

City of La Crosse

Planning and Development

CDBG Cares Grants (Homelessness or Child Care)

Deadline: 7/7/2020

Catholic Charities of the Diocese of La Crosse, Inc. Covid-19 Homeless Casework

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\$ 80,000.00 Requested

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SAM Expires 5/15/2021

Pre-Application [top](#)

1. Please select your eligibility as an applicant

You are not a qualified applicant if your organization does not meet one of these descriptions. "Licensed" means certified by a third-party agency, like the Department of Children and Families or by the Institute for Community Alliances.

- ☒ Homelessness Agency who is an HMIS Licensed User AND previous CDBG recipient
- ☐ Homeless agency, willing to obtain an HMIS License, and previous CDBG recipient
- ☐ For-Profit Licensed Child Care Center
- ☐ Non-profit organization, providing licensed child care services
- ☐ Non-profit organization, providing licensed school age care
- ☐ Certified family child care provider
- ☐ Licensed family care provider

2. If you are a non-profit, does your organization receive an independent audit every year or independent financial review?

- ☒ We are independently audited
- ☐ We are not independently audited but have another type of independent financial review, explain more in #10
- ☐ No, we are a for-profit business that provides licensed child care
- ☐ No, please explain in #10

3. Describe your organization's accounting procedures (budgeting, cash management, processing payments) and software or systems used for accounting.

Write N/A if you are a privately owned child care business with a capacity of 35 or less students.

Catholic Charities has written policies and procedures for all budgeting, cash management, payment processing, and drawing of funds activities. We utilize Peachtree financial software. Each government grant is designated its own G/L funding code.

4. Describe your agency's (fiscal agents) system of internal controls to prevent waste, fraud, and abuse of proposed funds. Second, describe the role of your board of directors.

Write N/A if you are a privately owned child care business with a capacity of 35 or less students

Catholic Charities has written policies & procedures for segregation of duties, account authorizations, software security, financial reporting, board financial review, accounting review and reconciliation, audit, contract compliance, receipting, etc.

5. Will CDBG grant be managed in a separate or segregated account?

These grant funds must be tracked separately from other accounts for purposes of tracking the grant funds.

- ☒ Yes, we are familiar with managing grant funds in a separate account
- ☐ No, we are a private organization
- ☐ Unsure, we have never managed grant funds in a segregated account before.

6. Do you have a drug-free workplace policy?

- ☒ Yes
- ☐ No
- ☐ No, but willing to put in place a policy.

7. Does your agency have a non-discrimination service policy?

- ☒ Yes
- ☐ No
- ☐ No, but willing to put in place a policy.

8. Does your agency have written policies and procedures for the homeless program, child care, or after school care program, in which you are applying for funds?

Note: This is not your employee handbook, it's your "program policies". Your agency will be required to attach a copy of your policies and procedures upon completion of application.

- ☒ Yes
- ☐ No, please explain in Question # 10.

9. Do you track household income of people enrolled in your services? If yes, please explain how.

We utilize a web based client database, Apricot, for all client data. In addition to this database, we also utilize the State of Wisconsin's database for information on homelessness, ServicePoint. Clients are track via these databases.

10. If you wish to explain any responses, you may also do so here.

You must answer this question in order to successfully submit.

N/A

11. Are your services located in the City of La Crosse?

Please note that the Town of Shelby or the Town of Campbell have city of La Crosse addresses but are not in the City of La Crosse. You are not eligible to apply if you cannot answer yes to this question.

- ☒ Yes
- ☐ No

Application Questions [top](#)

Some answers will not be presented because they are not part of the selected group of questions based on the answer to #2.

PROJECT SUMMARY

1. SUMMARIZE YOUR REQUEST FOR GRANT FUNDS

1) What will you use this grant for? 2) Where are the services located? 3) Who will benefit and how? 4) Why are these funds important for your organization/business to receive? 5) How will the funds help you respond to or prepare for Covid-19?

COVID-19 has and will cause several risks to our homeless population in La Crosse. This grant will be used to provide homeless case management to those homeless on the streets or in shelter. The primary focus of this case management will be to meet clients where there at, develop housing plans and work towards reaching those housing goals with a sense of urgency. At the same time, this case management will also be directed at those possibly entering homelessness with the same focus in order to minimize the length of time homeless, or possibly prevent it. Currently, direct client aid is coming from many sources, local & federal, to help those in need. However, there are not enough case managers to deliver the direct aid and services. The CDBG Cares Act funding will help bridge this discrepancy.

