City of Austin
Health and Human Services Department

Community Services Block Grant
Fiscal Year 2012

Community Action Plan
Parts II -IV

Texas Department of Housing and Community Affairs
October 31, 2011

Part II: Service Delivery System

1. SERVICE AREA

The only county in the City of Austin's Community Service Block Grant service area is *Travis County*.

2. MAIN OFFICE

A. The Health and Human Services Department's administrative office is located at the Betty Dunkerley Campus, 7201 Levander Loop, Austin, Texas, 78702. Administrative staff and other program staff who are non-CSBG supported are housed at this location. These employees include staff from the Director's Office; Community Services Division; Administrative Services Division (Budget & Analysis Unit, Accounting Unit; Human Resources Unit; Contract Compliance); and Vital Records.

Satellite offices are located throughout Austin/Travis County and house staff from the Disease Prevention & Health Promotion Division; Environmental Health Services Division; and Maternal & Child Health Division.

B. The delivery of services occurs at the six (6) City of Austin Neighborhood Centers and three (3) field offices. A client may be seen on a walk-in basis or request an appointment by calling any of the neighborhood centers.

3. NEIGHBORHOOD CENTERS/FIELD OFFICES

A. The Health and Human Services Department operates the following six (6) neighborhood centers from which CSBG-funded and supported services are provided -

Neighborhood Center	Address
Blackland Neighborhood Center	2005 Salina (78722)
East Austin Neighborhood Center	211 Comal (78702)
Montopolis Neighborhood Center	1416 Montopolis Drive (78741)
Rosewood Zaragosa Neighborhood Center	2800 Webberville Road (78702)
St. John Community Center	7500 Blessing Avenue (78752)
South Austin Neighborhood Center	2508 Durwood (78704)

Services provided at each of the centers include basic needs, case management, preventive health, and employment support:

- Basic Needs (food, clothing, information and referral, notary services, transportation, school supplies, car seat education and distribution, income tax counseling and preparation, Christmas Bureau applications, blankets, fans, holiday food baskets, pampers/toiletries, and other seasonal activities);
- Preventive Health (screenings for blood pressure, blood sugar, and cholesterol; pregnancy testing; lead poison testing and education, health promotion and education presentations, coordination and participation in health fairs, immunizations, coordination of wellness activities such as exercise and nutrition classes, linkages to medical home providers);
- Case Management (self-sufficiency case management, individual/family support counseling, household financial counseling, advocacy, crisis intervention, linkages with employers, educational opportunities and training, and working with individuals on quality of life issues);
- Employment Support (intake, assessment and goal setting, job readiness training, job placement assistance, and job retention services)

The Health and Human Services Department also ensures the provision of Community Services Block Grant-funded and support services, including public health nursing services at the following three (3) field locations –

Field Office	Address
Turner Roberts Recreation Center	7201 Colony Park Loop Drive (78724)
Dove Springs Recreation Center	5801 Ainez Drive (78744)
Santa Barbara Catholic Church	13713 FM 969 (78724)

B. Delivery of services at the neighborhood centers is performed by Community Workers, Social Workers, Public Health Nurses and Community Job Counselors primarily between the hours of 8am to 6pm., Monday through Thursday and 8am to 12pm on Fridays. Delivery of services at the outreach field locations is performed by Neighborhood Liaisons in coordination with other partners during established days of the month.
(**see attached Neighborhood Services Unit organization chart for list of CSBG direct and support staff**).

C. A resident may be seen on a walk in basis or request an appointment by calling any of the centers. During the screening process, applicants are 1) asked to answer some basic questions concerning their situation and 2) scheduled an interview with the appropriate worker depending on the type of services being requested. A CSBG intake application is completed by the worker to determine eligibility for basic needs services and based on the needs assessment, an internal referral is made for case management services, preventive health services and/or employment support services.

D. In addition to linkages to internal resources within the Health and Human Department, individuals and families are referred to other social service

providers for assistance by contacting the agency directly for the applicant to schedule an appointment or by providing the applicant with a written referral indicating the reason for the referral. In most cases follow-up is conducted by the worker to determine the outcome of the referral.

4. COORDINATION BETWEEN MAIN OFFICE AND NEIGHBORHOOD CENTERS

A. The Director of the Austin/Travis County Health and Human Services Department, Carlos Rivera, is located at the Department's main office. The mission of the Department is to work in partnership with the community to promote health, safety and well being.

