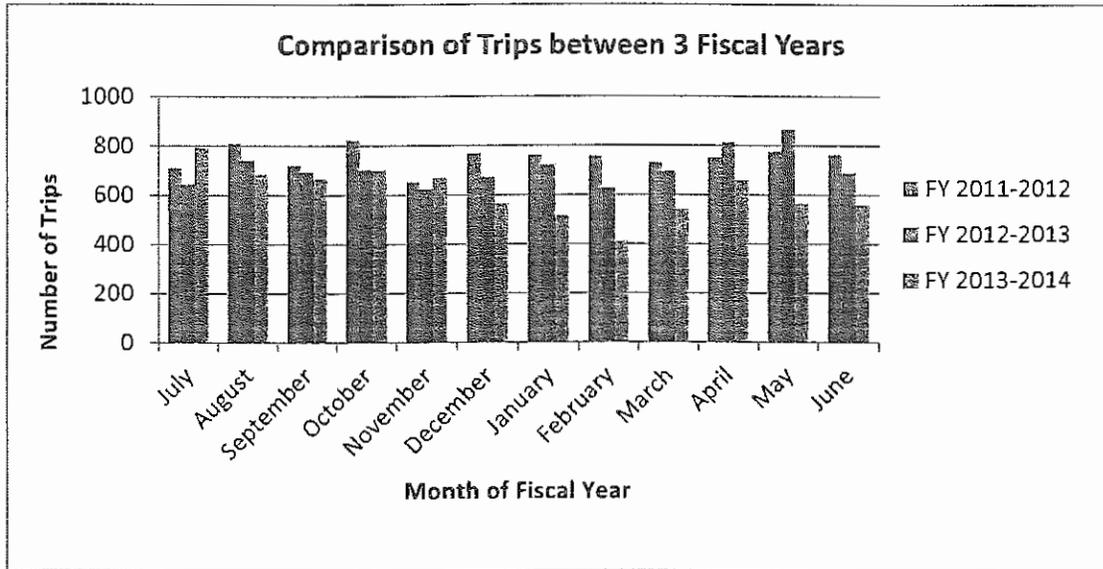
See Attached Copy of Survey

How well did we do?



Based on the graph above, our ridership has increased each fiscal year, with our most recent fiscal year having the greatest increase in ridership. As we continue to provide our service to the Vernon area, more residents begin to rely on our services to transport them to their doctor appointments, shopping trips, and personal appointments.

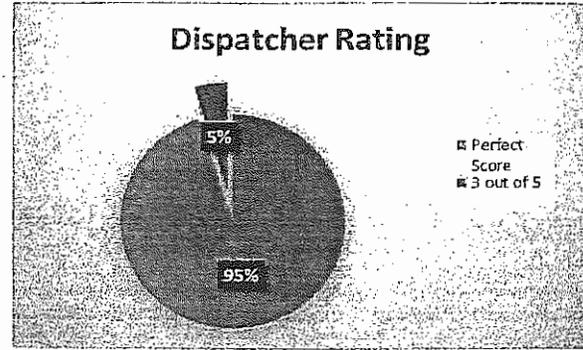
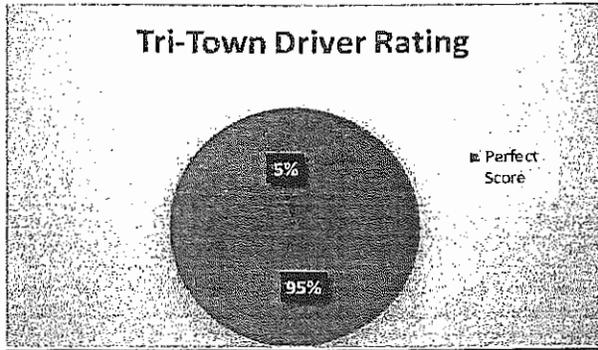
How much did we do?



Based on the graph above, the number of trips per month were roughly the same; however, during the most recent fiscal year, our winter months impacted the number of trips those months. Our Dial-a-Ride department usually provides at least 550 trips per month for the residents of Vernon.

Survey Results:

During the summer of 2014, we conducted surveys that documented our riders' satisfaction with our services. We conducted these surveys for approximately two weeks, and we individually called 21 riders to retrieve their responses. At the end of our last fiscal year, we served 434 riders, and although a small majority of our riders (4.8%) participated in the survey, almost all of the responses were positive. The following two graphs illustrate the riders' satisfaction with our drivers and dispatchers:



As the graphs demonstrate, 95% of the respondents gave both our drivers and dispatchers a perfect score, while 5% gave a score of 3 out of 5.

Is anyone better off?

Throughout the last few fiscal years, our number of unduplicated riders has increase dramatically, which suggests that more Vernon residents are becoming dependent on HVCC's Dial-A-Ride service. The following statistics compare the average cost of living at home versus living at a facility:

- The 2013 average cost of a private nursing home room (\$258 a day/\$94,710 annually) has risen an average 3.6 percent per year.
- The 2013 average cost of semi-private nursing home room (\$227 a day/\$82,855 annually) has risen an average 3.6 percent per year.
- The 2013 average cost for a month in an assisted living facility (\$3,427 a month)/\$41,124 annually) has risen an average 2.0 percent per year.
- The average cost of adult day care (\$71 a day/\$18,460 annually) has risen an average 1.6 percent per year.
- The 2013 average cost for a home health aide (\$19 hourly/\$29,640 annually) has risen an average 1.3 percent per year.

Based on the above statistics, it is becoming more expensive each year for an elderly person to live in an assisted living or have an aide. The HVCC Dial-A-Ride service allows elders to not only retain their dignity by living at home, but also allow elders to save money by eliminating the expenses of an assisted nursing home.

Dial-a-Ride Rider Survey
Tri-Town District

Please help us get some feed back on how we are doing by filling out this survey and returning it to the driver or the Dial-a-Ride office. The survey can also be taken home and mailed to us at a later date.

NOTE: If you have any pressing concerns about rider safety or driver conduct please contact us immediately at (860) 870-7940. Please DO NOT release any information in this public survey. Please do not discuss these questions or your answers with the drivers.

Please circle YES or NO

1. In the last 30 days, have you been denied a ride due to lack of availability or any other reason? YES NO
2. In the last 30 days, have you cancelled a ride BEFORE your allotted pick-up time?
YES NO
3. In the last 30 days, have you for any reason, been absent from your allotted pick up time? i.e. The driver showed up at your home, but you did not ride the bus.
YES NO
4. In the last 30 days, has the bus run out of available seats? YES NO
5. For any reason, have you ever been denied access to your ride by the driver?
YES NO
6. If you answered YES to question 5, please explain the situation WITHOUT naming the driver(s) or yourself.
7. Did you receive a phone call from us regarding our change in operating hours last summer?
YES NO
8. Do you like the current hours that Dial-a-Ride currently uses to serve your town?
YES NO
9. If you answered NO to Question 8, please explain any issues you have with our operating hours, and feel free to suggest any new hours you would like us to consider.

10. In the last 30 days, have you been unable to receive our services because you wished to travel to a location we do not currently serve? YES NO

11. If you answered YES to Question 10, please tell us the name of the location(s) you wish to travel to.

12. Are there currently locations that we do not serve that you would like us to consider? If so please explain.

13. On average, how many times PER WEEK, do you use the Dial-a-Ride services?

14. In the last 30 days, have you tried to schedule a ride to a DOCTORS appointment, and could not get a ride due to **availability**? YES NO

For the following questions, please rate your answers on the scale of 1-5 with 5 being very pleasant and 1 being very non-pleasant.

1. How was your experience with our drivers?

1 2 3 4 5

2. When you called to schedule an appointment, how was your experience with the dispatcher?

1 2 3 4 5

The following questions are to gauge your interest in some new ideas we have at Dial-a-Ride, please rate them on a scale of 1-5 with 5 being very interested and 1 being no interest at all.

1. How interested would you be in a trip to Foxwoods or Mohegan Sun Casino?

1 2 3 4 5

2. How interested would you be in trips that traveled out of the Manchester area? (i.e 45 minute - 1hr radius)

1 2 3 4 5

3. How interested would you be in trips that travelled out of state? (i.e. Boston, New York, Providence)

1 2 3 4 5

4. If you were interested in any of the above trips, would you be willing to pay a pre-determined fee for a ticket on these trips? YES NO

Town of Vernon Grant Application
Fiscal Year July 1, 2015 - June 30, 2016
ATTACHMENT A

Program Description

Complete this form for each service area for which you are requesting funds. Use the space provided keeping descriptions brief and specific.

