



Fund for Veterans' Assistance

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Application- Operation Fort Bend Heroes

Application ID AP-FVA_20-067	Applicant Organization Fort Bend County	Status Created	Application Deadline 10/25/2019 05:00 PM
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Overview

Opportunity

Announcement ID AN-FVA_20-001	Grantor Organization Texas Veterans Commission	ApplicationDeadline 10/25/2019 05:00 PM
Award Ceiling \$500,000	Award Floor \$5,000	Program Area (Do not change) General Assistance (GA)

Application Overview

Project Title Operation Fort Bend Heroes	Proposed Project Service Category Financial Assistance	Is this proposed project a new FVA-funded project, an expansion of current FVA-funded services, or continuation of an existing FVA-funded project? Continuation
Financial Documents	Requested Amount 250000	Proposed Project Start Date 7/1/2020
Proposed Project End Date 6/30/2021	Project Coordinator	Submitted On

Applicant Organization

Organization Name: Fort Bend County	EIN: 746001969	DUNS: 081497075
Address: 301 Jackson Street Richmond Texas 77469 United States	Applicant Type County Governments	Governing Body County Commissioners' Court/County Judge
What is the organization's overall mission? The mission of Fort Bend County Social Services	What year was the organization established? Fort Bend County 1837	What types of programs/services does the organization currently





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(FBCSS) is to provide comprehensive social services to individuals and families in need.

provide? Provide examples and briefly describe program components.

Fort Bend County Social Services provide one time assistance (rental/mortgage assistance, utility assistance, medication assistance, food assistance, unmet needs, emergency shelter) case management services (Case management services specifically targeted to the homeless and elderly, clients are eligible to receive transitional supportive housing) Iris Women's Program (Case management services targeted at victims of crime, clients are eligible to participate in transitional supportive housing), Operation Fort Bend Heroes (Case management services targeted specifically to veterans, clients are eligible to participate in transitional supportive housing), indigent burial services,

What services does the organization currently provide veterans?

Upon meeting eligibility requirements veterans can be provided with all services stated above.

On average, how many veterans does the organization currently serve annually?

122

What percentage of total clients served by the organization are veterans?

1%

Contacts

Full Name	User Role	Email	Business Phone
Anna Gonzales	Secondary	fbcsocialservicesgrants@fortbendcountytexas.gov	(281) 238-3506
KP George	Primary	county.judge@fortbendcountytexas.gov	(281) 341-8608
Ed Sturdivant	Secondary	ed.sturdivant@fortbendcountytexas.gov	(281) 341-3760





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Past Awards				
ID	ID	Award Title	Grantor Organization	Award Amount
AD-FVA19-03	PG-FVA_19-0001	Operation Fort Bend Heroes	Texas Veterans Commission	\$0

System Information

Created By Anna Gonzales	Created Date 10/10/2019 03:57 PM	Last Modified By Anna Gonzales	Last Modified Date 10/15/2019 12:52 PM
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Budget

Instructions

The budget is broken up into Direct and Indirect Costs. Within Direct Costs there are six allowable sections. Indirect Costs has one section. Each section represents a Budget Category that will make up your Total Grant Amount Request. The total grant amount request must equal the Amount Requested checked in Part I – Proposed Project.

Complete each Table as applicable to your Proposed Project. Costs must be broken out in Tables to a degree that is sufficient to determine if costs are reasonable, allowable, and necessary for the successful performance of the grant project. Costs will be reviewed for compliance with UGMS and federal grant guidance found in 2 CFR Part 200, Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards.

Costs claimed as direct costs that appear indirect in nature or budgets claiming no indirect costs will be scrutinized for accuracy. Any such costs claimed as direct need to be fully explained, supported, be reasonable and treated in a consistent manner across your organization. The FVA may ask the applicant to reclassify costs as indirect if the support provided does not meet the above criterion.

Do not leave a table blank. Place an "N/A" in the first line and a "0" in Total for the table if you are not budgeting those cost in this application.

Budget	
Budget Category	Grantor Share
Salaries and Wages	\$ 54,213
Fringe Benefits	\$ 25,578





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Travel	\$ 2,550
Supplies	\$ 1,229
Client Services	\$ 165,240
Other Direct Costs	\$ 1,190
Total Direct Costs :	\$250,000
Indirect Costs	\$ 0
Grand Total (Direct + Indirect Cost):	\$250,000

Matching Funds

Describe what other funding sources the organization will be using to support and accomplish the goals of the Proposed Project. Include any other grants that may fund portions of the Proposed Project, in-kind donations, or volunteer time that assists in the delivery of Proposed Project services. (Maximum allowable characters = 500)

FBCSS will utilize existing funding sources to support and accomplish the goals and objectives of Operation Fort Bend Heroes. These funding sources include Fort Bend County Public Assistance, Emergency Food & Shelter Program (EFSP), Reliant Care, TXU Energy Aid, City of Sugar Land Water, and Unmet Needs Funds. Services provided are: rent/mortgage assistance, utility assistance, medication assistance, unmet needs, food voucher, emergency shelter, and transitional supportive housing.

