SANGAMON COUNTY COMMUNITY RESOURCES

NEEDS ASSESSMENT
AND
COMMUNITY ACTION PLAN
2015 Update for
FY 2012- FY 2016 Strategic Plan

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http://www.co.sangamon.il.us/CR/resource.asp

Community Action Plan FY 2012 - FY 2016
September, 2015

Table of Contents

OPENING LETTER from the Executive Director,
Sangamon County Oversight Committee Chairman
and CSBG Advisory Council Chairman

To our program participants and supporters:

Every three years *Community Action* completes a comprehensive community needs assessment, and internal evaluation and plans programs based on what we find. This Community Action Plan brings together the input of our customers, community partners, board members and staff and provides information with which we will continue to move *Community Action* forward.

We have accomplished much of what we set out to do in our last Community Action Plan and even more that we could not anticipate. Knowing that even harder times are here, our program goals were set to increase our capacity to meet people's basic needs. We were successful in meeting those goals. In addition, as an organization, we began working even closer with community partners who serve our most vulnerable residents (Senior Services of Central Illinois case managers, Head Start, District #186 Parent Educators and Social Workers, the Illinois Dept. of Child and Family Services (DCFS) Parenting program, and the Springfield Housing Authority Family Self Sufficiency program). Other agency goals met were to re-brand the agency, perform stronger educational advocacy with the Faith Coalition for the Common Good and collaborate with five financial institutions to bring agency customers the best in financial education in the effort for them to make wise decisions with their income.

One of the most significant agency events in the past three years was increasing agency's ability to create self sufficiency by offering a customized Certified Nursing Assistant Program and aligning by CSBG scholarship eligibility with areas of study leading to employment in high-growth job sectors. And to better assure low-income participant success, program course work also included a new two-week "Academy" with content not directly tied to academic disciplines but related to professional skills that student can see are relevant to their lives. The 8-week pre-C.N.A. module to improves participants' reading and math skills. To effectively address the cost of transportation to LLCC, a daily travel stipend was also included for each day of class attendance.

The next agency accomplishment for 2014 was to require a 3-hour financial literacy workshop for rental assistance and to change eligibility for rental assistance to every other year from every year. With these changes, other customers can now receive rental assistance and others are given tools to help them their manage money. Money Smart skills also reduce stress, offer a plan to help save for unexpected events and expenses and enables participants to manage their money to help them meet goals they set for themselves. Each workshop presenter is a financial professional who guides them through the banking system.

With the new 2014, senior and summer student food box program, the agency accepted referrals from Senior Services and School District #186 and stabilize working families. It also gave parents a break from having to worry that their food stamps would not get them through the summer while school is out and their children do not receive free school breakfasts and lunches. Seniors continued to receive their food boxes throughout the year also due to food stamp cuts.

Other stabilizing programs such as pediatric dental anesthesia are still in demand. The addition of a parent education component at Early Head Start and Head Start focusing on child oral care from birth to age five will help address prevention of this condition. Sangamon County Public Health will provide these presentations at Head Start.

There has been no change in the need for dental care, although services will be reduced in order to provide employment supports as well as other programs to increase households' stability and self-sufficiency. Until the Affordable Care Act evolves and dental care is offered, there will continue to be the need to address dental services. During 2015, and once dental funding is depleted, our customers will be referred to Capital Community Health to receive dental services needed.

Programs reduced in 2014 included the GED Assistance program while our partners in GED education ramp up with new GED curricula to teach for the new GED. The test is now more difficult, more expensive and only computer-based. The agency medication program was in significantly less demand due to the addition of the Affordable Care Act covering medical and prescription drug needs for single adults without children. However, prescribed-over-the-counter and co-pays will be covered in 2015.

In conclusion, the War on Poverty is celebrating 50 years of success. Community Resources as helped thousands of people avoid poverty or get out of poverty. In this 50th anniversary year, we are celebrating the fact that the community action network has provided much needed services and helped expand opportunities to millions of low-income people and families -- and in doing so, helped improve people's lives and the communities in which they live.

We thank the hundreds of people who answered surveys; our staff, board, council, community collaborators, and especially the Strategic Planning Committee for their commitment through -out this process. We are moved to hear over and over again from our staff how good they feel about working here. We were pleased to hear from our participants who have said Community Action has made a real difference in their lives. We are challenged to think about how we can do an even better job using the recently implemented Organization Performance Standards and National Performance Indicators, and have emerged as an even stronger organization as a result.

Sharmin Doering	Linda Fulgenzi	Brad Mills
Executive Director	Chairman, Sangamon County	Chairman, CSBG
	Oversight Committee	Advisory Council

Community Action Plan for FY 2015

Submitted to the Community Resources County Oversight Committee and CSBG Advisory Council – October 2014

I. INTRODUCTION

In 1964, Congress passed the Economic Opportunity Act to begin America's War on Poverty. As a result of this initiative, a network of Community Action Agencies sprang up all over the country to alleviate the impact of poverty at the local level and to support people with low incomes to improve the quality of their lives. Today, all Community Action Agencies are overseen by a state agency designated by the Office of Community Services of the Administration for Children and Families, U.S. Department of Health and Human Services. In Illinois, this state agency is the Department of Commerce and Economic Opportunity (DCEO). A federal requirement, every three years, all Community Action Agencies must conduct a thorough needs assessment of their service area and create a Community Action Plan.

In 1965, Springfield-Sangamon County Community Action was designated as the agency to carry out anti-poverty work in Sangamon County, Illinois. The first program was Head Start. As the needs of the region changed and new funding opportunities became available, the agency changed and grew tremendously. In 1985, the County of Sangamon was then designated as the Community Action Agency for Sangamon County, and changed the legal name to the Sangamon County Department of Community Resources (SCDCR). SCDCR manages a wide array of over 15 programs three departments. The agency has an annual budget of over 4 million, 15 employees, and serves over 6,000 households and 15,000 individuals each year.

This Community Action Plan describes the needs of people with low incomes from our service area. It states SCDCR's programs for October 1, 2014, through September 30, 2015. A Strategic Planning Committee oversaw the process and consulted with stakeholder group survey responses while delineating these needs and developing the plan. We heard from the staff, other organizations, and hundreds of community residents with low incomes. Other research was done into secondary sources of information about our region. Hundreds of survey responses were analyzed from three different surveys completed by staff, community organizations, and adult constituents with lower incomes.

This Community Action Plan is simply a "snapshot in time" of an active process that continues all year round. Each year, assessment and planning do not stop with the publication of this Plan. As conditions in our communities change, routes we take are adjusted to reach the goals we have set for the agency. However, the initial set of goals and activities in the 2015 Community Action Plan creates a clearer path for us to follow, and as a result, better services are offered to our participants while achieving better outcomes for them.

II. MISSION STATEMENT

Our Mission
The Sangamon County Department of Community Resources strives to improve the quality of life of residents with low incomes in our county. The goal for our customers is self-sufficiency and is fostered by utilizing departmental programs and by staff referrals to community partner organizations.

Our Agency Vision
To improve the quality of lives in our county

Our Community Action Movement Vision and Values
Below are the visionary concepts of Community Action that have been commonly held and are the basis of community involvement and agency management.

We pledge to rededicate ourselves "to eliminating poverty in the midst of plenty in this Nation by opening to everyone the opportunity for education and training, the opportunity to work, and the opportunity to live in decency and dignity."

We hereby recommit to continue the battle to help the poor to overcome hunger, inadequate housing, illiteracy, unemployment, discrimination and the lack of adequate educational, health and social services.

We accept the challenge to lead our agency, our community, and our country with renewed dedication, enthusiasm and effort, into a new era in which the dignity and decency of all people will be paramount.

Vision:

- Poverty can be eliminated by creating an environment that encourages opportunities for everyone.
- Community Action is development of these opportunities.
- Serving the best interests of the poor is in the best interest of all people.
- Systems and people have the potential for change.
- Community Action's success is dependent upon the collective efforts of the entire community and its institutions.

The values and beliefs of Community Action affirm the capability and spirit of humanism collectively; and recognize the differences of each individual.
- The misery of poverty must be addressed and alleviated.
- Poverty is unacceptable, painful and far-reaching.
- Easing the misery of poverty is good, right and essential in an affluent society.
- Community Action identifies and addresses the causes of poverty.
- Community Action removes obstacles, fills gaps and confronts the causes/conditions of poverty.

- Despair can be replaced by opportunity and hope through Community Action intervention.
1. Empowerment of the poor for economic and social self-sufficiency through a variety of means.
2. Local flexibility/control creating a program mix: responsive to customers and community's needs.
3. Anti-poverty initiatives must be related to assessed community needs.
c. The plight of the poor must be made known.
1. Community Action is the voice for the poor.
2. Use of full range of public relations techniques.

- The impoverished individuals, families and communities can be enabled and assisted to attain self-sufficiency and independence.
1. Agencies move to shift forces from self-serving to selfless endeavors.
2. Agencies move from the abstract idea of the elimination of poverty to the achievement of self-sufficiency on an individual/family basis.
a. Listen to the poor/interact one-on-one, in partnership.
b. Encourage, assist, and strengthen the abilities of the poor to play major roles in programs, services and systems affecting them.
c. Accept the presence of the positive in people, work from an individual, asset-based model.

- A coordinated response to poverty causes/conditions, facilitated by the CAA, can be an effective approach to moving people out of poverty.
1. Effective use of the CAA Board structure
2. Development of networks, coalitions, task forces
3. Mobilization of resources; internally and externally
4. Initiation of grassroots activities
5. Community capacity building and development

- The vision and values of Community Action must be modeled internally and projected externally.

III. ASSESSMENT AND PLANNING PROCESS

In developing the (PY) 2015 Community Action Plan, Community Resources conducted an extensive assessment to determine community needs as well as the agency's strengths and challenges. We used a variety of approaches to gain input from stakeholders.

Strategic Planning Committee

The Strategic Planning Committee was formed in August, 2014 and included representatives of the Board of Directors, direct service staff and Department Directors.
The Strategic Planning Committee met for 6 hours in August, 2014 and was responsible for:

☐ Providing leadership, direction, and oversight for the strategic planning process and ensuring integration of various elements that go into the plan.

Creating a planning design that ensured all stakeholders were included in a meaningful way in articulating needs, goals, and strategies.

 Developing timelines and realistic expectations for completion of tasks by this committee and ensuring that work was completed in a timely way.

 Analyzing needs assessment data.

 Making recommendations to the CSBG Advisory Council regarding priorities, goals, and strategies for the next three years of the agency's development, as well as how progress toward the goals set out in the plan should be monitored.

 Ensuring that the goals and strategies presented to the Council for approval were consistent with the agency's mission, approach, and values, as well as with the needs of the community.

 Ensuring that the planning process and outcomes were consistent with the expectations of the U.S. Office of Community Services and with the National Organizational Performance Standards and the format of the Results Oriented Management and Accountability (ROMA) system.

Data and Reports used in Planning

- September, 2013 – August, 2014 Inter-Agency Customer <u>Needs</u> Assessment (Appendix 1)

- 2014 Sangamon County Community Needs Assessments – Customer and Non-Customer (Appendix 2 and 7)

- National Community Action Partnership (NCAP) 2012 Community Census Needs Assessment (Appendix 10)

- September, 2013 – August, 2014 Inter-Agency <u>Customer Service</u> Survey Results (Appendix 13)

- 50 Years Later: REPORT ON ILLINOIS POVERTY – Sangamon County by Heartland Alliance (Appendix 17)

- Homeless Point-In-Time Summary for IL-513-Springfield/Sangamon County – Heartland Continuum of Care – 2014 (Appendix 18)

- IDES Unemployment News Release, July 24, 2014 (Appendix 19)

- Anti-Poverty Strategies and Economic Security Issues, Jim Masters and Allen Stansbury, Center for Community Futures, August, 2014 (Appendix 20)

- United Way 2-1-1 Report, January-June, 2014 (Appendix 21)

IV. SCDCR Community Assessment Protocol
    Effective FY2014

I.   Requirements

A. *Funders*
    A Community Needs Assessment is required every three years by the State of Illinois
    Department of Commerce and Economic Opportunity and HHS Office of Community
    Services.

B. *Updates*
    Annual updates are required and accomplished through analysis of the results of the
    on-going inter-agency customer needs assessments.

C. *Strategic Planning*
    All Strategic Planning activities – and all agency services – must show a connection to
    needs identified in SCDCR's Community Assessment document.

D. *Board and Advisory Council roles*
    The Assessment and its Annual Updates must be reviewed by SCDCR's Oversight
    Committee and by the CSBG Advisory Council.

II.   Best Practices

A. *Community Action Standards of Excellence*
    The Community Assessment should be completed consistent with Organizational
    Performance Standards for Community Action, specifically Standard 6.1-6.4, which states
    (in part):
    > *"The Department conducts or is engaged in a community assessment and
    > issues a report no less than once every 3 years, if no other report exists."*
    > *"As part of the community assessment, the Department collects and includes
    > data specific to poverty and its prevalence related to gender, age, and
    > race/ethnicity for their service area"*

B. *Data Quality*
    The Community Assessment should include a mixture of objective data based on
    generally-accepted indicators as well as descriptive data gathered through an unbiased
    process that includes a variety of community stakeholders. Specifically, the three sectors
    represented on SCDCR's CSBG Advisory Council - the public sector, private sector and
    consumer sector – should all have tangible input into the assessment.

C. *Documentation*
    The Community Assessment should document the sources of all data and (in an
    appendix) provide all necessary explanations regarding the data (how it is collected,
    limitations of its accuracy/applicability, etc)

D. *Transparent timelines and content*
   The Community Assessment and its Annual Updates should have clear timelines and clear guidance regarding content. Because of the large amounts of data available, it is important to be strategic in identifying only the key data that bear on the mission of SCDCR and that provide the necessary guidance to the organization to plan its activities.

II. Data Elements in the Community Assessment

A. *Overview*
   Recognizing that a thorough community assessment can benefit from multiple sources of data, SCDCR's Community Assessment takes the approach that both qualitative and quantitative data are valuable and that these data should be based on well-documented, transparent methods of collection. Accordingly, the following section details the methods by which these data are to be collected.

B. *Consumer-sector feedback*

   1. Methodology: A public survey will be administered to all customers at a time that is programmatically-appropriate (see Appendix 1, Inter-Agency Customer survey). Additionally, the survey can be shared with other members of the community to gain additional input from individuals who may be less familiar with SCDCR or its services. The survey must include demographic questions, including family size and household income. These latter two data elements will be used to classify responses (Customer version) so that responses from families at or below federal poverty guidelines can be analyzed as a group and compared with responses from families above the federal poverty guidelines.

   2. Content & purpose: Consumer-sector feedback from the Customer Community Needs Assessment (see Appendix 2, Customer Community Needs Assessment survey) will include the following questions:
      a) Is our community better, worse or the same than 1 year ago?
      b) What do you think it would take to substantially reduce poverty in our community?
      c) What do you think are our community's most valuable resources?
      d) What are some positive things happening in our community?
      e) What are some challenges facing our community?
      f) What services are missing in our community that you think need to be added?
      g) What do you know about the Sangamon County Department of Community Resources (SCDCR)?

C. *Community Stakeholder feedback*

   1. Methodology: Community stakeholders are broken into three groups: partners, board/council members and community leaders. Partners are institutions with which SCDCR has a partnership relationship relative to service delivery or community engagement initiatives. Board members are all county board members, oversight committee members of the county board and the CSBG Advisory Committee. (Survey attached as Appendix 3.) Community leaders are individuals in the community with a high-level knowledge of issues

relative to particular subject areas (such as crime, education, politics, the faith community, health, etc). Because a specific individual or institution could belong to more than one of these groups, it is critical to ensure that no duplication occurs. (Survey attached as Appendix 4.)

D. Staff feedback

1. Methodology: All SCDCR staff members will be surveyed annually at the August Strategic Planning event.

2. Content & purpose: This survey tool can be found in Appendix 5. It includes questions about:

    a) *SCDCR's Mission, Vision and Values*: These questions gauge the degree to which staff members identify with the agency's mission, vision and values, to ensure that these foundation principles do not become obscured to staff at any level.

    b) *Teamwork at SCDCR*: The questions examine the degree to which staff members feel a shared identity across their department and across the agency. It should be used to determine whether the organization needs to invest resources in better-integrating staff from different departments to ensure the organization can present a consistent set of services to the community.

    c) *Communication at SCDCR*: These questions should be used to diagnose any potential concerns about the transmission of information within the organization. Responses could potentially be used to support management initiatives around openness, professional conduct or other related topics.

    d) *SCDCR in the Community*: These questions, in combination with feedback received from external stakeholders, can help the CSBG Advisory Council and management prioritize strategic initiatives related to the building of partnerships and the perceived responsiveness of the agency to community needs.

    e) *My Work at SCDCR*: These questions should be used to track staff satisfaction with their work environment and to determine if any strategic initiatives need to address concerns around staffing or the circumstances under which staff work.

    f) *The most important thing for SCDCR to focus on in the coming year*: This question is designed to permit staff to identify a single area (from the above areas – or others) that they would like to be the agency's primary focus. This provides management with a sense of how strongly the staff feels about these issues relative to each other.

    g) *Additional questions that ask more specifically about community issues related to the Community Assessment*: These questions should mirror the questions asked of the consumer sector and of other community stakeholders. Responses should be compared to identify areas of agreement and disagreement and also to ensure a wide range of responses can be collected which represent the full diversity of the community.

E. Oversight Committee/CSBG Advisory Council feedback

1. Methodology: Feedback will be gathered from members by holding a day-long Strategic Plan update for the purpose of soliciting feedback for the Community Assessment. In the event members cannot attend, Oversight Committee and Advisory Council members

should be asked to complete the "Board/Council" survey described above. In the case of SCDCR's Oversight Committee and CSBG Advisory Council, members should be made aware that they will be asked to review the completed Community Assessment as part of the agency's planning process, thus their input at each step will be critical.

a) An assessment of the community (the SWOT-style questions that will be asked of community stakeholders in the Strategic Planning session)
→ This assessment should be compared to feedback from other stakeholders to identify areas of commonality and difference. Areas of common agreement should be given priority however, it is also important to determine why some stakeholders differ.

b) A annual self-assessment by the CSBG Advisory Council and its committees (if applicable) – what is working well, what could be improved
→ This self-assessment should provide the strategic planning group with ideas that might form the basis of a strategic initiative designed to improve the functionality of the group. An independent facilitator will lead a separate, in-depth conversation on the same subject.

c) Recommendations as to how Oversight Committee and CSBG Advisory Council members can be more involved in helping the agency achieve its mission
→ These recommendations should follow from the discussion above.

F. Quantitative Data

1. <u>Methodology</u>: Quantitative data will be collected. Additionally, there is a future protocol for including new data or serendipitous data (for example, a unique report that might not be repeated in the future or an article that contains data that might not be captured routinely).

2. <u>Content & purpose</u>: The content for this section will be developed in cooperation with the programs and departments of the organization. Specifically, the Agency will need to know from each operating unit the following:
What is the population for which you need data (city only, county, region, state, federal? By race, gender, age? By poverty status? Etc.)

G. Internal Data/Reports

1. <u>Methodology</u>: As appropriate, the agency will include relevant internally-generated data/reports in the Community Assessment/Update such as the annual I.S. agency report. These might also include reports provided to the agency from external reviewers, such as funders, oversight agencies or other similar bodies. These documents will be referenced if they address matters internal to SCDCR's functioning or in the Community Needs and Resource Assessment if they provide information relevant to the community-at-large. Examples of data/reports would include the HHS Organizational Performance Standards and ROMA 2.0 Goals and National Performance Indicators.

