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Thurston County Public Health and Social Services  
Thurston County, Public Health and Social Services  
**2024 Consolidated Grant Application- Thurston County**  
Deadline: 4/5/2024

### Family Education and Support Services Peer Recovery Specialist

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**\$ 58,000.00** Requested

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### 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 #1.

**1. What type of project are you proposing?**

Select one. For more information on each project type, review the RFP Instructions under the Library tab.

- Affordable Housing Projects
- Homeless Services - Cold and Hazardous Weather Projects
- CDBG - Capital Projects (City of Tumwater projects only)
- CDBG - Public Service (City of Tumwater projects only)
- Veterans Emergency Shelter Bed Program (Vets RFP)
- Housing Basic Needs (NOT ACCEPTING APPLICATIONS)
- Basic Needs (NOT ACCEPTING APPLICATIONS)
- Lived Experience Steering Committee Facilitation (NOT ACCEPTING APPLICATIONS)
- Eviction Prevention Rental Assistance (NOT ACCEPTING APPLICATIONS)

**2. Please indicate which of the following is true with regard to the types of funding your organization is willing to receive. (Supports eligibility)**

Select all that apply, or to accept funds from all sources, select "all of the above". Projects that will accept Federal Funds are

required to attach both an Acknowledgement of Required Assurances and a Risk Assessment form (See Documents tab).

- Will accept Federal funds
- Will accept State funds
- Will accept Local funds
- All of the above

**3. What is the type of organization that is applying for funding? If your organization qualifies as a "By and For" Organization, check all boxes that apply. (Supports eligibility). By and For Organizations are those that are operated by and for the marginalized community to be served. By and For organizations have a primary mission and history of serving a specific marginalized community, and are culturally based, directed, and substantially controlled/managed by individuals from the specific marginalized population they serve. At the core of their programs, these agencies embody the central cultural values of the community to be served. Marginalized communities may include ethnic and racial minorities; immigrants and refugees; individuals who are lesbian, gay, bisexual, two-spirit, intersex and transgender; individuals with disabilities or who are deaf; and Native Americans.**

- Private/Non-Profit
- Community Housing Development Organization (CHDO) (Must meet HUD definition)
- Governmental Entity
- Corporation
- Limited Liability Corporation (LLC)
- Sole Proprietorship
- By and For Organization (See definition embedded in question above)
- Other (Submit supporting documentation)

**4. What population(s) is to be targeted for the service provided? Check all that apply. (Supports Criteria 1)**

Select all that apply.

- Adults (25 years of age and above)
- Young Adults (19-24 years of age)
- Children (0-18 years of age)
- Senior Citizens (as defined by your program)
- Families with Children
- Veterans
- Other or None (Explain in response to Question 8)

**5. Is this the first year this program will be in operation? If "No", what year did this program start? If "Yes", how long will it take after a contract is issued for the program to start? (Supports Criteria 11)**

*-answer not presented because of the answer to #1-*

**6. Indicate the type(s) of basic needs that your program will support. Select all that apply. (Supports eligibility)**

*-answer not presented because of the answer to #1-*

**7. Indicate the type(s) of Housing needs that your program will support. Select all that apply. (Supports eligibility)**

*-answer not presented because of the answer to #1-*

**8. Why is this program/project needed in our community? (Supports Criteria 1)**

*By and For Organizations should clearly and specifically identify the marginalized community they serve.*

Family Education and Support Services is seeking to sustain our Peer Recovery Specialist position located in Tumwater at our Family Resource Center. This program offers Peer recovery support for low to moderate income parents impacted by substance abuse/mental health challenges .

Thurston Co. has shown a rise in both parental substance and child abuse. The Center for Disease Control indicated as of June 2020, 13% of Americans reported increased substance use as a way of coping with stress or emotions related to Covid-19, and other stressors. While child abuse rose in 2021 in Washington State the numbers decreased by 3% in 2023 with 35.35 victims per 1,000 children. while at the same time Thurston County showed an increase with a child abuse rate of 40.53 victims per 1,000 children (Thurston County Health Dept. Proclamation 2024).

Thurston County is also showing risk factors higher than both our State, and national averages. These include: Adult smoking (Thurston at 15% - WA 12% ), Excessive Drinking (Thurston at 20% WA -18% and USA-19%) , Alcohol-Impaired Driving Deaths (Thurston at 34% WA- 33% and USA- 27%) \*countyhealthrankings.org/Thurston year=2023. Also, the Department of Health reports Thurston County Opioid and Drug Overdose Deaths per 1,000 per population to be at 43.25 while WA is at 33.44 (doh.wa.gov overdose-dashboard), and sadly Fetal and Infant death rates in Thurston County to be at the higher level of 7.7 while WA is at 5.5 (doh.wa.gov/data fetal-infant-deaths-county).