The six (6) neighborhood centers operate under the Department's Community Services Division, Neighborhood Services Unit. The Community Services Division Asst. Director is Vince Cobalis. The Community Services Division's goal is to promote and foster increased self-sufficiency, healthy behaviors, and healthy lifestyles to improve the quality of life for the city's most vulnerable citizens. The Neighborhood Services Unit Manager is Cathleen Rodriguez who oversees the management and coordination of all basic needs, case management, preventive health services and employment support services, including compliance with all grant requirements. On-site Program Supervisors oversee the day-to-day operations of each of the centers, which include coordination of the programmatic/service delivery aspect of the CSBG grant. They also supervise licensed Social Workers, Community Workers, Public Health Nurses (Registered Nurses), Community Job Counselors and Neighborhood Liaisons at each of the neighborhood centers.

Staff at each of the six (6) neighborhood centers provides basic needs, case management and employment support services, including the coordination and facilitation of activities benefiting neighborhood residents, such as job fairs, health fairs and preventive health education and screening sessions. Monthly reports of services rendered are prepared by the staff at the centers and compiled into a consolidated report, including the National Performance Indicator outcomes, which is submitted to the Texas Department of Housing and Community Affairs (TDHCA) by the 15th of each month. Data collection and reporting is performed utilizing the SHAH Client Tracking System, an ACCESS Database and internal client tracking logs. The Neighborhood Services Unit Office is responsible for completing and submitting the monthly report to TDHCA. The Unit Office is located at the Austin Health and Human Services Administrative Office, 7201 Levander Loop, Austin, Texas 78702.

The Administrative Services Division provides budget, human resources and information technology support to the Neighborhood Services Unit.

5. COUNTIES WITHOUT A NEIGHBORHOOD CENTER

A. The only county in the City of Austin's CSBG service area is Travis County where six (6) neighborhood centers exist.

6. OTHER SERVICE DELIVERY METHODS UTILIZED

A. The other means by which services are provided to residents include home visits, outreach field offices, onsite provision of services in neighborhood schools, churches and other community agencies, mobile van outreach to disseminate information and/or gather needs information, and participation at health fairs and/or job fairs.

Through a coordinated effort with other Department units, the Neighborhood Services Unit's outreach program focuses on neighborhoods where few or no medical or social services exist. The outreach team has two CSBG-funded personnel working in these neighborhoods establishing agreements with community organizations to host and/or sponsor basic needs and preventive health events at their respective sites. The activities performed by this team not only establish satellite neighborhood center operations within each of these communities, but will also provide a linkage for residents to gain services from other partners within the Health and Human Services network. The targeted areas are identified below.

Southern Target Areas	Northern Target Areas
78725 (Austin Colony)	78724 (Colony Park, Pecan Brook)
78741/78742 (Riverside/Montopolis)	78753/78757/78758 (N. Lamar/Rundberg)
78744 (Dove Springs)	

Part III: Linkages and Funding Coordination

1. PROCESS FOR LINKAGES AND FUNDING COORDINATION

A. The Health and Human Services Department is involved in service coordination efforts that focus on identifying funding opportunities and improving client access to basic needs, employment and preventive health services. The Unit Manager, Site Supervisors, Social Workers, Community Workers, Neighborhood Liaisons and Public Heath Nurses participate on a number of collaboration committees with the goal of providing basic needs, promoting self-sufficiency and addressing preventive health needs.

B. The Basic Needs Coalition of Central Texas (BNC) is a citywide collaborative group working on increased information sharing among providers; identifying

where new resources can be applied and making basic needs a funding priority. The coalition is comprised of public, private, nonprofit and faith based organizations and has a total membership of forty-one (41) agencies. (refer to **Attachment B**). The City of Austin Health and Human Services Department is a member of the Basic Needs Coalition of Central Texas and is active with the Food Security Committee. The Food Committee identifies and describes existing community food service programs; such as emergency food pantries and soup kitchens and their availability to the public. One of the goals is to bring together food service providers to share information, discuss gaps, challenges, other related issues, and to explore opportunities to collaborate to improve food service delivery in Travis County.

The mission of the coalition is "to lead the community in creating solutions that secure the basic resources – food and housing- of our neighbors in need." The Basic Needs Coalition of Central Texas (BNC) is recommending a fundamental change in the way we, as a community, provide for the basic needs of individuals and families in crisis. The purpose of the coalition is to 1) assist, advise, and educate community policymakers, service providers, funders, community groups and citizens in addressing basic needs in Austin and Travis County; 2) maximize services and resources through the development, coordination and implementation of effective strategies for service delivery; and 3) serve as an advisory body of the Community Action Network (CAN).

As basic needs service providers (emergency food, clothing, housing, rent, mortgage, utility assistance) the members of the BNC are collaborating to provide ease of access to services for clients; to identify and maximize community resources; and increase the level of community investment to meet the growing need for basic need services.