2. Content & purpose: Data/reports can vary from year to year as not all of them are produced on a regular basis. Such reports are not limited to, and may include:
- a) Customer satisfaction survey data (Appendix 6)
- b) Results from external monitorings, if relevant.
- c) Outcomes report data
- d) Departmental reports regarding staff turnover, inventory, finances, etc, if relevant.

III.   Assessment Components and Timelines

Components of Full Assessments and Updates

SCDCR is currently operating on a planning cycle where FY2014 will be the year in which a full Community Assessment is conducted and which will form the basis of a new multi-year Strategic Plan for 2012-2016. With reference to the above components, an Assessment and Assessment Update schedule would follow the following structures:

Year 1: Full Assessment 2014	Includes: a) Customer feedback b) Community feedback c) Staff feedback d) Oversight Committee/Advisory Council feedback e) Complete set of quantitative data f) All other relevant data (internal data/reports, etc)
Year 2: Update 2015	Includes: a) Data (from any source) that addresses an issues or need not previously discussed or that has newly emerged b) Follow-up areas from the Year 1 Full Assessment: data or concerns that had been identified as a negative trend or "threat" that requires updated information (these will be flagged as such in the Assessment) c) Any news stories or reports that appeared in the intervening year that are relevant to SCDCR's Assessment and merit inclusion. d) Community feedback – only SCDCR's partners e) Staff feedback
Year 3: Update 2016	Includes: a) Data (from any source) that addresses an issues or need not previously discussed or that has newly emerged b) Follow-up areas from the Year 2 Update or the Full Assessment: data or concerns that had been identified as a negative trend or "threat" that requires updated information (these will be flagged as such in the Assessment and Year 2 Update) c) Any news stories or reports that appeared in the intervening year that are relevant to SCDCR's Assessment and merit

	inclusion.
	d) Survey of SCDCR's partners
	e) Community feedback – only SCDCR's partners
	f) Staff feedback

B. Timelines for completion

Although it is impossible to synchronize all agency activities to correspond to an idealized planning calendar, a reasonable calendar would follow this rough outline in order to take account of the needs of the Community Services Block Grant (CSBG):

	SCDCR Community Assessment
January	Distribute timelines for upcoming fiscal year Assessment activities
February	Orient program staff to current year Assessment activities.
March	Finalize all surveys: staff, consumer sector, community stakeholder; schedule Board, Policy Council focus groups
June	Staff survey completed; distribute consumer sector and community stakeholder surveys
August	Gather quantitative data; collect outstanding surveys and tabulate
October	Complete a draft Community Assessment document
	Management/staff review of Community Assessment
	Board review and approval of Community Assessment
	Presentation of key findings in Community Assessment at October CSBG Advisory Meeting
March	Review previous-year Assessment process with staff, solicit feedback for improvements
April	Finalize list of data elements for upcoming year Community Assessment/Update

Planning activities in the above table represent activities consistent with past practice.

V. COMMUNITY PROFILE

Population change in our service area since the 2000 U.S. Census has been small – 4.51% overall, from 188,951 to 197,474. The state of Illinois experienced an even smaller percentage of growth at 3.26%.

Population by gender shows that the female population comprised 52.29% of Sangamon County while the male population represented 47.71%.

According to the American Community Survey 5-year averages, white population comprised 84.19% of the report area, black population represented 12.09%, and other races combined were 1.84%. Persons identifying themselves as mixed race made up 1.88% of the population.

The Economic Profile: Poverty, Wages and Unemployment

U.S. Census figures released in September, 2013, showed that record-high numbers of Americans are living in poverty. The latest data reveal:

One out of seven people in the USA are living in poverty.
--- In 2012, the poverty rate (the percentage of all people in the United States who were poor) also remained at high levels: 15% for all Americans and 21.8% for children under 18.

Almost one out of 16 people in the USA are living in *deep* poverty.
--- People with income 50% below the poverty line are commonly referred to as living in *deep* poverty; census figures show that, in 2012, 6.6 of our population, or 20.4 million people, were living in deep poverty.

Current State of Child Poverty:

According to the Census Bureau data, between 2007 and 2012, just 17 of the nation's more than 3,100 counties saw poverty decline in a statistically significant way among children ages 5-17. Poverty for that age group rose in 964 counties from 2007 to 2012.

Determining the exact number of children living in poverty can depend on what Census calculation you go by. More than 16 million children, or roughly one in five, were living in poverty in 2011, according to the U.S. Census Bureau's *official poverty measure*, higher than any other age group.

The Census Bureau's official figures fail to paint a complete picture, though. The formula the government uses to calculate poverty was designed in the 1960's and does not account for expenses that are necessary to even hold a job such as transportation costs and child care. The formula does not account for government programs such as food stamps or the Earned Income Tax Credit. When the Census Bureau uses its supplemental rate formula, the number of children found to be living in poverty falls to 13.4 million.

The nation's poorest kids primarily live in households headed by a single female. Nearly half of all children with a single mother – 47.6 percent – live in poverty. Indeed, the children of single mothers experience poverty at a rate that is more than four times higher than kids in married-couple families.

The longer a child lives in poverty, the tougher it can be for them to climb out later in life. According to an analysis by Columbia University's National Center for Children in Poverty, 45 percent of people who spent at least half of their childhood in poverty were poor at age 35. Among those who spent less than half of their childhood in poverty, just 8 percent were poor at age 35.

A full report of the National Community Action Partnership (NCAP) 2012 Community Needs Assessment for Sangamon County is attached as an appendix of this document. Below are relevant excerpts from the publication.

In Sangamon County, children in poverty in 2000 were 6,646 or 14.3 percent while in 2012 this figure was 9,726 or 21.5 percent, <u>an increase of 7.2%.</u> The national increase was less at 6.4 percent and the Illinois increase was 6 percent.

Students participating in the free and reduced lunch program in 2013 was 54 percent according to the Heartland Alliance, while 10.87 percent of county households received SNAP. Food insecurity data showed 12.4 percent with a child food insecurity rate of 18.3 percent.

In Sangamon County, the poverty rate is 14 percent, near to the state of Illinois rate of 14.7 percent. The U.S. poverty rate was significantly higher at 21 percent.   However, the poverty rate for persons in Sangamon County ages 0-17 was 21.5 percent.

The change in poverty rate in Sangamon County from 2000-2012 was 9.5 in 2000 increasing to 14 percent, an increase of 4.5 percent, compared to the national increase of 4.6. The number and percentage of households in poverty are estimated in 2012 that there are 10,160 or 12.3 percent but less than the national average of 14.9 percent.

<u>Households in poverty</u> were 5,222 out of 51,738 households or 10.1 percent. <u>By family type, female householders made up 3,336 (6.4%)</u> of those with male householders making up 697 (1.3%) and married couples at 1,189 (2.3%).

The rate of Sangamon County seniors in poverty is 6.5% or 1,715 of a total of 26,476 seniors in the county. Nationally, the rate is 9.4 percent and state-wide is 8.6 percent.

<u>The Point in Time</u> homeless survey data on January 24, 2014 (Appendix 18) shown in the charts attached from the HUD Heartland Continuum of Care as an appendix includes that in Sangamon County 96 households were in emergency shelter, 60 in transitional shelter and 14 were unsheltered for a total of 170. However, because this data is a snapshot performed on a winter day, the total number of people struggling with homelessness may be significantly higher. Springfield School District 186 estimates over 600 homeless children and the Regional Office of Education estimates an additional 200.

<u>Labor force and unemployment data</u> for Sangamon County is provided on Table 18 of the *NCAP 2012 Community Needs Assessment for Sangamon County.* Overall, the report area experienced an average of 6.5 percent unemployment rate in July 2014.   To arrive at this percentage, with a total labor force of 107,469, 100,468 are employed and 7,001 are unemployed. The change in unemployment from July, 2013 to July, 2014 fell from 8,674 to 7,001 persons or a rate change of -1.64 percent. Other unemployment data is provided on tables 19-24 of the same report.
A reduction in unemployment, according to the IDES News Release of July 24, 2014, (Appendix 19) shows Springfield at 6.1 percent unemployment rate, a decrease from 7.9 percent in June of 2013.

According to James Glassman, a former senior economist at the Federal Reserve Board in Washington, D.C., millions of part-time and young workers have been left out of an otherwise remarkable recovery following the worst recession in decades. He stated that the national unemployment rate of 6.1 percent in August would be closer to 9 percent if 4 million part-time workers, and 2.5 million to 3 million 23-28 year olds unable to find work out of college were added. Technology has also left millions of workers without the skills to compete. (Appendix 22)

The level of educational attainment in 2012 was that 8.17 percent had no high school diploma, 28.6 percent had high school only and 23 percent had some college. The balance of 40.3 had attained from associate to professional degrees.

Persons lacking basic prose literacy skills was 7 percent in our county with the state percent at 13 and the national percentage at 22.

The Heartland Alliance Report for Sangamon County (Appendix 17) shows that the high school graduation rate for low-income students for the 2012-2013 academic years was 59.5 percent, down 2.4 percent from the previous year, while the Illinois rate was 72.8 percent.

Regarding assets, in the same report, the percentage of consumers with credit scores below 620 in June of 2012 was 20.9 percent with an Illinois value of 22.5 percent.

Demographics considered in the planning process of programs offered in Sangamon County include the need for continued, strong support of families with children, ages 0-17, with emphasis on households headed by a single female. The need for the continuation of GED assistance and financial literacy for adults continues to be evident to help families move forward. There is also an urgent need to fill critical vacancies in our local workforce with opportunities for education and training. Last, an expanded weekend student food backpack and senior nutrition monthly food box program would help our community continue to meet the lack of nutrition and reduce food insecurity and hunger caused by food stamp cuts.

VI. COMMUNITY NEEDS ASSESSMENT

Since 1985 SCDCR has been addressing the needs of Sangamon County. To help identify needs in Sangamon County, the agency conducts numerous surveys; the Comprehensive Community Needs Assessment done every three years in 2014 (Appendix 2), two types of inter-agency customer surveys, (individual client needs surveys and customer service surveys (Appendices 1 and 6) done on an on-going basis, and annual surveys to the Board, Community Partners and Staff (Appendices 3 and 4). The Comprehensive Community Needs Assessment (CNA) implemented in June, 2014 was made available to the community on the agency website, agency Facebook page, emailed to community organizations through a press release. Fifteen hundred copies were delivered directly to partner agencies. The public was invited to take the abbreviated, non-customer version of the survey online (Appendix 7).

The number of 2014 C.N.A. customer (*people with low-incomes)* paper surveys returned was *229 or 15.2%* of the 1,500 paper surveys disseminated to 11 of 72 agencies who agreed to disseminate them to their customers. A list of organizations is attached as Appendix 8. The number of survey responses from people using the online survey version who do not use social services or by using the agency Facebook page link was a total of 138, twenty-seven submitted by staff from other community organizations. The total of inter-agency needs assessment survey results received between September, 2013 and August, 2014 was 5,960. All 2014 surveys were used to gather data for program planning purposes.

Each time we do or review a survey, we ask respondents questions that are shorthand of their needs in 7 different domains and 3 other relevant areas. (see below) Incentivizing the process by offering registration for a multiple gift card drawing has increased the number of survey responses.

1. Jobs
2. School
3. Housing
4. Food
5. Transportation
6. Health
7. Money
- Crime
- Poverty and Solutions
- Familiarity of SCDCR
- Gift card drawing

2014 Community Needs Assessment Results
The official report of the Community Needs Assessment is attached in the full report as Appendix 24 and at the end of this document on pp 45-69.
A summary report of the Community Needs Assessment results is attached as Appendix 9 (customer version) as well as in the Community Action Partnership Community Needs Assessment results as Appendix 10. Additionally, the more abbreviated, 2014 inter-agency customer survey results align very closely to the 2014 Community Needs Assessment results also attached as Appendix 11. The non-customer version of the Community Needs Assessment results are attached as Appendix 12.

Client Customer Service Survey Results Summary
(The full data report attached as Appendix 13 5,920 total client responses between September, 2013 – August 31, 2014.)

	Excellent	Very Good	Good
1. Respectful treatment when making appointment	84.80%	11.20%	3.90%
2. Appointment wait time	83.50%	11.80%	4.50%
3. If service Received, level of satisfaction	89.00%	8.90%	2.00%
4. If service not received, obtained additional info.	84.20%	8.98%	6.74%
5. Overall rating of agency and services	87.10%	12 80%	0%

6. Overall rating of Customer Service	89.40%	10.59%	0%
7. Based on Customer Service, will recommend to others	93.10%	6.80%	0%

In July, Annual surveys sent to board members, community partners and staff yielded feedback including: (complete survey results attached)

2014 Board/Council Survey Results: (Attached as Appendix 14)

Overall, feedback consisted of the idea that the agency is achieving the goals of needed programs, especially assistance to school children through summer food boxes, school uniforms, community gardens and pediatric dental anesthesia assistance. Other programs cited as making positive differences in the lives of others are educational scholarships, C.N.A. training, utility assistance and weatherization services to reduce households' utility bills.
Other responses included:
- Positive things happening in our community and included items such as the community gardens, city road repair and expanding farmer's markets.
- Challenges facing our community included: economic development, funds for repairs, more job opportunities needed and too many vacant office buildings
- How to address challenges included, job creation, more police on the streets and tougher sentences.
- How to reduce poverty included more jobs, more shelters for homeless persons, job training.
- Most board members had heard of all agency programs. Pediatric dental anesthesia and school uniforms were the lowest and others were from 100% to 75%.
- All members had at one time referred clients to the office for services.
- SCDCR performance ranked in points:
  Excellent: 66.6%
  Above Average: 33.3%
  Average: 0
  Very Poor: 0
  Don't know: 0
- How satisfied members were with the agencies affiliation ranged from Very Satisfied – 66.6% and Satisfied – 33.3%.
- Suggestions to improve SCDCR consisted of continuing to work hard on existing programs and to keep up the good work.
- Programs where SCDCR has made a positive difference include, WX, LIHEAP, Gardens, Community Outreach.
- Additional community initiatives felt SCDCR should participate in included none at this time.
- Other comments included the satisfaction of working with the programs and that the public has no idea how difficult it is to work with our households in crisis.
- Best ways to engage others in the community about SCDCR activities were to add more people to the mailing list and email lists.

Community Partner/Leader Survey Results: (Attached as Appendix 15 & 16)

1. Q. In your opinion, is the community better, worse or the same than 1 year ago?
    A. Better – 5, Worse – 2, Same – 6

2. Q. Positive things happening in the community?

    A. The Faith Coalition, agency collaborations, growing theatre scene, new Urban League programs, acceptance of people with developmental disabilities, city street repair, more family activities.

3. Q. Challenges facing our community?

    A. The cost of living, unemployment, salary cuts, increase in violence and crime, homelessness, lack of low-skill jobs, housing for single adults with mental health issues, unfair employment practices, continued low pay, high unemployment, sidewalks in need of repair, dental assistance for all Medicaid recipients, lack of adequate mental health care.

4. Q. What can our community do to address the challenges mentioned?

    A. Work more closely with each other, schools holding parents accountable for their children, host forums to create awareness through educational seminars, attract a more complex range of industries to the area, make or needs know to elected officials, contribute to homeless housing, more entry level positions and make people work for the services given.

5. Q. What will it take to reduce poverty in our community?

    A. Jobs, employment opportunities, more opportunities for skill training, training programs, schools, job training, companies willing to give jobs to those less educated, comprehensive approach to a person's well-being, additional jobs with benefits, a better educational system, increasing awareness of the people who have money, educating our community members, affordable, adequate housing, work incentive programs.

6. Q. What SCDCR programs have you heard of?

    A. The Small Business Loan, Sewer Rebate and Pediatric Dental Anesthesia were the least heard of with the other programs recognized at least 60 % by respondents.

7. Q. How has SCDCR performed in the following areas: Publicity, leadership, collaborations, quality of services, and visibility in the community?

    A. Excellent – 22,   Above Average – 33,   Average - 20

8. Q. Community initiatives SCDCR's presence has made a positive difference?

A. Rural Transportation, partnerships with major organizations, C.N.A. program, food box program, GED, medication assistance, financial literacy workshops, community garden, excellent financial and educational support to after-school programs.

9. Q. Additional initiatives SCDCR should participate in for community impact?

   A. More exposure in the schools and faith-based centers, stronger link with the COMPASS program, track case management enrolled clients' progress to determine increase in self-sufficiency.

10. Q. How satisfied are you with your partnership/affiliation with SCDCR?
    A. Points = 38 Very Satisfied
                25 Satisfied
                11 Neither satisfied or dissatisfied
                 0 Dissatisfied
                 0 Very dissatisfied

11. Q. Suggestions to improve partnership/affiliation between you and SCDCR?

    A. more opportunities for joint events, keep communicating, continued dialogue about gaps in services and ways to partner to fill the gaps, one of best relationships I have with an agency, more direct involvement.

12. Q. Additional comments SCDCR should know about?

   A. SCDCR works very hard to identify duplication in services by engaging other community organizations, implementing their customer and Community Needs Assessments, strategic planning and posting the Annual Community Action plan on the website.

Staff Survey Results:

The results of the staff survey showed the majority of staff members felt they have a good understanding of the agency's mission, have a good understanding of the values with respect to how we treat our customers and each other, see a spirit of teamwork in their program, see a spirit of teamwork across the agency, see us effectively collaborating with others in the community, have been praised for doing a good job in the past month, promotes the sharing of constructive criticism, talk about the agency's successes with friends and neighbors, believes the agency provides quality services, believes the agency is considered a leader in advocating for low-income families, satisfied with the work they do, have the tools they need to do the job. Comments ranged from valuing the work of assisting household with low-incomes, sending program emails to all staff since it affects us all, improve communication across all departments; strengths included promoting changes to break the cycle of poverty, etc.

Landlord Survey Results: (Appendix 23)
    1. Is the client still renting from you? Yes – 52.1% No – 47.99%
    2. If no, how long before they moved out? Between 30 days and 4 months.

3. If yes to first question, have there been any more problems with rent being paid on time?
   No – 57.7% Yes – 42.3%
4. Has renter gone to other agencies that you are aware of? No – 68.6% Yes – 31.4%
5. As a landlord, do you feel has this assistance helped your renter?
   Yes – 80.4% No – 19.6%
6. Additional comments (see attached) Of 21 comments, 11 were positive and 10 were not.

In 2015, the agency will contact the landlord to agree on the payment process and establish an agreement between the landlord and the agency. Landlord must report to the agency if client does or does not pay their rent as agreed in the next year. Landlord will not get paid in the future if the client does not fulfill the agency requirement for receiving assistance

Based on the 2013 Community Needs Assessment, agency programs offered last year in 2014 to increase family stability included:

- Family and senior food assistance in the form of nutritious food boxes and fresh fruits and vegetables from the local Farmer's Market.
- dental, rent and school uniform clothing assistance
- Head Start pediatric dental anesthesia for bottle mouth

Programs offered in 2014 to increase family self-sufficiency included:
- financial literacy workshops,
- scholarship assistance for training/education in high-growth employment sectors
- *increased customization of C.N.A. training courses to better ensure participant success by integrating a two-week "Academy" was based around life skills and teamwork.*

All 2014 programs will again be offered and some will be enhanced. See below.