Risk factors impacting healthy child development are at critical levels. Providing a Peer Recovery Specialist enhances our

county's ability to improve protective factors and reduces our risk factors by providing the adults influencing children access to family strengthening resources and supports. Peers leverage the power of lived experience, culturally competent practices, and awareness of our community landscape to promote positive outcomes for adults, and their children.

**9. Describe the activities and actions your project will undertake and accomplish with this funding. This language may be included as a scope of work in a grant contract and may be adjusted if a grant award is less than the requested amount. (Supports Criteria 1, 2, 3, 4, and 5a)**

We are applying for CDBG-Tumwater Public Service funds to sustain our Tumwater based Peer Recovery Specialist program. We will serve over 50 low-moderate income adults (parents/caregivers) impacted by substance abuse and/or mental health concerns. Our goal is to promote healthy child development by providing support, training and concrete goods to the adults who influence child well-being through peer case workers. Our Peer Recovery Specialists or PRS case workers will bring the wisdom of lived experience, the resources of evidence-based programming, concrete goods, and the knowledge of our ever-changing community services landscape to parents/caregivers impacted by substance abuse and/or mental health concerns. PRS case workers will complete an initial screening with participants to evaluate emergent needs and then collaborate to develop and implement a plan that will be re-visited at 3 and six month intervals. PRS case workers will strive to improve access to basic services intended to improve health and well-being across several domains (physical, financial, emotional, familial).

Examples of plans may include assisting participants in accessing: medical coverage, substance abuse treatment, transportation, TANF, food, housing, domestic violence support, or other community resources and more. The PRS case worker is able to enroll participants in parenting classes, help them to build positive social connections by attending weekly support groups, engage with a home visitation program, or explore strategies to work on building fiscal self-sufficiency. The PRS is also able to provide support in accessing immediate concrete goods such as food, clothing, or hygiene items. While there is no one-size-fits-all solution for helping family members facing the complexities of addiction or addressing a mental illness, research has indicated that strategies like our Peer program can play a major role in helping to reduce, and sometimes even prevent, trauma by providing support, training, concrete goods, and strategies for healing. After the initial intake participants meet regularly with the PRS case worker to meet the goals of the plan.

We expect outcomes will show participants will report increased protective factors such as successfully accessing resources and improved over all well-being. We also anticipate overall outcomes will indicate 50 participants engaging with our Peer Recovery Specialist Case workers will report decreased risk factors (parental stress, feelings of isolation) and increased protective factors (increased parenting skills, increased social supports to call on in times of need, increased access to community resources).

**10. If applying for facilitation of the Lived Experience Steering Committee (LESC), please describe your agency's experience centering people with lived experience of homelessness (PLEH) within program development, hiring and support of peer staff, and/or advocacy efforts towards including PLEH voice in the HCRS. (Supports Criteria 1a)**

*-answer not presented because of the answer to #1-*

**11. Indicate the Strategy and Task in the 5 Year Homeless Housing Plan that your project seeks to address. Format Response as Strategy Number, Task. ie "Housing A-3: Task All new Homeless housing units should be focused on Housing First/Low Barrier)" If your project touches on multiple strategies/tasks, list the one that best aligns with your project. (Supports Criteria 1)**

*-answer not presented because of the answer to #1-*

**12. PHSS prioritizes funding for programs adhering to evidence-based and promising practices. For housing and homeless services applicants, how will this program follow a low-barrier/housing first approach? Attach evidence that demonstrates low barrier/housing first approach. (Supports Criteria 2 and 5a)**

*-answer not presented because of the answer to #1-*

**13. List the specific objectives and planned results/outcomes of the proposed project. Describe how they align with the RFP Priorities. Please explain how you will show success or measure your results/ outcomes. If your program has been operational during the past 12 months, please highlight recent key impacts and outcomes. (Supports Criteria 2)**

Our Peer program has three primary components which include Peer led training, support groups and case management. When we learned that our prior funder, Treatment Sales Tax, would not be funding our agency for the 2024/2025 year we quickly began searching for alternative funds to sustain our service delivery. We were able to secure funding to cover the training and support portions of our Peer service delivery and now we need the support of CDBG Tumwater to help us sustain the final component-Peer Case management.