A. Program Title: Elder Services (Elderly Outreach and Management Services)

B. Name of program contact person: David O'Rourke Chief Operating Officer
 Name Title

Tel #: 860-872-9825

C. Name of fiscal contact person: David Fowler Chief Financial Officer
 Name Title

Tel #: 860-872-7727

D. Statement of Need program will address:
 As the senior population in Vernon reaches advanced age, managing basic necessities for independent living is a challenge. This program provides referral and direct services to assist clients in remaining in the homes. It also enriches the lives of the clients by offering socialization and opportunities.

E. Services to be provided:
 Comprehensive case management, benefits management and education, recreational services (lunches, book club), volunteer recruitment, home bound food deliveries, out patient counseling.

F. Projected **unduplicated** number of Vernon residents to be served:

Adults: 270 Youth/Children: 0 Families: 0

Actual unduplicated number of Vernon residents served in the past three (3) fiscal years:

FY 2012-13	Adults: <u>316</u>	Youth/Children: <u>0</u>	Families: <u>0</u>
FY 2013-14	Adults: <u>292</u>	Youth/Children: <u>0</u>	Families: <u>0</u>
FY 2014-15	Adults: <u>281</u>	Youth/Children: <u>0</u>	Families: <u>0</u>

G. How do Vernon residents access services?:

Clients can access services via referral from town, senior housing or by phone/walkin. Home visits are provided.

H. Budget Summary:

Total Agency Budget:	\$	3,688,205	
Total Program Budget:	\$	86,975	
Total Board Fund-Raising:	\$	544,747	

Town of Vernon Grant Application
 Fiscal Year July 1, 2015 - June 30, 2016
 ATTACHMENT A

List revenue by source: (Example of possible sources: federal; state; municipal; foundation; fund-raising)

SOURCE	AGENCY	PROGRAM
Municipal	\$ 754,605.00	\$ 18,000.00
Federal (NCAAA & GHTD)	\$ 79,707.00	\$ 26,975.00
State	\$ 316,446.00	\$
Fees	\$ 1,450,801.00	\$
United Way	\$ 50,300.00	\$
Foundations	\$ 77,500.00	\$
Retail / Rental	\$ 12,100.00	\$
Donations / Fundraising / In Kind	\$ 946,747.00	\$ 42,000.00
Total:	\$ 3,688,206.00	\$ 86,975.00

I. What is the percentage increase in your Agency's expenses this year versus last year? 10.00%

J. What is the percentage increase in your Agency's revenue this year versus last year? 10.00%

K. What new revenue sources is your Agency seeking this year?
 We are always seeking new sources of revenue. We are alerted when new grants become available locally and also seek national grants that can benefit our programs. We have also reached out to foundations for support. Numerous fundraising events, donations, food drives, & an Annual Appeal are conducted throughout the year.

What other municipalities provide funding to your organization?

Town	Amount
	\$
	\$
	\$
	\$
	\$
	\$
	\$
	\$
Total:	\$ -

With any questions pertaining to this form, please contact: Marina Rodriguez, Tel. 860-870-3567 / mrodriguez@vernon-ct.gov; or Alan Slobodien, Tel. 860-870-3558 / aslobodien@vernon-ct.gov

Hockanum Valley Community Council

ATTACHMENT-CLIENT NEED HOCKANUM OUTREACH AND MANAGEMENT FOR THE ELDERLY

This program provides assistance and options for older adults living in Vernon that will aid them in remaining in their homes as they age. Any resident 60 years or older, residing in the community, is entitled to these resources. The staff has information on local and statewide programs and can assist clients in accessing the help that they need to maintain independence as long as possible.

Because many of the seniors we meet are advanced in age, over eighty years, they need more support than clients we saw years ago. That was at a time when many people were choosing to retire before their sixty-fifth birthday. These retirees were active. Now, however, as people work longer, and live longer, we are challenged to meet our goal of helping clients "age in place". Declining health and lack of family or peer support are just some of the barriers to successfully maintaining in the community. These clients require more direct service from our staff and frequently need assistance with tasks such as shopping for groceries, paying bills, remembering, and getting to medical appointments and having access to social contact with others.

Over the years we have created programs and services ourselves to satisfy the needs that are not being met through available state and federal programs. We currently have volunteers who participate in the Home Visitor program, provide medical rides for frail elderly, shop for groceries and keep in touch with clients who are alone by making reassurance calls on a weekly basis. There are also two groups of clients who enjoy an outing for lunch, on separate days, once a month. Volunteers assist staff in hosting the luncheon.

It is likely that as our clients grow older, we will be challenged again and again to create the services needed in preventing premature long term care placement. Aging brings many obstacles to individuals. We want to provide seniors with information and hope that there can be a full and meaningful life, even after eighty.

HOCKANUM VALLEY COMMUNITY COUNCIL
Results Based Accountability for Elder Services

Goal Statement Clients who come to HVCC for food, mental health and transportation are frequently seeking stability, often in multiple areas of their lives. In recognition of our clients' need to access services internally and externally, the Case Management program was developed in 2010 to help clients connect to critical services.

Who Are We and What Do We Do? The Case Managers are comprised of one full-time program manager, a part-time case manager, a pantry intake coordinator and several volunteers who help with clerical and direct client support.

Adults Case managers meet clients to assess their life situation. Together, they establish goals and develop an action plan to reach them. Meetings may occur just once, over several weeks or intermittently depending on the goals. Many clients have few resources and are emotionally fragile which makes hope, trust and encouragement important components of case management support. Although intangible, these attributes can make the difference for a client who has difficulty taking an action step, such as, calling a company to discuss a bill they can't pay.

Seniors Individuals over age 60+ are considered elderly. Case managers are able to assess an individual's ability to manage their daily activities and coordinate services. Supportive services include help with household chores, personal care, transportation, socialization, Medicare and other benefit programs. The elderly are also prone to developing mental and physical problems, which require professional assessment and care. Case Managers are on a first-name basis with local service providers and able to coordinate care in a manner that creates a comfort level for families floundering in unfamiliar territory.

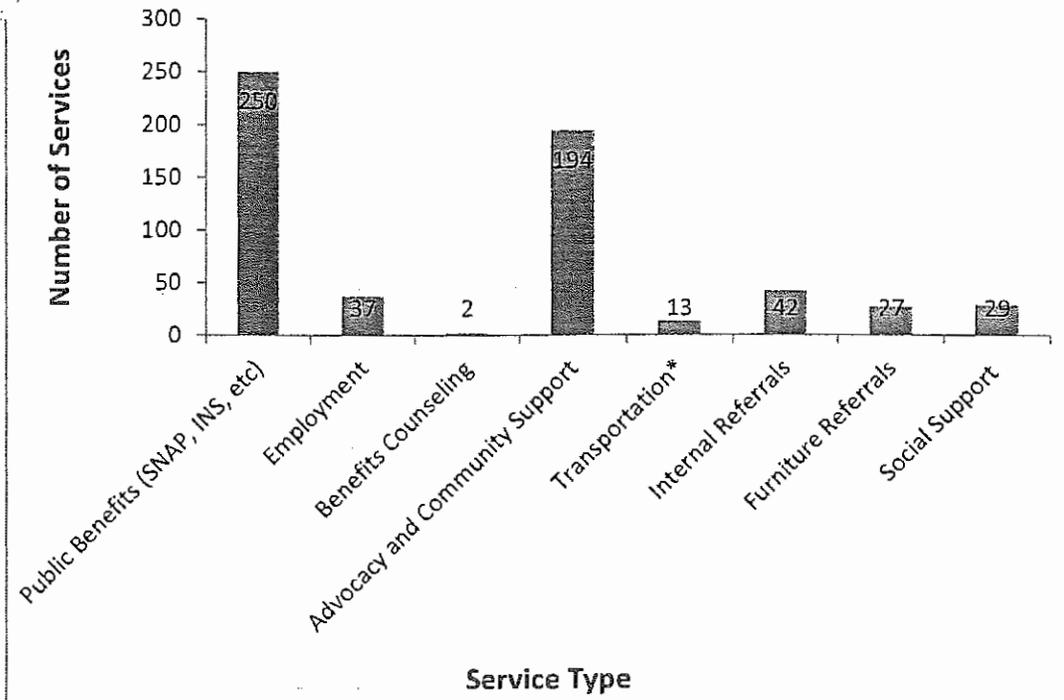
How Well Did We Do It?