Agency programs to be added in 2015 to increase family stability include the additions of:
- intensive and crisis case management including referral and follow up (pilot program).
- Medical co-pay assistance.
- Weekend food assistance to homeless students enrolled in the Compass After School Program.
- year-round senior (shut-ins) food box program in coordination with case managers of Senior Services of Central Illinois.
- monthly oral health workshops required prior to calling for dental appointments
- dental hygiene kits given to customers who receive dental appointments and receive a dental voucher.
- Quarterly oral health presentations by Public Health for parents of Early Head Start students 0-3.
- Employee Supports program for working families to assist with car repair, car payment, rent, childcare co-pay, license plate sticker, uniform required by job

Major change in approach to CSBG services for 2015:

Because numerous customers return every year for services, programs in 2015 will be written to better assist all customers to improve or gain self-sufficiency or stability. Providing services to those in most need due to circumstances out of their control and those who wish to participate in case management to achieve self-sufficiency will be the agency priority in 2015 and beyond.

Staff will offer eligible customers opportunities in the form of agency services and community partner referrals for them to use when a service is provided. Customers who do not follow through with referrals and obtain tools to progress toward self-sufficiency will be ineligible for services until they can verify progress. All services provided will be incentivized with opportunities for self-improvement through short term training, job-search workshops, financial literacy workshops, volunteer opportunities and mentoring.

Programs to be added in 2015 to increase family self-sufficiency or stabilize families will include:

- All callers for rent appointments must have first attended the 3-hour financial literacy workshop for each year they call and are eligible. The next time they call and are eligible, they must show evidence of further progress toward self-sufficiency.

- In addition, Emergency Rental Assistance will be defined as households who face eviction due to extenuating circumstances out of their control within the 90-days prior to appointment. Examples are fires, floods, tornados. Families with children will be the priority for both emergency and non-emergency rent programs.

- Non-Emergency Rental Assistance will be defined as households who need rent if their circumstances have changed due that are out of their control (guardians of child whose parents are incarcerated, divorce, death of a spouse, job loss, bills from illness.)

- Parents of children who are on disability and are not working will be required first to submit documentation of emergency/non-emergency need before assistance is considered. If parent is able to work, case manager will first refer parent to job search, education, organizations who need volunteers, financial literacy workshops, etc. programs to complete. If parent calls again and receives appointment, he/she must show evidence of a certificate(s) or other progress toward self-sufficiency to receive any rent. Otherwise, he/she will be ineligible for CSBG services until progress is verified by documentation. Progress is determined by case manager or coordinator.

- Employment Supports is a new program that provides support to working families who encounter situations out of their control which can or is causing a domino effect where crisis is the result. Providing one-time assistance per household for rent, car payment, car repair, license plate sticker, uniform required by the job, or one child care co-pay is necessary to be able to retain self-sufficiency. Assistance can be up to

$500.00 for employed parents (at least 25 hours per week), to better assure they can retain stability or self-sufficiency.

- a bundled services approach case management program with referrals and follow up (pilot program).

- an incentivized 12-hour Money Smart Financial Literacy module.

- Emphasis on credit repair in weekly 3-hour Financial Literacy workshops

- high school summer school financial assistance.

- increased assistance and incentives for scholarship and C.N.A. recipients.

In addition, to address prevention of dental disease,
- an oral health workshop will be required for anyone interested in calling for a dental
- appointment. At the time of the appointment, a dental hygiene kit will be given
- to the family with enough tooth brushes for each family member to create a healthy family outcome.

VII. SUMMARY OF THE COMMUNITY ACTION PLAN (CAP)

With the assistance of funding provided by the Community Services Block Grand, SCDCR provides the community with access to services and service gaps from results of the Community Needs Assessment, Strategic Planning, Inter-agency customer surveys, community leader, partner and board member survey data, census data and poverty data.   Examples of programs created in response to the surveys include educational scholarships, GED test funding, funding for Certified Nurses Training, financial literacy workshops, rental, dental and prescription medications assistance. CSBG funding is also used as gap funding for business loans when other options are not available. In addition, when critical emergencies arise in the community, other agencies often call our agency for assistance to address situations such as house fires and medical and dental needs in order to advert homelessness, illness, and suffering. The partnership with the SUL Head Start program for a pediatric dental anesthesia program for children, ages 3 to 5 years is such an example. In this case, twenty children were suffering from baby bottle tooth decay. The partnership resulted in paid relief for these children who had suffer daily from extreme dental pain. Now free of pain, the children can learn and enjoy classes and the parents can now move forward, undistracted.

SCDCR also offers programs that assist clients with energy assistance: The Low Income Home Energy Assistance Program (LIHEAP), the Percent of Income Payment Plan (PIPP) and the Illinois Home Weatherization Assistance Program (IHWAP). LIHEAP is designed to assist households in paying for winter energy service. The months of September and October are reserved for appointments for senior citizens, disabled individuals, disconnected households and households with children under age 6. All other families with low incomes are served in November through May. For the 2014 program year, LIHEAP funds are level to 2013

In addition to LIHEAP, the LIHEAP/ Percent of Income Payment Plan (PIPP) program is offered as an alternative LIHEAP program. (In Sangamon County, only Ameren participates in PIPP, while CWLP does not.) The PIPP option is advantageous for households that would benefit from knowing the cost of their monthly utility bills in order to help avoid disconnection. The PIPP program is also a program that results, under successful circumstances, in positive behavior changes: program participants pay their utility bills each month on time. Collateral impacts include reduced stress and use of a household budget. At the time of each 2014 intake appointment, client's will be given the option of either the LIHEAP or PIPP benefit, whichever is more beneficial to the client as determined by system-generated estimates for both programs. The PIPP program amount will be determined by the utility and is based on the amount of the level payment figured by Ameren for a 12 month period using the client's monthly income. PIPP clients are required to pay 6% of their income amount and the agency (SCDCR) will pay the balance of the bill up to $150 each month, not to exceed $1,800 in one year. Any amount in excess of $150 per month will be the client's responsibility. Once certified for PIPP, if a client fails to pay the monthly charge of 6% of income, the household is removed from the PIPP program. The household also becomes ineligible to apply for LIHEAP for 1 year. Income guidelines for PIPP are the same as LIHEAP or 150% of the federal poverty level.

Weatherization or IHWAP provides energy conservation services (such as attic and wall insulation, storm windows, caulking, glazing, weather stripping and furnace repair etc.), to income eligible clients based on income for all members in the household for the preceding twelve months. Furnace tune-ups, retrofits and repairs are included with dollar limits for all work done. This dollar amount is reached by performing a computerized energy audit to determine services that can be applied within the spending limit. The number of homes weatherized in 2014 will be approximately 100. The waiting list for service can be up to three years.

On June 1, 2011 a Low-Income Sewer Rebate Program (LISAP) began for customers of the Springfield Metro Sanitary District. For the 2014 program, residents are eligible for a higher benefit of $71.60 credited to their sewer accounts if they submit an application, their utility bill (containing a sewer charge) and are determined to be at the 150% or less of the federal poverty level like LIHEAP. For program year 2014, 1,800 benefits are available.

The CSBG Advisory Board is responsible for overseeing services and helping to design programs that address the needs of the community. The fifteen-member board is diverse and offers a variety of perspectives at each quarterly board meeting and through feedback from monthly updates sent by email. The tripartite board consists of five elected officials, five representatives of the poor and five representatives of major groups and interests in the community. During meetings, the director reports on the number of clients served and expenditures for the CSBG programs as well as other agency programs and activities during the quarter. Monthly report updates are emailed to the Council to help them keep up with agency activity and future approval items. Committee discussion takes place around activities for that quarter, ways to streamline services, evaluation of agency progress toward meeting the Organizational Performance Standards and the ways in which programming will change due to the updated ROMA Goals and NPI's. The departmental budget is also discussed each quarter. As a result, the board is able to determine if the CSBG work programs are best serving the needs of clients. In addition, SCDCR receives monthly oversight from the Community Resources Committee, which consists of seven

members of the County Board. Based on monthly reports, oversight committee members ensure funds are being utilized appropriately.

On August 8, 2014, members of both of the CSBG Advisory Committee and County Oversight Committees and agency staff, participated in the processes of updating the third year of the 5-year strategic plan. The facilitator was the Illinois Association of Community Action Agencies (IACAA) Vice President of Professional Development and a certified ROMA trainer who prepared the agenda and facilitated the process toward, setting priorities, gauging program outcomes using the ROMA Dashboard, developing strategies and identifying and developing resources. The process was engaging and revealed valuable information used to formulate programs and activities for the 2015 program year. Each year, until 2017, the plan will continue to be reviewed for progress and relevance to community needs.

One of the most significant outcomes of ROMA 2.0 and corresponding National Performance Indicators (NPI's) was around implementing programs and bundling services that better move families toward stability and self-sufficiency and also how to measure those results. In 2014, in-person and web-based listening sessions, case studies of bundled services and learning communities have help move CA agencies closer to implementation of ROMA 2.0 in effect in 2015.

The Community Action Plan serves as the primary planning tool for CSBG programs. Feedback and results from the 2014 Community Needs Assessment, the inter-agency Client Needs Assessment, the Annual Needs Assessment sent to community partners, board and staff, strategic planning updates, important partnerships with other social service partners are all included in the CAP to guide types of agency programs offered to meet needs in the community. The agency currently possesses written agreements with partner agencies to provide services to common households. Current Memorandums of Understanding in place include those with the Springfield Urban League, Lincoln Land Community College, the Springfield Community Federation, genhKids and Urban League Headstart, and the Springfield Housing Authority Family Self Sufficiency program. A 2014 grant from the PNC Foundation enabled the agency to help fund a large community garden/nutrition education/fresh food program for Brandon Court families.

Less formal linkage agreements with Public Health, District #186, the Parent Help Line, the Regional Office of Education, Catholic Charities, Salvation Army, Springfield Housing Authority, Springfield Center for Independent Living, 4 different Banking institutions are important and necessary to strengthen working relationships around customer referrals. Through Continuum of Care meetings, survey feedback from the recipients of agency benefits, community partners, boards and agency staff, the agency has been able to effectively address community needs.

VIII. SERVICE DELIVERY SYSTEM

The service delivery system for Sangamon County social services is through individual organization administrations, collaborative/partnership efforts and meetings of the Continuum of Care.

SCDCR is one of the main providers of human services in Sangamon County. Energy programs (LIHEAP and Weatherization are provided on a first come-first serve basis by telephone to set an appointment). Walk-in appointments are held weekly at the Salvation Army. Since the agency moved to the new location, it is now accessible by bus and in the medically underserved area. Customers are pleased with improved access although the need for services is greater than the supply of benefits.

Until community agencies convene around reduced funding and how to address inter-agency referrals and determine how to address families moving from agency to agency for assistance, the access landscape in our area will not change. The current delivery system is disconnected and significantly less effective due to the lack of common tracking software.

Local gaps in services, include transportation access and a rural transportation system. As a result, family members, neighbors, helpers or case managers assist those in need of transportation to doctor appointments, shopping, etc. Unfortunately, the SMTD bus service does not yet reach the west part of the city where may jobsites are located. Workers transport their bicycles on the bus and ride the rest of the way to their worksites.

Outreach to community groups, high rises and senior service agencies remains constant by the agency director and energy staff remains.

For dental and medication outreach, agency personnel attend homeless health clinics at Kumler church to provide better homeless customer access. Agency pharmacy and dental vendors are also closein proximity to the homeless population near low-income neighborhoods.

CSBG appointments *are taken by call in* on a first-come-first served basis with the exception of referrals from community partners like the Springfield Housing Authority Family Self Sufficiency program with whom we work as partners to move families toward self-sufficiency. The agency also works closely with school district parent educators and school social workers to identify students who's parents are struggling with, eviction notices and/or keeping children home from school due to lack of school uniforms. Agency personnel visit schools to meet parents for appointments for services when transportation is a challenge for them.

The customized agency C.N.A. program implemented at LLCC, has filled a gap in training and education for low-income single parents. Even before the 8-week C.N.A. module begins, a two-week "Academy" focusing on professionalism, teamwork and financial literacy is held to assist students with job retention. Subsequently, a pre-C.N.A. module consisting of concentration in math and reading prepares students for success in the C.N.A. module and the final exam. Of 22 students in the first two years who passed their state board exams, 22 became employed and each was working at the same C.N.A. job after at least 90 days. The combination of customized course work and case management provide by the SCDCR sets up students for success.

A robust scholarship program is also offered by SCDCR via a CSBG Scholarship Committee made up of diverse members including retired teachers, county board members, CSBG Advisory Council members and college or graduate students. If an applicant does not hold a "B" average,

to be eligible for a scholarship award, he/she must hold a "C" average and be enrolled in training/education in Illinois leading to a local high-growth job sector. Training that leads to employment fosters self-sufficiency for our customers.

Prescription drug and dental services are provided year-round and offered to the public on a first come-first served call-in basis every two weeks. For 2015, SCDCR has enlisted the services of Sangamon County Public Health to provide oral health education to parents of Early Head Start and Head Start Children at Head Start campuses. Pediatric dental anesthesia services are rendered for Head Start students ages 3-5 and made available on site at the Springfield Urban League and scheduled independently through a pediatric oral surgeon and the Head Start nurse.

Advocacy by SCDCR with households who are disenfranchised county residents is done in partnership with the Faith Coalition for the Common Good. The agency director is active as member of the Education Task Force, a co-chair of the Anti-Bully committee as well a member of the District #186 Truancy Task Force.

To assist with homeless prevention, weekly financial literacy workshops are offered by PNC, UCB, Woodforest Bank, BOS and the Illinois Comptroller Office in the agency conference room. All callers for rent assistance are required to attend an agency financial literacy workshop and submit a certificate of completion prior to being eligible to call for an appointment for rental assistance, as well as verification specified need within the 90-days prior to appointment.

To address hunger and food insecurity, in partnership with District #186, Compass and Senior Services of Central Illinois to identify children and seniors in greatest need of food. Children are more vulnerable on weekends (no free breakfasts and lunches). Shut-in seniors in poverty are vulnerable year-round and rely on the assistance of Senior Services case managers. Monthly, food boxes will be prepared by Humphrey's market and picked up by seniors' case managers to supplement food stamps which may be depleted by the first two weeks of the month. SCDCR partnered with genHkids to determine the contents of the food boxes to assure nutritious food is being disseminated. The agency will also provide nutritious, convenient food for the Compass student weekend backpacks of homeless or food insecure children.

IX. LINKAGES

To provide services to targeted populations, collaboration is necessary method to reach our customers. Linkages, partnerships and collaborations are effective methods to ensure individuals in need receive the services the agency provides.
As examples, the agency:
- Partners with the SUL to offer a pediatric dental anesthesia program to serve to 3-5 year olds enrolled in the Urban League Head Start program. Some children suffer from baby bottle tooth decay and require anesthesia not covered by Medicaid. Pediatric oral surgeons who accept the medical card have been identified by Central Counties Health Center dentists for the agency. Children must be transported to either Bloomington or Decatur. The partnership is an outgrowth of the Urban League Health Advisory Committee meetings, attended by the agency director.

- Provides funding, case manages participants and administers the C.N.A. program taught by LLCC.
- Works closely with the Springfield Housing Authority through an MOU to provide services to families enrolled and making progress toward self-sufficiency and is a member of the SHA Program Coordinating Committee (PCC).
- Holds an established collaboration agreement with Springfield Public Schools Birth-Five program.
- Will resume Education Advocacy in partnership with the Faith Coalition Education Committee. The committee hosts events to assist parents of school children, i.e. truancy, expulsion, bullying.
- Will continue to implement programs provided through funding from the PNC Foundation to increase agency capacity and focus on family development programming at Feitshans Grade School through the 21st Century after-school program.
- Offers GED test assistance in partnership with LLCC and Lawrence Education Center (LEC). LEC also scheduled an age-21+ class for adults to avoid work conflicts, etc. as a request of our agency.
- Attends SIU Homeless Healthcare Clinics at Kumler United Methodist Church to offer dental and prescription drug vouchers to homeless individuals.
- Through the agency director, continue as a board member of Illinois Ventures for Community Action which creates wealth distribution to member Community Action Agencies to enhance their economic development capacity.
- Partners with five financial institutions to offer weekly financial literacy workshops. Partners include PNC Bank, UCB Bank, Woodforest Bank, Bank of Springfield and the Illinois Comptroller Office.
- Visits outreach sites to ensure individuals in most need are receiving services, (i.e. LIHEAP, medications, dental anesthesia, school uniforms, summer school) so as not to "fall through the cracks".
- Serves as a worksite (host agency) for BASUAH Summer Interns and older workers from the Lincoln Land Area Agency on Aging and Capital Township Workfare.
- Enjoys a Community Partnership Agreement with the Boys and Girls Club of Central Illinois.
- Works closely with District #186 parent educator coordinator and Compass to identify families of children in need of weekend food backpacks and/or school uniforms those in need of homeless prevention assistance. SCDCR director is a member of the Serving the Same Families Leadership Team.
- Works closely with the newest member of the CSBG Advisory Council who is also the President of the Ministerial Alliance in Springfield.
- Is an active member of Springfield Urban Agriculture planning.
- Collaborates with training institutions like MTI and ITT to identify low-income students with student loans to encourage application to the CSBG Scholarship program.
- Received Community Needs Assessments from 11 partner agencies in the effort to identify gaps in services to address.
- Director is a new board member of the Illinois Community Action Development Corporation and continued board member of the Illinois Association.
- Director is an executive board member of the Springfield Community Federation located in Brandon Court.

In addition to community collaborations, Sangamon County and other social service agencies trade written linkage agreements to assist households with low-incomes. Agencies include Fifth Street Renaissance, The Parent Place, Youth Service Bureau, etc. In addition to written linkages, monthly or quarterly attendance at meetings of the Providers' Council, Continuum of Care, and advisory councils of Springfield Housing Authority PCC, Head Start Health Advisory Council and boys and Girls Club Advisory Council keep the agency linked and informed of activities within the community. In addition to surveys, strategic planning and outreach, the agency is better able to identify service gaps in the system and as a result, clients benefit from agency networking.

Community Resources also participates in many service provider fairs through out the county. Staff participates in outreach at informational fairs at Madison Park Place, Brandon Court Springfield public school open houses, hospitals, senior citizen conferences, job fairs, street festivals etc.

Until 2013, Community Resources performed LIHEAP outreach to 23 locations to provide on-site intakes. Due to reduced funding for 2013, LIHEAP outreach site personnel work with their constituents by assisting with applications and mailing them to the agency for processing. As always, staff is available to take applications over the phone or mail applications to applicants for LIHEAP and the Sewer Rebate Program to eligible residents who are elderly and/or have no transportation. Outreach continues to be performed by staff at SCIL once and Near North twice. Normally, approximately 40 applications are taken by staff at the two locations.

For services not offered by SCDCR, paper referrals are given to clients to the many food pantries and clothing providers in the county. A separate food pantry informational flyer was created by SCDCR staff for customers and other walk-in clients. (Area food pantries together share an efficient computer system to determine if clients are being served fairly and that residents are not abusing the system.) SCDCR LIHEAP staff cross refers customers to the agency GED, WIOA and school uniforms programs but equip all customers with an agency resource guide and department overview.

A significant change occurred on October 1, 2008, when Community Resources WIA Staff was relocated to the workNet located at 1300 South 9th Street. This change was done to centralize the LWA 20 staff from 5 counties into one location. Community Resources has continued the referral process to WIA for clients seeking job assistance. In 2015, the WIA Sangamon County Liaison will provide a consistent, direct connection to WIA services for SCDCR clients and follow up with the SCDCR case manager.

The Community Resources service delivery system is comprehensive and partners with numerous other local agencies to assist clients to ensures the best possible service to county residents in need.

X. COORDINATION OF SERVICES

1.5 CSBG Loan Program

CSBG works with Illinois Ventures in Community Action (IVCA), Lincoln Land Small Business Development Center and the Greater Springfield Chamber of Commerce to assure that applicants are aware of the CSBG Loan program and resources to assist applicants. The program is advertised in the Chamber of Commerce business paper published in the spring and fall.