Enhancing our Peer program to include case management has been a critical step towards supporting families in securing safe and stable environments. Reports from those receiving this service have reflected increased protective factors and decreased risk factors. With CDBG funding we will continue our service to 50 low-moderate income parenting adults impacted by substance abuse/mental health concerns and expect outcomes indicating increased health and well-being. Specific outcomes include: 94% will show improved markers of reduced parental stress, 94% will show they are better off by having improved parenting skills, 80% will share reduced feelings of isolation, and 94% will share increased access to or

awareness of concrete supports.

We will measure outcomes through an initial intake evaluation which will set a baseline for future measurement at the 3 and six month timeline. Our services are offered in Tumwater at 6840 Capitol Blvd. Building #3, Tumwater, WA. We are located next door to the TANF/Welfare office and in the same building as Child Welfare. We are a one-stop-shop for many families. Though our case managers travel across Thurston County- Tumwater is our home. We align with RFP priorities because we are a Family Resource Center providing evidence based public services in Tumwater, and prioritizing services to low-to moderate income level families.

**14. Describe the actions your agency has taken in recent years and intends to take in 2024 and 2025 to decrease disparity amongst identities overrepresented in the Homeless Crisis Response System (such as, Black, Indigenous, People of Color, LGBTQIA2S+, and people living with disabilities), advance or support racial equity and center people with lived experience of homelessness or those unstably housed or eligible under the Housing Choice Voucher program within your organization. Are there people in your leadership team that identify as BIPOC? If yes, please complete the table on the Documents tab. (Supports Criteria 1, 5a and 5b)**

As the Director of Family Education and Support Services, addressing disparities within the homeless crisis response system and advancing racial equity are central to our mission. Over the past few years, we have implemented several initiatives aimed at reducing these disparities and centering the voices of those with lived experience of homelessness. In recent years, we have established partnerships with local organizations serving BIPOC, LGBTQIA2S+, and disabled communities to better understand their unique needs and barriers to accessing housing services. We have implemented culturally competent training programs for our staff to ensure they are equipped to provide support that is sensitive to the diverse identities of those we serve. We have expanded outreach efforts to engage directly with communities disproportionately affected by homelessness, providing resources and support tailored to their specific needs. Looking ahead to 2024 and 2025, we are committed to building on these efforts by:

- \* Increasing the representation of BIPOC, LGBTQIA2S+, and disabled individuals within our leadership team and staff through targeted recruitment and retention strategies.

- \* Elevating the voices of those with lived experience of homelessness by creating opportunities for them to participate in decision-making processes within our organization.

- \* Implementing initiatives to address the root causes of homelessness, such as economic inequality and discrimination, through community partnerships and advocacy efforts.

- \* Continuing to evaluate and adapt our programs and services to ensure they are inclusive and accessible to all members of our community.

Yes, there are individuals who identify as BIPOC within our leadership team. We recognize the importance of diversity and representation at all levels of our organization and are committed to fostering an inclusive environment where everyone feels valued and supported.

**15. Where will the services be provided and how will the services: 1) reach target population: 2) be accessible to persons with disabilities or special needs; 3) reduce racial disproportionality and 4) support historically vulnerable and disadvantaged populations? (Supports Criteria 5a)**

Services will be provided from our Tumwater location at 6840 Capitol Blvd. This is a Family Resource Center and as such a one-stop-shop for families seeking support, training and resources. Our Peer's however work across Thurston County and will continue to work closely with our neighbors at Child Welfare and the TANF/Welfare office as well as family court, schools, treatment facilities, Public Defenders, the ARC, and many other community partners serving low /no income parents impacted by mental health or substance abuse issues. We are an ADA facility and prioritize our service to underserved populations. Every program and service offered through our agency was born out of community need. We recognize that BIPOC populations are disproportionately represented in the populations we serve, and we are intentional about culturally respectful and trauma informed service delivery. This is one of the reasons we have embraced Peers into our workforce. Our mission is to ensure healthy child development and we recognize adults have the greatest influence on children. Families come in all shapes, sizes, economic and racial backgrounds and our agency has been intentional about ensuring our service delivery mirrors our values to provide unconditional positive regard to those we serve. At FESS we build relationships, foster hope and promote resilience for vulnerable and disadvantaged populations.