Case Management was included in survey questions that pertain to Pantry

In 2014, 393 referrals were made to Case Managers. 252 unduplicated clients were seen who were linked with multiple services.

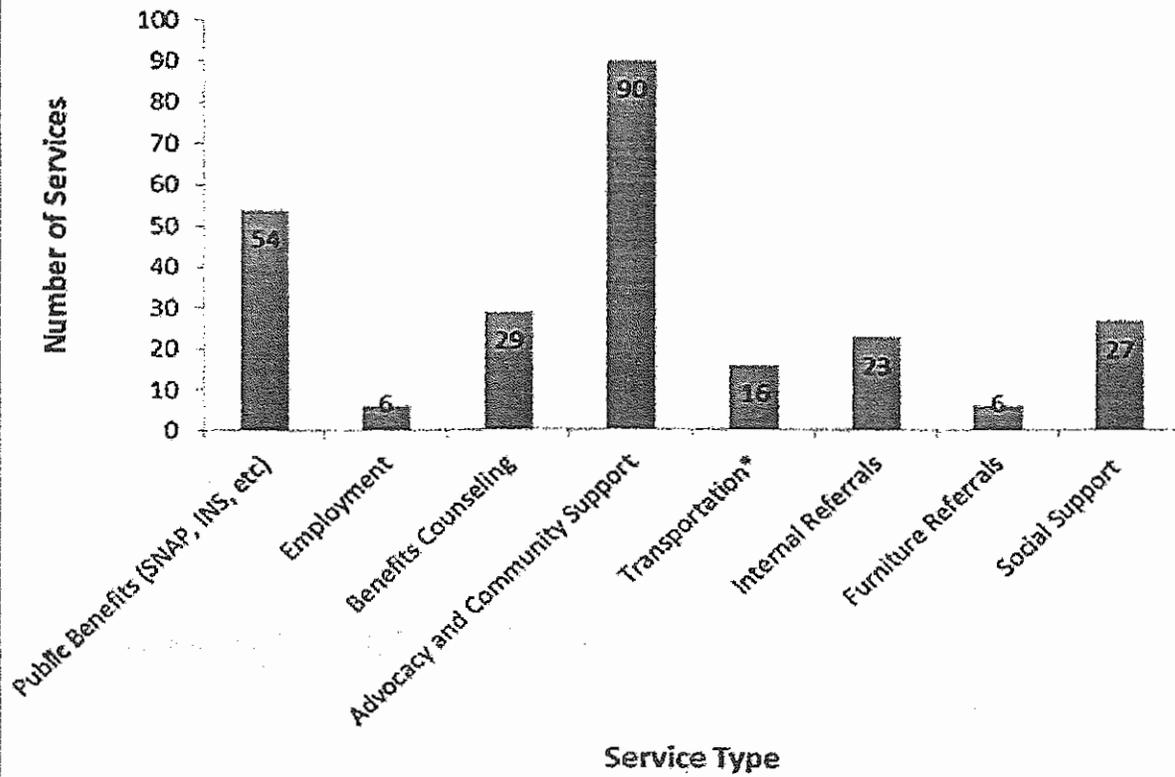
Goals met: Adults: 81% and seniors 71.38%

Adult Services in Case Management 2014

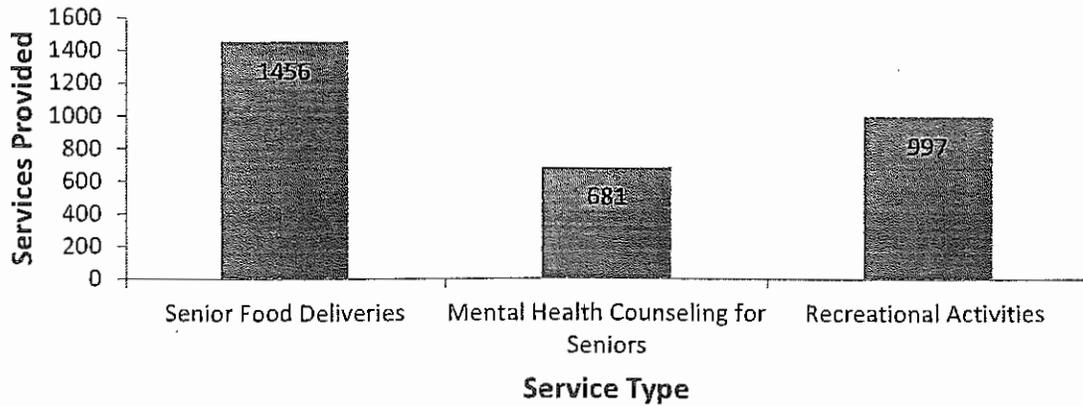


- **Public benefits:** Includes links to subsidized housing, energy assistance, SNAP (food assist), health insurance, and cash assistance.
- **Employment:** Clients are with resumes, on line job applications, employment agencies, job leads and fairs.
- **Transportation:** Referrals to LogistiCare, Medcab, Greater Hartford Transit and ADA paratransit for the disabled.
- **Furniture:** At St. Vincent DePaul, Lighthouse Mission (accepts agency only referrals)
- **Advocacy and Community Support:** Outreach to Agency referrals to other service providers, appeals for personal items, calls to Veterans Adm., housing complexes, etc. on behalf of client.

Elder Services in Case Management (60+) 2014



Agency Services Provided to Seniors 2014

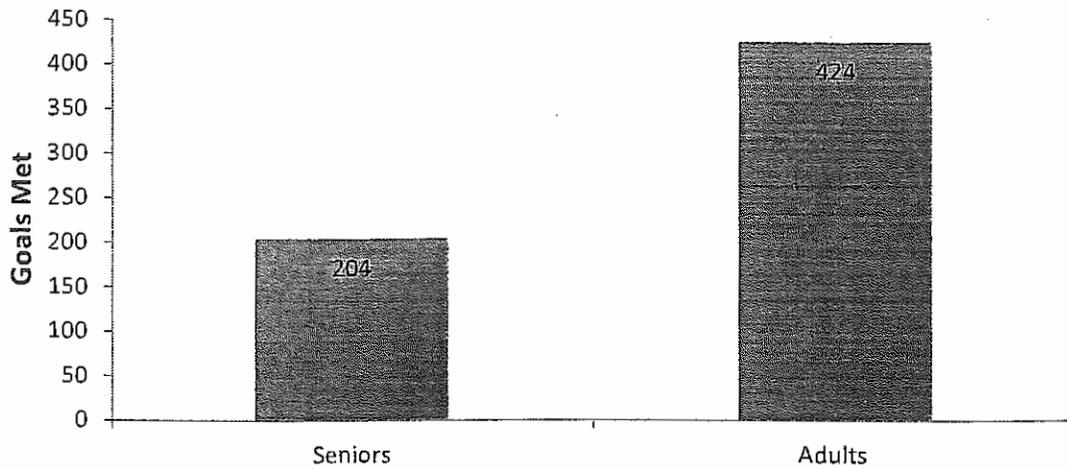


Senior food deliveries: number of meals to homebound seniors 1,456

Mental health counseling: hours of service 681

Recreational activities: 997 hours (luncheons, book clubs, cultural events)