1.6 Employment Through Education

Provide job placement/employment through education activities to up to 20 CSBG eligible individuals resulting in their employment and retention in un-subsidized employment through a Pre-C.N.A./C.N.A. program in partnership with LLCC. Agency will also fund limited student travel expenses. Two week "Academy" added in 2015 to evaluate student potential through attendance, group exercises and individual participation during classes.

1.6-5 General Job Skills/Resume Writing
(Although not a separate CSBG work program, the C.N.A. curriculum includes the above outcome for students who complete this program course work)
(Mod 1/Pre-C.N.A of C.N.A. Course) 10 weeks of employability skills, teamwork Aleks Math and reading comprehension are covered by LLCC staff for C.N.A. students.

1.7-1 Equipment/Uniform/Supplies for employment – Report as Annual Outcome
(Although not a separate CSBG work program, the C.N.A. curriculum includes the above outcome for students who complete the C.N.A. course)
C.N.A. students who pass the pre-C.N.A. module are provided with all C.N.A. equipment and uniforms including scrub tops and bottoms, shoes, watch, and gait belt.

1.7-2 Transportation to Employment Training
C.N.A. students are provided with a $7.50 stipend for each day of class attendance. Forms to verify attendance are required to be signed by instructors.

1.7-3 Licensing or certification for employment - Report as Annual Outcome
(Although not a separate CSBG work program, the C.N.A. curriculum includes the above outcome for students who complete take the State board test)
C.N.A. students are provided with fees required at the time of certification exam.

1.7-6 Employment Supports (New Program)
Providing one-time assistance per household for rent, car payment, car repair, license plate sticker, uniform required by the job, or a child care co-pay as necessary to retain employment. Assistance can be up to $500.00 for employed parents (at least 25 hours per week), to better assure they can retain stability/self sufficiency.

2.6-1 Summer School (New program)

Many students miss school due to illness or truancy may be in need of fees to attend summer school in order to graduate from high school. With the increased difficulty and cost of the GED,

finishing high school and earning a high school diploma reduces barriers later for students who do not graduate. In district fees are based on a reduced fee schedule for low-income students.

2.6-3 Adult Basic Education (ABE) GED Instruction or other instruction

Provide funding in the form of vouchers to students who have passed the GED on-line practice test to take the actual test at the ROE. The new 4-part test is computer-based, aligns with employment potential costs $30-$40 per modules (4) up to a total cost of $120. Students instructed by GED programs by LLCC or Lawrence Education Center (LEC) are eligible for vouchers.

2.7   Scholarship Program

Information about the CSBG scholarship program is sent to all college**s**, universit**ies**, high school deans, churches, libraries and newspapers in the Sangamon County area. Local service providers and staff are emailed the press releases in order to communicate dates, deadlines and eligibility information.
Again in 2015, applicants who hold a "B" average are eligible to apply and be enrolled in training/education of their choice. Applicants with at least a "C" average must enroll in coursework leading to employment in high growth job sectors. Community Resources will attempt to ensure all eligible low-income residents of the county have the opportunity to apply for CSBG scholarships if their chances of employment after graduation are likely.   If a client is determined ineligible for a CSBG scholarship, he/she is referred to the WIA program.

2.9-1 School Uniform Program

For the uniform vouchers, students must be referred by parent educator coordinator from District #186 or from administration in parochial schools or as part of a bundled service approach by the agency case manager. *No public call-in for uniform vouchers in 2015*.   Recipients of this and all services will be referred to a workshop or course to show improvement toward self-sufficiency by the next visit to agency for services. Items eligible to obtain with voucher include shoes, socks and underwear in addition to pants and shirts to address only hardest hit families who are working

3.1-2 Financial Literacy/Debt Counseling

All applicants who request appointments to receive rental assistance in 2015 will again be required to complete a financial education/debt reduction workshop offered weekly in the agency prior to becoming eligible to call for a rent appointment. Each workshop presenter will provide a dated a certification of course completion. For customers who work during the day and time of the workshops, on line coursework will also be made available to participants with a certificate of completion.

Participants who keep a 90-Day budget approved by their instructor are eligible for a $25 gift certificate.

All agency C.N.A. enrollees must complete the financial education class in order to receive transportation assistance.

SCDCR will partner with SUL Head Start to incentivize and hold financial literacy and debt reduction (incentives provided) classes at the agency and/or Head Start campuses.

3.1-3 Savings Plan/Account (New Program)

The addition of a 12-hour Money Smart Financial Workshop will be offered quarterly to CSBG eligible customers and C.N.A. students. Participants who complete the course will receive $100.00 to open a savings account with their banker instructor. If the participant adds to the account in the first 90 days, the agency will match the participants increase up to $50.00. Any one not eligible for a savings account will have the option of the agency sending $100.00 to either their utility or landlord.

4.3   Home Repair/Rehabilitation/(Weatherization)
Applicants call for appointments and are called in order of call in to attend appointments. Once all documents are in the Weatherworks system, an assessment is performed and construction services provided to homes of low-income applicants. This assistance assist in the reduction of high utility bills enable families to better afford food, clothing and other basic needs.

5.3   Emergency Energy Support/LIHEAP
Applicants call for appointments in priority order from September-November/May. The LIHEAP program is designed to assist low-income households pay for winter energy services. A one-time benefit is provided to eligible households to be used for energy bills. If the PIPP program is selected, the applicant pays 6% of their income each month, the arrearage is forgiven by the month payments are made and the agency pays up to $150 per month up to $1,800 per year. Community Resources served approximately 4500 households in program year 2014 with LIHEAP, furnace assistance and summer cooling.

5.2-3 Emergency Services

The **CSBG Rental Assistance program** provides emergency and non-emergency assistance to income-eligible clientele. Families with children under 18 years are the priority. For 2015, all parents including parents of children receiving disability will be required to submit documentation of need before assistance is rendered and attend a 3-hour agency Financial Literacy Workshop. Need is defined as verification of an event within the previous 90 days that occurred out of their control (i.e. death of a spouse, natural disaster, incarceration of parents of child, layoff, car accident medical bill, etc.)
If parent provides verification of need and is able to work, case manager will refer parent to job search, education, agency programs, and community workshops to complete. If parent returns in future and does not have verification of increase in self-sufficiency, he/she will be ineligible for any future CSBG services until provides documentation thereof. Coordination is done with other social service agencies to work with clients. Referrals for rental assistance are often received from self-sufficiency programs and homeless shelters as well as from homeless student liaisons.

Assistance will be only to families with children who have an eviction notices. This service helps households secure housing for their families and them and avoid eviction. All applicants must have completed a financial literacy class in the agency in 2014 and are eligible only every other year. To qualify in subsequent years, applicants must show verification of increase in self-sufficiency before considered for any CSBG assistance. Eligibility for rental assistance is every other year, regardless unless natural disaster out of their control.

5.4-1 Crisis Case Management (New Program)

SCDCR will pilot a crisis case management program on a case-by-case basis for working families who experience a situation out of their control which renders them without resources due to the event. (Crisis Rental Program)

6.3-2 Food Baskets

Families identified and referred by the Compass Program will be eligible to receive food for weekend backpacks to help maintain stability. Recipients of this service must establish eligibility with agency before receive service.

6.4-1 Senior Meals

Up to 13 seniors served by Senior Services of Central Illinois who are shut in will receive monthly food boxes to help them maintain stability. Farmers Market produce vouchers will also be available in warm months for pick and delivery with the food boxes. (see below)

6.7-4 Farmer's Market Coupons/Vouchers (New Program under CSBG)

Only Senior households that receive above described monthly food boxes will also be eligible for weekly, seasonal Farmer's Market $10.00 vouchers.

7.1-1 Information and Referral (NPI 6.5.E)

Over 300 CSBG customers were formally referred to other agencies during their appointments. Inter-Agency and Intra-Agency referral forms are used in the process.
Follow up on paper referrals given in case management program will be implemented in 2015.
In 2014, 3,600 referrals were made by SCDCR to other agencies by the receptionist for call who could not be assisted immediately by SCDCR.

A strong linkage system with other agencies exists in the Sangamon County area to disseminate updated versions of the agency resource guide at least three times a year. In October, 2013, the agency made available a Senior Resource Guide for senior customers and residents of Sangamon County with the intent of helping this population identify resources in the effort to continue to be self-sufficient in their own homes.

7.3 -1 Needs Assessment/Out Reach Projects

The agency 2014 Community Needs Assessment is described under IV. Assessment Protocol on pp. 9-15.

8.5-1 Case Management/Intensive Case Management (New program)

An FCD certified employee will work with households working toward self-sufficiency and meet regularly to track progress and offer services (bundled) to help them in the process. Families must show they are making progress to continue in the program or graduate from the program. The SHA FSS program will also be a component of this program.

9.10 Health

This program assists with emergency dental assistance **(9.2-1))** and prescription drug assistance **(9.2-2)** for individuals when Medicaid does not cover needed dental or prescription drugs. However, since most local dentists do not accept Medicaid cards, applicants are in need of assistance from SCDCR. The agency works closely with Complete Care Pharmacy and local dentists in the area. There is a good working relationship with many dentists in the county who assist with the CSBG emergency dental program. Catholic Charities is also an active provider through the St. Clair Health Clinic. In addition, local pharmacists have been careful to ensure sure that clients get the best prices for medication**s.**

The **Pediatric Dental Anesthesia program** provides assistance to children of families enrolled in Head Start who suffer from extreme dental pain due to lack of preventative care. Through referrals from the Head Start nurse, families receive a $300.00 voucher to cover expenses not covered by Medicare in order to address extensive pediatric dental work in one visit while the child sleeps so as not to cause trauma due to potential pain and duration of the appointment. Should the child also need funding for dental service, the family also receives a dental voucher to cover expenses not covered.

In 2015, Sangamon County Public Health will provide presentations for Early Head Start and Head Start parents of 0-5 year olds to help prevent baby bottle tooth decay.

In 2015, callers for adult dental assistance must first attend an oral health workshop offered monthly on Thursday before call-in day on the 2nd and 4th Fridays of each month. At the time of appointment, all customers will receive a dental hygiene kit and enough tooth brushes for all family members.
Dental vouchers must be used within 5 weeks of receipt. If not, customers must call in for a new appointment.

The Medication Assistance program (9.9-2) for co-pay assistance to individuals in need of medical care from physicians specializing in what is determined the applicants' medical care requires. Vouchers would be categorized as either basic (up to $20) or for specialist co-pays (up to $75) This program again be offered in 2015.

XI. Innovative Community Initiatives

Community Resources of Sangamon County continues to participate in many innovative community and neighborhood-based programs. At times, the agency is approached for funding support when other agencies wish to partner toward initiatives which must also be proven unmet needs in the community.

- Community Resources has been able to assist with some of these programs such as the School Uniform Program, Summer School Tuition and GED Test Assistance for all Sangamon County schools.
- As unemployment continues to rise the tailored C.N.A. program will again be offered in partnership with LLCC to income-eligible, unemployed and selected individuals. In 2015, the program will again assist at least 20 individuals with education and training costs, required uniforms, transportation assistance, employability skill instruction and test expenses for certification in the quest for employment to earn a living wage.
- In 2013, the agency began a partnership with the Springfield Urban League (SUL). Local and central Illinois oral surgeons were recruited to provide dental anesthesia to 3-5 year olds enrolled in Head Start in need of full-mouth dental services under anesthesia for baby teeth in decay.

In 2015, innovative changes will occur in existing programs and new programs will be offered to offer opportunities for low-income households to increase self-sufficiency to reduce barriers in their efforts toward attaining stability or self- sufficiency.

- Collaborations with local providers of services to vulnerable populations Springfield Urban League (Male Involvement program), Springfield Housing Authority (Family Self-Sufficiency program) and training institutions offering education in local high-growth job sectors (MTI, ITT and LLCC) will identify low-income students in need of financial assistance. The agency director will give outreach presentations at each of these institutions to better explain agency educational and other programs.

- Summer school tuition assistance for low-income students who need 1-2 courses to graduate to be more qualified to enter the workforce.

- A 12-hour Money Smart Financial Education module for C.N.A. students and quarterly workshops for the public with the potential incentive of opening their own savings account, 100.00 for the account and up to a $50.00 match if the individual saves up to $50+.

- Working directly with the Compass After-School program to provide food for backpacks homeless students.

- Partnering in self-sufficiency with the existing SHA FSS program to add capacity with services to SHA households making progress toward self-sufficiency.

- Co-pays for low-income individuals in need of general or specialist assistance.

- In 2015, callers for dental assistance must first attend an oral health workshop offered monthly on Thursday before call-in day on the 2nd and 4th Fridays of each month. At the time of appointment, all customers will receive a dental hygiene kit and enough tooth brushes for all family members.

- Follow up on paper referrals given to CSBG customers and updating the file copy with information.

- Customer evaluations from customers of food box and financial literacy programs.

XII. YOUTH

In addition to weekend food backpack assistance, GED, summer school tuition and school uniform assistance, rent assistance for families with school-aged children, WIOA youth programs operate under the provisions of Title I of the federal Workforce Investment Act of 1998 serving the at-risk youth population. Populations considered being the neediest youth include, but are not limited to: youth aging out of foster care, youth in the juvenile justice system, children of incarcerated parents, or other barriers that hinder youth from successfully completing their education or attaining employment.

The LLWA Youth Council, of which the SCDCR director is a member, has adopted the following vision for the delivery of youth services under the Workforce Investment Act.

Vision: Youth are an important part of the new workforce "supply pipeline" needed by businesses to fill job vacancies in the economy. WIA-funded youth programs will provide leadership by serving as a catalyst to connect these youth with quality secondary and postsecondary educational opportunities and high-growth and other employment opportunities.

Youth programs are designed to improve basic skills ensure attainment of a high school diploma or GED, placement in employment or post-secondary education, and attainment of a credential by implementing the following services to youth between the ages of 16-21:

- Tutoring/Study skills training
- Alternative School Services
- Occupational Skills Training
- Leadership Development/Adult Mentoring
- Guidance and Counseling
- Job Shadowing and Work Experience Opportunities
- Support and follow-up services

In the spring of 2014, an RFP was released and local providers were awarded contracts to provide meaningful work experiences for the participants. The providers included: **Lawrence Education Center (LEC) and First Institute.** Twenty youth will attend LEC and take part in programs offered. They will receive tutoring and study skills training, leadership development

opportunities, vocational skills training, follow up services, credential attainments, paid or unpaid work experiences and work readiness training. First Institute will serve 30 students with training for Medical Office Assistant work with 10 students attending 3 12-week modules.
Clients will be referred to the Illinois WorkNet Center for assistance
NO SIGNIFICANT CHANGES

XIII. OUTCOMES

This Community Action Plan is reflective of the needs of the low-income population, described services available, and identified gaps in services. Below is a list of problem statements for each work program and the outcome measures expected for each program. Outcome measures will be monitored on the agency dashboard, client and board survey responses, feedback from other agencies and follow-ups on client progress.

Problem statements, work programs and outcome measures are listed in the order of the CSBG work programs in the 2015 Grant.

Employment Supports

Problem Statement – The unemployment rates in Sangamon County as of July, 2014 is 6.1%. However, according to James Glassman, a former senior economist at the Federal Reserve Board in Washington, D.C., millions of part-time and young workers have been left out of an otherwise remarkable recovery following the worst recession in decades. He stated that the national unemployment rate of 6.1 percent in August would be closer to 9 percent if 4 million part-time workers, and 2.5 million to 3 million 23-28 year olds unable to find work out of college were added. Technology has also left millions of workers without the skills to compete. (Appendix 22)

Problem Statement - More families are seeking assistance due to underemployment of unemployment. Assistance with basic needs (food clothing and shelter) is sought by more families than anytime since the previous recession. Although in previous years, the revolving loan program worked well to create one job for every $20,000 borrowed, banks are loaning to significantly fewer loan applicants in previous years. Therefore, until 2012, Category D loan funds not loaned in 2010 and 2011 were forwarded to Illinois Ventures in Community Action (IVCA) and the funds subsequently loaned across the state outside of Sangamon County. However, with continued unemployment in Sangamon County, this year Category D funds the agency will request approval by DCEO to use in an alternative method to provide C.N.A. training to at least 20 individuals thus moving 20+ households toward self-sufficiency.

Work Program 1.5
Operating the Small Business Loan program which helps to create jobs for
CSBG eligible clients
Outcome Measure NPI 1.1.A
Unemployed and obtained a job

Problem Statement

Many low-income families rent or own housing that is not energy efficient resulting in utility bills are high enough to force families to choose between food and heating their homes.

Work Program 1.2

Home Repair/Rehabilitation/(Weatherization**)**

Outcome Measure NPI 1.2K

Emergency Car or Home Repair (structural, appliance, heating system)

Work Program 1.6

Job Placement/Employment through Education. (C.N.A Program)
Outcome Measure NPI 1.2.A (for all 1.6 and 1.7 Work Programs)
Obtained skills required for Employment

1.6-5 General Job Skills/Resume Writing

(Mod 1/Pre-C.N.A of C.N.A. Course) 10 weeks of employability skills, teamwork Aleks Math and reading comprehension are covered by LLCC staff for C.N.A. students.

1.7-1 Equipment/Uniform/Supplies for employment

C.N.A. students who pass the pre-C.N.A. module are provided with all C.N.A. equipment and uniforms including scrub tops and bottoms, shoes, watch, and gait belt.

1.7-2 Transportation to Employment Training

C.N.A. students are provided with a $7.50 stipend for each day of class attendance. Forms to verify attendance are required to be signed by instructors.

1.7-3 Licensing or certification for employment

C.N.A. students are provided with fees required at the time of certification exam.

Education

Problem Statement
Lack of education continues to be a problem for low-income people. Many people in poverty lack funds to continue their education and realize their potential of higher living wages. The scholarship program meets the goal of improving the conditions in which low-income people live by presenting them with the opportunity to continue their education in areas of high-growth job sectors. Recipients may re-apply for further scholarship assistance to attain diplomas for Associates or Bachelor degrees.

Work Program 2.7
SCCR administers the Scholarship program to assist low-income people to
provide opportunity for better paying jobs.
Outcome Measure NPI 1.2.M

Make progress toward the post-secondary degree or vocational training

Problem Statement
Many individuals are striving for their GED certificate to achieve eligibility to enter either vocational training or college. In 2014, in Illinois, the GED testing process will become more expensive, more difficult, and implemented only by computer. In order to assist individuals toward earning their GEDs the agency will again provide vouchers up to $120.00 for testing or a lower amount for re-testing in order to remove the barrier of the lack of available cash to use for the test. Lawrence Education Center has agreed to offer a night GED class for students 21 and older on Tuesdays and Wednesdays from 5:00 – 8:00 pm

Work Program 2.6
Adult Basic Education (ABE), <u>GED Instruction</u> and/or Other Instruction
Outcome Measure NPI 1.2.B
Completed ABE/GED and received certificate or diploma

Child and Family Development

Problem Statement
Households who have the desire to become self-sufficient and never have been, need guidance, services and referrals. Without knowledge of local resources available, contact people at local agencies and a realistic plan to work toward, a case manger makes this goal much more possible for these households. Emerging from poverty to stability requires basic services (medical, dental, emergency rent assistance and utility assistance) while self-sufficiency is attained through Housing, Employment, Education/Training and Asset Accumulation.
Work Program 8.3
Self-sufficiency Counseling
Outcome NPI 6.3
Physical development improved as a result of adequate nutrition (food boxes), youth improve health and physical development (dental, meds), increase academic, athletic or social skills for school success, parents learn and exhibit improved parenting skills, and improved family functioning skills.
Work Program 8.5-1
Family Development/Intervention for Family Stability
Outcome 6.3
Physical development improved as a result of adequate nutrition (food boxes), youth improve health and physical development (dental, meds), increase academic, athletic or social skills for school success, parents learn and exhibit improved parenting skills, and improved family functioning skills.