Forms and Attachments

Instructions

Please click the "Edit" icon (pencil) in the "Appendix I - Project Narrative" section below in order to fill out the required form for the application. Once the form is 100% filled out, and before the application is submitted, click the "Validate" button in that section.

Additionally, click the "Add" button in the "Attachments" section to upload all required supplementary documents for the applications.

An Application Package may have up to five attachments. Failure to provide required attachments may negatively impact the application or result in ineligibility. When submitting Application Package name each attachment according to numbers below. Note that attachments 1-3 are required for all applications.

Do not upload the all the documents as one file.

The Application Package includes the following items be attached:

- 1. Résumés of the Principal Participants in the organization**
- 2. List and terms of current governing body members (Board of Directors, Commissioners Court, City Council Members)**
- 3. A copy of current professional liability insurance and/or malpractice insurance policy**
- 4. Financial Documentation if not a Unit of Local Government**





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- 5. **IRS Tax determination letter regarding non-profit status, if not a unit of local government or VTC certification letter if applying for a VTC grant. Do not submit paperwork from the State Secretary of State or the State Comptroller of Public Accounts regarding non-profit status. Only IRS Tax determination letter indicating your organization is recognized as a tax-exempt non-profit is acceptable.**

Attachments				
Attachment Name	Type	Description	Last Modified	Owner

Notes			
Title	Description	Created Date	Created By

Acknowledgement

Acknowledgement

TO THE BEST OF MY KNOWLEDGE AND BELIEF, ALL INFORMATION IN THIS APPLICATION IS TRUE AND CORRECT AND COMPLETED PER THE DIRECTIONS OUTLINED IN THE ACCOMPANYING REQUEST FOR APPLICATIONS.

THE APPLICANT ORGANIZATION REPRESENTATIVE HAS READ AND UNDERSTANDS ALL REQUIREMENTS AND PROVISIONS NOTED IN THE ACCOMPANYING REQUEST FOR APPLICATIONS, AND WILL COMPLY WITH ALL REQUIREMENTS AND PROVISIONS NOTED IN THE ACCOMPANYING REQUEST FOR APPLICATIONS AND NOTICE OF GRANT AWARD EFFECTIVE UPON SUBMISSION OF THIS APPLICATION AND THROUGHOUT THE LIFETIME OF THE GRANT IF AN AWARD IS MADE.

THE SUBMISSION OF THIS DOCUMENT HAS BEEN DULY AUTHORIZED BY THE GOVERNING BODY OF THE APPLICANT.

Acknowledge here

false

Acknowledged By (Name)

Acknowledged By (Title)

History





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Form - TVC Form

Overview

Geographic Service Area(s)

The counties that will be served by this grant are called the Geographic Service Area(s). All Texas counties are grouped into one of eight regions. Check all counties, regardless of region, that the Proposed Project will serve. If the Proposed Project provides services to Veterans living in all counties statewide, simply select "Yes" for the Statewide field.

Statewide

No

Region 1 - Panhandle

Region 2 - West Texas

Region 3 - Alamo

Region 4 - South Texas

Region 5 - Gulf Coast

Region 6 - Central Texas

Region 7 - East Texas

Region 8 - North Texas

true

Beneficiaries

Applicants may elect to restrict Proposed Project services to particular groups to address needs by narrowing the eligibility of who can receive services through the Proposed Project.

Who will the organization provide direct services to under the proposed project?

truetruetrue

- Note: Texas Veterans Commission, Fund for Veterans' Assistance defines Dependents a





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If Veterans are selected above, provide a definition for veterans that will be eligible to receive services.

(Maximum allowable characters = 500)

Veterans to be served through this program will have served in the United States Armed Forces, National Guard Reservist and on Active Duty. A veterans will be considered for services, without regard to the era hey served and military branch they served.