**16. If requesting set-aside funds for supporting activities (training, technical assistance, compensation for people with lived expertise in consultation roles through stipends) to decrease disparity and advance racial equity within your agency, please describe the specific activities these funds would support. (Supports Criteria 1, 5a, and 5b)**

*-answer not presented because of the answer to #1-*

**17. What organizations do you have a formal partnership agreement with? Attach memorandums or agreements with collaborating organizations with which you have formal relationships. If there are other organizations you collaborate with on a less formal basis, describe this collaboration. (Supports Criteria 4)**

Family Education and Support Services (FESS) works with Children's Home Society (now known as AKIN) for the implementation of one of three components of our Peer Service delivery. This agency funds our ability to provide monthly training at family court called Dependency 101 and weekly support peer led services. We offer an evidence based parenting program called Parenting in Recovery that has a sliding fee scale and is supplemented by the HORIZONS foundation and

allows us to provide scholarships. In addition DCYF Child Welfare also contracts with FESS to engage parents in this training. For the past year we had funding from Treatment Sales Tax to cover the Case Management enhancement we had added to the Peer program. When we learned we were not funded for the 2024/25 year we recognized the need to apply for CDBG Tumwater Public Service assistance in order to sustain this unique and valuable service for our community. These funds braid together to ensure PEERS are able to meet parents where they are and provide comprehensive supports inclusive of case management. When parents enter into a "system" be it Court, Child Welfare or even applying for TANF or Housing it can be a humiliating, scary and overwhelming experience. Peers bring their lived experience to the table and let parents know they are not alone, that they too have walked in this path and had found success.

Our Peers work with our Justice system and serve on the Family Recovery Court, Drug court, Dependency, and Safe Baby Court teams. They work closely with Child Welfare Social workers, guardian ad litem, the System of Care hub of mental health professionals to ensure parents have access to available resources and supports. We also work closely with Medicaid providers such as Molina, Coordinated Care and Amerigroup as well as Catholic Community Services- all in the best interest of supporting adults in their ability to influence healthy child development.

**18. Who will provide the services, supervise the program staff and be responsible for reporting requirements? List the names, titles, responsibilities and length of time with the agency for each identified staff member. If new staff will be hired, briefly describe the qualifications or credentials necessary for the position. (Supports Criteria 2 and 8)**

Executive Director and agency Founder Shelly Willis is responsible for overall contract compliance and has been with the agency for 25 years. Deputy Director and Chief Finance Officer Karin Oceguela provides fiscal oversight and has been with FESS for five years. Clinical Director Scott Hanauer has worked for FESS for six years. These three individuals comprise the Senior Leadership team and will support Natalya Kinder Director of our Peer service delivery in the successful implementation of this work. Natalya supervises a team of Peers who have been with our agency from 2 months to 7 years. She will also be supported by Jacob Tillet our Data management lead who has worked for us for six years, Nate Gomez our Marketing Lead in his second year, and Jody Smetak our Education Director in her 3rd year. Natalya will collect and assimilate data (with support) and be responsible for the reporting requirements.

FESS works with a wide array of non profit, government, faith, tribal, school, and community partners to support the 20,000 individuals we served last year. We believe in collaboration over duplication of effort, and we are intentional to be good stewards of our funds and resources. While there are other Peer programs in our community there are no services that directly serves this population, with Peers, and the evidence-based strategies we are able to provide. The Peers in this program must have lived experience with parenting, a dependency (child welfare engagement) and navigated substance abuse and/or mental health supportive services. The Peers must be able to serve vulnerable populations (background check confirmed) and be able to certify as a Peer Recovery Coach, motivational interviewing, trauma informed training, and culturally respectful service delivery. In addition, peers must participate in weekly clinical staffing, weekly supervision, and on-going training.

**19. How many unduplicated individuals will be served by the program or project? Total project cost per person served. Please show your calculation: Total project budget/number of individuals served = total cost per person. (Supports Criteria 3)**

50 individuals will be served averaging \$1,160 per person (\$58K/ 50 people served). While the Peers will be full time worker only 1/3 of the budget

**20. Briefly describe and also attach your organization's policies and procedures for programmatic operations to ensure compliance with federal, state and local guidelines. (Supports Criteria 2 and 6)**