C. The ARRA funds provided the neighborhood centers the opportunity to establish workforce resource centers and to partner closely with Workforce Solutions Capital Area Program Specialists to provide on-site services to clients who are struggling to secure employment in the current job market. These are households whose income is below the income poverty level either due to unemployment or under-employment, including residents who are receiving state benefits such as food stamps and/or cash welfare benefits. Short-term plans are for neighborhood center staff to continue to provide referrals to Workforce Solutions with a designated contact person to be assigned to staff for direct linkage. A team approach of working with the individuals who are seeking services will continue between City and Workforce Solutions staff even though the centers will not have an on-site program specialist and workforce development services. The long term plan is to seek and secure other funding that will allow for neighborhood based workforce development services to be accessible through the centers.

D. As a partner in the Community Action Network Streamlined Common Eligibility Work Group, the goal is for neighborhood center staff to connect families to all available resources while maximizing public assistance enrollment.

E. The City of Austin has been a partner with Austin Free-Net (AFN) since 2006. This partnership has afforded AFN to provide computer access through the neighborhood centers. Five of the six neighborhood centers have computer labs in operation. As a member of the Texas Connects Coalition, AFN received funding through a technology grant to replace and increase the number of workstations with current partners and provide onsite instructors. The benefit to the neighborhood centers in continuing this partnership with AFN is the enhancement of computer access, technical support, digital literacy, workforce development and other services to the low-income and vulnerable populations.

F. The City of Austin has a long standing history of supporting and funding social services in the community. Through social service contracts, these dollars have supported the issue areas of basic needs, early children and childcare, homeless services, mental health/mental retardation/developmental disabilities, substance abuse, victim services, workforce development and youth development. The plan is to work with these social service agencies to expand services within the neighborhood centers resulting in a one-stop service delivery system.

G. Linking households to the City of Austin's Permanent Supportive Housing program that not only addresses affordable housing for certain targeted populations but also includes the provision of support services that enable tenants, especially the homeless, to live independently and participate in community life.

2. LINKAGES WITH OTHER SERVICE PROVIDERS

A. In Travis County, we coordinate with a number of social service, health and faithbased providers. Coordination efforts are performed by either referring the clients directly to the service provider for assistance or service providers are on-site at a neighborhood center during special events. The following list represents the level of coordination and leveraging of resources to meet the needs of clients.

AARP
Austin Independent School District
American Cancer Society
American Heart Association
American Youth Works
AMERIGROUP Community Care
Any Baby Can

Austin Community College
Austin EMS
Austin Energy
Austin Fire Department
AustinFree Net
Austin Housing Authority
Austin Police Department
Austin Learning Academy
Austin Library Services
Austin Stone Church
Blackland Community Development Corporation
Blue Santa (Christmas Bureau)
CommUnity Care
Capital Area Food Bank
Caritas
DARS (Tx Dept of Assistive and Rehabilitative Services)
Dell's Children Hospital – SafeKids Program
El Buen Samaritano
Family Eldercare
Foundation Communities
Hispanic Bar Association
Huston Tillotson University
Light of Hope (Children's Shelter)
LiveStrong
Mexican Consulate
Parks and Recreation Department – recreation centers and senior activity centers
Physician Health Choice
Planned Parenthood
Rising Star Baptist Church
Roger Hughes Masonic Lodge
Salvation Army
Seton Healthcare Family
Smile Dental
Southwest Keys
Superior Health
Susan G. Komen Breast Cancer Foundation
Sustainable Food Center
Travis County AgriLife Extension
Travid County Health and Human Services
Travis County Sheriff's Department
UT School of Nursing
UT School of Social Work
Womens Infants and Children -WIC
Workforce Solutions

3. EXISTING GAPS OR UNMET NEEDS

A. The Community Needs Assessment identified the following existing gaps or unmet needs:

- Basic Needs - food, rent, utility assistance
- Employment – jobs for people with criminal records, good paying jobs with benefits, jobs skills training programs
- Housing – affordable rental housing, affordable homeownership, emergency shelter
- Health Care - dental care, affordable prescriptions, and access to clinics
- Education – GED classes, financial assistance for classes, English as a Second Language classes
- Youth Development – affordable summer activities, summer youth employment, after school programs
- Preventive Health Services – blood pressure screenings, domestic violence education, and family planning

Contributing factors impacting a family's ability to meet the identified critical unmet needs -

- low wage paying jobs to meet basic needs
- affordable childcare that will enable individuals to work and/or attend training programs and education classes
- inability for previously incarcerated individuals to find employment
- funds to pay for educational classes
- must work therefore cannot attend training programs
- gentrification.