Choose the discharge status(es) (Character of Service) that the organization will serve under the proposed project.

true true true true true true true

Describe any other restrictions on eligibility, if applicable (example: income level, disabilities, or referral from VA or other such organization). If blank, input 'n/a'. (Maximum allowable characters = 1000)

Operation Fort Bend Heroes has no income, disability or referral restrictions. The veterans/beneficiaries served under this program must demonstrate they live in Fort Bend County and must show they have exhausted all resources. In addition the veteran/beneficiary must show he/she lives in Fort Bend County. All addresses are verified using the Fort Bend County Appraisal District website.

If the organization receives grant funds, it will be responsible for tracking each individual Veteran, their dependents, and surviving spouses that receive grant-funded service(s).

The number of unduplicated Veterans, Dependents and Surviving Spouses, as well as cumulative totals, will be reported to the FVA quarterly.

Enter the number of unduplicated Veterans, Dependents, and Surviving Spouses to be served by the Proposed Project. The information to be entered is a number. Do not enter a percentage and do not enter a range. If the project will not serve a particular population, enter '0' in the corresponding area.

Number of Veterans

200

Number of Dependents

5

Number of Surviving Spouses

10

Total Number of Clients to be Served (Updates on Save)

215

Number of Home Modifications to be Completed. (Required performance measure for all Home Modification Assistance Programs projects)

0

Performance Reporting

What type(s) of data collection tools will your organization use to document Beneficiaries receiving services (required performance measure) and any additional performance measures noted in Beneficiaries, as well as measure goals and outcomes? (Maximum allowable characters = 1000)





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FBCSS collects basic demographic information, along with assessment questions. A client satisfaction questionnaire will be administered after services are provided. A follow-up questionnaire will be administered at 3 and 6 months of follow-up.

How will your organization consolidate the collected data to ensure that beneficiaries that are reported to the FVA are unduplicated? (Maximum allowable characters = 1000)

Currently FBCSS utilizes a computer software system entitled Caseworthy for data collection and tacking of services. The program has the capacity of tracking duplication of clients by date of birth social security number address, etc. Since all clients are asked "Have you served in the military?", the software has the capability of generating a report of those clients who responded "yes." Prior to assessing a beneficiary the case worker will look up a beneficiary to verify the client had not been assisted. If the client had not been assisted the caseworker will continue with the assessments and eligibility process. If the client had been assisted before, he will provided with referrals to other agencies and/or the client could be assisted with other funding sources provided by FBCSS.

Project Eligibility

The forms listed below are the only forms acceptable by TVC to determine Veteran, Dependen eligibility.

Select the forms the organization will use to verify eligibility for each beneficiary that will be s proposed project.

Veterans

true true true true true true true true true true

Dependents

true true true true

Surviving Spouse

true true true

Describe how the eligibility verification documents will be retained (example: as listed in your organization's retention policy) and maintained (example: in locked filing cabinet or electronically on your organization's server). (Maximum allowable characters = 1000)

Note: Retention period must meet minimum requirements as defined in 2 CFR 200.333 of the Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards.

FBCSS will store all needed documents electronically in the FBCSS database network which is only accessed by password and user ID and documents are restricted to only be viewed by FBCSS agency. No paper documents are maintained. Electronic documents will be maintained for a maximum of 5 years.

Proposed Project Services

Describe the Proposed Project. The answers should be brief but specific.

Describe what services will be provided with grant funding. (Maximum allowable characters = 1500)





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FBCSS proposed to provide financial assistance to veterans, dependents and surviving spouses consistent with need and eligibility, to include rental assistance, utility assistance, transportation assistance and childcare assistance will be provided for up to one month. FBCSS proposes to assist eligible beneficiaries with rental/mortgage assistance (up to \$1500), utility assistance (up to \$600, to include, deposits, fees, electricity, water, natural and propane gas, sewage/waste, internet/cable, cellular phone/phone), and childcare assistance (for one month, up to \$1,000). In addition, transportation assistance will be provided by filling the beneficiaries' tank with gas if necessary. Currently this is done by following the beneficiary to the nearest gas station and the County procurement card is used to purchase the gas. All services provided through this grant will be paid directly to the vendor. FBCSS aims to assist clients to become self-sufficient and to assist them to improve their own long-term quality of life.

Where will clients receive services: List addresses of all offices and if services are available on-line and/or over the phone. (Maximum allowable characters = 1500)

Services are located at two sites, West End Location at 4520 Reading Road Ste. A-900, Rosenberg, Texas 77471, and the East End Location at 307 Texas Parkway Ste. 235, Missouri City, Texas 77459.

When will the services be available to clients. Indicate the hours of operation for the facilities to include days and time. (Maximum allowable characters = 1500)

Services are offered Monday through Friday from 8:00 am to 5:00 pm.