With oversight from the Board, FESS has a stellar Fiscal management system. Our Executive Director supervises the Chief Financial Officer who is responsible for the preparation of financial statements in accordance with generally accepted accounting principles. We also host a Senior Leadership Team (Executive Director, Chief Finance Officer, and Clinical Director) who review and steer agency operations. We employ Quick Books/non profit and operate on accrual basis. Internal Controls established by the Board are followed by the CFO with checks in place by the Exec. Director to assure all payments are timely and in accordance with all purchase orders and contracts. Both accounts payable and receivable have established protocols to ensure that duplicate payments are not made, documentation is attached, and signed by the Executive Director prior to distribution. Monthly financial statements are reviewed by the board, while additional transaction details are also reviewed by our Board Treasurer and Exec. Director. The agency manages four Bank accounts including two restricted accounts, a reserve account, and primary account. A line of credit is in place, but has no owed balance. Payroll is completed by Genie Payroll and reviewed monthly by the CFO. Controls include a second signature for checks exceeding \$5,000. Segregation of duties are strictly adhered to with specific FESS employee handling all incoming cash, checks and purchase orders, and our CFO handling all accounts .

**21. Describe your organization's policies and procedures for financial operations to assure the proper use and safeguarding of public funds. (Describe the organization's fiscal management, including internal controls and risk management, regarding: financial reporting, record keeping, accounting systems, payment approval procedures, and audit requirements and procedures.)(Supports Criteria 6)**

We have a strong Board of Directors who supervise our Executive Director. A three person Senior Leadership team oversees mission and our 34 employees, three offices (Thurston, Lewis and Mason), and last year served to over 20,000 individuals. Our Board of a Directors oversees and approves our budget and policy directives. On our Board is an Executive team, with a treasurer who works closely with our Executive Director and Senior leadership team to ensure internal controls. Deputy

Director and CFO Karin Ocegüera oversees our fiscal well-being. We employ Quick Books/nonprofit and operate on accrual basis. Internal Controls established by the Board are followed by the CFO to assure all payments are timely and in accordance with all purchase orders and contracts. Both accounts payable and receivable have established protocols to ensure that duplicate payments are not made, documentation is attached. Monthly financial statements are reviewed by the board, while additional transaction details are also reviewed by our Board Treasurer and Exec. Director. The agency manages four Bank accounts including two restricted accounts, a reserve account, and primary account. A line of credit is in place but has no owed balance. Payroll is completed by GUSTO, and reviewed bi-monthly by the CFO. Controls include a second signature for checks exceeding \$5,000. Segregation of duties are strictly adhered to with specific FESS employee handling all incoming cash, checks and purchase orders, and our CFO handling all accounts payable. Distributions are made by check or card and are reviewed and signed by the Executive Director prior to delivery. All blank warrants/checks are kept in a locked storage container under the control of the ED. All deposits and AP are reviewed by the Exec. Director, and Board Treasurer monthly. Contract compliance ensures we have encryption software, several layers of locked records, and we keep all documents for a minimum of 7 years. We are audited annually by an independent accounting firm and have nearly reached 25 years of successful audits. Additional audits are conducted by state agencies such as DCYF, AL TSA Our Service delivery is overseen by our Clinical Director who works with our 7 agency Directors to ensure fidelity to the programs and to agency policies. We have systems in place to interview staff, review program fidelity, and sustain quality service delivery.

**22. Did your most recent financial audit in the past 24 months result in any findings? If yes, have all findings and concerns been successfully resolved? (Attach the written report(s) identifying the weaknesses/findings and describe how the organization has responded to the report.) (Supports Criteria 6 and 10)**

- Audit conducted with NO audit findings
- Yes, audit findings. All findings have been resolved.
- Yes, audit findings. Findings have NOT all been resolved
- No audit conducted in past 24 months.

**23. Did your most recent programmatic monitoring (either County, State, or Federal) in the past 24 months result in any findings? If yes, have all findings been successfully resolved? (Attach the written report(s) identifying the weaknesses/findings and describe how the organization has responded to the report.) (Supports Criteria 10)**

- Monitoring conducted with NO program monitoring findings
- Yes program monitoring findings. All findings have been resolved
- Yes program monitoring findings. Findings have NOT all been resolved
- NA - program has not received program monitoring in past 24 months.
- NA - program is less than 12 months old and no monitoring has been conducted.

**24. What is the sustainability funding plan for this program? Is the program solely dependent on this award? If you have identified financial resources other than those in this current request, please identify whether the other funding is committed. What are the plans to ensure that the project is able to be fully and successfully completed? If other funds are committed, please attach a letter of commitment from the identified funding source(s). For Capital and CDBG projects, all required funds must be committed before a written agreement with Thurston County will be executed. (Supports Criteria 3 and 6)**

The Peer Case Management component of Peer outreach is dependent on this funding. We have a sustainability plan for next year that includes requests at the state (Health Care Authority) and Federal (Health and Human Services) levels. We also plan to submit a funding requests to Samhsa in hopes of fully supporting our Peer service delivery for the 25/26 fiscal year. Our agency is well supported in this community and if we are unfunded, we will continue to reach out and explore other opportunities. We will not give up as we see this approach as effective and the outcomes show impact. We recognize Peer led case management as a highly effective approach to engaging what can sometimes be a reluctant and highly stigmatized service area. We will continue to advocate to sustain this service for this underserved population.