In addition, an assessment of the current health services indicated the following:

- Many services are not community focused
- A disconnection exists between what people feel they need and what is available
- Current public health delivery system is not understood by general public and many providers
- Preventive services are fragmented or do not exist
- One stop service delivery for preventive services that is community based does not exist.

The overall goal of the Unit is to promote a healthy community, which reflects social equity. This will be achieved by:

- The increase in the availability or preservation of community services to improve public health and safety
- Promoting and fostering increased self sufficiency, healthy behaviors and lifestyles among targeted populations
- Delivering quality, safety-net health service in partnership with the community

Special projects during 2012 will focus on the following -

- Developing and implementing a healthy eating project. The project will focus on addressing policy changes to ensure consistency among the six neighborhood centers when ordering food from the Capital Area Food Bank for food pantry operations. The goal is for all food pantries to have an array of healthy food items available for distribution to residents in need of assistance, including recipes focused on healthy food preparation.
- Looking at the feasibility of piloting a client job readiness project
- Collaborating with social service agencies to expand services at the neighborhood centers

PART IV: CASE MANAGEMENT SYSTEM

1. INTAKE AND SELECTION PROCESS

A. The process for selecting clients to participate in case management is as follows:

Step 1: Intake Process – The client makes the initial contact with the Community Worker. The Basic Needs intake form is completed at this time. The Community Worker completes the Needs Assessment form to determine the need for case management, public health and/or employment support services. The client may be referred to an outside service at this point if they seek a service that is not provided at the Neighborhood Center.

Step 2: Referral for Case Management Services- A client is referred to the Social Worker. The Social Worker receives a copy of the needs assessment and the referral for services form to review the reason for the referral.

B. The Social Worker does an initial assessment to determine the following:

- If the client is appropriate for services
- The level of assistance to be provided to the client
- Other concerns that may need to be addressed

C. The following factors are considered when choosing a client for Case Management services:
    - Unemployed: seeking employment, TANF, and Disability;
    - Underemployed: expressing a need for a higher paying job; client feels there is a need for additional employment skills; quality of life improvement;
    - Homelessness; living in a shelter or other temporary place (hotel, motel, or Salvation Army); unstable living environment (living with family or friends);
    - Person with multiple crisis at home: problems with children, spouse, and/or employer; problems with the home (need repairs); medial concerns and how to address those issue; people who live in abusive homes or abusive relationships;
    - Applying for disability;
    - Elderly: problems with adult children, spouse or other; problems with home; medical concerns and how to address those issues; people who are in abusive situations.

2. CASE MANAGEMENT DELIVERY PROCESS

A. The Initial Assessment note is a progress note that will be written in narrative form using the Data, Assessment, and Plan (D.A.P.) format for documentation. The Assessment looks at all the needs of the household as well as the individual needs of the client. The Social Worker determines at this point if the client is willing to participate, if so the Social Worker and the client develop a service plan.

B. The areas of the Integrated Assessment and Case Management Services Assessment Levels I (Intensive Case Management) and II (Moderate Case Management) are used initially to build a baseline for services. In addition, the case management assessment is used throughout services to examine any further goals that need to be set and achieved by the client with the assistance of the Social Worker.

C. The Release of Information is used by the Social Worker when providing Case Management services. This agreement basically gives permission to the Social Worker and this agency to communicate with any other service provider. The Social Worker may release information with a client's signed consent.

Social Workers must complete the Release of Information during the initial assessment with the client. The Release of Information allows the Social Worker to discuss with other agencies about the case and/or needs in which other providers can assist the client. The Social Workers document any contact in the chart with the client or other service providers. Social Workers have in-services with providers from different Social Services Providers during their monthly meetings. Some agencies provide a special referral for the Social Workers to complete in order to expedite the services for the client.

3. FOLLOW-UP AND CLOSURE

A. The Social Worker reviews the plan every 90 days or sooner if the worker agrees that a change needs to be made in the plan. The Social Worker monitors the client by face to face and telephone contact. Depending on the level of case management of the client, the Social Worker would determine the frequency of the contact. For example, if the client is in the Intensive Case Management Intervention level, the Social Worker must have weekly contact with this individual. The Social Worker must also have a minimum of one face-to face contact with the client on a monthly basis. If the client is on the Case Monitoring level, the client will need to have one contact per month with the Social Worker.

B. When the Social Worker places the client on the Case Monitoring level for services, the Social Worker has to have one contact a month with the client by phone or face to face during the next 90 days. The clients are informed after the 90-day monitoring to come in one last time to close the case. The client is instructed to bring in documentation of their income for the last visit. The client and the Social Worker mutually agree to close the case. Clients will be given the option to call if they have changes to their level of functioning/self sufficiency after closure.