Goals met in Case Management 2014



Above and Beyond Food Distribution

<i>ACTIVITIES, DIRECT OR COLLABORATIVE</i>	<i>OUTCOME FOR CLIENT</i>
<i>SNACKS FOR CHILDREN</i>	<i>CHILDREN NOURISHED, STAVE HUNGER</i>
<i>NUTRITION WORKSHOPS: CLIENTS LEARN HOW TO READ LABELS AND UNIT PRICES</i>	<i>BUY HEALTHIER FOODS & STRETCH THEIR LIMITED FUNDS</i>
<i>CLIENTS ARE LINKED WITH HEALTHCARE PROVIDERS SCREENING FOR COLON, PROSTATE, BREAST CANCER & DIABETES</i>	<i>EARLY TREATMENT INCREASES RECOVERY ODDS AT LOWER COSTS</i>
<i>PROVIDE BACK TO SCHOOL MATERIALS</i>	<i>CHILDREN PREPARED FOR SCHOOL INCREASE POSSIBILITY OF SUCCESS</i>
<i>DIAPER DISTRIBUTION</i>	<i>REDUCED CHANCE OF INFECTION FOR BABIES</i>
<i>REFERRALS TO OPTICIANS FOR FREE GLASSES</i>	<i>CLIENTS RETAIN VISION</i>
<i>WEEKLY FOOD DELIVERY TO HOMEBOUND</i>	<i>HOMEBOUND ARE ABLE TO EAT</i>
<i>PANTRY SHUTTLE</i>	<i>CLIENTS HAVE ACCESS TO FOOD</i>
<i>HOLISTIC HEALTH EVENT</i>	<i>CLIENTS IMPROVE WELL BEING</i>
<i>YMCA CAMPERSHIP ASSIGNMENT</i>	<i>4 CHILDREN HAVE BENEFITS OF SUMMER CAMP</i>
<i>COATS, HATS, GLOVES ARE GIVEN TO CLIENTS</i>	<i>CLIENTS ARE WARM, HEALTHY, ABLE TO WORK OR ENJOY OUTSIDE ACTIVITIES</i>
<i>HOLIDAY BASKETS DISTRIBUTED TO CLIENTS, NOV AND DEC AND EASTER BASKETS DISTRIBUTED TO CHILDREN</i>	<i>FAMILIES PARTICIPATE IN FAMILY & COMMUNITY TRADITIONS FEEL CONNECTED, MORE STABLE</i>
<i>HAIRDRESSER PROVIDES DISCOUNTED HAIRCUTS</i>	<i>CLIENTS IMPROVE MORALE</i>

Town of Vernon Grant Application
Fiscal Year July 1, 2015 - June 30, 2016
ATTACHMENT A

Program Description

complete this form for each service area for which you are requesting funds. Use the space provided keeping descriptions brief and specific.

A. Program Title: HVCC Counseling Outpatient Mental Health

B. Name of program contact person: David O'Rourke Chief Operating Officer
 Name Title

C. Name of fiscal contact person: David Fowler Chief Financial Officer
 Name Title

Tel #: 860-872-9825
 Tel #: 860-872-7727

D. Statement of Need program will address:
 Outpatient mental health, substance abuse, treatments for uninsured and under insured residents, and Parenting Education are critical to the well being of the community members that are in need.
 Suboxone treatment is essential to address the increaing issues of opiate addiction.

E. Services to be provided:
 Outpatient individual, group, family, couples, and psychiatric services for adults, children, and families. Assessment and evaluation.

F. Projected **unduplicated** number of Vernon residents to be served:

Adults: 660 Youth/Children: 150 Families: 380

Actual unduplicated number of Vernon residents served in the past three (3) fiscal years:

FY 2012-13	Adults: <u>642</u>	Youth/Children: <u>137</u>	Families: <u>358</u>
FY 2013-14	Adults: <u>658</u>	Youth/Children: <u>148</u>	Families: <u>381</u>
FY 2014-15	Adults: <u>650</u>	Youth/Children: <u>125</u>	Families: <u>330</u>

G. How do Vernon residents access services?:
 self referral, referral from community and community agencies.

H. Budget Summary:

Total Agency Budget:	\$	3,688,206	
Total Program Budget:	\$	1,787,588	
Total Board Fund-Raising:	\$	544,747	

Town of Vernon Grant Application
Fiscal Year July 1, 2015 - June 30, 2016
ATTACHMENT A

List revenue by source: (Example of possible sources: federal; state; municipal; foundation; fund-raising)

SOURCE	AGENCY	PROGRAM
Municipal	\$ 754,605.00	\$ 46,500.00
Federal (NCAAA & GHTD)	\$ 79,707.00	\$
State (CSSD)	\$ 316,446.00	\$ 316,446.00
Fees	\$ 1,450,801.00	\$ 805,464.00
United Way	\$ 50,300.00	\$ 50,300.00
Foundations	\$ 77,500.00	\$
Retail / Rental	\$ 12,100.00	\$ 12,100.00
Donations / Fundraisers / In Kind	\$ 946,747.00	\$ 556,778.00
Total:	\$ 3,688,206.00	1,787,588.00

- I. What is the percentage increase in your Agency's expenses this year versus last year? 10.00%
- J. What is the percentage increase in your Agency's revenue this year versus last year? 10.00%

K. What new revenue sources is your Agency seeking this year?
 We are always seeking new sources of revenue. We are alerted when new grants become available locally and also seek national grants that can benefit our programs. We have also reached out to foundations for support. Numerous fundraising events, donations, food drives, & an Annual Appeal are conducted throughout the year.

What other municipalities provide funding to your organization?

Town	Amount
Ellington	\$ 5,000.00
Coventry	\$ 1,500.00
	\$
	\$
	\$
	\$
	\$
	\$
Total:	\$ 6,500.00

With any questions pertaining to this form, please contact: Marina Rodriguez, Tel. 860-870-3567 / mrodriguez@vernon-ct.gov; or Alan Slobodien, Tel. 860-870-3558 / aslobodien@vernon-ct.gov

HOCKANUM VALLEY COMMUNITY COUNSELING
Attachment
Out Patient Mental Health and Substance Abuse Counseling

Goals:

To provide quality out patient services to Vernon residents who are experiencing emotional, behavioral, social, mental health and substance issues.

To provide these services in a timely fashion provides for the greatest opportunity for the clients to have engaged in the counseling process.

To provide on going services to individuals who require psychiatric services requiring medication, evaluation and medication review.

Who is served:

A majority of HVCC clients are residents of Vernon. Most are referred from social service agencies such as: Vernon Social Services, DCF, Family Courts, schools and the judicial departments.

They require services due in part to family violence, divorce, death, crime, substance abuse and/or mental health issues.

Clients treated at HVCC typically are low income, unemployed and with multiple systemic family issues. Clients are offered services at a reduced fee according to their income.

The services to clients are typically the only available services for them. Many are not eligible for support services offered through other state agencies and many more are not insured.

In October 2013, HVCC began offering SUBOXONE treatment to a limited number of clients.

Domestic violence and substance abuse continue to place a burden on this program. No other program in this area provides low cost services for the treatment of substance abuse and anger management.

Over the past year HVCC has increased its psychiatric services by 30 %. Patients without insurance are unable to obtain these services any place else. Furthermore, the continued economic changes in this community have seen an increase in depression and anxiety due to loss of employment and increase financial stressors. This has resulted in patients seeking psychiatric services that are unavailable anywhere else in this community for the population we serve.

HOCKANUM VALLEY COMMUNITY COUNCIL

Results Based Accountability for Counseling

Goal Statement: HVCC's counseling program provides a safety net for families and individuals in emotional crisis. The program supports the needs of the community by providing full service mental health care for all members of the community and by providing referrals and information about additional support services. All of these supports are provided to members of the community without regard to their ability to pay for the professional services provided.

Who We Are and What Do We Do?

The HVCC Counseling Department is comprised of diverse clinical staff who range in specialties that treat people who suffer from issues related to Mental Health and Substance Abuse including Trauma, Anxiety, Depression, Addiction as well as other complex disorders. The range of services the Department offers includes Individual Therapy, Group Therapy with focuses including tiered substance abuse groups, Beyond Trauma Group, Cognitive Behavioral Therapy/ "Stress Less Group," Active Parenting Skills Group, Anger Management, Suboxone Treatment and Start Now Group Counseling. Additionally, the Department offers Family and Couples Therapy, as well as having two Psychiatrists on staff who offer expert Psychiatric care to our Counseling Clients who are in need of a comprehensive Psychiatric Evaluation and/or Medication Management services.

See Attached Copy of Survey

How Well Did We Do It?

In a written survey conducted over a three week time frame within the Counseling Department an anonymous sample of Clients reported the following:

73 total participants

Average length of service: less than one year

Participants utilizing another HVCC service: 26%

How Much Did We Do?