**25. What type of Affordable Housing Project is being proposed? Select all the boxes that apply. (Support eligibility)**

*-answer not presented because of the answer to #1-*

**26. Describe your plan for completing this project on time and on budget. A Project Timeline, a Financing Sources Statement, and a Project Team Summary are required for Affordable Housing Projects. These forms can be found under the Documents tab and should be uploaded to the same tab after completion. (Supports Criteria 2, 8 and 9)**

*For CDBG-Capital projects a Project Timeline is required, but the provided form is not required. The information provided should include a bid release/closing date, selection of a general contractor, start/end construction date, and other key dates.* Director/CFO will review budget and internal protocols, and Clinical Director would review supervisions, trainings and program implementation.

July 2024: Service delivery is initiated and engagement strategies are implemented. Staff training calendar is confirmed and supervisions scheduled. Peer team initiates community engagement plan. Technology is loaded onto tablets for remote data collection and tested. Calendars are set for clinical supervisions and trainings are defined and scheduled along with quarterly report dates. Future sustainable funding streams are explored and applied for this month- and everyone that follows.

August 2024: Program Director follows up and checks in with key community partners, and key stakeholders. Supervisor meets with the Peer team to review status and successful implementation Trends and themes are considered, brainstormed and discussed. Intake form is reviewed and confirmed to be working well to capture data. First training should be completed. September 2024: Quarterly report for Senior Team who checks in with Director on all three areas Adjustments made if needed. Check in on first 3 month check in. Celebrate successes.

January 2025: 2nd quarter check in with Senior Team. Also included is the first 6 month check in first co-hort. Report to interest parties. Sustainability seeking continues.

April 2025: 3rd Quarter check in with Senior Team. Follow up on check ins. Data review. Suggestions for future approaches. Report to interested parties. Should be at a minimum of 40 served.

June 2025: Collect and assemble the final report and submit to interested parties. Take next steps in sustainability. Final appreciation to those who contributed.

**27. List the name and organization of the person(s) (up to a max of 3 people) who will serve as the project manager or serve in a lead role on the project. Briefly describe their role on the project, experience serving in their assigned role on similar projects and attach their resume reflecting their relevant experience under the Documents tab. (Supports Criteria 8)**

Natalya Kinder is our Director of Peer Services and will serve as the Project Manager and will supervise the Peer team, engage with key stakeholders, and oversee engagement and data collection.

Shelly Willis is the Executive Director, and she will support Natalya in reviewing contractual obligations, aligning resources to support her team and review strategies to ensure successful contract completion.

Karin Ocegueda will work with Natalya to understand her budget, expenditures and allocations and will develop and monitor invoices providing oversight on internal controls.

Scott Hanauer, Clinical Director will support Natalya in providing clinical support, assist in the provision of training for staff and problem solve service to our constituents.

Jacob Tillet is our Data Collection Director and will ensure Natalya and her team have tools to collect survey information and other documentation (such as demographics and proof of income)

**28. Please describe how the project will meet and document income eligibility requirements. Please include your method for ensuring that eligible Thurston County residents will benefit from this project.**

Initial intake survey will collect demographics from each individual served whether they are engaging in services. The demographic form will be delivered in multiple ways in order to ensure collection- English/Spanish, electronic, oral interview, and printed survey format and on a tablet. Verification will be requested to confirm income eligibility including TANF and/or Medicaid documentation, pay stubs and other forms of revenue confirmation. Because over 70% of those we serve will also be engaged in a Dependency with DCYF Children's services we are confident in our ability to capture information.