C. The Social Workers also provide a Client Comment Card, which is given to the client and reviewed by the Social Services Supervisor. The Social Services Supervisor reviews the comment card and reports to the Social Worker, Site Supervisor and Unit Manager. The comments from the card are shared at the monthly meeting when clients make suggestions for improvement for the Case Management program.

4. CASE MANAGEMENT STAFF

A. Refer to **Attachment E**, Staff Providing Case Management Services.

5. *EVALUATION OF CASE MANAGEMENT SYSTEM*

A. As a part of the Unit's reorganization, a centralized Social Services Program was created to strengthen our case-management focus. This program consists of all of the Social Workers within the Neighborhood Services Unit. The Social Workers have several years of experience and expertise, and a commitment to their area of practice. The Social Services Coordinator conducts monthly meetings with the Social Workers which allow for stronger coordination of services and ensures consistency in our delivery of case management services.

B. An area for improvement in the Social Services Program case management system would be to increase partnerships with community social service providers to ensure the provision of emergency financial assistance. In addition, the Social Workers have a goal to increase the number of collaborations with area service providers. To reach this goal, the Social Services Program added an outreach component.

C. Continued plans to monitor and evaluate the programs' data collection process to ensure an ability to assess overall results and efficiency and obtain a base of information for continued refinement and improvement. These improvements will be made during the program year.

BNC Member Agencies

- 211
- AIDS Services of Austin
- Any Baby Can Child & Family Resource Center
- Arc of the Capital Area
- Austin Stand Down
- Austin Tenants' Council
- Austin/Travis County Health and Human Services Department
- Austin/Travis County Integral Care
- Blackland Community Development Corporation
- Capital Area Food Bank
- Caritas of Austin
- Catholic Charities of Central Texas
- Communities In Schools
- Community Action Network
- Crime Prevention Institute
- El Buen Samaritano
- Family Eldercare
- Foundation Communities
- Foundation for the Homeless
- Front Steps
- Gateway Church
- Good Shepherd Episcopal Church
- Goodwill Industries of Central Texas
- Housing Authority of the City of Austin
- Meals on Wheels and More
- Micah 6
- Physicians Health Choice of Central Texas
- SafePlace
- Saheli for Asian Families
- Salvation Army
- St. Louis Catholic Church
- Sustainable Food Center
- Texas Interagency Interfaith Disaster Response
- Texas Rio Grande Legal Aid
- The Episcopal Church of the The Good Shepard
- The Wright House Wellness Center
- Travis County Health and Human Services and Veterans Affairs
- Travis County Re-Entry Roundtable
- Trinity Center
- United Way Capital Area and 2-1-1 Texas
- Workforce Solutions

Case Management Service Agreements

Name of Service Provider Organization	Description of Services Coordinated with Organization	Contact Name (First and Last Name)	Is there a written Service Agreement in place? Yes or No	Details of the Service Agreement
Child Inc.	Provide assistance and linkage to accessible childcare.	Larry Meyers	No	A working agreement to accept and give referrals in order to assist clients with long term affordable child care, parent education and social services.
Urban League	Assist families with home repairs.	Rudy Rios	No	A working agreement to accept and give referrals in order to facilitate client access to services.
Family Eldercare	Assist Elderly with Case Management for those that need supported home services; but are not appropriate for placement outside of the home.	Krystal Wilson	No	A working agreement to accept and give referrals in order to facilitate client access to services.
Foundation Communities	Tax Preparation Centers	Alpha Balde	Yes	Provision of tax assistance, outreach and education to low-and-moderate income taxpayers, while saving them the cost of filing their taxes.
Travis County – Family Support Services Division	Access to financial emergency services and basic needs services.	Jane Price-McLean	No	A working agreement to accept and give referrals in order to facilitate client access to services.
Goodwill Industries	Services for employment	Steve Kaiven	No	A working agreement to accept and give referrals in order to facilitate client access to services.
Department of Assistive and Rehabilitative Services (DARS)	Services that facilitate the access for individuals with development problems for job training and support services.	No specific contact person.	No	A working agreement to accept and give referrals in order to facilitate client access to services.
Workforce Solutions	Workforce Development employment and employment support services	Jasmine Griffin-Ives	No	A working agreement to accept and give referrals in order to facilitate client access to services.

Staff Providing Case Management Services

Name	Title	Duties	Phone, Area Code, & Extension	Location
Andrew Medlock	Social Worker	See Note Below	(512) 972-5794	Blackland Neighborhood Center
Jesse Hernandez	Social Worker	See Note Below	(512) 972-5188	St. John's Neighborhood Center
Yvonne Meyer	Social Worker	See Note Below	(512) 972-6860	South Austin Neighborhood Center, Montopolis Neighborhood Center
Laura Candelas	Social Worker	See Note Below	(512) 972-4465	East Austin Neighborhood Center, Rosewood Zaragosa Neighborhood Center

Note:
The purpose of the Family Social Services and Case-Management Services is to provide social work/case-management assistance to families and individuals in order to improve their quality of life and/or so that they may increase their income above the federal poverty level.