Describe how beneficiaries will be provided with project services. Include how the beneficiary requests services and how long it will take for requested services to be provided. (Maximum allowable characters = 1500)

Beneficiaries will access services by scheduling an appointment at one of the two locations listed above. A beneficiary can receive an appointment on the same day or within a 24 to 48 hour period. The beneficiary is interviewed and assessed by the caseworker. During this process he/she must provide eligibility documents and if all documents are not provided at the time of the initial interview he/she will be given three-four days in which to return all required documents. Once all documents have been submitted the case worker will assess the case for eligibility and will inform the client he/she qualifies. The caseworker will submit a service request to supervisor for final approval and then submitted to the Auditor's Office for payment to the vendor (landlord, mortgage company, utility company, childcare, use of purchasing card).

Need Identified

What is the community need(s) or existing service gap(s) that the Proposed Project will address? (Maximum allowable characters = 1500)

According to a needs assessment conducted by The George Foundation, in 2011 in Fort Bend County, using focus groups, interviews and randomized telephone surveys, respondents identified food and housing as the most critical needs in Fort Bend County in the area of human services. Furthermore, participants listed affordable housing, homeless shelters, food assistance and basic needs as not being met by current services in the region. When comparing FBCSS fiscal year 2014 to fiscal year 2015 it was noted that there was a 24% increase in the number of families/ individuals living at or below 100% poverty level. When comparing FBCSS fiscal year 2016 to fiscal year 2017, there was a 28% increase in the number of families/individuals living at or below 100% poverty level. In fiscal year 2017 (October 2016 through September 2017) 3,974 individuals requested rent/mortgage, utility, and food assistance.





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In this same year 2,233 actually received assistance with one of the three services from Fort Bend County Social Services (FBCSS). Over the last 4 years, 470 veterans requested one time or repeated assistance, totaling 856 requests for assistance from FBCSS. Of this same population 47% reported an income of less than 30% of the area median income (less than \$21,091.80 a year), 63% reported an income of less than 50% of area median income (less than \$35,153.00 a year) and 73% reported an income of less than 80% of area median income (less than \$56,244.80 a year).

How were community need(s) or gap(s) in service identified? Describe the methods used to identify the need in the service area. (Maximum allowable characters = 1500)

FBCSS has tracked gaps in services by collaborating with other organizations and participating in various networking meetings such as the United Way Fort Bend Veterans Network. The Network has identified a fragmented system and has identified that services specifically targeted to veterans are either non-existent or veterans must travel long distances to receive services. While providers in the Houston/Harris County area extend services to the veterans in Fort Bend County, services may only be provided one or two days out of the week, making it difficult for the veterans to receive services at the time he/she is in crisis. Veterans too often comment about the red tape and barriers faced at the Veterans Administration and the difficulty in navigating the system, as a result many will go without services. Many providers agree (Fort Bend Veterans Network) that there is a need to provide financial assistance to veterans, as a result FBCSS created the Fort Bend County Collaborative Information System (FBCCIS), where 12 non-profit organizations (to include The County) are connected electronically, utilizing the same computer software program. This system will for partners to easily identify and refer veterans quickly to FBCSS, in addition to having access to other services. It is anticipated that through this collaborative, Fort Bend County will be in a unique position to better document financial needs and other needs faced by veterans.

How does the Proposed Project address the identified need(s) or gap(s) in the service area? (Maximum allowable characters = 1500)

For more than 30 years, FBCSS has provided financial assistance programs. In the last three years, it has gradually modified its approach to go beyond simply paying an individual or family's rent or electricity bill, but rather has taken a holistic approach and examined the root cause of the client's crisis. As a result, FBCSS has discovered clients are facing recurring issues such as water leaks, high kilowatt usage, no gas for transportation, no identification, eviction history, lack of medications, mental health issues, etc. and unfortunately are unable to get back on their feet. The Operation Fort Bend Heroes Project will address needs by first determining need and eligibility and following through with assistance. When needed, FBCSS may have to refer to outside agencies or to agencies within the collaborative. In the last three years, FBCSS has provided case management to assist the client and identify the root cause of the problem. Case management services are provided for a minimum of six months. During this time, the caseworker develops a rapport with the client, creating a connection whereby the client feels comfortable asking questions and disclosing other needs the client is facing. Operation Fort Bend Heroes Project is proposing to provide financial services along with case management services to ensure the beneficiary is assisted and prevent major crises from re-occurring.