Fiscal Year 2013/2014

Number of Clients Served: 1,702

Number of Appoints Kept: 20,413

Number of Vernon Clients Served: 758

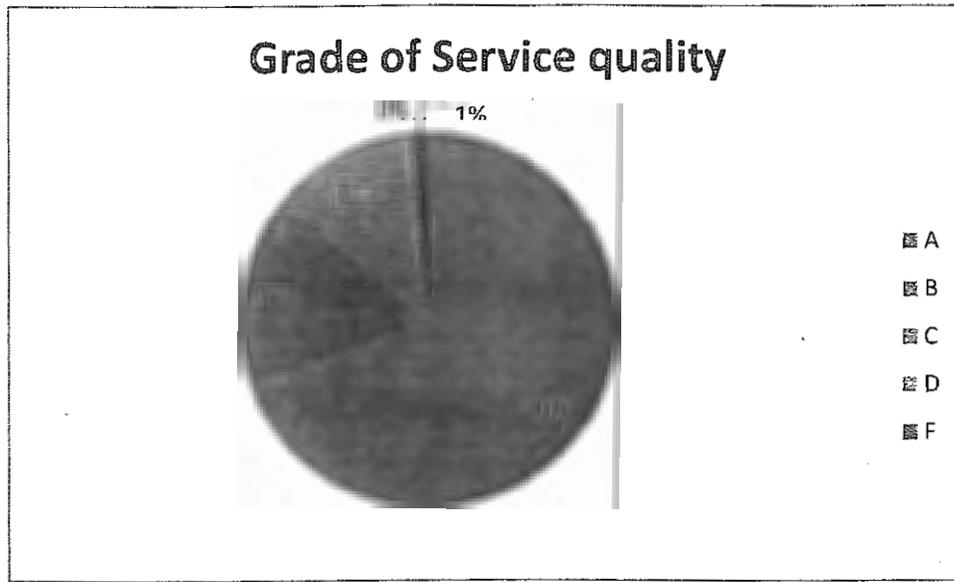
Number of Appointments Kept of Vernon Residents: 8596

Survey Results:

Clinical:

All but one client claimed that when they arrived at HVCC, they were ready for change. The majority of reasons for attending were to seek help/ quit a particular habit. All but three clients had very positive reactions to their treatment/ services. 59 out of 67 responses claimed to have derived some benefit from counseling treatment. 67 out of 69 responses said they would recommend HVCC to others seeking treatment. The majority of clients were very satisfied with the treatment they received at HVCC. All but two clients claimed that they felt their clinician provided expert care. Only one client felt they were not taught the skills to help cope with their issues.

The Survey asked Clients to grade the Counseling Department on an Academic Grade scale A-F.



Clinical:

The following is a small sample of Client responses describing the benefits the Clients gain from engaging in the treatment services at HVCC.

- COUNSELOR HAS HELPED ME COPE WITH MY DIFFICULT EXPERIENCES WITH DEPRESSION
- HOW TO CONTROL ANGER AND HOW TO HANDLE DIFFERENT SITUATIONS
- REDUCTION OF ANXIETY
- HELP WITH STAYING SOBER
- LEARNED WHAT SOME OF MY PROBLEMS ARE AND HOW TO AVOID THEM
- THINK FIRST
- BETTER RELATIONSHIPS
- BETTER UNDERSTANDING OF MYSELF AND FAMILY
- GETTING AND STAYING OUT OF DOMESTIC VIOLENCE RELATIONSHIP

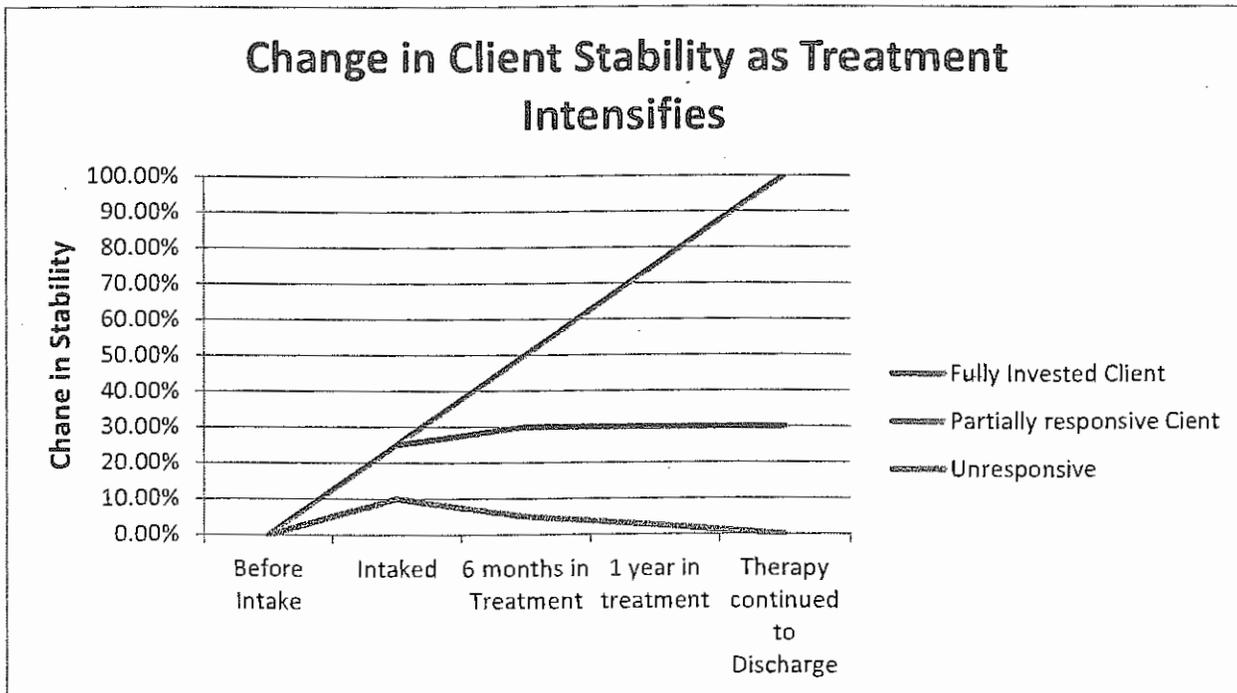
Who is Better Off?

With a large mandated population much of the clinical work we do is monitored very closely. A significant focus is put upon the recidivisms rate of our clients within our major contracts with the Judicial Branch. As of January 1, 2015 HVCC holds the one of lowest recidivisms rates in the State of CT for both it's General Mental Health/Substance Abuse contract and it's Family Violence Education Contract.

For example the average recidivism rate for offenders who successfully complete the Family Violence Education Program is 6%.

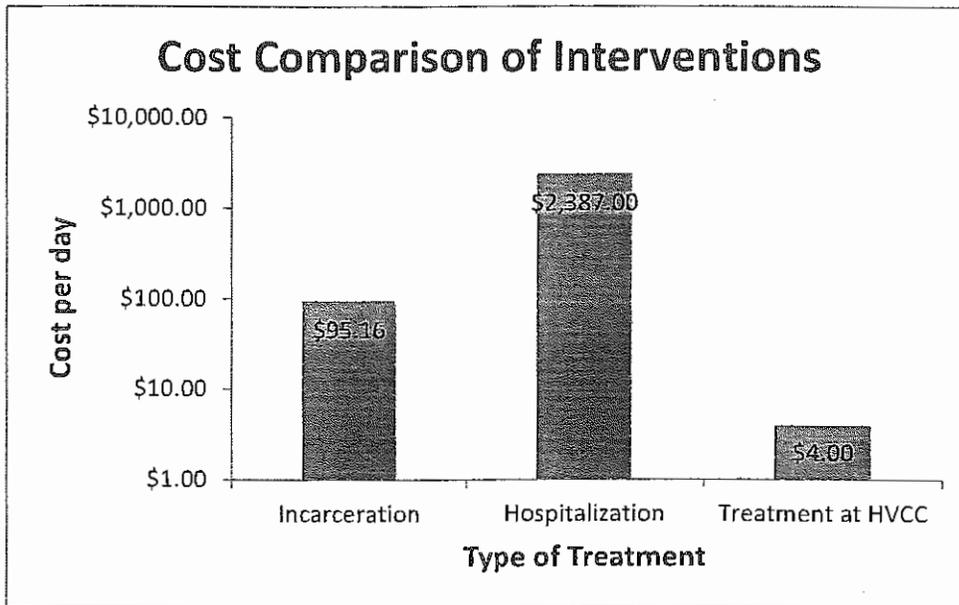
Additionally, evidence of success with our clients is seen through increased autonomy and stability. Through engagement within services at HVCC, inclusive of all or some of the following services, Individual Counseling, Psychiatric Services, Psycho-educational Groups and/or Process Oriented Groups, and Family/Couples Therapy as well as Case Management Services. With this Clients have gained access to eligibility assistance inclusive of Health/Medical Benefits, SNAP Benefits, TANF, Employment, keeping their children within their homes and under their care, reunifying with their children, becoming clean and sober for a substantial amount of time for the first time in their lives as well as learning how to function not only as a healthy member of society but within their own family and relational dynamics.