**29. If this is an Affordable Housing or CDBG-Capital project, is the project dependent on future funding to be fully operational for public benefit? Within the required project timeline requested in question #26 and uploaded to the Documents tab, Affordable Housing and CDBG-Capital projects should include specific dates and funding commitments for all phases needed to complete the project and have it fully operational for public benefit.**

*-answer not presented because of the answer to #1-*

**30. A) Does the applicant organization own the property? B) If not, does it plan to acquire building(s) or land as part of this project? C) Has a legally binding contract to purchase the property been signed prior to your intent to apply for funds? If yes to any of these questions, answer Question 31. If no to all, answer NA for Question 31 and proceed to Question 32. Format response as: A) yes/no; B) yes/no/NA; C) yes/no/NA**

*-answer not presented because of the answer to #1-*

**31. Will any owners / tenants or businesses currently occupying the site be displaced due to this project? If yes, upload a Residential Antidisplacement and Relocation Assistance Plan (RARAP) stating how the project will meet Uniform Relocation Act (URA)/104(d) requirements under the Documents tab. If required, a RARAP must include information regarding how displacement will minimize the number of residents required to move, the type of relocation, notification procedures, and relocation benefits to be provided.**

*-answer not presented because of the answer to #1-*

**32. Is your Project currently underway?**

Yes

No

**33. Has a National Environmental Policy Act (NEPA) environmental review record been completed? Federal funding regulations require that an environmental review record be completed prior to any choice limiting actions taking place. See the Environmental Review criteria in the RFP instructions. If a NEPA environmental review record has been completed please list the agency which completed the record and the date it was completed**  
no not applicable to our service delivery

**34. The Risk Assessment Form, located under the Documents tab, has been completed and attached to this application. (Supports eligibility)**

*Note: All applicants must complete a risk assessment form.*

Yes

**35. Select all options below that describe your proposed program and how it will benefit the residents of the City of Tumwater.**

- Organization is located in Tumwater and will only serve Tumwater residents
- Organization is located in Tumwater and will serve all county residents
- Organization is not located in Tumwater and will serve all county residents
- 75% or more of beneficiaries will be Tumwater residents
- 50-74% of beneficiaries will be Tumwater residents
- 25-49% of beneficiaries will be Tumwater residents
- 1-24% of beneficiaries will be Tumwater residents

**36. What type of activity will the project perform? The City of Tumwater has identified affordable housing and public service activities as their top priorities for funding. (Check all that apply)**

- Energy Efficiency Improvements
- Land Acquisition
- Affordable Housing Acquisition
- Affordable Housing Rehabilitation/Preservation
- Home Buyer Assistance
- Publicly-Owned Infrastructure/Off-Site Improvements Supporting Affordable Housing
- Public service

**37. Select the CDBG eligible activity category the project falls under.**

- Affordable housing
- Public services

**38. What is the service area or operation area (e.g. census tract, neighborhood)? (Supports eligibility)**

We serve all parents and caregivers in Thurston County as an agency and in the Peer program we are seeking funding for we narrow service down to the parents and caregivers impacted by substance abuse and/or mental health challenges.

**39. How will the project satisfy the CDBG National Objective to benefit low-and-moderate income persons? For Questions 40, 41 and 42, answer the question that applies to your project and indicate NA for the National Objective benefits which do NOT apply to your proposed project.**

- Area Benefit
- Limited Clientele Benefit
- Housing Benefit

**40. For Area Benefit, list the boundaries of the service area, state the percentage of LMI persons that reside in the service area and provide the source of this data.**

We will engage families residing in Thurston County with a proof of address.

**41. For Limited Clientele benefit, indicate whether the project will serve at least 51% low and moderate income (LMI) individuals and whether it will document participant's income, have income eligibility requirements, or serve a presumed LMI category.**

We expect over 70% of our participants will be low and moderate incomes and will confirm through TANF verification and/or medical coverage.

**42. For Housing benefit, indicate if the project is a one, two or more than two unit structure and the percentage of units that will benefit low and moderate income individuals or if you will provide assistance to reduce development costs of new construction.**

not applicable

**43. How many bed nights will you provide?**

*-answer not presented because of the answer to #1-*

**44. What is the cost per bed night? Please show your calculation: Project budget/number of bed nights = total cost per bed night**

*-answer not presented because of the answer to #1-*

45. Have you operated an emergency shelter program before and will you be ready to proceed on January 1, 2025?

-answer not presented because of the answer to #1-

46. If you are unable to implement your proposed project without a minimum funding award, list the MINIMUM funding award that you will accept for the proposed project? (This information will be considered only if a potential award is less than the minimum amount listed. The funding body may determine to not make awards for less than the minimum.)