How is the Proposed Project unique from other similar services that may be available in the proposed service area? Be specific with details about what sets your Proposed Project apart. (Maximum allowable characters = 1500)





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FBCSS takes a comprehensive approach when assisting Fort Bend County clients. FBCSS complete in intake and assessment to determine true causes of issues in order to better service the client. If a client comes in seeking assistance with a utility bill, FBCSS is not just looking at the utility, it approaches the case as a whole. At the time of assessment it is determined if rent is too high, has income decreased, is there a loss of employment, is the client unaware of resources available to them, such as government resources that may alleviate some of the strain on the client's financial status. It has been FBCSS' number one goal to assess each client's situation to determine what else can be done to prevent this individual from returning for services, to address the root of the problem, and identify other services in the community the client can be connected to. Another unique feature of this project is that beneficiaries will have immediate contact with the Fort Bend County Veterans Services Office. Since both agencies are co-located in the same building (next door to each other), access to additional services is more readily available. In addition, Fort Bend County's FBCCIS also allows for beneficiaries to access additional services to include: food assistance, medication assistance, clothing assistance, and/or other unmet needs the beneficiary may need.

Goals and Outcomes

Title	Sub Title	Question	Target Outcomes
Financial Assistance	Project Specific Goals	How many evictions/foreclosures were prevented?	10
Financial Assistance	Project Specific Goals	How many service disruptions were prevented?	10
Financial Assistance	Project Specific Performance	How many clients will receive rent/mortgage assistance?	72
Financial Assistance	Project Specific Performance	How many clients will receive utilities assistance?	73

Goal Tracking

Describe how the organization will determine if the anticipated outcomes above are met. Examples may include using a client satisfaction survey or following up with clients 30-90 days after receiving services to determine status. (Maximum characters = 1500)

FBCSS will utilize a client satisfaction survey as well as follow –up with clients at 3 months and 6 months of receiving services. Follow-up will be conducted either face to face or by phone. Beneficiaries will be encouraged to contact caseworker upon change of address or change of phone number.

Project Principal Participants

Title	Name of Principal Participant	Veteran	Years	Résumé Attached	Roles, Responsibilities, and Qualifications
					Anna M. Gonzales, MSW, is responsible for the overall implementation of the project to





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Secondary	Anna Gonzales	<input type="checkbox"/>	30	✓	include: staff training, budget, implementation, policy and procedures and program evaluation. She has served as the Director of Fort Bend County for 7 years and initiated the development and implementation of veterans within the Social Services Department.
Primary	KP George	<input type="checkbox"/>	18	✓	Empowered by the Constitution as the County's Chief Executive Officer. Presiding officer of the Commissioners Court including publishing meeting notices and prohibiting illegal closed meetings. Administrative duties primarily relate to carrying out the court orders passed by the Commissioners Court, signing all contracts and overseeing all non-elected department heads.
Secondary	Ed Sturdivant	<input type="checkbox"/>	24	<input type="checkbox"/>	Ed Sturdivant will be responsible for payment of bills and to detect any deficient controls, duplicated effort, extravagance, fraud, or non-compliance with laws, regulations, and management policies. Mr. Sturdivant has held the position of County Auditor for the past 18 years.

Partnerships

Name of Partner Organization	Address	Telephone	Website
Fort Bend County Veterans Services	4520 Reading Rd, Suite A-300, Rosenberg, TX 77471	281-238-3587	http://www.fortbendcountytexas.gov
Access Health	400 Austin St., Rich-mond, TX 77469	281-342-4530	http://www.myaccesshealth.org
Texana Center	4910 Airport Ave., Rosenberg, TX 77471	281-261-9199	http://www.texanacenter.com
Veteran of Foreign Wars (VFW)	1903 1st St., Rosenberg, TX 77471	281-232-3011	http://www.vfw.org

Marketing and Outreach

Does the organization have an outreach and/or marketing plan to ensure the organization is able to reach and provide services to the number of clients to be served as listed in the Beneficiaries section?

checked





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If yes, describe the outreach and/or marketing plan and how it will ensure that the organization is able to reach and provide services to the Number of Clients to be Served as listed in the Beneficiaries section. (Maximum allowable characters = 1500)

FBCSS' current marketing plan utilizes a combination of strategies to include newsprint, social media, networking with various businesses churches, civic groups, veterans groups, social service organizations junior colleges/universities, veteran service providers, clinics, Texas Workforce, All Xena's Horses LLC, VFW, Disabled American Veterans, participation in local health fairs, attends regular standing monthly networking meetings. Program staff attends United Way Connect monthly network meetings and the quarterly United Way Fort Bend Veterans Network meetings.

