



City of Hendersonville

Request for Special Appropriations FY21-22

Contact: Adam Murr, 828-233-2879, amurr@hvlnc.gov, City Hall Rm. 326

[Submit forms by February 26, 2021]

Organization's Name: Interfaith Assistance Ministry
Address: PO Box 2562
City, State, ZIP: Hendersonville, NC 28793
Website address: iam-hc.org

A. GENERAL INFORMATION

1. Program Name: Crisis Services (food, rent, clothing, personal hygiene, heat)
2. Contact Person/Title: Elizabeth Moss, Executive Director
Telephone Number: 828-697-7029

E-mail address: elizabethmoss@iam-hc.org

3. **Estimated** total number of individuals served in the last complete fiscal year by this program: 26,475
4. **Estimated** total number of the above individuals who are City residents: 6,000

Please attach any documentation that supports this number.

Estimated percent of people served who are City residents: _____

5. Amount of Request: \$18,000 6. Total Program Budget: \$1.18 million

Percent of total program budget you are requesting from Hendersonville: _____

7. Please state the mission of your agency: IAM Mission: To provide assistance to Henderson County residents in crisis with compassion and respect.

8. Will the funding be used to:
☒ Maintain an existing program ☐ Expand an Existing Program ☐ Start a new program

9. Has your organization received funds from the City in the past for this or a similar program? Yes

If yes, please answer the following:

- a. Does the amount of your request represent an increase over your previous appropriation? Yes

If yes, explain the reason(s) for the increase. In large part due to the pandemic, IAM had

26,475 service touches in 2020, a 91% increase from 2019. Instituted two new

new programs: Tuesday Drive-Through (food and clothing), and Covid Food Delivery Project.

- b. Were any conditions or restrictions placed on the funds by the City Council? Yes

If yes, describe how those conditions or restrictions have been met. \$10,000 for overdue water bills.

B. Program Overview.

1. Statement of Need: Identify the issue or need that the program will address (use statistical data to justify the need for the program). To what extent does this need, or problem exist in the City of Hendersonville?

IAM provides crisis services to Henderson County residents Monday-Thursday, 9:00 am-4:00 pm. IAM provided services to 26,475 people in 2020 (including repeat visits). In June 2020 IAM launched a weekly Tuesday Drive-Through Program from 3:00 to 5:30 pm, whereby residents receive food, clothing, personal hygiene products, pet food, towels and blankets. The Drive-Through Program provided service to 13,555 individuals in 2020. IAM also launched a new program in July 2020, the Coronavirus Food Delivery Project, whereby IAM partners with the Council on Aging to deliver food to Henderson County families who have one or more family members with Covid-19 and do not have a safe way to shop for food. More than 50 Henderson County families received food deliveries with that project in 2020.

2. Program Summary:

a. Identify the target/recipients of program services. Specify the number of City residents your program will serve during the fiscal year and explain the basis upon which this number is calculated. Indicate any eligibility requirements your program has with respect to age, gender, income or residence. IAM is located within the City of Hendersonville and has served city and county residents since 1984. IAM estimates serving more than 5,000 city residents, however the number is difficult to determine because zip codes cross city/county lines. IAM serves residents in verifiable financial crisis without regard to age, gender or ethnicity.

b. Identify what is to be accomplished or what change will occur. (e.g., begin your sentences with "The purpose of the program is to provide ..." and describe the services to be provided.)

The purpose of IAM's crisis services program is to provide assistance to local residents in financial crisis from becoming homeless or hungry by providing food for families who would otherwise go hungry, rent assistance, assistance with utility bills to keep lights and heat on, assistance with gas vouchers to enable residents to travel for job interviews, prescription vouchers for people in need of medicine, and referrals to other local non-profits or employment opportunities.

3. Program Funding:

a. Identify how City funds, specifically, will be used (i.e., funds will provide "X" units of service.)

Funding from the City of Hendersonville would provide support for much needed basic services to residents in need; assistance with food, clothing, prescription vouchers, utilities, rent, socks and shoes for adults and children. Families qualifying for food receive a week's worth of food, providing three meals a day for every person in the family. For a family of four that is 84 meals for the week. In addition to the two new programs launched in 2020 (Drive-Through Tuesdays and the Coronavirus Food Delivery Project, the regular and ongoing crisis services program provided food to 11,605 individuals, clothing to 1,933 individuals, rent assistance to 271 families, heat and power assistance to 42 families, utility assistance to 488 families and prescription vouchers to 27 individuals.

b. List the other agencies to whom you are submitting a request for funds for this program and the amount requested. How would this program be modified should revenues be lost?

IAM will submit requests to multiple potential grantors in 2021, including the Community Foundation of Henderson County, Henderson County government, local grocery store chains and local faith congregations.

IAM will continue to fundraise and do community outreach to make Henderson County residents aware of the needs and the services offered to our neighbors in need.

C. Organizational Capacity.

1. Describe your agency's capability to provide the program including its history, previous experience providing this service, management structure and staff expertise.

IAM was founded in 1984 and has been serving Henderson County residents for 37 ongoing years. IAM is the largest provider of emergency assistance in the county, providing assistance with food, clothing, rent, utilities, prescription vouchers, gas vouchers, bed and bath linens, school supplies and personal hygiene products. IAM has developed a strong program through the years and has been effective with managing funds, as evidence by the ongoing growth in services and number of people served. IAM tracks services, programs and use of funds.

2. Does your organization have a strategic plan and a strategic planning process in place? Yes

The strategic plan includes a mission statement, goals, action steps to achieve the goals, and measures that assess the accomplishments of the goals. The Strategic Plan must be provided to the City upon request.

3. What is the authorized size of your board of directors? 12 - 20

How many meetings were held by the board last year? 6

4. Does your organization have an audit performed? Yes, annually

The audit must be provided to the City upon request.

We, the undersigned, confirm the information contained herein is accurate and can be verified as such. We understand and agree if the request funds are approved the disbursement of funds are subject to all conditions established by the City Council.

Signature of Applicant

Date

Typed Name and Title