	Fully Invested Client	Partially responsive Client	Unresponsive
Before Intake	0.00%	0.00%	0.00%
Intaked	25.00%	25.00%	10.00%
6 months in Treatment	50.00%	30.00%	5.00%
1 year in treatment	75.00%	30.00%	2.50%
Therapy continued to Discharge	100.00%	30.00%	0.00%



Further, in a cost comparison between interventions including Incarceration, Hospitalization or Outpatient Mental Health and Substance Abuse Treatment it shows that on average it costs the State of Connecticut \$95.16 per day per inmate, (<http://www.ct.gov/doc/cwp/view.asp?q=265472>) for the intervention of Incarceration. The cost of Hospitalization is \$2,387 on average per inpatient day, (<http://kff.org/other/state-indicator/expenses-per-inpatient-day/>). The average cost of a person seeking Outpatient Mental Health/Substance Abuse Treatment at Hockanum Valley Community Council, Inc. is 1462.50 per year or approximately \$4.00 per day.

	Treatment at	
Incarceration	Hospitalization	HVCC
\$95.16	\$2,387.00	\$4.00



Hockanum Valley Community Council

Counseling Survey

Administration

1. Are your phone calls answered promptly?
 - a. Yes
 - b. No

2. Is the scheduling of your appointments handled efficiently?
 - a. Yes
 - b. No

3. Are you aware that HVCC offers Transportation, Mental Health/Substance Abuse Counseling, Parenting education, Family Therapy, Case Management, and a Food Pantry? (Circle all that apply)
 - a. Counseling
 - b. Mental Health/Substance Abuse Counseling
 - c. Parenting Education
 - d. Family Therapy
 - e. Case Management
 - f. Food Pantry
 - g. Transportation

4. What services at HVCC do you currently utilize? (Circle all that apply)
 - a. Counseling
 - b. ASIST
 - c. Case Management
 - d. Pantry
 - e. Transportation

5. Do you feel we can improve on your visit in any way?
 - a. Yes. Please explain: _____
 - b. No

For the following question, please rate your answer on the scale of 1-5, with 5 being very pleasant and 1 being unsatisfactory.

6. How was your experience at HVCC?
1 2 3 4 5

7. When you called to schedule an appointment, how was your experience with the receptionist?
1 2 3 4 5

Turn Over



Counseling

1. How long have you been a Client of HVCC?
 - a. Less than 1 year
 - b. Between 1 and 2 years
 - c. Between 2 and 5 years
 - d. More than 5 years

2. When you came to HVCC, were you ready for change?
 - a. Yes
 - b. No

3. What was your intention when you began treatment?

4. How would you grade the services that are being provided within your group?
 - a. A
 - b. B
 - c. C
 - d. D
 - e. F

5. How would you describe your counseling services?

6. Have you experienced any benefits since beginning counseling?
 - a. Yes
 - b. No

7. If so, what benefits have you experienced?

8. If not, what do you believe we can do better?

9. Would you recommend HVCC counseling services to friends or family?
 - a. Yes
 - b. No, why? _____

10. When in an appointment or group, do you understand your clinician's goals and what you are aiming for?

- a. Yes
- b. No

11. Do you feel your Counselor is providing expert care?

- a. Yes
- b. No, why? _____

12. Do you believe you were you taught skills to help you cope with your situation?

- a. Yes
- b. No

The following questions are for ASIST clients only.

13. Do you believe your engagement and cooperation with ASIST has led to a positive legal outcome?

- a. Yes
- b. No

14. Do you believe your ASIST clinician has your best interest in mind?

- a. Yes
- b. No, why?

Child Guidance Clinic
Account Code #10456223

Department Summary:							
Account Code	Account Classification	Actual 2013-2014 Expended	Adopted 2014-2015 Budget	Department's 2015-2016 Request	Mayor's 2015-2016 Recommended	\$ Increase (Decrease)	% Increase (Decrease)
51000	Salaries & Wages	-	-	-	-	-	0.00%
52000	Employee Benefits	-	-	-	-	-	0.00%
53000	Professional & Tech. Services	-	-	-	-	-	0.00%
54000	Property Services	-	-	-	-	-	0.00%
55000	Other Purchased Services	-	-	-	-	-	0.00%
56000	Supplies & Materials	-	-	-	-	-	0.00%
57000	Capital Outlay	-	-	-	-	-	0.00%
58000	Other/Sundry	\$ 5,500	\$ 5,500	\$ 11,000	\$ 5,500	\$ -	0.00%
	Total:	\$ 5,500	\$ 5,500	\$ 11,000	\$ 5,500	\$ -	0.00%
	Total Excluding Wages:	\$ 5,500	\$ 5,500	\$ 11,000	\$ 5,500	\$ -	0.00%

TOWN OF VERNON

FISCAL YEAR 2015 - 2016 BUDGET SUMMARY

DEPARTMENT - CHILD GUIDANCE CLINIC

2013- 2014 ACTUAL	FISCAL YEAR 2014-2015				DEPT CODE	OBJECT CODE	ACCOUNT DESCRIPTION	FISCAL YEAR 2015-2016		
	ORIGINAL BUDGET	REVISED 6 MO BUDGET	6 MO EXP 2014-2015	EST EXP 2014-2015				DEPT REQUEST	MAYOR'S RECMD	TOWN COUNCIL
5,500	5,500	5,500	-	5,500	10456223	58700	GRANTS - HUMAN SERVICES	11,000	5,500	
5,500	5,500	5,500	-	5,500			58000 SUB TOTAL	11,000	5,500	
5,500	5,500	5,500	-	5,500			DEPARTMENT TOTAL	11,000	5,500	

**TOWN OF VERNON 2015-2016
BUDGET REQUEST DETAIL**

		DEPARTMENT'S REQUEST	MAYOR'S RECOMMEND	TOWN COUNCIL APPROVED
10456223	CHILD GUIDANCE CLINIC			
58700	GRANTS - HUMAN SERVICES			
	GRANTS - HUMAN SERVICES	11,000	5,500	_____
	Total Object	<u>11,000</u>	<u>5,500</u>	_____
Grand Total	10456223 CHILD GUIDANCE CLINIC	<u><u>11,000</u></u>	<u><u>5,500</u></u>	<u><u>_____</u></u>

ATTACHMENT A

Program Description

Complete this form for each service area for which you are requesting funds. Use the space provided keeping descriptions brief and specific.

A. Program Title: Community Child Guidance Clinic, Inc.

B. Name of program contact person: Clifford Johnson, LCSW Executive Director
 Name Title
 Tel #: (860) 643-2101

C. Name of fiscal contact person: Mary Gracyalny, MBA CFO
 Name Title
 Tel #: (860) 643-2101

D. Statement of Need program will address: Community Child Guidance Clinic (CCGC) has been serving the Vernon community since the 1950's by providing a range of mental health services to children and their families. Families can have access to services regardless of their ability to pay. Our goal is to provide help to the increasing number of children with serious emotional and behavioral problems and to maintain them in the community. A stronger family makes a stronger community and saves costs.

E. Services to be provided: We provide individual, group and family therapy in our office, in the home, in school services, after-school programming, and a therapeutic day treatment school depending on the acuity of needs of an individual family.

F. Projected unduplicated number of Vernon residents to be served:
 Adults: 0.0 Youth/Children: 118.0 Families: 110.0

Actual unduplicated number of Vernon residents served in the past three (3) fiscal years:

FY 2012-13	Adults: <u>0.00</u>	Youth/Children: <u>101.00</u>	Families: <u>95.00</u>
FY 2013-14	Adults: <u>0.00</u>	Youth/Children: <u>111.00</u>	Families: <u>103.00</u>
FY 2014-15	Adults: <u>0.00</u>	Youth/Children: <u>115.00</u>	Families: <u>107.00</u>

G. How do Vernon residents access services?: The family needs to call our main number, 860-643-2101, and they will speak to a live person to schedule an intake appointment.