Responsibilities/Duties include:

- Receives referrals of potential clients for short-term family social services and/or longer-term case-management services
- Conducts assessment of clients' problems and needs
- Develops individual service plans, with stated goals, for clients/households
- Provides counseling, referrals, assistance in obtaining needed resources, accompaniment to required or beneficial appointments, as needed, and support and encouragement, to client/client's household members, per established service plan
- Follows policies and procedures and maintains required documentation per the Unit's established Case Management Model.
- Provide basic needs assistance-requested to eligible clients.
- Assess overall client needs and make appropriate referrals for other relevant services, including case-management services.
- Perform outreach activities, as assigned, in order to inform residents of available services and resources through the Neighborhood Centers, other Departmental programs, and other community service providers, and/or to assess residents' and Center's service-area conditions, assets and needs.
- Complete and maintain required intake/eligibility determination forms and documentation, and service- provision information for clients served, in client file.

PERFORMANCE STATEMENT FOR FY 2012

	Services, Programs, and Activities	Counties Served	Funding Source (federal or state agency) & Name of Grant (Do not use abbreviation)	National Performance Indicators (NPI) (Identify specific codes, ex: 1.1A
1.	Adult Immunizations	Travis	Department of State Health Services - Office of Public Health Practices; City of Austin	1.2G 6.1A 6.1B 6.3D4
2.	Child Immunizations	Travis	Department of State Health Services - Office of Public Health Practices; City of Austin	6.3A1
3.	Health Education and Promotion	Travis	Department of State Health Services - Office of Public Health Practices; City of Austin	6.1A 6.3C1 6.3C2
4.	Health Screenings – blood pressure, blood sugar and cholesterol, pregnancy testing	Travis	Department of State Health Services - Office of Public Health Practices; City of Austin	6.1A 6.1B 6.3D4
5.	Lead Screenings	Travis	Department of State Health Services - Office of Public Health Practices; City of Austin	6.3A1
6.	Vision Screenings	Travis	Department of State Health Services - Office of Public Health Practices; City of Austin	6.3D4
7.	Mammograms	Travis	City of Austin; Seton Hospital	6.3D4
8.	Nutrition Classes	Travis	Department of State Health Services - Office of Public	6.3A2 6.3B1

			Health Practices; City of Austin	
9.	Car Seat Distribution	Travis	Texas Department of Housing and Community Affairs - Community Services Block Grant; City of Austin; Department of State Health Services – Safe Riders	6.3D9
10.	Car Seat Safety Class	Travis	Texas Department of Housing and Community Affairs - Community Services Block Grant; City of Austin; Department of State Health Services – Safe Riders	6.3C1
11.	Clothes Closet/Tools for employment, emergency and regular support	Travis	Texas Department of Housing and Community Affairs - Community Services Block Grant; City of Austin; Donations	1.2N 6.2K 6.3D6
12.	Fans, Blankets	Travis	Texas Department of Housing and Community Affairs - Community Services Block Grant; City of Austin; Family Eldercare	6.1A 6.1B 6.2L 6.3D9
13.	Food Assistance (food pantry, Fresh Foods for Families Program, Healthy Options Project for the Elderly, Shop For)	Travis	Texas Department of Housing and Community Affairs - Community Services Block Grant; City of Austin; Capital Area Food Bank; St. John Episcopal Church	1.2I 6.1A 6.1B 6.2A 6.3D1
14.	Income Tax Assistance	Travis	Texas Department of Housing and Community Affairs - Community Services Block Grant; City of Austin; American Association of	1.3A1

			Retired Persons	
15.	Household Financial Counseling	Travis	Texas Department of Housing and Community Affairs - Community Services Block Grant; City of Austin; Caritas	1.3A7
16.	Notary Services	Travis	Texas Department of Housing and Community Affairs - Community Services Block Grant; City of Austin	6.3D9
17.	School Supplies	Travis	Texas Department of Housing and Community Affairs - Community Services Block Grant; City of Austin; Donations	6.3D8
18.	Pampers, Toiletries	Travis	Texas Department of Housing and Community Affairs - Community Services Block Grant; City of Austin; Donations	6.3D9
19.	Transportation – bus passes, gas gift cards	Travis	Texas Department of Housing and Community Affairs - Community Services Block Grant; City of Austin	1.2F 6.2I 6.3D5
20.	Holiday Food Baskets	Travis	Donations: Capital Area Food Bank; City of Austin; Texas Department of Housing and Community Affairs – Community Services Block Grant	6.3D7
21.	Christmas Bureau Application Assistance	Travis	Texas Department of Housing and Community Affairs - Community Services Block Grant; City of Austin; Donations	6.3D7
22.	Letter Reading/Translations	Travis	Texas Department of Housing	6.3D9