How often are marketing and outreach activities conducted? (Maximum allowable characters = 1000)

Program staff will also meet with veteran program partners 2-3 times per year to ensure that outreach is being performed and that services offered are being marketed to veterans. Veterans not affiliated with the aforementioned organizations will be targeted through social media, press releases in local newspapers, newsletters, churches, businesses, civic groups, etc. FBCSS works very closely with the Fort Bend County Veterans Service Office and they will play an integral role in referring beneficiaries to FBCSS. In addition, FBCSS has created brochures regarding available services and make them available to other agencies as well as "hand out" at any functions where Veterans may congregate.

Sustainability after the Grant

If the organization is awarded an FVA grant, would the Proposed Project continue after the grant period ends if the organization does not receive additional FVA funding?

checked

If yes, describe how the Proposed Project will continue. Include what other funding will be available to the organization and what other organizations will be partnering or working to carry on the work of the Proposed Project after the grant period ends. (Maximum allowable characters = 1500)

The proposed project will continue, however the number of veterans assisted would be reduced as well as the amount of funding per service, depending on the veteran's situation. FBCSS will utilize its department's budget to assist in meeting the immediate needs of the veteran. A reduction in funds will not change the primary goal of the project which is to help veterans, veteran spouses and surviving spouses and dependents, but it will have an impact on the number of veterans that can be assisted. Plans for maintaining the project include securing funding from state and federal funding sources, local foundations, corporate and individual contributions.

If the organization has received FVA funding in the past for the Proposed Project, describe why it is applying for a grant again. (Maximum allowable characters = 1500)

FBCSS is applying for funding to continue Operation Fort Bend Heroes. Currently, there are no agencies in Fort Bend County that specifically target the unmet needs of veterans, their spouses, or surviving spouses. By continuing this project, Fort Bend County Social Services will be able to continue providing financial assistance to Fort Bend County veterans and their spouses.

TVC Contracts

Contract Amount	Contract #	Begin Date	End Date	Services provided under contract





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Total				
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TVC Contracts Narrative

For TVC-only (non-FVA) contracts that are listed in the above table provide a brief description of the contract. (Maximum allowable characters = 1500)

N/A

Other Grants					
Contract Amount	Grantor	Grant/Contract #	Begin Date	End Date	Audit Performed
\$ 240,607	U.S. Dept. of Homeland Security (Emergency Food & Shelter Program)	LR #782800-006	10/1/2018	3/31/2020	✓
\$ 252,313.64	Office of Governor Criminal Justice Division	3024003	10/1/2018	9/30/2020	✓
Total					
492,920.64					

Fiscal Management

What software does the organization use to record accounting transactions?

Lawson

Policies	
Fiscal Management Accounting Policy	Y / N
A. Procurement	Yes
B. Vendor Payments	Yes
C. Payroll	Yes
D. Grants Administration	Yes
E. Cash Management	Yes
F. Travel	Yes
G. Capitalization and Equipment	Yes

Assessment	
Fiscal Management Statement	T / F
A. There has been no staff turnover or reorganization in the past 6 months.	False
B. The organization uses a Chart of Accounts.	True





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C. Time sheets are approved and signed by supervisory personnel.	True
D. An A-133 Single Audit has been performed in the past 2 years.	True
E. Travel receipts are submitted for travel reimbursement requests.	True



Case Worker	To Be Determined	43,702	100	\$43,702.00	 
Program Coordinator	To Be Determined	52,555	20	\$10,511.00	 

Total Records: 2

Other Information

Describe the roles, responsibilities, and qualifications including any required license or certification of each of the positions listed under Salaries and Wages and how each of those roles are necessary to accomplishing the Proposed Project. Positions allocated 10% or less will be indirect costs. For any vacant positions, provide a narrative as to how the annual salary was determined. How was the % allocation for each employee determined? (Maximum allowable characters = 2000)

The Caseworker position is currently open. The Caseworker is responsible for assessing beneficiary's eligibility for services, works closely with FBCSS team, FBCV/S department and other resources within and outside the County. The caseworker is responsible for assessing the beneficiary holistically. This approach is utilized to ensure all aspects of the beneficiaries' needs are addressed. These areas include mental health, physical health, Veteran's Administration, legal assistance, and social determinants of health. Upon completion of assessment, the caseworker along with the beneficiary create a service plan to address the beneficiaries' needs and work with internal and external organizations to ensure the beneficiaries' needs are met. The case worker position is a grade 8 position with a salary range of \$16,58 - \$20,93 an hour. The salary provided was calculated at \$20.93 an hour X 2088 hours = \$43,702.00. The FBCSS Program Coordinator is to be determined. Twenty percent of the program coordinator time will be utilized to supervise the caseworker, supervise the day to day activities of the program, attend community meetings, completes monthly and annual reports. The Program Coordinator position is a grade 10. The salary provide for this position was determined at her current salary with potential annual pay increase. The full time cost of this position is \$25,17 (an hour) X 2088 (total hours) = \$52,555 (annual salary). The 20% salary for the Program Coordinator was calculated as follows: \$52,555 X 20% = \$10,511.00.