H. Budget Summary:

Total Agency Budget:	\$ 5,042,308.00
Total Program Budget:	\$ 5,042,308.00
Total Board Fund-Raising:	\$ 48,596.00

ATTACHMENT A

List revenue by source: (Example of possible sources: federal; state; municipal; foundation; fund-raising)

SOURCE	AGENCY	PROGRAM
School Tuitions	\$ 2,373,637.00	\$
Grants and Contracts	\$ 1,069,621.00	\$
Patient Service Revenue	\$ 1,491,780.00	\$
Contributions	\$ 48,596.00	\$
Other	\$ 58,674.00	\$
	\$	\$
	\$	\$
	\$	\$
Total:	\$ 5,042,308.00	\$ 0.00

I. What is the percentage increase in your Agency's expenses this year versus last year? -1.00 %

J. What is the percentage increase in your Agency's revenue this year versus last year? -4.00 %

K. What new sources of revenue is your Agency seeking this year? We continually apply for grants as they become available, but grants for operating expenses are seldom available; so we continually look at ourselves to find greater efficiencies.

L. What other municipalities provide funding to your organization?

Town	Amount
Manchester	\$ 99,195.00
South Windsor	\$ 8,882.00
Glastonbury	\$ 1,000.00
	\$
	\$
	\$
	\$
	\$
Total:	\$ 109,077.00

With any questions pertaining to this form, please contact: Marina Rodriguez, Tel. 860-870-3567 / mrodriguez@vernon-ct.gov; or Alan Slobodien, Tel. 860-870-3558 / aslobodien@vernon-ct.gov

**RESULTS BASED ACCOUNTABILITY DATA
ATTACHMENT B**

FOR

COMMUNITY CHILD GUIDANCE CLINIC

I Goal statement Through attendance at CCGC outpatient programs children and adolescents will demonstrate reduced symptoms, improved functioning in their families and in their schools and be maintained in the community without having to resort to higher levels of care.

2a. How much did we do?

7/1/13 - 6/30/14

OVERALL VERNON

Number of children seen

842

118

Number of appointments

15,098

2,207

Groups

204

27

Children seen in home based our community programs

74

14

Children seen in Intensive Outpatient services

66

15

Adults completing parenting classes (not included in grant request but is a reflection of Clinic Services)

384

not available

2b. How well did we do? Measured by quarterly client satisfaction surveys filled out anonymously by clients.

"I was satisfied with the services".

Agree
98%

Disagree
0%

"There has been improvement in the problem we

sought services for".

Agree
91%

Disagree
4%

"We are better able to handle problems on our own

Agree
77%

Disagree
12% *

If we need help in the future we would return here".

Agree
95%

Disagree
0%

2c. How were clients better off?

As a result of CCGC outpatient services 72 % showed reduced symptoms, improved functioning in their homes and community without having to resort to higher levels of care.

* 13 of the 60 respondents were just beginning tx.

SURVEY DATA

We administer the attached Client Satisfaction survey quarterly. We do this by picking a random week in that calendar month and asking every client who comes into our waiting room to fill out a form. The results are then left in a drop box so as to maintain privacy in their response. Clients fill the forms out alone without involvement of staff. Some are relatively new clients, some are established and some are near completion. We combine these 4 quarterly forms into a year end annual report and this totals approximately 250 client responses.

We have not separated these responses out by town as we serve many towns and did not feel results would be any different from one town to another but we will add a question to the form in the future asking town of residence.

The results for key questions in this survey are found in Attachment B.

Satisfaction Questionnaire

Your Opinion matters to us! Please fill out the following survey and help us improve our services!

Program CLINIC Date _____

What is your relationship to the child: parent _____ foster parent _____ guardian _____ relative _____ self _____ other _____

Current Age of Child _____ Sex of Child: Male _____ Female _____

Race/Ethnic Background (optional)

Hispanic/Latino Asian/Pacific Islander
 Black/African American Native American
 White/Caucasian Bi-racial
 Other (please indicate) _____

Please indicate the number of sessions attended.

1-5 sessions 11-20 sessions
 6-10 sessions 20 or more sessions

Please check the box that best describes your experience with the statements below.

	Questions	Strongly Agree	Agree	Disagree	Strongly Disagree	Does Not Apply
1	I received a courteous and prompt response to my first request for services.					
2	I found the building to be easily accessible, clean and comfortable.					
3	I was given information about my rights and responsibilities, including grievance procedures and privacy laws.					
4	Staff were polite to us (reception, telephone, billing)					
5	We were involved in developing our goals for treatment.					
6	Staff respected my culture/ethnic background					
7	The therapist listened to our concerns.					
8	When needed, I received a prompt response from my therapist/other available clinical staff.					
9	I was satisfied with services received.					

As a result of services:

10	There has been improvement in the problems we sought help for.					
11	We are better able to continue working out problems on our own.					
12	We were provided information about community services.					
13	If we need help in the future, we are likely to return here					

To help us better service you please comment on any concerns: _____

If you would like to speak to someone about your concerns please leave you name and phone number:

Community Child Guidance Clinic
CHILD CENTERED ★ FAMILY FOCUSED



317 North Main Street
Manchester, CT 06042

Tel.: (860) 643-2101
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E-Mail: clinic@ccgcinc.org

1075 Tolland Turnpike
Manchester, CT 06042

Tel.: (860) 432-9229
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Clifford Johnson, ACSW, LCSW
Executive Director

C. Lynn Helman, M.D.
Medical Director

Carla L. Corcione, Ph.D.
Director of Psychological & Developmental Services

Tanja Larsen, LCSW
Director of Outpatient & Milieu Services

Robin Entress, LCSW
Director of Community & Home-Based Services

COMMUNITY CHILD GUIDANCE CLINIC, INC.

PURPOSE, SERVICES, TARGET POPULATION

The mission of the Community Child Guidance Clinic, as approved by our Board of Directors, is to improve our community by providing a system of children's mental health services which is child centered and family focused and designed to maintain children in their homes and within the community. The Clinic serves families with a child between the ages of birth to 19, and the service is provided regardless of a family's ability to pay. The service area includes Manchester and the surrounding towns which include: Andover, Bolton, Columbia, Coventry, East Hartford, Ellington, Glastonbury, Hebron, Marlborough, South Windsor, Stafford, Tolland and Vernon. The Clinic has a goal of serving 600 families a year clinically. These families experience a variety of social, emotional and behavioral difficulties in one or more children, and a detailed description is included in the following summary of programs offered by the Clinic. Increasingly, our clients are poor and are from single parent homes. There is also a trend for our families to have a history with DCF, hospitals, residential institutions and out-of-home placements. More than in the past our clients are coming to us on psychotropic medications, and it is clear that we are seeing a more disturbed population than we were in the past. This is more than likely a result of efforts to bring children back from placements, to maintain children within the community, and the experience of managed care and limitations on expenditures. To serve this changing population, we have designed programs which are aggressive, which reach out to the community, which respond quickly to crises and which have preventative components. These programs are summarized below.

- I. Direct Clinical Service Program (Est. 1959) This program continues to be the backbone of Clinic operations.

Our effort, as can be seen below, is to provide a continuum of services that offers programs which are preventive through programs that are to meet mild problems all the way to services

A United Way Agency
Supported by the Connecticut Department of Children and Families

Serving: Andover · Bolton · Columbia · Coventry · East Hartford · Ellington · Glastonbury
Hebron · Manchester · Marlborough · South Windsor · Stafford Springs-Stafford · Tolland · Vernon-Rockville

designed to meet the most serious problems we find in our community. We make every effort to provide services not provided by others in the community. In this program families apply on a voluntary basis for help with any form of social, emotional or behavioral problem in a child under 19 years of age. Our Intake procedure means that families who have public insurance are seen face to face within 14 days of their initial call. Our average wait has been less than 7 days, and there are provisions to see emergent and urgent cases even quicker. People who have commercial insurance (about 25% of our applicants) and, therefore, have other treatment options available to them, are not seen within these guidelines but are still seen more quickly than they had been previously. Treatment can be individual, family or group treatment and these decisions are made by a treatment team headed by a Child Psychiatrist. Termination is reached mutually by the decision of the family and the Clinic. Throughout this process, there is every effort made to collaborate with appropriate community agencies, and, in particular, schools. Progress is measured by the subjective response of the clinician and the family, by changes in the Global Assessment of Functioning Scale (GAF) and by the attainment of case specific treatment objectives.

