

APPLICATIONS FOR FUNDING MUST BE FILED WITH THE COUNTY ADMINISTRATIVE OFFICE BY 5:00 P.M. ON February 25, 2019. POSTMARKS ARE NOT ACCEPTABLE FOR MEETING THIS DEADLINE. LATE APPLICATIONS WILL NOT BE CONSIDERED.

Glenn Ziemer

Committee Vice Chair



CITIZENS' ADVISORY COMMITTEE ON MEASURE Z EXPENDITURES

(Advisory Committee will make recommendations to the Humboldt County Board of Supervisors as to expenditure of funds derived from *Measure Z*.)

APPLICATION FOR FUNDING

RECEIVED
FEB 25 2019
CAO

Agency Name: North Coast Substance Abuse Council, Inc.

Mailing Address: P.O. Box 1332 Eureka, CA. 95502

Contact Person: Wesley Harrison

Title: Executive Director

Telephone: 707-601-6932 E-mail address: wharrison562@mycr.redwoods.edu

1. AMOUNT OF MEASURE Z FUNDING REQUESTED FOR FY 2019-20: \$ 77,500

2. ENTITY TYPE -- Please check appropriate box.

a. Humboldt County Department ☐

b. Contract Service Provider to Humboldt County ☐

c. Local Government Entity ☐

d. Private Service Provider ☐

e. Non-Profit Service Provider ☒

f. Other ☐

3. Please provide brief description of proposal for which you are seeking funding. We are seeking funds to provide treatment to members of our community who are experiencing substance use dependency. We operate 22 treatment beds in Eureka and have done so for 44 years. We serve the highest risk population, often serving individuals that the other two programs won't treat. We strive to keep treatment costs affordable remaining the lowest priced treatment in Humboldt County in an effort to serve more people. We would like to have a Measure Z fund contract to fund those who continue to fall through the cracks. We are requesting \$77,500 to fund 1,250 bed-nights at a rate of \$62 per bed-night.

4. How are you developing a plan for sustainability, including diversification of funding sources, in order for your proposal to carry on without reliance on future Measure Z funds? We are in the process of becoming Drug Medi-Cal certified to fund clients through this funding source which is easily the most common insurance of the population we serve.
5. If this request is for the continuation, or expansion, of an existing program/service, what is the current source of funding for that program/service? Our current funding sources are AB109 (probation) Child Welfare Services and County MH AOD. All three are very limited on funding.
6. If you are awarded Measure Z funds, how will you use them to leverage additional grants, contributions, or community support? We will leverage current county aod funds to match the requested amount and double the amount of bed-nights we are able to provide. This will relieve financial stress of AB109 funds which currently are unable to fill the need of the court ordered probationers needing treatment.
7. Will this proposal require new or expanded activity on the part of another entity to be fully functional and effective? If so, please describe. No, the required infrastructure is already in place. We would only need to be included in the referral/approval system that already exists for other treatment programs to use measure z funds to pay for treatment.
8. Are there recurring expenses associated to this application, such as personnel costs? Please check yes or no and if so, please detail those expenses. ☐ Yes ☒ No

ATTACHMENTS—Please include the following with your application

Proposal Narrative: Brief description of your request for Measure Z funds – Please explain how it is an essential service or for public safety. (one page maximum)

Prior Year Results: If your request is a continuation of a program funded with Measure Z in prior fiscal years, please provide the results of implementation. (one page maximum)

Program Budget

I declare under penalty of perjury under the laws of the State of California that the above statements and all attachments are true and correct

I declare under penalty of perjury under the laws of the State of California that the above statements and all attachments are true and correct

DATE: 2-25-2019

SIGNATURE: _____

A handwritten signature in dark ink, consisting of a stylized 'W' followed by a large, loopy 'S' or 'J' shape, written over a horizontal line.

SUBMIT THIS APPLICATION TO:

Humboldt County Citizens' Advisory Committee on *Measure Z* Expenditures c/o
County Administrative Office
825 Fifth Street, Room 112 Eureka,
CA 95501-1153



North Coast Substance Abuse Council, Inc.