To avoid losing work, be sure to click Save before moving on to the next section.

Position Title	Employee Name	Annual Fringe Benefits	% of Time Allocated to the Grant	Total	Actions
Caseworker	To Be Determined	20,962	100	\$20,962.00	 
Program Coordinator	To Be Determined	23,081	20	\$4,616.00	 

Total Records: 2

▲ Other Information ⓘ

List employer paid benefits for each position listed in Table A. The personnel and the % allocation must match the Salaries and Wages table. (Maximum allowable characters = 2000)

The total cost of benefits for the Caseworker is \$20,962.00. The breakdown of cost per benefit is below.

Payroll taxes 7.65% @ \$43,702 = \$3,343.00

Retirement 12.49% @ \$43,702 = \$5,458.00

WC/Unemployment 1.0% @ \$43,702 = \$437.00

Property/Casualty/Liability 2.8% @ \$43,702 = \$1,224.00

Insurance total cost \$10,500

The total cost of benefits for the Program Coordinator is \$ 4,616.00. The following is a breakdown of the cost of benefits.

Payroll taxes 7.65% @ \$10,511= \$804.00

Retirement 12.49% @ \$10,511 = \$1,313.00

WC/Unemployment 1.0% @ 10,511 = \$105.00

Property/Casualty/Liability 2.8% @ \$10,511 = \$294.00

Insurance \$10,500 @ 20% = \$2,100.00

Edit

Enter employee travel in the table below. This can include travel to and from conferences, training, outreach, and travel to provide services to Beneficiaries.

To avoid losing work, be sure to click Save before moving on to the next section.

Travel Expense	Budget Sub-Category	No. of Staff	No. of Days	Total Cost	Actions
Staff Mileage @0580	Local Mileage	1	1	\$1,100.00	 
Conferences/Workshops Training	Conference	1	5	\$700.00	 
Hotel & Per Diem	Conference	1	5	\$750.00	 

Total Records: 3

Other Information

Provide a description for each travel item included in the Table above. The description should include, at a minimum, what the travel is for, who is traveling, costs to be used for mileage rates, meal rates per day, conference registration fees, and why the travel is necessary to accomplishing the proposed project. Narrative must also include a calculation to demonstrate how the cost was determined. (Maximum allowable characters = 2000)

Mileage-Travel to and from home visits, outreach, community meetings, local and regional training and conferences. The cost of .58 cents per mile will be the claim per mileage. The total cost of mileage is figured at .58 cents per mile X 1897 miles=\$1,100.26. On average the caseworker travels approximately 2-3 days a week.

Conferences/Workshops Training registration fees range from \$50.00-\$300.00. It is anticipated Caseworker could attend 2-3 conference trainings in the fiscal year. The Caseworker is anticipated to attend the San Antonio Combat PTSD Conference (October 23-24, 2020) and Motivational Interviewing training (dates to be determined). One conference/workshop/training takes place over a two to three day period, so two conferences combined could total 5 days. Hotel /Per Diem-Fort Bend County travel policy requires employees to utilize the US Government Services Administration (GSA) rate. Prior to traveling the traveler (employee) must verify confirmed rate matches the negotiated contract rates found on the state's website http://www.gs.gov/portal/content/104877?utm_source+OGP&utm_medium=printra-dio&utm_term=perdiem&utm_campaign=shortcuts based on traveler's destination. The County's policy per diem is \$36.00 a day for in-state travel and \$48.00 a day for out of state travel. It is anticipated the Caseworker will two in-state conferences in a fiscal eyar for a combined per diem cost \$36.00 X 5 days=\$180.00.

Table D - Supplies

New



Enter a description, unit cost and quantity for each item of supplies to be purchased for the Proposed Project. This category includes normally consumable and general use items that do not reach the threshold for capital equipment. This can include, but is not limited to, general office supplies, furniture, laptops, and printers.

To avoid losing work, be sure to click Save before moving on to the next section.