II. COMMUNITY CHILD GUIDANCE CLINIC SCHOOL (Est. 1973)

This is a day program for children ages 3 to 13 and which can accommodate up to 44 children at one time. Children are referred by their local school systems which pay a tuition for the service. The program is educational and consists of a six-hour day, Monday thru Friday. There is a very low teacher/student ratio, and faculty is comprised of special education teachers and specially trained teaching assistants. In addition to the educational programming, each child is followed through our clinical program. The family is also involved in this treatment, and there is also a home-based component to this program. The target population of our School is the seriously disturbed youngster between the ages of 3 and 13, who because of social, emotional or behavioral reasons cannot function in a public school setting, and our School is an alternative to more extensive residential placements. Approximately 50% of the students seen in our School are DCF involved.

III. Sexual Abuse Treatment Program (Est. 1979)

This is a multi-disciplinary, family-focused treatment program directed toward children who have been sexually abused. The purpose of the Program is to become involved as soon after disclosure of the sexual abuse as is possible. This requires close work with DCF on all cases; if the case is not referred by DCF then

we have ongoing communication with DCF through our initiative. The goals of this Program are (1) to protect the child; (2) to prevent further sexual abuse; (3) to help the family deal with the trauma of the abuse; and (4) when appropriate, to reunite the family.

The Sexual Abuse Treatment Team is available to testify in court if needed.

IV. Birth to Five Early Intervention Program (Est. 1987)

Our BTF Program is a multi-disciplinary team which has been specially trained in working with the problems of the very young child and their family. The team consists of a child psychiatrist, a clinical psychologist, and a psychiatric social worker. Assessments are provided. Treatment can consist of coordination with other early childhood agencies, as well as a variety of treatments conducted within the Clinic. The focus of our interventions in this area has been parent education groups, parent support groups, family therapy, individual and play therapy for children, and other forms of therapeutic care.

V. Firehawk Program (Est. 1988)

This is a cooperative program with the Manchester Fire Department and the Vernon Fire Department that attempts to direct juvenile fire setters into counseling when appropriate. While the Program does not deal with a large volume, this Program is seen as a significant preventive program in reducing property loss due to arson and in reducing recidivism among fire setters.

VI. Student Training (Est. 1972)

Each year the Clinic offers itself as a training institute for students from area professional schools. This past year we had three students from UCONN; two from Springfield College; and one from the University of Hartford. Each year we have also had a number of students from local schools of special education who work within our School Program. Our interns are typically here from September through April and their practicum consists of 20 to 35 hours per week at the Clinic.

VII. INTENSIVE FAMILY PRESERVATION (Est. 1993)

This is a cooperative program with DCF, which is supported by a grant from DCF and provides intensive, home-based treatment and

case management services to families in imminent danger of having a child placed outside the home.

VIII. Parent Education Groups for Divorcing Parents (Est. 1994)

Through this Program, the Clinic offers a 6 hour long education program designed to help parents understand the effects of their divorce on their children. This is a court-mandated, court-sponsored program and is open to any parent in the State who is in the process of a divorce. Funding is provided through tuition paid by parents who enroll in the course. This program currently sees over 300 people per year.

IX. Victims of Crime Program (Est. 1996)

This program is supported through a grant from the Judicial Branch and has allowed us to hire a full-time social worker. The purpose is to provide home-based services to people in our catchment area who are children and victims of crime. Services consist of case management, crisis intervention, home-based counseling, advocacy, and helping the family through the legal system. The majority of people that we have seen in this program have been victims of family violence and victims of physical and/or sexual abuse, but a number of people have been victims of other crimes. This program serves 100 families a year.

X. URGENT CARE (Est. 2003)

We have a social worker assigned to this program who provides ongoing service within a week to families unable to wait for services. Emergency applications can be referred to the regional Emergency Mobile Psychiatric Service or to local hospitals, but many families have problems just below this level of acuity and need service quickly.

XI. INTENSIVE IN-HOME CHILD AND ADOLESCENT PSYCHIATRIC PROGRAM (IICAPS) (Est. 2002)

This is a DCF funded and fee-for-service program where we are working with Yale University using a model they developed. The target population is the family with a child who is returning from a hospital stay and who may require a residential placement. IICAPS provides intensive in-home therapeutic services by a mental health team working under the direction of a child psychiatrist.

The goal of this program is to develop a range of community services to avoid having to send a child to a residential setting.

XII. OUTREACH PROGRAM TO THE MANCHESTER SCHOOLS (Est. 1999)

We provide Clinic services at 5 elementary schools. We now provide Clinic services at Robertson School, Waddell School, Bowers, Washington and Verplanck Schools by stationing a staff social worker at these schools. We have just added Iling Middle School and Manchester High School.

XIII. MEMBERS COMMUNITY PARTNERSHIP VERNON HEAD START

The Clinic participates in Community Advisory Board through EASTCONN for Vernon head Start.

**XIV. PARTICIPATION IN MANCHESTER SCHOOL READINESS COUNCIL
(Est. 2003)**

We participate in this team which focuses on quality services to preschool children. We provide a mental health perspective and consultation to the team. A grant through this group (MELC) allows us to provide services including training and education to parents, the public and child care providers, both center and home-based. We also provide consultation to child care providers.

XV. SOCIAL WORK SERVICES IN THE PAROCHIAL SCHOOLS (Est. 2004)

Since September, 2004, the Clinic has provided two full time social workers to provide school social work services at East Catholic High School, St. James School, St. Bridget School and Assumption School. This service is being offered in response to a request from the Town of Manchester to provide these services. Funding during the current year is provided under a separate contract which is currently between the Clinic and the Manchester Board of Education.

XVI. MULTI-DISCIPLINARY TEAM (MDT) (Est. 2004)

Since September, 2004 the Clinic has been working collaboratively with the Manchester Police Department and also police departments in South Windsor, Glastonbury, and East Hartford, to provide a multi-disciplinary team whose purpose is to review cases that have come to the attention of the police departments involving child sexual abuse. The purpose of this team is to advance and coordinate the prompt investigation of these cases and to reduce the trauma in any child victims, and to insure the protection and treatment of the child. This team meets monthly at the Manchester

Police Department to review cases and to plan for children who have been abused.

XVII. NORTHSTAR INTENSIVE OUTPATIENT (IOP), PARTIAL HOSPITAL PROGRAM (PHP) (Est. 2005)

In October, 2005 the Clinic took over this program from St. Francis Hospital. The program, formerly called Teamworks, would have relocated to Enfield had we not picked it up. Children age 6 to 12, either returning from placements or at risk of being sent out of the community, are seen in this afterschool program which provides up to 20 hours a week of intensive treatment. Our program currently sees 15 children at a time with an average stay of 8 weeks.

XVIII. BUILDING BLOCKS AUTISM ASSESSMENT PROGRAM (Est. 2008)

In the summer of 2008, at the request of area pediatricians and local school systems, the Clinic began an assessment program for children who have Pervasive Developmental Disorders, primarily autism. This is a service that was not currently provided in our area and not typically provided in outpatient clinics.

We assess 20 children per year and provide a comprehensive, multi-disciplinary assessment which is made available to parents and to school systems for planning. As we progress, we hope to be able to offer supportive programs to parents and consultations to schools in terms of setting up programs for these children as well as any ongoing clinical services that might be required.

XIX. MISCELLANEOUS

There are a number of activities that the Clinic conducts which are not formal programs but which should be noted. These include the following:

- (A) Consultation - The Clinic is available for consultation to other agencies for general topics or for individual children on an as needed basis. Currently, we provide ongoing services to day care centers and to two area HeadStart Programs.
- (B) East of the River System of Care - The Clinic is participating in monthly meetings with other area agencies to develop a comprehensive, integrated system of care in the Manchester area to deal with seriously disturbed children and adolescents. This concept, which brings various agencies together to work in a coordinated manner will be the model used by the State to program in the community for those children and adolescents who are the most disturbed.
- (C) DCF Permanency Planning Committee - The Chief Psychiatric Social Worker at the Clinic sits as a member of the DCF

Permanency Planning Committee in the Manchester DCF office. This is an ongoing monthly activity.

- (D) Manchester Truancy Board We provide a social worker who participates in these monthly meetings at the Manchester Board of Education.
- (E) Manchester Community Services Council - The Clinic is a member of the Manchester Community Services Council, and as such has been a member of several issues oriented task forces which that group has addressed over the past few years.
- (F) Connecticut Community Providers Association - This is our statewide child guidance clinic association which meets monthly and looks at issues related to children in Connecticut. A major piece of this work is a joint planning committee which is a committee consisting of Clinic representatives and DCF personnel.
- (G) Public Speaking - The Clinic is available to community agencies and to community groups to speak on issues related to children. We regularly speak to groups such as service organizations and other community groups.