Problem Statement
Parents with low-incomes at times cannot afford to purchase school uniforms for their children. Children cannot attend school without a school uniform and will be truant.
Work Program 2.9-1
School Uniform Program
Outcome Measure 6.3B5

Child development improved

Problem Statement
Medicaid does not cover the $400-$600 hospital fee to address extensive dental work under anesthesia for 3-5 year old children experiencing "baby bottle mouth". Left untreated, the child's overall body health is compromised and dental pain causes crying and inability to concentrate as school.
Work Program 5.2-9
Pediatric Dental Anesthesia
Outcome measure
Outcome Measure 6.2-F
Medical Care

Problem Statement
Weekends are a difficult time for out-of-school children who may be food insecure without free breakfast and lunch. Food Stamps/SNAP benefits have been reduced significantly and many households deplete their food benefits half-way through the month. Good nutrition is imperative to foster child physical development and continued learning in the summer months.
Work program 6.3-2
Food Boxes
Outcome NPI 6.2A
Emergency Food

Problem Statement
Graduating from high school is one of the first steps in moving toward individual self-sufficiency. Not graduating from high school can be an automatic barrier to employment if the individual cannot pass the GED. In 2014, the GED test was significantly revised and became more difficult, more expensive and only computer-based. For low-income students who would require a course to graduate and offered in summer school, tuition assistance would provide significant benefit to them and their families.
Work program 2.6-1
Youth education/achievement
Outcome NPI 1.2.A

Employment Asset Enhancement and Utilization

Problem Statement
Households with low-incomes many times must choose between which basic needs to satisfy. The ability to manage money is important so as not to fall behind and risk a reduction in their credit.
Work Program 3.1-2 and 3.1-3
Financial literacy/Debt Counseling/Budgeting
Outcome Measure 1.3 E
Individuals opening a savings account
Outcome Measure 1.3 D/1.3B.1

Demonstrated ability to maintain a budget for 90 days and or opening a savings account after a 12-hours Money Smart Course and adding to the savings account

Emergency Assistance

Problem Statement
Many agency customers are described as "working poor". These individuals have a difficult time meeting their living expenses while working, due to circumstances out of their control. Periodically, emergency assistance may be needed for rent or re-locating a family after a fire, flood or tornado.

Work Program 5.2
Cash Assistance for Emergency Services
Community Resources provides rental assistance through the Emergency Services program.

Outcome Measures   NPI 6.2C, K, F
Have more resources to meet basic needs
Community Resources meets the CSBG goal of low-income people achieving their potential by strengthening family and other supportive systems, by measuring the number of people who stay in their homes. A survey was conducted again this year to determine how long a client, who has received help with rent, is able to maintain his place of residence.

Problem Statement
Due to the high price of utilities, many time, low-income families' utilities are in arrears and/or disconnected. Assistance is needed to enable families to catch up and/or be re-connected to heat their homes. Many of these family members include children who are also lacking food support. Utility assistance enables parents to purchase food for their families.

Work Program   5.3
Emergency Energy Support (LIHEAP)
Applicants call for appointments in priority order. The LIHEAP program is designed to assist low-income households pay for winter energy services. A one-time benefit is provided to eligible households to be used for energy bills. If the PIPP program is selected, the applicant pays 6% of their income each month, their arrearage is forgive and the agency pays up to $150 per month also. Community Resources served approximately 4000 households in program year 2012 with LIHEAP, furnace assistance, cooling and Ameren Hardship benefits.

Outcome NPI 6.2.B
Emergency fuel or utility payments funded by LIHEAP or other public and private funding sources

Case Management

Problem Statement

Often time families experience a life-changing event out of their control which causes a **crisis** situation rending them unstable or no longer self- sufficient. Examples include a house fire a house condemned, tornado or a catastrophic health event. When families have no resources and desire to work with a case manager to progress back to self-sufficiency, the agency will assist with bundled services and referrals as well as using the Missouri or Illinois Self-sufficiency scale.

Work Program 5.4-1
Crisis Intervention and Crisis Case Management
Outcome NPI 6.3.C.2
Case Management

Problem Statement
Often time families experience an event out of their control which causes a situation rending them **unstable.** Examples include death of a spouse, illness, providing guardianship for incarcerated parents, loss of a job due to lay off or other events not in their control. When families have few resources and desire to work with a case manager to progress back to self-sufficiency, the agency will assist with bundled services and referrals and use either the Missouri or Illinois Self-sufficiency scale.

Work Program 8.5
Intervention for family stabilization
Outcome NPI 8.5-1
Intensive Case Management

Problem Statement
Many elderly seniors are "shut in" and have experienced reductions in Food Stamps/SNAP. To help maintain stability through good health, adequate amounts of proper nutrition is important to continue to live independently.
Work program 6.4-1
Senior/Disabled Meals
Outcome NPI 6.4.F
Obtained Food Assistance

Problem Statement
Seniors benefit significantly from nutrition from fresh foods and similarly can neither afford them nor travel to buy them.
Work program 6.7-4
Farmer's Market Coupons/Vouchers
Outcome NPI 6.2.A and 6.2.F
Emergency food/medical care

Linkages-Outreach & Referral

Problem Statement

People with low-incomes are not always aware of services available or how to access them. Community Resources will address this problem through an informational resource guide referral forms and referrals when customers call the agency.

Work Program 7.1

Community Resources provides an extensive outreach and referral program by keeping staff informed of services available and by networking with other agencies at meetings each week. The agency has a formal MOU with SHA to accept referrals for families enrolled in the SHA FSS program and are making progress. The agency resource guide is kept current every quarter. Additionally, CSBG staff is mandated by DCEO to ask every client if child support is due and if so, if the family would like assistance in obtaining it. If so, a packet of information is offered and follow up done to determine if child support can and is being received. Internal referrals are done by all staff for individuals who are interested as reflected on their Needs Assessment Survey. A Senior Resource Guide is included in the Resource packet given to all senior customers.

Outcome Measure 6.5.E

Referred to/from other sources

Health

Problem Statement

Many low-income people on Medicaid are unable to afford over-the counter medications doctors prescribe for short-term illnesses. Many clients are also unable to afford dental assistance. The need will continue in 2015 as Medicaid does not yet cover dental care charges. Lack of medication and dental care are barriers which keep low-income from maintaining their self-sufficiency due to health problems and dental pain. Pediatric Anesthesia is not covered under Medicaid and therefore, children with baby-bottle tooth decay continue to suffer. Co-pay assistance has been re-added to this work program to assist those in need, especially specialist co-pay assistance.

Work Programs 9.2-1 (Dental Assistance), 9.2-2 (Prescription Drug Assistance) and 9.9-2 (Physician Co-Pay Assistance)

Community Resources provides low-income clients with prescription, dental, pediatric dental andesthesia and co-pay assistance so that they many continue to function in society and/or at their jobs and not miss wages.

Outcome Measures NPI 6.4.D (Dental) & 6.1.A (Prescription)

Children or adults whose health condition was improved due to access
to emergency health and dental care services.

The CSBG goal of the conditions in which low-income people's lives are improved is met when the people receive the prescription or dental assistance and are able to function at their jobs or other duties. **6.3.A Health Education (oral health)**

Report of 2014 SCDCR Community Needs Assessment

Methodology

The Sangamon County Community Needs Assessment is a survey examining the services that are urgently needed or potentially needed in the Sangamon County. The assessment has been conducted every three years. The survey includes questions about demographics, employments, education, health care, nutrition, transportation, household finances, housing, etc.

The data was collected from three groups of surveys- community needs assessment survey conducted by the agency's customers, community needs assessment survey conducted by the public/non-customers, and FY 2014 inter-agency survey conducted monthly by the agency's customers. Printed questionnaires of community needs assessment survey and letters requesting participation in this assessment were sent to collaborative organizations, and these organizations randomly selected individuals to complete the questionnaires. The community needs assessment survey was also conducted online by non-customers. The inter-agency needs assessment survey was conducted between September, 2013 and August 2014 (FY 2014) by the agency's customers. The survey has a 15.3% (229 out of 1500) response rate for the customers and represents 11 collaborative organizations.

Customer Demographics

The majority of the agency's customers who participated in the community needs assessment survey were female. Caucasians and African Americans made up the majority of the population. According to the individual client needs survey, among the valid results, 18.4% of the surveyed were male while 81.6% were female (Figure 1). In terms of races, black/African Americans represented the greatest population served by the agency, 50.8%; white/Caucasians, the next, 45.3%. The minor populations of the agency's customers were 2.1% of the bi-racial, 0.8% of American Indians, and 0.8% others (Figure 2). Most of the agency's customers were non-Latino or non-Hispanic, and only 2.6% were Latinos or Hispanics.

The agency served many female-held single families. Almost a half of the families the agency served were single-parent families and 91.5% of them were held by female single parents. More than 45% of the families the agency served had at least one child aged 0-17. Figure 3 shows the sources of family income of those receiving the agency's services. What deserves attention is that there were 15.6% families the agency served who had zero income. Besides, 13.4% families received SSI (disability) as their income source.

Figure 1

Customers by Gender

18.4%

■ Male: 43
■ Female: 191

81.6%
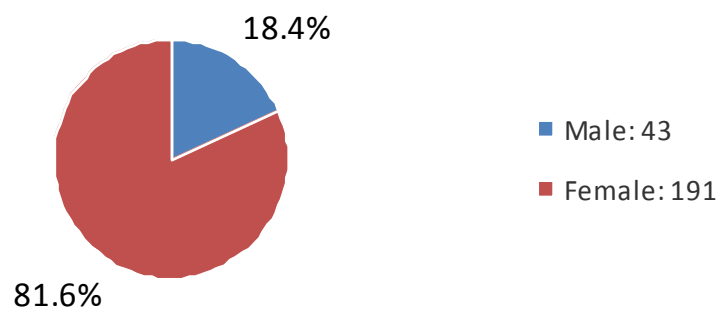
Figure 2

Customers by Race

White/Caucasian	Black/African American	American Indian	Bi-racial	Other
107	120	2	5	2

Figure 3

The Customer's Source of Family Income

Legend:
- TANF
- SSI(disability)
- Social Security
- Pension
- Employment
- Zero Income
- General Assistance
- Unemployment Benefit
- Other

Slices: 8.8%, 1.5%, 2.9%, 13.2%, 35.9%, 1.8%, 8.8%, 11.4%, 15.8%
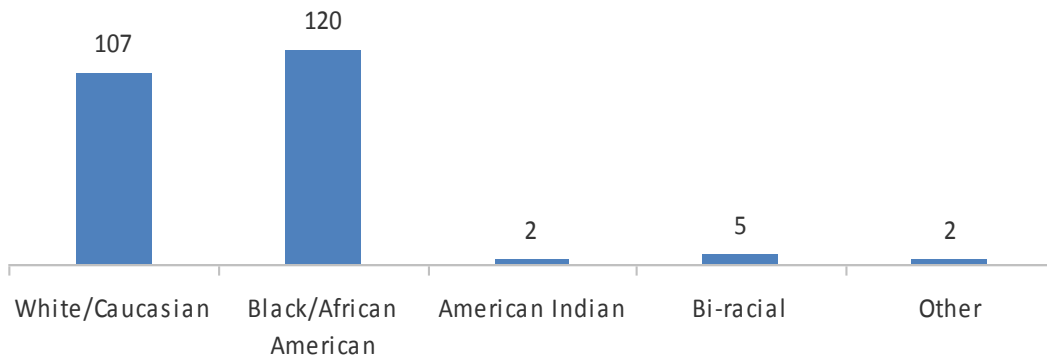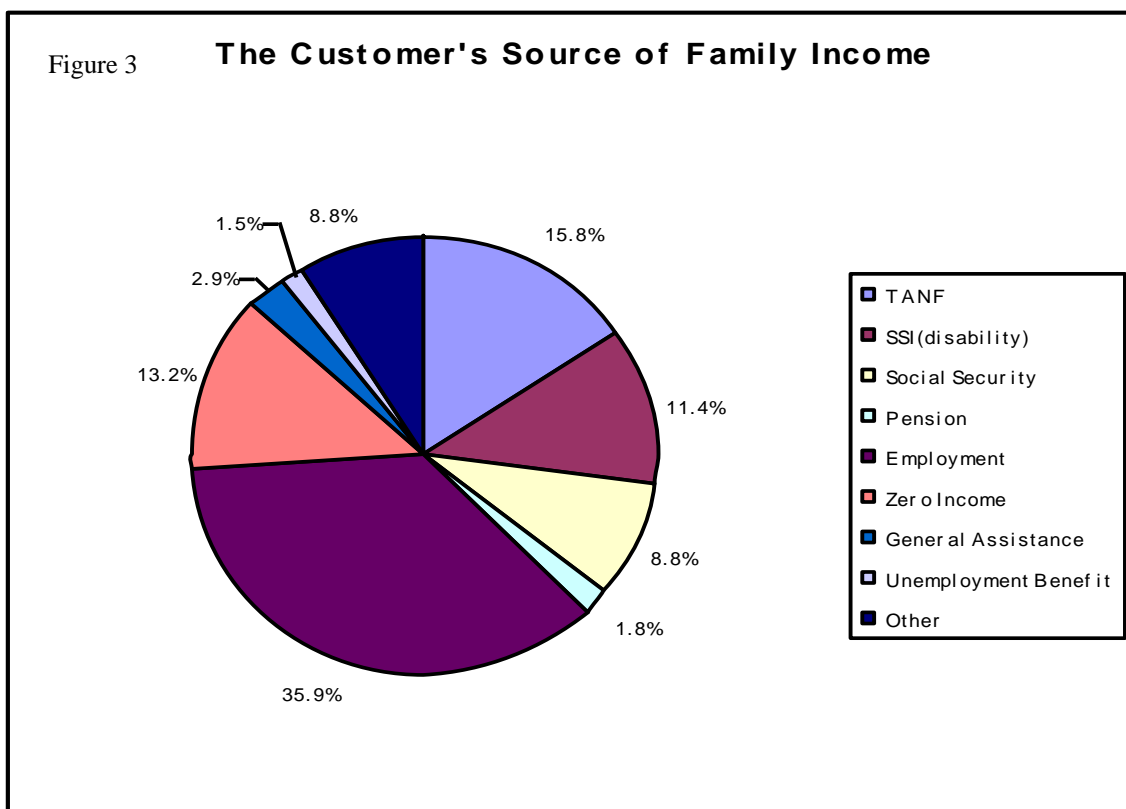
Employment

Job Status

Most of the agency's customers did not have a full-time job. Except 8.5% customers who were retired, only 30% customers were employed as full-time workers. 15.7% customers had part-time jobs, and 45.7% were unemployed. (Figure 4)

Only a minority of the agency's customers had benefits from employers. 79.1% of the full-time employed customers did not have benefits (Figure 5), and 91.4% of the part-time employed customers did not have benefits from employers. (Figure 6)

In addition, among those who were not employed, 73.5% were job searching while 26.5% were not. These 26.5% unemployed customers might not be able to work due to disability, emotional reasons, and other reasons. (Figure 7) Among the unemployed customers, 14.9% received SSI (disability) as their family income.

Figure 4

Job Status of Customers

- Full-time: 30.0%
- Part-time: 15.7%
- Unemployed: 45.7%
- Retired: 8.5%
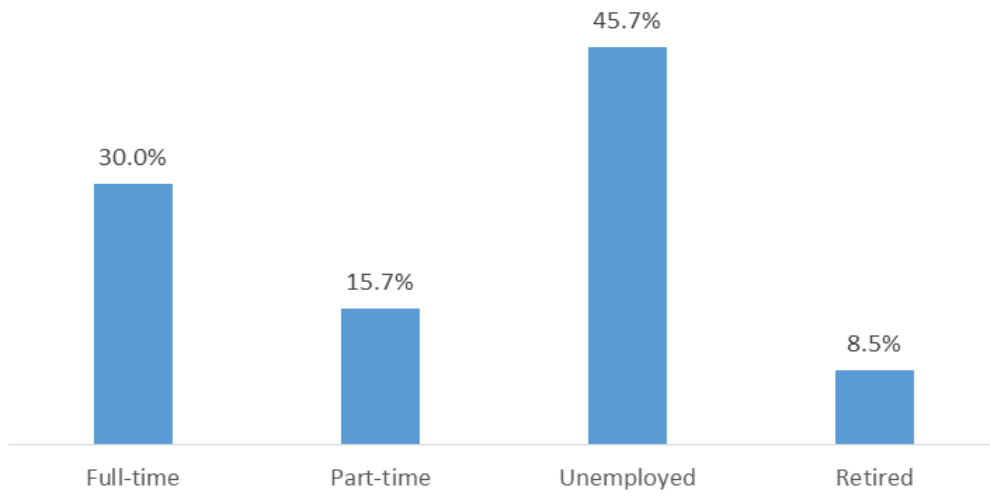
Figure 5

Full-time Employed Customers

- 20.9%
- 79.1%
- with no benefits
- with benefits
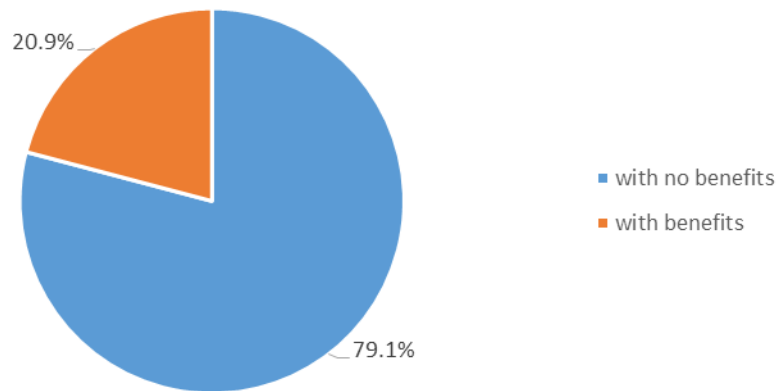
Figure 6

Part-time Employed Customers

8.6%

91.4%

- with no benefits
- with benefits
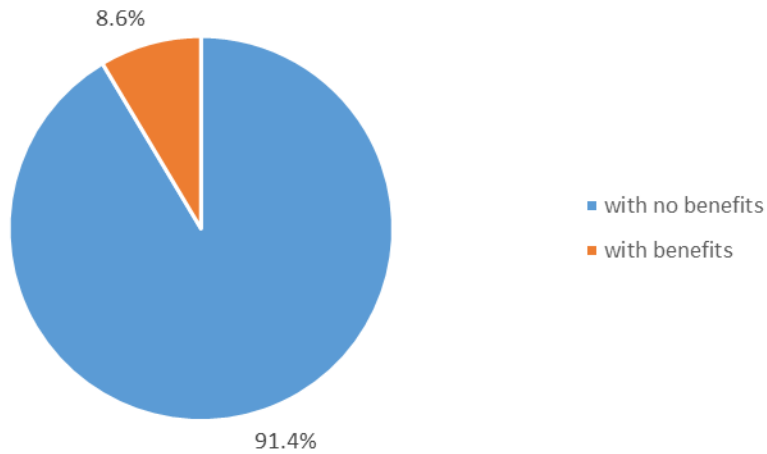
Figure 7

Unemployed Customers

26.5%

73.5%

- not searching jobs
- searching jobs
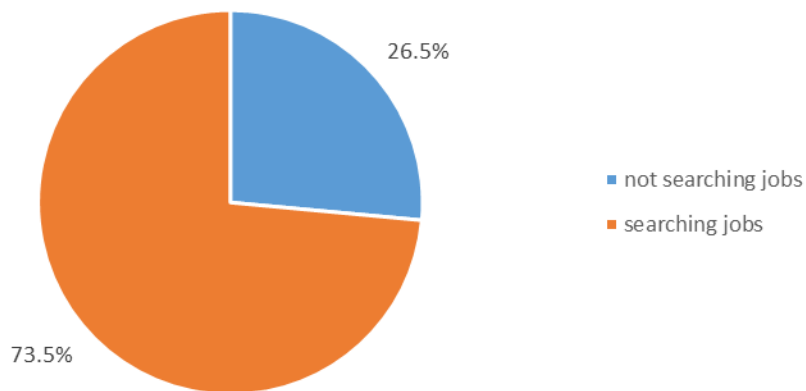
Job Strengths and Barriers

High school diploma or GED influences employment. Except education issues, health issues or disability, lack of transportation, lack of reliable child care prevented people from getting employed. Economic climate may also influence employment.