Our partnership and involvement in the Coulee Collaboration to End Homelessness has been very beneficial. Being able to see issues from others' perspective has made our agency stronger.

2. What type of project are you applying for?

If your project meets more than one priority, select the best fit.

- ☒ Housing homeless households and providing case management
- ☐ Conducting street outreach to homeless individuals
- ☐ Providing child care services for children younger than 5
- ☐ Providing school age care services (summer or after school)

NATIONAL OBJECTIVE

3. Please select which option describes how your project meets a Community Development Block Grant (CDBG) National Objective.

80% County Median Income, Household Size \$49,200 (family of 2); \$55,350 (family of 3); \$61,450 (family of 4); \$66,400 (family of 5); \$71,300 (family of 6)

- ☒ Limited Clientele: Activities will ONLY benefit homeless persons (HUD definition)
- ☐ 51% or more of enrolled children come from households that make less than the household income levels described above
- ☐ The nature of the child care services and location (low-income neighborhood) mean that 51% of the households served can be assumed to be low-income
- ☐ Children served are not low-income but this grant will help meet an Urgent Community Need
- ☐ Unsure, please explain in question #24

ORGANIZATIONAL CAPACITY

4. Please describe your organization or business and the services that you provide. How long have you been in business and how many people do you serve? What types of programs or services does your organization? What are unique aspects of your services? Describe the experience, qualifications, and background of your organization's staff and leadership.

Catholic Charities of the Diocese of La Crosse (CCDL) has been a leader in social services in our community for almost 150 years. Our goal is to help individuals and families face their life challenges, but also make it known that they are not alone, that we all belong to a community, and we are all loved by God.

By providing case management and financial assistance, our St. Lawrence program reaches hundreds of individuals and families that need help with rent, housing counseling, utilities, food, disaster recovery, and other basic human needs. Similarly, our Community Homeless Facilities provide thousands of shelter nights for the homeless, and our Beyond Shelter program furnishes long-term housing for individuals experiencing chronic homelessness. CCDL has operated the warming center in La Crosse for a while. We have also dispersed client aid, provided CCS services, operated a day center, provided long-term housing, and have had a successful rapid re-housing effort in our city.

NEED AND COVID-19 RESPONSE

5. Please describe how this grant will help your child care business prepare for or respond to Covid-19?

-answer not presented because of the answer to #2-

6. How has Covid-19 had a negative impact on your child care business? What has been the decline in revenues (be specific)? How does supporting your child care business help the entire La Crosse community better respond to Covid-19? How does helping your business improve the health and welfare of the community?

-answer not presented because of the answer to #2-

7. How will the homeless services that you provide help the La Crosse community respond to Covid-19? Why is there an urgent need for this project, in light of the Covid-19 pandemic?

Not applicable to child care applicants

Our community effort to provide shelter to the homeless in the face of the pandemic this spring, showed its limitations and only exacerbated some of the clients' physical and mental frailties. Our rapid re-housing efforts tie the basic human need for housing together with the circumstantial necessity of human services. These efforts jointly help the individuals and community. We believe getting people housing or keeping them in their houses is a much better use of resources. Rapidly housing the homeless and successfully giving them a safe place to stay, especially during the pandemic, not only protects an already vulnerable population but also the community as a whole.

PERFORMANCE METRICS

8. Please enter your expected performance numbers below.

Please mark "0" or "N/A" if this does not apply. Please note, only enter in numbers that you can reasonably expect to complete as these will be part of your performance objectives in your contract with the City. Not applicable to child care.

<input type="text" value="25"/>	Number of people living in shelter that will receive case management services
<input type="text" value="25"/>	Number of people living on the street that will receive case management services
<input type="text" value="30"/>	Of total number served, number of people that will successfully be housed
<input type="text" value="10"/>	Of total number served, number of people that will successfully be enrolled in Social Security Benefits, County Services, etc.
<input type="text" value="45"/>	Of total number served, estimated number of single, chronically homeless households served
<input type="text" value="5"/>	Of total number served, estimated number of households, with children served
<input type="text" value="140.00"/>	TOTAL

9. Please enter numbers for each category below.

-answer not presented because of the answer to #2-

STAFFING**10. Please answer the following questions related to staff that will be paid as a result of this grant.**

LMI Income Definition (Annual Income and Household Size) \$43,050 (household (HH) of 1) \$49,200 (HH of 2); \$55,350 (HH of 3); \$61,450 (HH of 4); \$66,400 (HH of 5); \$71,300 (HH of 6)

<input type="text" value="1"/>	Number of people that will be employed and directly providing services as a result of this grant
<input type="text" value="1"/>	Of total, number of employees that are from a Low-Moderate Income Households (see above)
<input type="text" value="0"/>	Of total, number of employees that are a Racial or Ethnic Minority
<input type="text" value="N/A"/>	N/A
<input type="text" value="2.00"/>	TOTAL

11. Please describe the qualifications and resume of the case manager that will be hired as a result of this grant. Has this person already been hired? If yes, what is their background and experience, salary? If not, what will be the minimum qualifications and the salary? How many hours will they dedicate to this position and what will their caseload be?