			and Community Affairs - Community Services Block Grant; City of Austin	
23.	School Based Social Services	Travis	Texas Department of Housing and Community Affairs - Community Services Block Grant	6.3C1 6.3C2
24.	Job Counseling & Referrals	Travis	Texas Department of Housing and Community Affairs - Community Services Block Grant; City of Austin	1.1A 1.1C 1.1D
25.	Family and Individual Counseling	Travis	Texas Department of Housing and Community Affairs - Community Services Block Grant; City of Austin	6.3C1 6.3C2
26.	Neighborhood Council Meetings (persons participating)	Travis	Texas Department of Housing and Community Affairs - Community Services Block Grant; City of Austin	3.2D
27.	Disaster Relief Assistance	Travis	Texas Department of Housing and Community Affairs - Community Services Block Grant; City of Austin	6.2J
28.	Volunteers	Travis	City of Austin	2.3, 3.1
29.	Partnerships	Travis	Texas Department of Housing and Community Affairs - Community Services Block Grant; City of Austin	4.1
31.	FamilyWize Prescription Drug Discount Card Program	Travis	FamilyWize	1.3B5

TARGETS FOR NPI 1.1, 1.3, 6.2, 6.3
CSBG Program Year 2012

Subrecipient: City of Austin, Health and Human Services Department

NPI	Activity	PY 2012 Target	Target Attained & Reported in Final 2010 CSBG Performance Report	Cumulative Target Reported as of September 2011 CSBG Performance Report	Methodology Utilized (Description of how target was selected)
1.1 A.	Unemployed and obtained a job	35	30	25	The goal of the unit is to transition 12% of the number of households casemanaged.
1.1 B.	Employed and maintained a job for at least 90 days				
1.1 C.	Employed and obtained an increase in employment income and/or benefits	2	3	2	Looked at actuals for 2010 and 2011.
1.1 D.	Achieved "living wage" employment and/or benefits	1	2	1	Looked at actuals for 2010 and 2011
1.3, A.1	Number and percent of participants in tax preparation program who qualified for any type of Federal or State tax credit and the expected aggregated dollar amount	2089	1338	1739	Anticipate increase in number of participants for 2012 due to another neighborhood center hosting a tax preparation center.
1.3, A.2	Number and percentage of participants who obtained court-ordered child support payments and the expected annual aggregated				

NPI	Activity	PY 2012 Target	Target Attained & Reported in Final 2010 CSBG Performance Report	Cumulative Target Reported as of September 2011 CSBG Performance Report	Methodology Utilized (Description of how target was selected)
	dollar amount of payments				

NPI	Activity	PY 2012 Target	Target Attained & Reported in Final 2010 CSBG Performance Report	Cumulative Target Reported as of September 2011 CSBG Performance Report	Methodology Utilized (Description of how target was selected)
1.3, A.3.	Number and percent of participants who were enrolled in telephone lifeline and/or energy discounts with the assistance of the agency and the expected aggregated dollar amount of savings				
1.3, A. 4.	Other projects resulting in an increase in financial assets or financial skills				
1.3, B. 1.	Number and percent of participants demonstrating ability to complete and maintain a budget for over 90 days				
1.3, B. 2.	Number and percent of participants opening an Individual Development Account (IDA) or other savings account and increased savings, and the aggregated amount of savings				
1.3, B. 3.	Number and percent of participants who increased their savings through IDA or other savings accounts and the aggregated amount of savings				
1.3, B.4.a	Number and percent of participants capitalizing a small business with accumulated savings				
1.3, B.4.b	Number and percent of participants pursuing post-secondary education with accumulated savings				
1.3, B.4c.	Number and percent of participants purchasing a home with accumulated savings				