-answer not presented because of the answer to #1-

**Budget** [top](#)

<b>SERVICES AND NON-CAPITAL PROGRAM TYPES BUDGET</b>	Grant Request	Applicant's Own Resources	Committed Outside Funding	Uncommitted Outside Funding	TOTAL
Administrative Costs	\$ 5,800.00	\$ 14,000.00	\$ 8,812.00		\$ 28,612.00
Personnel Costs	\$ 36,000.00	\$ 14,745.00	\$ 44,280.00		\$ 95,025.00
Facility Costs: Rent/Mortgage	\$ 12,000.00	\$ 152,975.00			\$ 164,975.00
Operating Costs:					
Insurance/Training/Transportation/Utilities/etc	\$ 2,200.00	\$ 8,050.00	\$ 5,500.00		\$ 15,750.00
Supplies: Phone, printing, copying, and equipment	\$ 2,000.00	\$ 0.00			\$ 2,000.00
Rapid Rehousing					\$ 0.00
Rental Assistance					\$ 0.00
Diversion Assistance					\$ 0.00
Diversity, Equity & Inclusion Organizational Activities (max of \$5k)	\$ 0.00				\$ 0.00
Other:	\$ 0.00				\$ 0.00
<b>Total</b>	<b>\$ 58,000.00</b>	<b>\$ 189,770.00</b>	<b>\$ 58,592.00</b>	<b>\$ 0.00</b>	<b>\$ 306,362.00</b>

<b>AFFORDABLE HOUSING/CDBG CAPITAL PROJECT BUDGET</b>	Year 1 Grant Request	Applicant's Resources	Other Federal	State/Local	Private/Other	TOTAL
Design & Inspection						\$ 0.00
Project Manager/Consultants						\$ 0.00
Relocation Costs (if applicable)						\$ 0.00
Title Insurance						\$ 0.00
Environmental Review						\$ 0.00
Permits & Fees						\$ 0.00
Land/Property Acquisition						\$ 0.00
Site Development & Landscape						\$ 0.00
Construction/Rehabilitation						\$ 0.00
Utilities						\$ 0.00
Other:						\$ 0.00
Other:						\$ 0.00
Other:						\$ 0.00
Other:						\$ 0.00
Other:						\$ 0.00
<b>Total</b>	<b>\$ 0.00</b>	<b>\$ 0.00</b>	<b>\$ 0.00</b>	<b>\$ 0.00</b>	<b>\$ 0.00</b>	<b>\$ 0.00</b>

**Documents** [top](#)

**Documents Requested \***

Verification and Signature

[download template](#)

**Required? Attached Documents \***



[fess verification](#)

For Non-Profits: Your IRS Letter of Determination of Tax Exempt Status AND your most recent IRS Form 990 return (or link to electronic version) -For For-Profits: Articles of Incorporation



[501 c 3 updated](#)  
[board policies conduct](#)

For Non-Profits: Board Documentation (List of Board Members, Charter, By-Laws) (Required for By and For Organizations)

[Board list](#)  
[FESS Board Signed Bylaws](#)  
[Signed Bylaws](#)

Agency's most recent Fiscal Year Audit Report and/or Certified Financial Statement (If not available, attach best available financial statement)



[Audit](#)

Financial Commitment Letters

Letters of Support or Collaboration Memorandum

[Nick a dads letter of support](#)  
[updated p4p contract](#)

General Liability Insurance Certificate

[Insurance](#)

Risk Assessment  
[download template](#)



[Risk](#)

Demographic Composition of Organization (as part of response to Question #14)  
[download template](#)

[Demographics](#)

Project Timeline (Required for Affordable Housing and CDBG applicants)  
[download template](#)

Resumes (Required for Affordable Housing and CDBG applicants)

[Scott Resume](#)  
[Karin REsume](#)

Project Team Summary (Required for Affordable Housing and CDBG Capital applicants)  
[download template](#)

Pro Forma. (Required for Affordable Housing and CDBG rental project applicants)  
[download template](#)

Financing Sources (Required for Affordable Housing applicants)  
[download template](#)

Rents and AMI (Required for Affordable Housing rental housing applicants)  
[download template](#)

Development Budget (Required for Affordable Housing applicants)  
[download template](#)

Purchase or Option Agreement

Acknowledgement of Required Assurances (Required for all projects that will accept Federal funds)  
[download template](#)

[Acknowledgement of](#)

Environmental Review Documenation

Project Map/Service Area

Residential Antidisplacement and Relocation Assistance Plan (RARAP)(Required if answer "yes" to Application Question #31)

Program Policies and Procedures (As part of response to Question #20)

Low Barrier/Housing first policies and documents (As part of response to Question #12)

Other

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

Application ID: 468745

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