Not applicable to child care grant applications

This position will be full-time, 40hr/week, benefit eligible position with minimum salary without benefits of \$34,320. The case load described above will fluctuate depending on need. However, the service numbers estimated above are the approximate case load of this candidate.

Qualifications: Education-Bachelor's in Human Services, Business Management or related field desired. Minimum of an Associates Degree in Business/Mgmt or Social Work or equivalent experience. 3 Years experience preferred.

12. How will data on performance be collected and tracked in the Homeless Information Services System (HMIS)? Describe how staff will be trained to use the HMIS system. Describe how individuals will be selected and prioritized to received case management and rental assistance as a result of this program.

If not currently users of HMIS, please describe steps to license. This question is not applicable to child care grant applicants.

Catholic Charities is a "No Wrong Door" agency. All case managers become licensed in Service Point - the HMIS system used for the Coulee Continuum of Care. The chosen candidate will complete this training within their first 30 days of employment and become licensed. Program entry/exit, services, funding & client demographics will be tracked through Service Point. Clients chosen for the program will be selected from the City of La Crosse's Rapid Re-housing Prioritization List in Service Point.

13. What other sources of funding does your organization have available to support rental assistance for people served by this project? For what length of time? After the rental assistance "runs out", how will the individual continue to remain sustainably housed? How will you collaborate with other organizations on this project, be specific.

Not applicable to child care service applicants.

We believe COVID-19 is a natural disaster, and will use funding already secured for disasters to assist clients. Our organization also receives private donations in direct aid for our homeless and homeless prevention efforts – including from a special annual appeal to provide relief. Combining these two funding sources, along with other restrictive funds we receive (such as Emergency Food and Shelter Program funding and others), we have a lot of flexibility in getting funding to those in need.

14. The target population that this project will serve, is likely to have many barriers to housing. This might include criminal background, drug/alcohol addiction, mental health etc. What is your organization's success with helping people overcome these barriers? What steps will you take to ensure individuals funded through this program will be successful in their housing? How will you work with the landlord and tenant to resolve any issues?

Be specific and use examples. Not applicable to child care applicants.

Catholic Charities has ample experience dealing with clients who have significant barriers including in our immigration, disability, rep payee, shelter, warming center, rapid rehousing, and other of our outreach programming. Success is sometimes hard to see when looking at short periods of time. However, we prioritize case management in our organization. We hire people to help people. That is why this funding is critical to helping the community. Case management is the priority.

15. There is a low supply of quality and affordable rental housing in La Crosse. What steps will your project take to overcome these barriers?

Write N/A if this does not apply to your project.

Our current programming has allowed us to make connections with landlords and get to know the City's current rental situation. Although we can't make rental units appear, we can act as advocates for our clients and be a sort of reference and resource. This question really shines a light on why services need to be included with providing housing. Teaching a person what it takes to keep housing is critical and we understand that. However, we are absolutely willing to listen to any City advice.

16. Answer the following related to the cost per household served

No symbols please. Total costs should match your budget. Please disregard the total that will automatically appear at the bottom.

80,000	Total grant funds requested from City of La Crosse
45	Total Number of People Served (Children + Staff OR homeless households)
1,778	Cost per Beneficiary/Household Assisted (City funds/ total household assisted)
81,823.00	TOTAL

17. Are you receiving or do you plan to apply for any other types of funding to support this homeless program or your child care center or after-school program? What is the total dollar amount and what will you use the funds for? How will you avoid duplication of benefits for the City funds and other funds that you receive?

You will also be asked to provide this information under the Budget Tab. The Budget tab is required for organizations requesting more than \$5000. Examples of other sources of funds are: HUD ESG, Paycheck Protection Program, DCF/Wisconsin grants, LCF)

Our organization would use other funding, such as private donations, EHH and/or Emergency Food and Shelter Program funding, to pay for direct aid – not pay for staff. CDBG money will be used to pay for staffing. It is a great combination of resources.