238 agency's customers were asked about their job strengths. 70.9% of the customers thought a good work history was their strength to get a job. Having transportation to work (64.1%), having education (60.5%), and having skills gained from other jobs (56.8%) were reported by a majority of customers. 39.5% of the customers argued it could be their job strength because they were trained or had certified skills. 22.3% thought having child care was their job strength. (Figure 8)

Although most customers thought their education was an advantage, lack of high school diploma or GED was the most common problem in terms of employment (20.6%). Emotional problems were reported as the second most common job barrier which constituted 18.4%. The third most common barriers were lack of transportation to work (17.7%), lack of good child care

(17.7%), and poor health or disability (17.7%). 31.9% of the customers had other problems. Some common comments include criminal history, difficulty to find a job or to be employed, and health issues. (Figure 9)

According to the on-going monthly survey, in FY 2014, permanent health issues or disability were reported most frequently, followed by lack of transportation to work, lack of high school diploma or GED, lack of reliable child care, and emotionally unable to work.

The result of the 138 of the public responses (Figure 10) indicated that lack of good paying jobs with benefits, lack of skills to get a job, lack of education to get a job, high cost of child care, and low payment of jobs were the top 5 employment problems. Issues about payment and benefits are more related to economic climate in the community.

Figure 8

Job Strengths of Customers and Their Families

Category	Percent
Good work history	70.9%
Have car or bus to get to work	64.1%
Have an education	60.5%
Have skills gained from other jobs	56.8%
Trained or have certified skills	39.5%
Have child care	22.3%
Other (tell us)	7.3%
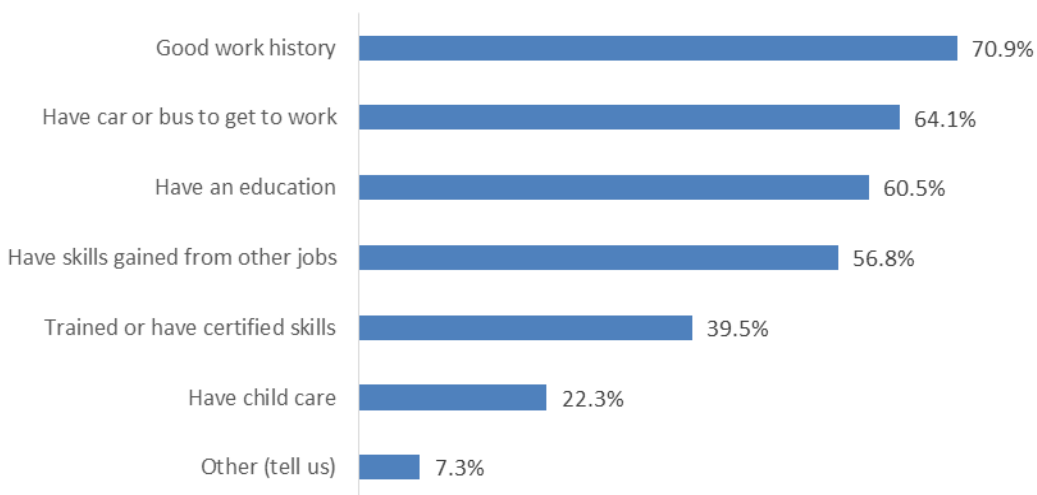
Figure 9   Job Problems of Customers and Their Families

(See above in paragraph)

Category	Percent
Other (tell us)	31.9%
high school diploma or GED	20.6%
Emotional problems	18.4%
Poor health/disabled	17.7%
No good child care	17.7%
No car or bus to get to work	17.7%
Disabled right now	15.6%
Pregnant	8.5%
No adult dependent care	2.1%
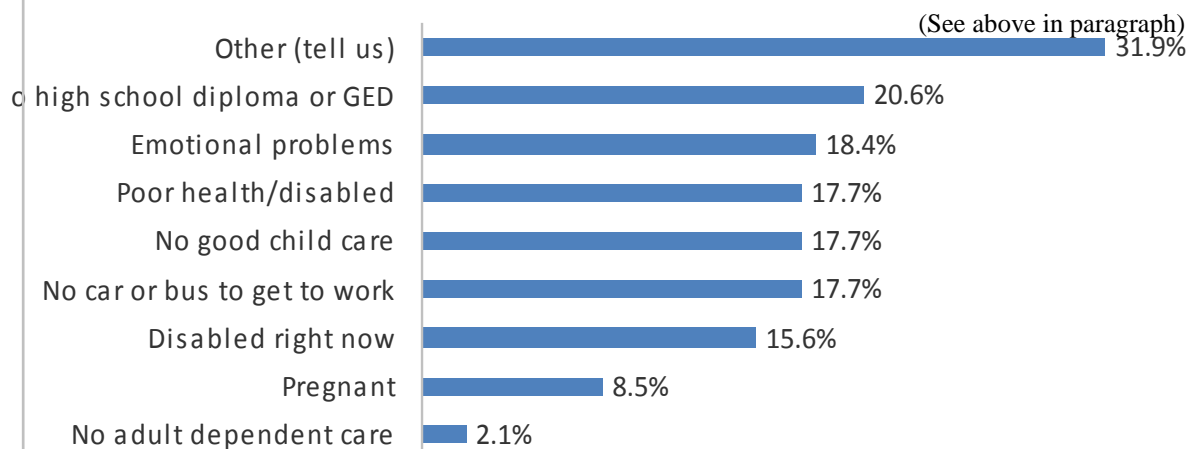
Figure 10

Job Problems in the Community

Job Problem	Percentage
Few good paying jobs with benefits	44.4%
No skills to get a job	43.0%
No education to get a job	40.7%
Child care costs too much	37.0%
Jobs are low paying	35.6%
Few jobs for people without skills	34.8%
No transportation	26.7%
People unable to find jobs in the area	23.7%
Employers leaving the area	18.5%
Costs of cars/ buses	12.6%
No computer skills	11.1%
No child care	8.9%
Jobs far from my home	5.2%
None of these apply	3.7%

Education

Low Education Attainment

2 in 3 customers did not have post-secondary education. 1 in 3 customers did not have high school diploma or GED.

The Community Needs Assessment reported that a majority of the agency's customers (67.5%) did not have post-secondary education and 32.3% among them did not have high school grad/GED. **The proportion of those with no post-secondary education (67.5%) is much higher than the proportion of Sangamon County which was 36.8% in 2012** (Appendix 10). 16.2% of the agency's customers had some post-secondary education, and only 23.5% had 2-4 year college graduate. That is to say, most of the agency's customers were those in lower education level. (Figure 11 & Figure 12)

Figure 11

Education Attainment of Customers

High school grad/GED and under: 67.5%
Some post secondary: 16.2%
2-4 year college graduate: 23.5%
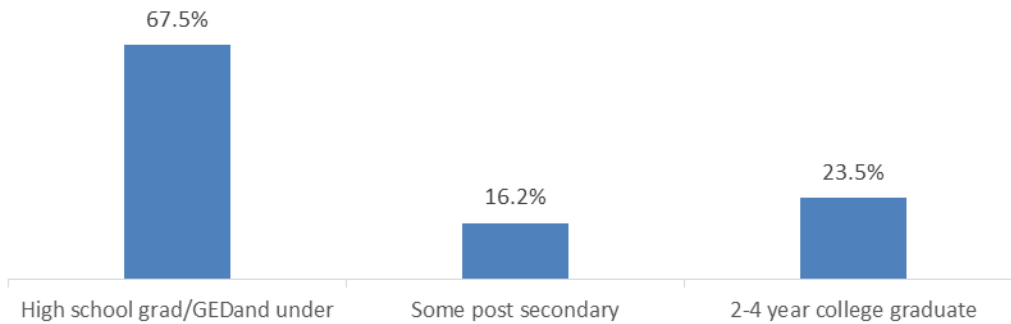
Figure 12

Education Attainment of the Customers with no Post-Secondary Education

4.4%
27.8%
65.8%

- 0-8 Grade
- 9-12 Grade
- High school Grad-GED
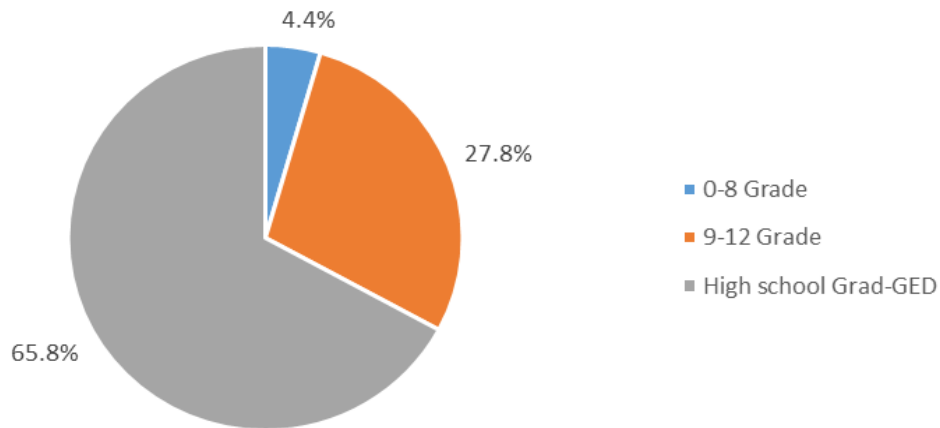
Training Needs
Earning a GED and an associate degree is the most needed.
The Inter-Agency Customer Needs Assessment Survey in FY 2014 reveals 4 top areas which people would like to improve in. For this question, the mean frequency of the 12 months in FY 2014 was considered as the indicator. Earning a 2 or 4 year degree was the most frequent option that people chose, followed by earning a GED, training in a specific area, and improving math skills. (Table 1) The needs that the agency is able to help solve are highlighted.

Table 1

Inter-Agency Customers Needs Assessment Survey- Customers' Training Needs (FY 2014)												
MONTH	SEPT	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	Mean
SATISFIED WITH EDUCATION	331	270	189	158	221	154	213	180	263	94	525	62	**222**

LIKE TO EARN A 2 OR 4 YEAR DEGREE	74	75	122	94	111	82	106	89	89	34	114	38	86
LIKE TO OBTAIN A GED	71	75	79	66	57	47	66	57	61	18	77	21	58
LIKE TRAINING IN A SPECIFIC AREA	42	54	47	49	56	37	51	45	51	15	82	27	46
LIKE TO IMPROVE MATH SKILLS	42	51	37	50	33	40	39	34	36	15	51	20	37
LIKE TO IMPROVE READING SKILLS	45	37	32	30	26	25	24	25	25	6	36	14	27
LIKE TO IMPROVE WRITING SKILLS	38	27	21	25	23	29	15	22	24	6	27	9	22
LIKE TO IMPROVE ENGLISH OR LANGUAGE SKILLS	22	23	18	25	14	19	12	15	15	3	24	9	17
NEED OTHER AREAS OF IMPROVEMENT	2	8	2	3	1	3	0	0	3	0	1	0	2
TOTAL	667	620	547	500	542	436	526	467	567	191	937	200	517

As the Community Needs Assessment indicates, 38.4% of the agency's customers felt satisfied with their education; however, a majority of the customers wanted to pursue more improvement in their education. (Figure 13) Compared with reading, writing skills, and English or language skills, more customers (17.5%) wanted to improve math skills. There were 19.4% customers showed their willingness in obtaining a GED, which means most of those customers with no GED wanted to obtain a GED. Besides, 28.2% customers wanted a two or four year college degree. That is to say, almost a half (43%) of those with GED wanted to pursue further education. Additionally, 19.9% customers expressed their interest in having training in an area of choice. 10.7% of the customers had other improvement needs, such as solutions to children's behavior issues, skills of job searching, further education, Spanish, etc. Most of the agency's customers presented their willingness in having improvement in their education.

Educational Improvement Needed by the Customers

Figure 13

Category	Percentage
Satisfied with education	38.3%
Want a two or four year college degree	28.2%
Want training in an area of choice	19.9%
Want to obtain a GED	19.4%
Want to improve math skills	17.5%
Need to improve (tell us)	10.7% (See above in paragraph)
Want to improve writing skills	9.7%
Want to improve reading	9.7%
Want to improve English or language skills	4.9%
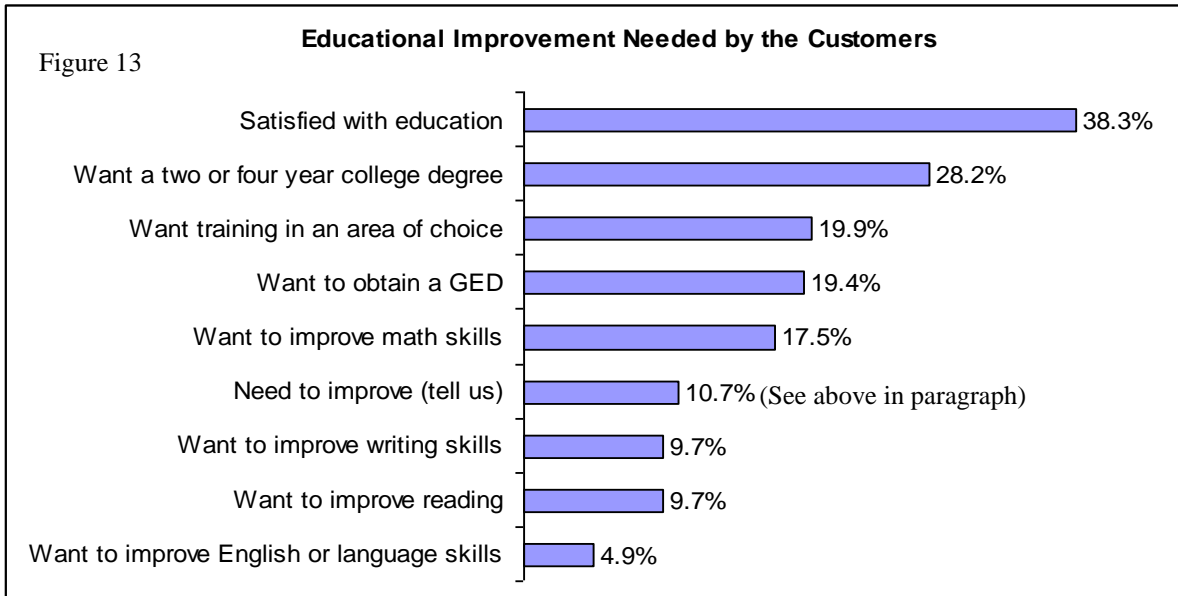
Strengths and Barriers Regarding Education
Greatest education barriers were lack of money for school and lack of high school diploma/ GED.
In terms of the strengths and barriers regarding education for the customers' families, based on the Community Needs Assessment, only 11.1% customers thought they have money for school, and 37% customers might not able to afford to education. Budget for education directly influences whether a person will attain education which he or she is satisfied with. However, unfortunately, cost of education is the greatest barrier among the agency's customers and their families. (Figure 14 & Figure 15) 17.6% of customers had other barriers, such as criminal history, children's behavior issues, conflict work schedule, pregnancy, etc.

Strengths Regarding Education of the Customers

Figure 14

Category	Percentage
Have car or can take bus	70.4%
Did or doing well in school	43.2%
Have job or learning goals	40.2%
Have child care	27.6%
Have money for school	11.1%
Other strengths (tell us)	5.5%
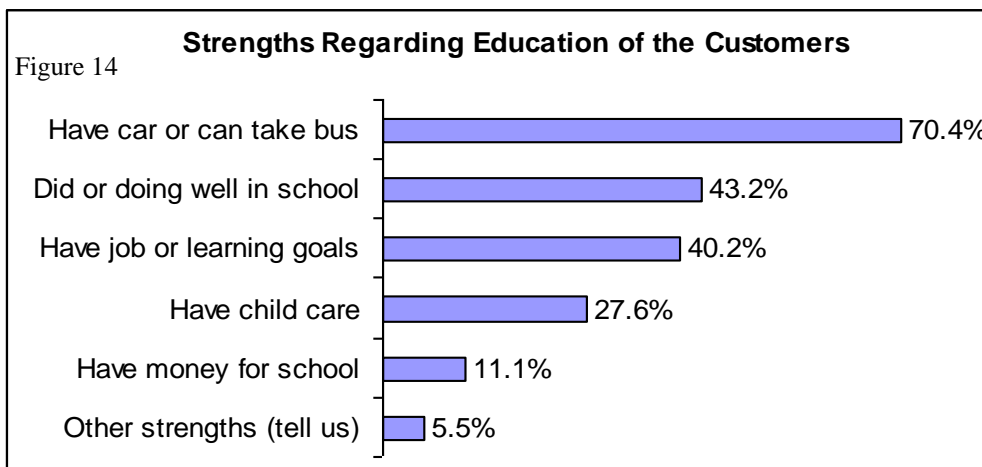
Figure 15

Barriers Regarding Education of the Customers

Barrier	Percentage
School too costly	37.3%
No high school deploma or GED	28.2%
No child care	19.0%
No transportation	19.0%
Other barriers (tell us)	17.6% (See above in paragraph)
School was hard	13.4%
Discrimination (age, race, gender)	2.8%
Language problems	1.4%
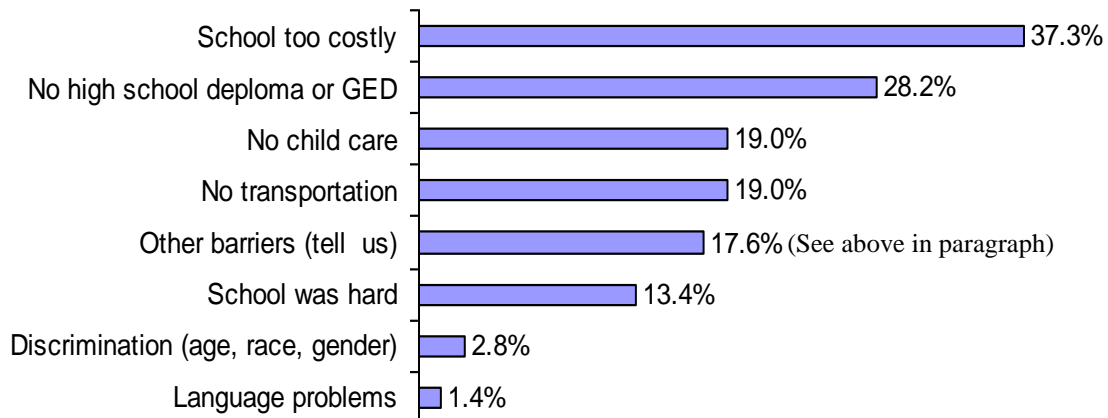
The Inter-Agency Customer Needs Assessment Survey in FY 2014 indicates that cost of school is the most common barrier in terms of education. Lack of high school diploma/ GED and lack of transportation, difficulty with school, and lack of childcare are followed.