Name	Budget Sub-Category	Unit Price	Quantity	Total	Actions
General Office Supplies	General Office	1,229	1	\$1,229.00	

Total Records: 1

Other Information

At what amount does your organization capitalize equipment? (\$1-\$5000)
\$5,000

Provide a description for each item of supply and explain why each supply item is necessary to accomplish the Proposed Project. (Maximum allowable characters = 2000)

General office supplies-will be purchased to carry out the day to day operations and ensure all activities are carried out in a timely and organized manner. The estimated cost of these items varies, however the experience of FBCSS is that the cost of the general supplies per new employee is approximately \$740.00 annually. The cost of general office supplies was calculated based on current monthly purchase of office supplies to date. Current monthly purchase per month is approximately \$61.66 a month X 12 months = \$740. Ink/toner is needed to print documents, its total cost is \$479. The total cost of these items is \$1,219.

If this is a continuation request and the organization was previously awarded funding for the Proposed Project, note each item of supply listed in the Table above that was also requested as part of a previously funded application and explain why it is being requested again. Examples of such items may include laptops, projectors, printers, and phones. Do not provide an explanation for consumable items such as office supplies. (Maximum allowable characters = 1000)

Non-applicable

To avoid losing work, be sure to click Save before moving on to the next section.

Name	Budget Sub-Category	Average Unit Price	Quantity	Total	Actions
Rent/Mortgage Assistance	Housing	1,500	72	\$108,000.00	 
Utility Assistance	Utilities	600	73	\$43,800.00	 
Childcare Assistance	Child/Adult Care	1,000	10	\$10,000.00	 
Transportation	Transportation	40	86	\$3,440.00	 

Total Records: 4

Other Information

Provide a description for each Client Service listed in the Table above and explain why each cost is necessary to accomplish the Proposed Project. (Maximum allowable characters = 2000)

Rent/Mortgage assistance will be provided to 72 beneficiaries at a rate of \$1,500 (or less) per month for a total sum of \$108,000. This service will pay will pay up to \$1,500 up to 6 months of rent/mortgage, pet deposit, arrears, application fees, and security deposit. Utility assistance will be provided to 73 beneficiaries at a maximum of \$600 (or less) for a total sum of \$43,800. Utility services include: deposits, fees, water, sewage/waste, electricity, natural and propane gas, internet/cable, cell phone/phone, and arrears not to exceed \$600. Childcare assistance will be provided to 10 beneficiaries for a maximum of \$1,000 for a total sum of \$10,000. Beneficiaries are allowed more than one time assistance however the total can not exceed \$1,000. Transportation assistance will be provided to 86 beneficiaries for a maximum cost of \$40 (or less) for full tank of gas. The total cost of transportation is $\$40 \times 86 \text{ beneficiaries} = \$3,440$.

Does the organization have a maximum allowable cost per client?

- Yes
 No

If Yes, what is maximum allowable cost per client?

N/A

To avoid losing work, be sure to click Save before moving on to the next section.

Name	Budget Sub-Category	Unit Price	Quantity	Total	Actions
Brochure Printing	Printing	350	1	\$350.00	 
Cellular Wireless Data Card	Outreach	480	1	\$480.00	 
License Software Caseworthy	Software	360	1	\$360.00	 

Total Records: 3

▲ Other Information ⓘ

Provide a description for each item of other direct costs listed in the Table above and explain why each cost is necessary to accomplish the Proposed Project. If costs are allocated an approximate percentage to be charged to this grant is to be included. (Maximum allowable characters = 2000)

Brochure printing cost-FBCSS conducts ongoing outreach in the community to inform veterans of program services. FBCSS created a brochure specifically targeting veterans to include men, women, and their families. The cost of printing 1,000 brochures is \$350.00. This cost is based on the current county cost as per vendor.

A cellular wireless data card is needed to access the web-based data collection software system (Caseworthy) utilized by FBCSS. This software is utilized to complete client intake and assessments. The cellular wireless data card is specifically assigned to the laptop utilized by the Caseworker assigned to this project. The card is needed to connect laptop to the internet at the office, and while making home/field visits to veterans. The cost of the cellular wireless data card is \$40.00 per month for a total annual cost of \$480. This price is based on the county cost as per vendor.

License Computer Software (Caseworthy)--FBCSS utilizes the data collection software Caseworthy. This software is necessary for data collection, monthly reporting, quarterly, and end of the year reports and to ensure proper documentation and data collection. The Caseworker for this grant is required to maintain a license to gain access to the system. The cost of one license is \$360. This price is based on the current agreement that the County has with Caseworthy.

Edit