18. What is the total dollar amount that you are requesting? What will you use grant funds for from the City of La Crosse? What will you use other funds from state/local/federal funding to pay for?

Please note: If you are requesting more than \$5000 in funding, you are required to complete a budget summary tab on this application. If you are requesting less than \$5000, you are not required to complete the budget summary tab.

We are requesting \$80,000 from this funding source of CDBG money. It will be used to pay for a specific staff position to accomplish the project's goals. Other staff, paid with agency money, will provide support.

Other funding, such as EHH & EFSP, will be used for direct aid such as rental assistance. Along with those grant sources, we will use disaster relief funds and other client aid funds already secured by Catholic Charities for direct client aid.

INSURANCE

19. In the spaces below, provide the expiration date and amount next to each insurance instrument. If government agency, type N/A below.

Note: boxes below are limited to 10 characters. The following date format is required: Month (First three letters). Year (four digits). Example Nov 2014. Please disregard the total that will automatically appear at the bottom.

1,000,000	General Liability (Date i.e. Oct 2017)
10/01/20	General Liability (Amount)
1,000,000.00	TOTAL

20. Does your Organization have any outstanding legal issues, does it have any unpaid taxes or owed debts to the City (such as water bills or property taxes) or unresolved audit findings? Has your business ever had a license revoked?

If so, please attach a document to this application that explains why and a copy of the audit or legal issues.

☐ Yes

☒ No

ACKNOWLEDGEMENT

21. I am authorized to represent my organization. I agree that if the project does not proceed according to the established timeline, the CDBG Committee will rescind the funding. All statements made in the pre-application and application are true.

Pursuant to 18 USC § 1001, 31 USC § 3729, et seq., 24 CFR Part 28, false or fraudulent statements or claims are subject to up to 5 years imprisonment and civil penalties up to \$10,000 plus up to 3 times the amount of damages sustained by the Govnt

☒ Yes, I agree to these terms. All statements are true.

☐ No, I do not agree to these terms.

22. I understand that as part of this grant, my Agency will allow City staff to accompany an HQS inspection or have City staff perform rental unit inspection to ensure it meets City of La Crosse minimum standards for being suitable environment for safe and healthy living. Landlord name/ property address shall also be released to City to ensure property is not on a chronic nuisance list or has outstanding orders to correct. This is for any beneficiary that receives rental assistance from agency, as part of this program.

Not applicable to child care grant applications

☒ Yes, I understand

☐ No, I do not agree to this provision and will provide additional information in the question below

☐ Not Applicable (N/A)

23. Is there any other explanation you will like to add to any of the questions above? Is there anything else you will like to share with the Staff about the importance of these grant funds for your business or organization?

Through our work of compassion, we strive to honor God's gift of life, and we can only do this work thanks to funders, partners, volunteers, and the many donors who support our mission. We are united in giving hope and support to the least among us.

Budget Summary [top](#)

Covid-19 Relief Grant Funds	Committed	Non-Committed
Staff Wages and Benefits	\$ 42,500.00	\$ 80,000.00
Administrative Costs (Administrative Staff/Overhead)	\$ 17,200.00	
Rent and Utilities		
Personal Protective Equipment / Covid-19 related expenses		
Classroom Supplies		
Motel Vouchers		
3-months of rental assistance	\$ 25,000.00	
Other Describe: Rapid Re-Housing	\$ 98,000.00	
Other Describe: EFSP	\$ 6,800.00	
Total	\$ 189,500.00	\$ 80,000.00

Budget Summary Narrative

Our committed salary support comes from the PPP federal fund. This will help us cover existing staff's work on this project, but it would not enable us to hire a person specifically for it. The other money is a mixture of donations and program funding such as EHH & EFSP.

Documents [top](#)

Documents Requested *

Copy of IRS 990 or Federal Tax Schedule C Form or personal tax return (if in-home child care business)

Articles of Incorporation or Business Operating Agreement (not applicable to in-home child care but required form for all other applicants. In-home child

Required? Attached Documents *

☒ [IRS 990](#)

☒ [Articles of Incorporation](#)

care applicants should upload a document that states Not Applicable)

List of Board of Directors (Required document for non-profit applicants. For private child care, need to upload a document that says not applicable.)

[Board of Directors](#)

Completed and Signed W-9 Form
[download template](#)



[W-9](#)

Letters of support (optional)

** ZoomGrants™ is not responsible for the content of uploaded documents.*

Application ID: 210759

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