1.3, B. 4d	Number and percent of participants purchasing other assets with accumulated savings or who will utilize a savings account for a retirement fund.				
1.3, B. 5	Number and percent of participants who received assistance with enrollment in prescription assistance program	**316**	**106**	**211**	**Anticipate increase in number of participants since the public health nurses will be part of the enrollment process.**
NPI	**Activity**	**PY 2012 Target**	**Target Attained & Reported in Final 2010 CSBG Performance Report**	**Cumulative Target Reported as of September 2011 CSBG Performance Report**	**Methodology Utilized (Description of how target was selected)**
1.3, B. 6.	Number and percent of participants who received assistance to prevent loss of home and other homebuyer related assistance.				
1.3, B. 7.	Number and percent of participants who enrolled in classes or projects to increase financial skills.				
6.2 A.	Emergency Food	**150**	**63**	**114**	**Anticipate continued increase in food requests due to economic environment.**
6.2 B.	Emergency fuel or utility payments funded by LIHEAP or other public and private funding sources				
6.2 C.	Emergency Rent or Mortgage Assistance				
6.2 D.	Emergency Car or Home Repair (i.e. structural, appliance, heating system, etc.)				
6.2 E.	Emergency Temporary Shelter				
6.2 F.	Emergency Medical Care				

6.2 G.	Emergency Protection from Violence				
6.2 H.	Emergency Legal Assistance				
6.2 I.	Emergency Transportation	**0**	**1**	**0**	**Most of the transportatin assistance falls under Family Maintenance.**
6.2 J.	Emergency Disaster Relief				
6.2 K.	Emergency Clothing	**12**	**0**	**12**	**Most of the clothing assistance falls under Family Maintenance.**
6.2 L.	Other emergency assistance				
NPI	**Activity**	**PY 2012 Target**	**Target Attained & Reported in Final 2010 CSBG Performance Report**	**Cumulative Target Reported as of September 2011 CSBG Performance Report**	**Methodology Utilized (Description of how target was selected)**
6.2 M.	Assistance with items for holidays (food, toys, etc.)				
6.2 N.	Assistance with school supplies for children.				
6.3 A. 1	Infants and children obtain age-appropriate immunizations, medical, and dental care	**200**	**212**	**124**	**YTD is through August. Due to immunization clinic in September, anticipate YTD to be within target which is 200.**
6.3 A. 2	Infant and child health and physical development are improved as a result of adequate nutrition	**150**	**1**	**90**	**Anticipate increase due to projected increase in referrals to WIC and other nutrition programs.**

6.3 A. 3	Children participate in pre-school activities to develop school readiness skills				
6.3 A. 4	Children who participate in pre-school activities are developmentally ready to enter Kindergarten or 1st Grade				
6.3 B. 1	Youth improve health and physical development				
6.3 B. 2	Youth improve social/emotional development				
6.3 B. 3	Youth avoid risk-taking behavior for a defined period of time				
6.2 B. 4	Youth have reduced involvement with criminal justice system				
6.3 B. 5	Youth increase academic, athletic, or social skills for school success				
6.3 B. 6	Youth Employment Projects				

NPI	Activity	PY 2012 Target	Target Attained & Reported in Final 2010 CSBG Performance Report	Cumulative Target Reported as of September 2011 CSBG Performance Report	Methodology Utilized (Description of how target was selected)
6.3 B. 7	Youth Leadership Projects				
6.3 B. 8	Youth increase academic skills by completing educational requirements				
6.3 C. 1	Parents and other adults learn and exhibit improved parenting skills	**2400**	**1301**	**2025**	**Anticipate continued increase due to outreach efforts in schools.**

6.2 C. 2	Parents and other adults learn and exhibit improved family functioning skills	**385**	**208**	**367**	**2010 reflected a decrease in participation but 2011 is near 2009 acutals. Anticipate slight increase due to outreach efforts.**

TARGET FOR TRANSITIONING PERSONS OUT OF POVERTY (≥ 125%)

CSBG Program Year 2012

CSBG Subrecipient: City of Austin, Health and Human Services Department

A. Number of Persons Projected to be Working Towards Transitioning Out of Poverty (TOP)	**288**
Number of Persons Projected to Transition Out of Poverty	35

B. Provide a brief description of how the target numbers above were selected.	The department's performance measure is to have 288 participants enrolled in case management with 12% transitioning out of poverty.
C. Have 2012 CSBG funds been budgeted to provide assistance to persons working towards TOP? If yes, provide information on how much money has been budgeted and what type of assistance will be provided with those funds.	If CSBG remains at level funding for 2012, the department anticipates the 2012 CSBG budget to include 3 social worker positions (est. $232,567) and direct services (bus passes est. $2,000 and gift cards $500).

Instructions: Complete this form using the following instructions:

A. Provide targets for the number of persons that will work towards transitioning out of poverty (number you plan to enroll or work with) and the number of persons that will transition out of poverty (obtain a household income of 125% or above and maintain it for 90 days) during the 2012 program year, January through December 2012.

B. Provide a brief description of how the target numbers were selected for persons working towards transitioning out of poverty and persons transitioning out of poverty.

C. Provide a description of any funds budgeted for persons assisted with CSBG case management. Include the amount budgeted and the type of assistance to be provided.