P.O. Box 1332, Eureka, CA 95502

1205 Myrtle Avenue, Eureka, CA 95501

Phone: 707.445.0869 Fax: 707.445.0826

Email: wharrison562@mycr.redwoods.edu

February 25, 2019

Re: Measure Z Proposal Narrative

We are North Coast Substance Abuse Council, Inc. also known in our community as Crossroads. We are a 90-day inpatient substance use dependency treatment program. We work with the re-entry population and the homeless population. It is no secret that drug addiction fuels crime, and our city is experiencing this amidst our current opioid epidemic. We are looking to treat the ever- growing population suffering from this disease.

This proposal seeks to create a funding source to alleviate the burden our community is experiencing by admitting more individuals into treatment. Our current system has many barriers to treatment but the largest one by far is funding, or lack thereof. If we increase funding sources available then we increase access to treatment which, in turn, creates a healthier community. Public Safety is a direct result of drug treatment. When criminal behavior is halted and changed through therapy addressing the core issue of addiction not only does the criminal behaviors decrease but positive behaviors increase.

Through this proposal We would provide a total of 1,250 bed-nights at a rate of \$62 a bed-night. This would be the most affordable rate in Northern California. We are requesting \$77,500 to remain in the measure z committee's control to be invoiced for services on a monthly basis.

The services we provide participants include; 90-days of food, shelter, case management, group therapy, individualized counseling, drug testing and transportation to name a few. We have been providing these services to our city for over 44 years and it takes a range of funding sources to continue the important work we do.

We thank you for your time and truly appreciate the amazing work that the committee has done for our community

North Coast Substance Abuse Council, Inc.

Budget

July 2018 - June 2019

	Total
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Income	
Direct Public Support	
Total Direct Public Support	\$ 0.00
Dividend Income	10.00
Government Contracts	75,000.00
Local Gov Contracts-County	409,000.00
Total Government Contracts	\$ 484,000.00
Government Grants	10,000.00
MRT books reimbursement	1,000.00
Program Income	
Foodstamps	7,200.00
Program Fees	
Program Service Fees-PP	13,292.00
Total Program Income	\$ 20,492.00
Service/Fee Income	0.00
Total Income	\$ 515,502.00
Gross Profit	\$ 515,502.00
Expenses	
Business Expenses	
Bank Service Charges	36.00
Fines, Penalties, Judgments	1,000.00
Licenses & Permits	1,000.00
Taxes	304.00
Total Business Expenses	\$ 2,340.00
Contract Services	
Outside Contract Services	3,000.00
Total Contract Services	\$ 3,000.00
Facilities and Equipment	4,000.00
Equip Rental and Maintenance	250.00
Mortgage Interest	17,118.00
Property Insurance	16,536.00
Total Facilities and Equipment	\$ 37,904.00
Internet/TV	4,460.00
Operations	102.00
Auto Expenses	10,000.00
Books, Subscriptions, Reference	3,000.00
Equipment & Furnishings	300.00

Food		55,000.00
Garbage		3,567.00
Gas and Electricity		12,000.00
Postage, Mailing Service		300.00
Prescription Co-Pays (Client)		500.00
Printing and Copying		1,000.00
Recreation/Education		2,500.00
Supplies		
House Supplies		10,000.00
Office Supplies		3,000.00
Total Supplies	\$	13,000.00
Telephone, Telecommunications		4,645.00
UA Testing		2,700.00
Water/Sewer		5,265.00
Total Operations	\$	113,879.00
Other Types of Expenses		
Health Insurance		4,000.00
Staff Development		1,000.00
Total Other Types of Expenses	\$	5,000.00
Payroll Expenses		323,832.00
Medical payroll		161,000.00
Petty Cash		1,509.00
Petty Cash/bus fare		500.00
Reimburse Money		193.00
Repairs and maint.-buildings		10,000.00
1205 Myrtle		7,000.00
1210 Myrtle		3,000.00
Total Repairs and maint.-buildings	\$	20,000.00
Special Events Expenses		1,000.00
Training books mrt		1,000.00
Travel and Meetings		250.00
Conference, Convention, Meeting		250.00
Travel		250.00
Total Travel and Meetings	\$	750.00
Uncategorized Expense		135.00
		0.00
Total Expenses	\$	515,502.00
Net Operating Income	\$	0.00
Other Expenses		
Other Expense		
Total Other Expenses	\$	0.00
Net Other Income	\$	0.00
Net Income	\$	0.00