According to the results of Community Needs Assessment Survey from the public, lack of money for school, lack of high school diploma or GED, lack of dropout prevention programs, lack of programs teaching job skills, and high cost of child care were the top 5 issues regarding education barriers. (Figure 16)

Figure 16

Education Problems in the Community

Problem	Percentage
No money for school	46.3%
No high school deploma or GED	41.3%
No dropout prevention programs	39.7%
No programs teaching job skills	28.9%
Child care cost too much	25.6%
Do not know about school programs	24.8%
No transportation	19.8%
No job skills	19.0%
No college education	19.0%
No computer skills	17.4%
No child care	15.7%
Tranportation too costly	12.4%
Violence in schools	11.6%
No programs for gaining computer skills	5.8%
No preschool programs	4.1%
No programs for obtaining a GED	3.3%

Health Care

75% of the agency's customers had health insurance Medicaid, while 25% did not. 26.4% of the agency's customers were disabled.

Health Care Problems

Lack of money was a big issue. 40.4% of the agency's customers reported lack of money to pay for prescription as one of their health care problems, which made it the biggest problem. Lack of income for medical emergency, lack of health insurance, lack of doctors accepting Medicaid, and waiting list for dental services which represented 28.8%, 28.8%, 23.6%, and 21.2% respectively were also reported as important problems. (Figure 17)

The survey results from the public also indicated that lack of money to pay for prescriptions as the biggest problem (55.5%). Lack of health insurance (41.2%), waiting list for dental services (37.8%), lack of income for medical emergency (37.8%), and lack of doctors accepting Medicaid (32.8%) were repeated by the public as important problems. Except those repeated problems, 36.1% of the public also considered lack of resources from mental health treatment as a problem. (Figure 17)

Figure 17

Health Care Problems

	Customer	Public
No money to pay for prescriptions	40.4%	55.5%
None of the above	35.1%	18.5%
Lack of health insurance	28.8%	41.2%
Lack of income for medical emergencies	28.8%	37.8%
Doctors will not accept Medicaid	23.6%	32.8%
Waiting list for dental services	21.2%	37.8%
Existing health conditions	18.3%	17.6%
No transportation	11.5%	12.6%
No resources for mental health treatment	8.2%	36.1%
Lack of resources for alcohol or drug abuse treatment	4.3%	19.3%
No clinics or doctor offices in my area	4.3%	3.4%
Hospital/ emergency room not available	1.9%	0.0%

Customers' Needs

The agency's customers were asked about their needs in health care. As a result shown in Figure 18, dental service was the most needed (40.6%), followed by vision service (38.5%), insurance for self or family (35.7%), medical service (28%), and prescription medications (24.5%). The survey result from the customers in FY 2014 (Table 2) also states that dental service and vision service were the most needed, followed by prescription medications, insurance for self or family,

and medical services. **Both survey results reveal the same needs from the customers.** The highlighted items reflect the problems that the agency is able to help solve. The agency does not provide assistance with vision service which was the second common need in Table 2, because Catholic Charities of Capital Township has been providing assistance with it.

Figure 18 **Health Needs of the Customers**
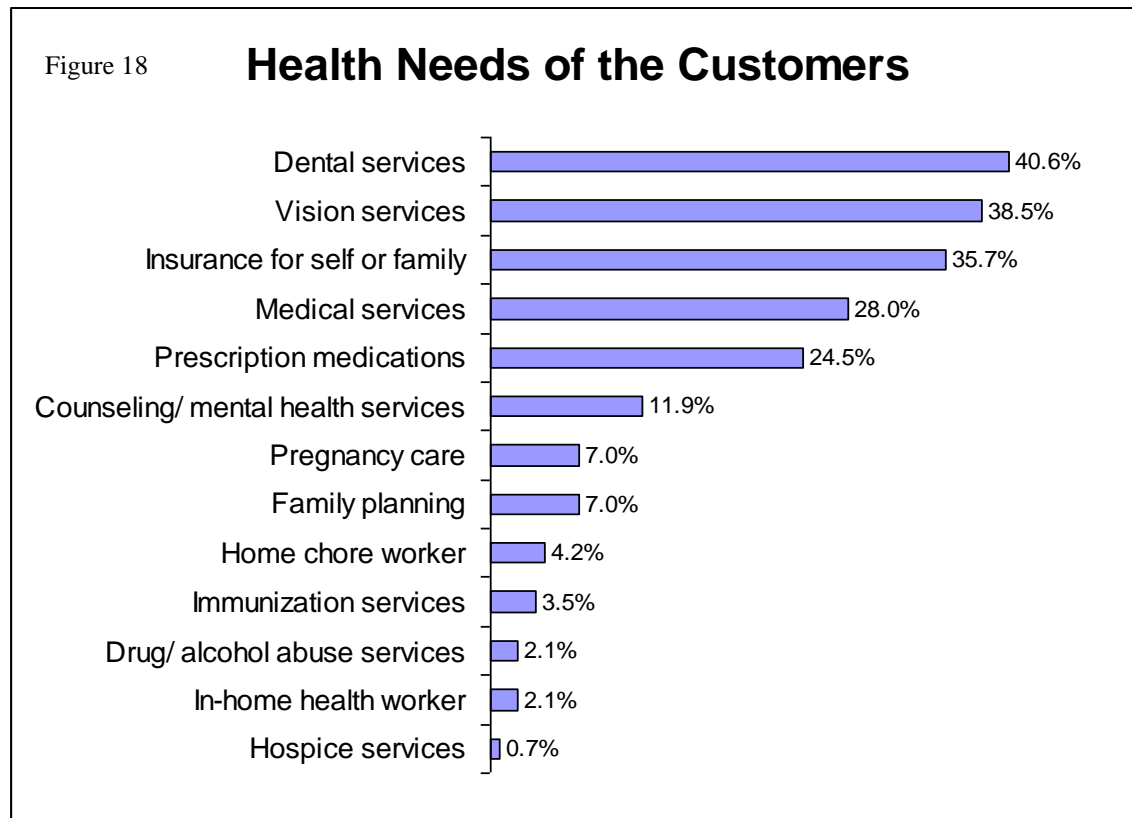
Table 2

Inter-Agency Customers Needs Assessment Survey- Customers' Health Care Needs (FY 2014)													
MONTH	SEPT	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	Mean
DENTAL SERVICES	189	176	127	129	160	109	182	141	221	80	330	53	158
VISION SERVICES	149	117	75	78	85	64	110	98	156	45	267	37	107
PERSCRIPTION MEDICATIONS	108	91	49	49	62	56	58	66	109	28	149	25	71
LACK HEALTH INSURANCE FOR SELF OR FAMILY	85	74	36	59	73	64	70	59	56	20	43	7	54
MEDICAL SERVICES	21	60	38	40	54	36	55	50	75	14	67	17	44
COUNSELING/MENTAL HEALTH SERVICES	32	43	16	16	19	22	32	30	20	7	66	14	26
HOME CHORE	26	36	8	10	9	16	10	8	8	8	32	2	14

WORKER													
IN-HOME HEALTH WORKER	21	25	5	5	5	9	5	10	6	8	31	1	11
IMMUNIZATION SERVICES	18	10	4	4	7	5	6	4	1	3	9	0	6
FAMILY PLANNING	5	12	6	3	5	5	3	3	7	3	3	3	5
PRENATAL CARE	1	7	11	2	4	6	6	3	7	1	6	1	5
DRUG/ALCHOL ABUSE SERVICES	0	0	1	0	2	0	0	1	1	2	4	1	1
HOSPICE SERVICES	4	2	0	1	0	1	0	1	0	0	2	0	1
OTHER	3	0	0	0	0	0	0	0	0	1	1	1	1
TOTAL	662	653	376	396	485	393	537	474	667	220	1010	162	503

Housing

Most of the agency's customers did not own houses, and more than a half were renting. Only 18% owned houses, while 53.7% rented. Additionally, 10.7% of the customers fell into the homeless category. (Figure 19)

Figure 19

Housing Status of Customers

9.4%
18.0%
10.7%
53.7%

■ Own
■ Rent
■ Homeless
■ Other
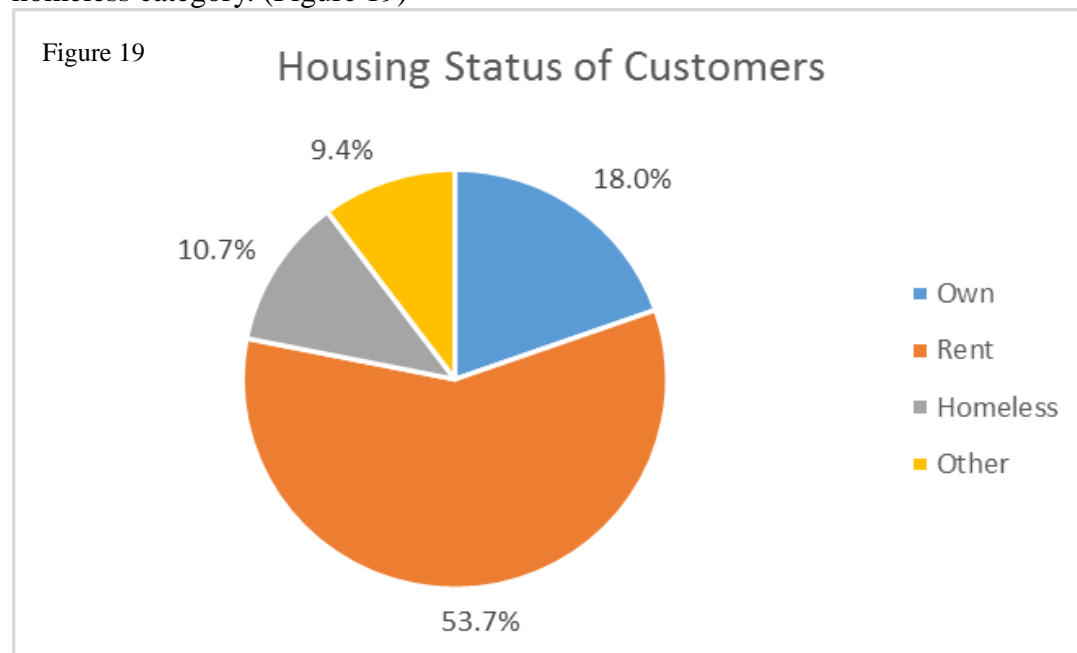
Housing Problems
High costs on utility and on housing were unanimous problems.
The agency's customers were asked to state their housing problems and they could select all the

issues that applied to them. Figure 20 illustrates the housing problems the agency's customers has been faced. High utility cost was the top issue which had been confronted by 61.2% of the agency's customers. The second top issue was high housing cost which had been experienced by 35.3% customers. Minor repairs needed (26.6%), overcrowding (20.1%), poor plumbing (15.1%), and major repairs needed (15.1%) followed the top 2 issues.

Figure 20
Housisng Problems of Customers
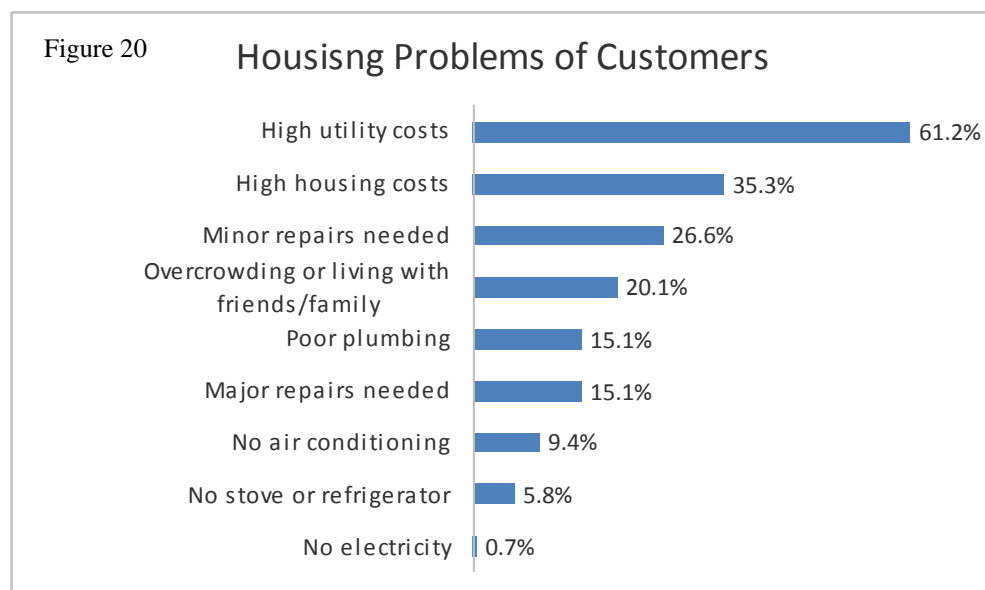
The survey from FY 2014 stated similar problems. The two greatest problems were also high utility costs and high housing costs, followed by minor repairs needed, major repairs needed and poor plumbing. The highlighted items reflect the problems that the agency is able to help solve. (Table 3)

High costs on housing and utility were the greatest problems for the public as well; 58.7% of the public selected high housing costs and 46.8% selected high utility cost. (Figure 21)

Table 3

Inter-Agency Customers Needs Assessment Survey- Cutomers' Housing Problems (FY 2014)													
MONTH	SEPT	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	Mean
HIGH UTILITY COSTS	392	335	257	235	300	244	327	299	381	82	611	89	296
HIGH HOUSING COSTS	103	103	61	72	80	67	75	70	105	37	152	26	79
MINOR REPAIRS NEEDED	119	98	59	63	81	55	93	64	74	24	131	30	74
MAJOR REPAIRS NEEDED	77	47	49	37	59	42	57	55	45	19	83	6	48
POOR PLUMBING	46	24	18	20	26	22	23	32	19	10	46	3	24
NO AIR CONDITIONING	28	28	14	16	22	12	25	22	55	9	30	5	22
NO STOVE OR REFRIGERATOR	17	17	11	15	14	8	12	12	13	1	22	2	12

OVERCROWDING OR LIVING WITH FRIENDS/FAMILY	11	17	14	10	12	3	15	7	7	3	16	6	10
NO ELECTRICITY	11	11	29	9	7	4	6	15	15	0	10	1	10
TOTAL	804	680	512	477	601	457	633	576	714	185	1101	168	576

Figure 21

Housing Problems in the Community

- High housing costs — 58.7%
- High utility costs — 46.8%
- Housing in my price range is unsafe — 34.1%
- No housing in my price range — 31.7%
- No emergency housing — 31.0%
- Need repairs (roof, foundation, plumbing, etc.) — 29.4%
- Lack of shelter for emergency (natural disaster) — 15.9%
- None of these — 12.7%
- No shelters for emergency (domestic violence) — 9.5%
- Need weatherization services — 9.5%
- House sizes too small — 6.3%

Home Weatherization

74% of the agency's customers showed no interest in weatherization services. (Need Reasons- Maybe people did not have enough understanding on the significance of weatherization. Maybe the agency's customers, those with low-incomes, did not afford to weatherization services or did not have budget on it.)

12.7% customers had applied for weatherization services and on the waiting list. 13.3% customers had already had home weatherized. 9.3% customers had home weatherized by SCDCR while 4% had home weatherized by a non-SCDCR agency. Only 14 customers (9.3%) had home weatherized by SCDCR, whereas more customers (19 or 12.7%) were still on the waiting list. Currently, the agency is not able to serve those on waiting list, as the capacity is limited by allegation of funds from Federal government to 100 homes per year.

Current Housing Situation- High Proportion of the Homeless

A question further categorized the current housing situation of the customers. 55.3% customers were renting home/apartment, and 19.5% customers were home/apartment owners. The percentages are slightly higher than those presented in a previous general question, but it does not make much difference. 11.5% customers reported that they were temporarily living with friends or families. These people might not think themselves as the homeless, but they are potentially homeless. 10.2% of customers were living in shelters. These people should belong to the category

of homeless which accounted for 10.7% of the agency's customers as previously reported. If those who were living temporarily with friends and families were also considered to be homeless, it would add the proportion of the homeless to more than 20% of customers. It would be a dramatically considerable proportion of the homeless which requires urgent resolutions. (Figure 22)

Figure 22

Current Housing Status of Customers

Rent home/apartment	55.3%
Own home/apartment	19.5%
Living with friends/family temporarily	11.5%
In shelter for women and children	3.5%
Living with friends/family permanently	3.1%
In a shelter more than one month	2.2%
In a shelter less than one month	2.2%
In family shelter	1.8%
In emergency housing	0.4%
In shelter for father and children	0.4%
temporary housing for pregnant teens	0.0%

Nutrition

Nutrition Issues
Lack of food stamps and lack of money to purchase food were the biggest issues. The agency's customers were asked to choose 3 to 5 nutrition issues in Sangamon County. The top 2 issues were exhaustion of food stamps before end of month which had 48.8% responses and lack of money of purchase food which had 40.3% responses. The agency had 69% customers receiving food stamps, which means at least 18% of the agency's customers did not have enough food stamps. The result implies that food stamp as a service to low-income families seems not enough to solve the lack of food. The families using food stamps lack financial capacity to purchase food. Food stamps help release some burden of food purchase; however, money would still be a problem after their food stamps run out. (Figure 23)

Non-eligibility of food stamps, lack of knowledge on nutrition, and lack of usage of available community resources were reported as followed popular issues, respectively representing 21.8%, 19% and 17.5% of customers. (Figure 23)

From the opinions of the public, the No. 1 problem was lack of knowledge on nutrition which constituted 64.5% of the public. Lack of money to purchase food and exhaustion of food stamps were repeated as top problems by 50% and 30.6% respectively. There were 40.3% people considered it a issue that people did not use available community resources. (Figure 23)

Nutrition Problems

Figure 23

Problem	Customer	Public
Food stamps run out before end of month	48.8%	30.6%
Not enough money to purchase food	40.3%	50.0%
None of these apply	26.1%	14.5%
People not eligible for food stamps	21.8%	28.2%
People don't know about nutrition	19.0%	64.5%
People don't use available community resources	17.5%	40.3%
Lack of food	12.8%	10.5%
No way to get to grocery store	11.4%	12.1%
Alternative food resources nor available	3.8%	15.3%

□ Customer ■ Public

Food Adequacy

Almost a half of the agency's customers thought they did not always have enough food. (Figure 24) 32.6% of customers sometimes had enough food, and 10.2% seldom had enough food. 4% of customers reported that they never had enough food.

Figure 24 **Food Adequacy of the Customers**

Category	Percent
Always	52.7%
Sometimes	32.6%
Seldom	10.7%
Never	4.0%

□ Always
■ Sometimes
□ Seldom
□ Never
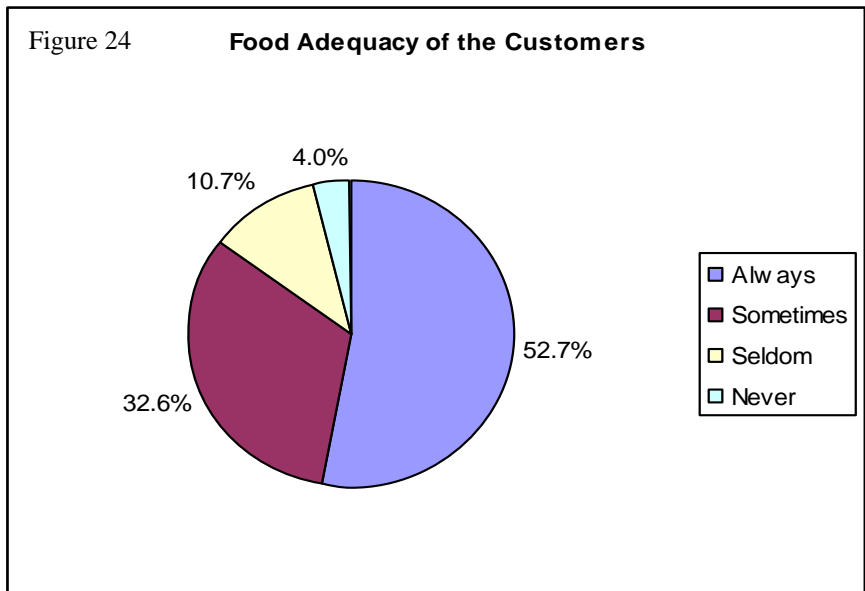
Helpful Meal Programs

Meals programs definitely help solve the nutrition issues in this community. Table 4 illustrates

how helpful the meal programs are. 50% customers felt that breakfast meal program for youth would help their family, and 52.5% though that lunch meal program for youth would help. 58.5% customers responded that summer meal program for youth would be helpful. Senior meal program provided to customer's home was thought to be helping by 29.7% of customers.

Table 4

Helpful Meal Programs				
Meal Programs	Frequency	Percentage	Valid Frequency	Valid Percentage
Breakfast meal program for youth	59	24.8%	59	50.0%
Lunch meal program for youth	62	26.1%	62	52.5%
Summer meal program for youth	69	29.0%	69	58.5%
Senior meal program provided to your home	35	14.7%	35	29.7%
Missing	120	50.4%		
Total	238	100.0%		

As the result of on-going monthly survey in FY 2014 shows (Table 5), summer meals for youth was the most popular program that people thought helpful. Other three choices did not notably vary. The agency is able to help the highlighted programs.

Table 5

Inter-Agency Customers Needs Assessment Survey- Would These Meal Programs Help You or Your Family? (FY 2014)												
MONTH	SEPT	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	Mean
SUMMER MEALS FOR YOUTH	65	84	62	60	76	48	69	72	86	30	100	26	65
LUNCH MEALS FOR YOUTH	59	59	45	36	49	30	35	50	63	20	81	20	46
BREAKFAST MEALS FOR YOUTH	54	57	46	42	41	31	34	37	52	11	77	21	42
SENIOR MEALS PROVIDED TO YOUR HOME	64	69	19	27	15	22	31	36	62	17	115	6	40
TOTAL	804	708	512	477	601	457	633	576	714	185	1101	168	578

Transportation

Transportation Issues
The cost on transportation was the biggest issue. 50.2% of the agency's customers thought gasoline was too costly. 47.9% thought cost of buying a car was too high. 38.5% thought auto

insurance was expensive. 37.6% had no credit to buy a car. 30.5% could not afford car repairs. These were the top five problems of transportation based on the customers, and **four of them refer to cost**. (Figure 25)

The survey result from the public also stated the same five main problems. The expense on gasoline was again the greatest issue which was reported by 73.8% of the public. Most people responded the high cost of insurance (64.8%) and lack of credit to buy a car (55.7%) as the next two issues, followed by high cost of buying a car (49.2%) and high cost of car repairs (38.5%). (Figure 25)

Transportation Problems

Figure 25

Problem	Values
Gasoline too costly	73.8% / 50.2%
Cost of buying a car too high	49.2% / 47.9%
Cost of insurance	64.8% / 38.5%
No credit to buy a car	55.7% / 37.6%
Car repairs too costly	38.5% / 30.5%
None of the above	9.0% / 27.7%
No help to learn to drive or get a license	2.5% / 10.3%
People don't know how to buy a cay	6.6% / 7.0%
No bus service	16.4% / 5.2%
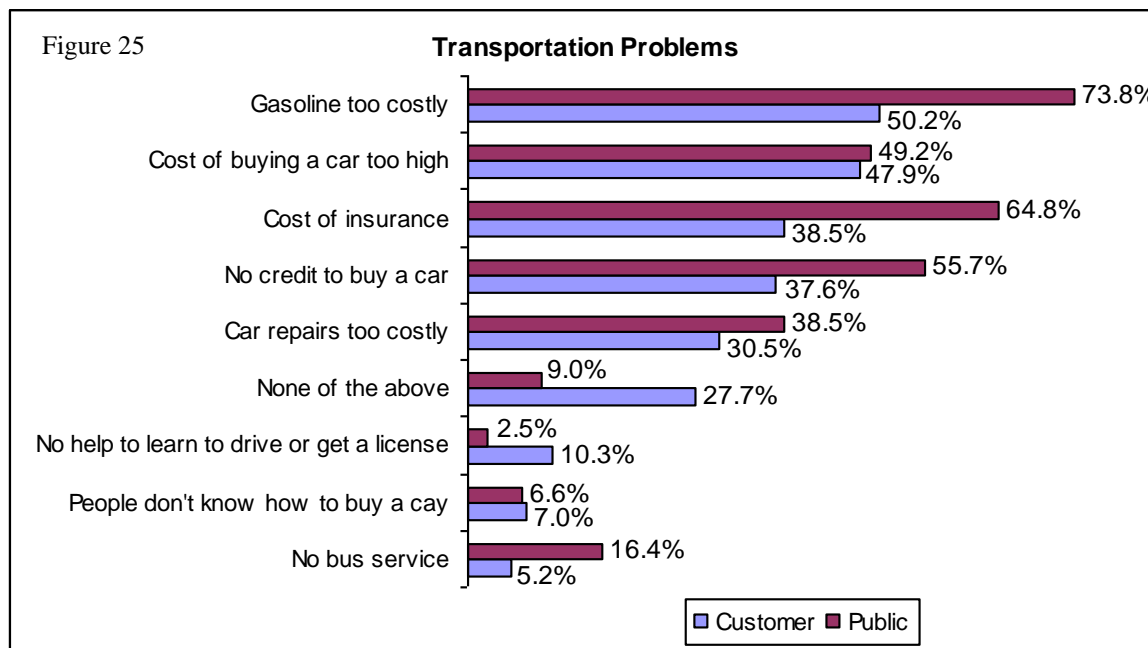
□ Customer ■ Public

Bus System of the Community

According to the result of transportation options, 57.4% of the agency's customers owned a car. 19.3% could walk to job or shopping, and 48% could use public transportation. Many people used public transportation, but many of them were not satisfied with it.

54.4% of the customers were satisfied with the bus system, which means that nearly a half of the customers were not satisfied. **Routes and punctuation of buses were reported by many people as the top 2 problems.** 26% of the customers reported that the inconvenience of bus routes and stops, and 15.4% reported that the buses were not on time. (Figure 26)

Among the public, even fewer people- 42.2%- were satisfied with the bus system. **Inconvenience of routes or stops was a notable problem among the public.** 42.2% were not satisfied with the inconvenience of bus routes or stops, which made it the biggest issue among the public. 27.8% reported that no bus services covered their workplace. (Figure 26)

Figure 26

Description of the Community's Bus Systym

Category	Public	Customers
No issues (satisfied with buses)	42.2%	54.4%
Bus routes / stops not convenient	42.2%	26.0%
Not on time	12.2%	15.4%
Buses/ stops do not feel safe/ secure	12.2%	8.3%
Not good for kids	10.0%	7.1%
No service to my job	27.8%	6.5%
Not good for disabled	8.9%	5.9%
Costs too much	6.7%	5.9%
Not good for elderly	13.3%	5.3%
No routes to doctors or hospitals	6.7%	3.6%

☐ Customers ■ Public

Household Finance

Household Financial Status

Many customers were in negative financial status. 3 out of 5 customers had unpaid or past due bills. 1 out of 3 had to choose between basic needs.

As the agency defined, customers who had past due or unpaid bills, mortgage, or rent, who had to choose between basic needs, who used payday loans, pawn shops, or rent-to-own services, and who had TANF, Medicaid, or FSS cut-off or reduce were considered to be at a negative financial status. Figure 27 illustrates that 39% of the customers had unpaid medical of hospital bills. 38% had past due utility bills. Those with past due or unpaid bills, including medical or hospital bills, utility bills, telephone bills and rent or mortgage, represented 59%. Those who reported that they had to choose between basic needs represented 33.3%. Based on the data, 50 people out of 205 valid results did not have any negative elements of financial status, which means **less than 1/4 customers were not in negative financial status**. Besides, having checking accounts, savings accounts, or credit cards is a positive element of financial status. Having a household budget, receiving Earned Income Tax Credit (EITC), and having applied child support are also positive elements of financial status. However, many people did not have household budget, checking or saving account, and credit cards. Only 44.4% customers had household budget, and 52.2% had none of checking accounts, savings accounts, or credit cards. 17.1% customers received EITC (Earned Income Tax Credit).

Table 6 illustrates the household financial status of the customers during FY 2014. Having past due utility bills, having unpaid medical or hospital bills, and having had to choose between necessities were frequently reported. The highlighted issues are those the agency is able to help solve.

Household Financial Status of the Customers

Figure 27

Category	Percentage
Have a household budget	44.4%
Have a checking account	43.9%
Have unpaid medical or hospital bills	39.0%
Have past due utility bills	38.0%
Have had to choose between basic needs (ex: buy food or pay rent)	33.2%
Have a savings account	28.8%
Have had TANF, Medicaid, or FSS cut or reduced	21.0%
Have one or more credit cards	20.5%
Have past telephone bills	17.1%
Use pawn shops for cash needs	17.1%
Receive an Earned Income Tax Credit (EITC)	17.1%
Have applied for child support, but not receiving yet	10.2%
Have past due rent or mortage	10.2%
Use "Rent-to-Own" services	8.3%
Use Payday Loans	7.8%

Table 6

Inter-Agency Customers Needs Assessment Survey- Household Financial Status (FY 2014)												
MONTH	SEPT	OCT	NOV	DEC	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	Mean
HAVE PAST DUE UTILITY BILLS	306	299	304	267	340	239	344	317	307	46	311	57	261
MAINTAIN A HOUSEHOLD BUDGET	273	220	163	161	211	126	198	144	161	61	278	45	170
HAVE CHECKING ACCOUNT	279	218	108	110	161	125	157	141	147	65	265	24	150
HAVE UNPAID MEDICAL OR HOSPITAL BILLS	195	178	147	147	172	131	170	154	152	38	177	45	142
HAVE HAD TO CHOOSE BETWEEN NECESSITIES (EX: BUY FOOD OR PAY RENT)	170	153	137	138	181	127	138	129	14	45	214	42	124
HAVE HAD TANF, MEDICAID, FOR FSS SANCTIONED	108	91	110	86	151	135	168	151	161	43	129	34	114

HAVE PAST DUE RENT OR MORTGAGE	78	95	107	92	104	74	101	90	81	23	72	23	78
RECEIVE AND EITC	52	61	98	73	130	57	78	77	44	19	67	18	65
HAVE PAST DUE TELEPHONE BILLS	84	95	72	64	89	38	60	68	73	18	74	16	63
HAVE SAVINGS ACCOUNT	92	87	34	47	63	38	64	48	46	21	84	12	53
USE PAWN SHOPS FOR CASH NEEDS	59	59	61	54	54	48	57	55	64	14	60	16	50
HAVE ONE OR MORE CREDIT CARDS	69	55	33	26	54	36	40	37	32	20	62	7	39
HAVE APPLIED FOR CHILD SUPPORT - NOT REC. YET	43	44	64	49	42	31	40	35	33	15	35	14	37
USE PAYDAY LOANS	38	39	34	47	32	21	29	40	29	11	62	8	33
USE "RENT TO OWN" SERVICES	43	35	24	25	18	17	25	21	26	6	26	11	23
TOTAL	1889	1729	1496	1386	1802	1243	1669	1507	1370	445	1916	372	1402

Problems Regarding Use of Money
Lack of money to meet family needs and lack of household financial knowledge were the biggest problems.
The agency's customers were asked about the problems regarding household finance. Figure 28 illustrates the problems in terms of use of money. Lack of money to meet family needs is the biggest issue. 58.9% of the customers reported it as a financial problem. Difficulty with money management/ poor spending habits and lack of knowledge about how to do a budget were the second and third biggest issues, which were reported by 40.2% and 39.7% of the customers respectively. 31.5% stated that they do not know how to save money, which was also an important issue.

The public reflected the same four most frequent household financial problems. A great proportion of people (86.1%) had difficulty with money management, that is, they had poor spending habits. 77% did not know how to do a budget. People who did not know how to save money and who did not have enough money to meet family needs also represented great proportions- 63.1% and 62.3% respectively.

Figure 28

Problems Regarding Use of Money

Category	Customer	Public
Not enough money to meet family needs	58.9%	62.3%
Difficulty with money management/ poor spending habits	40.2%	86.1%
Lack of knowledge about how to do a budget	39.7%	77.0%
don't know how to save money	31.5%	63.1%
None of the above	21.0%	4.1%
Families did not get an earned income tax credit	7.8%	4.9%

☐ Customer ■ Public
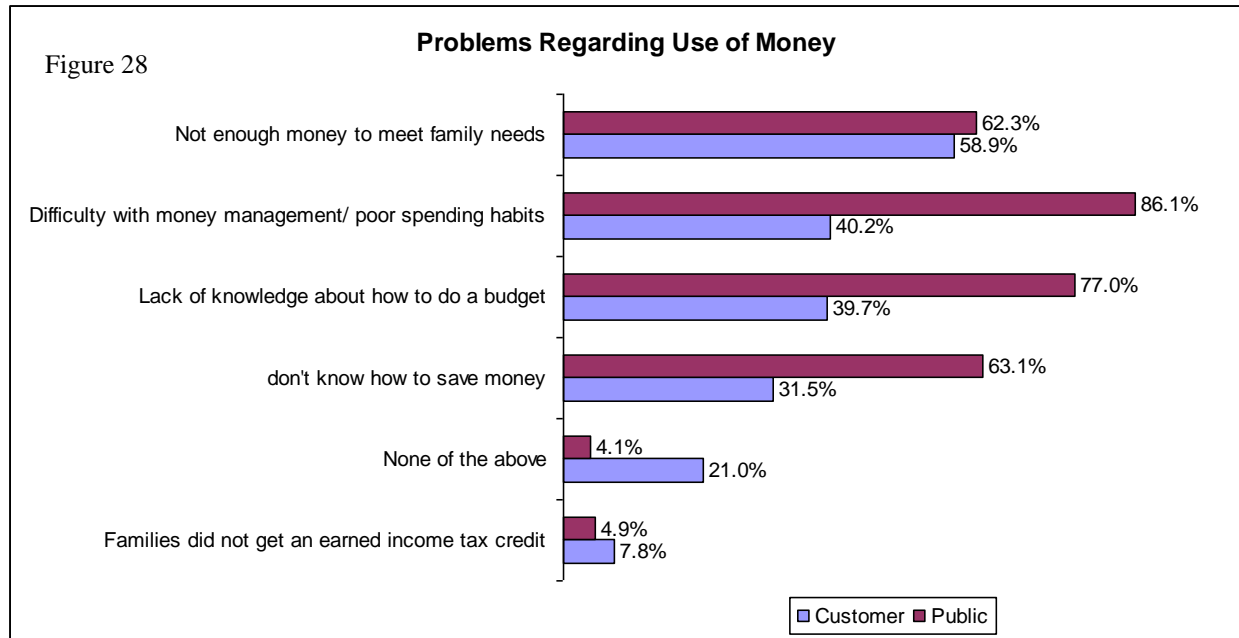
Many people were not considered in good financial status, and many people agreed that people lacked knowledge on household financing; however, a dramatic proportion of people- 75%- were not interested in finance training. More than a half of the agency's customers- 50.2%- were not interested in how to improve their credit.

Some indicators show people's positive financial status, such as having a household budget, having checking or savings accounts, having credit cards, receiving EITC, and applying child support. Some indicators show their negative financial status, such as have unpaid or past due bills, choosing between basic needs, using pawn shops, using payday loans or rent-to own services, and receiving TANF, Medicaid or FSS reduce or cut-off. According to the further analysis, **more of those who showed negative financial status tend to be not interested in finance training**. (Figure 29) The possible reasons why these people were not interested in financial training could be:

- People do not have time to participate in the training;
- People do not know what is the training about and what they can learn from it; and
- People do not realize their weakness in finance or they do not know why they need finance training.

Figure 29

Interest in Finance Training VS Financial Problems

	Interested in finance training	Not interested in finance training
Have to choose between basic needs	19	49
Use pawn shops	13	18
Use payday loans	4	10
Use rent-to-own services	3	15
Have TRAN, Medicaid, or FSS reduce or cut-off	11	34
Have no household budget	33	76
Have none of checking accounts, savings accounts, or credit cards	32	74
Not receive EITC	44	122
Have past due or unpaid bills, mortgage, or rents	41	79

Addendum to Community Needs Assessment

This addendum provides the analysis of the inter-agency customer CSBG Needs Assessment which is additional to Community Needs Assessment. The data, indicating services and needs in other cooperative organizations, were collected monthly during FY 2014 (from September, 2013 to August, 2014). There were both returning clients and new clients per month. The following figures are constituted by the average results of the 12 months in FY 2014.

In FY 2014, the number of clients served by the cooperative organizations fluctuated from month to month. (Figure 1) The number of clients served reached the peak in September, 2013 and July, 2014, while it decreased to the smallest number in August, 2014. The average monthly number of client served in FY 2014 was 497. The number of clients served was greater than the average in some months and was smaller than the average in some other months. There is not an obvious tendency of the change of clients.
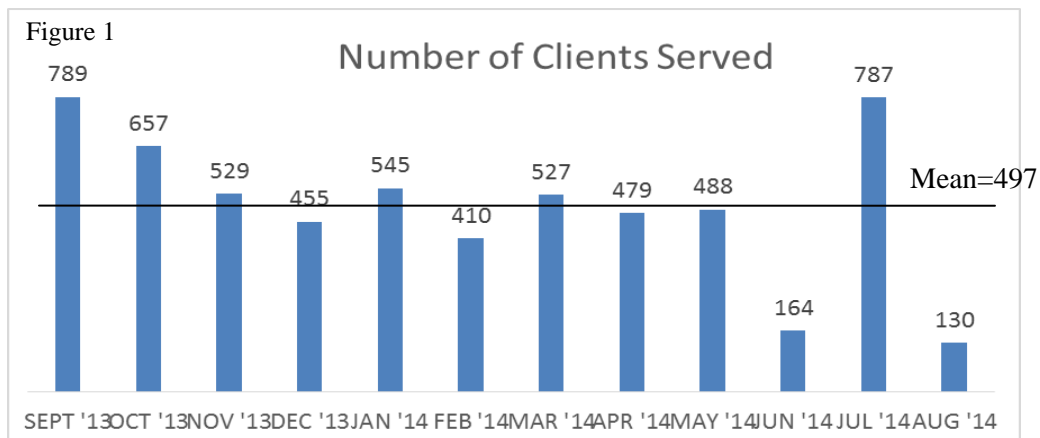
Figure 1

Figure 2 presents the ratios of returning clients and new clients. The average monthly ratio of new clients represented 17% in FY 2014. The ratio of new clients showed an increasing tendency from 11% to 27% between September, 2013 and April, 2014 and a decreasing tendency from 27% to 19% between April, 2013 and July, 2014. In August, 2014, the ratio of new clients went up again to 20%. The ratio of returing clients presented an opposite tendency.It went down from 89% to 73% between September, 2013 and April, 2014, and then went up to 90% until July, 2014. Finally, it reduced to 80% in August, 2014. The average monthly ratio of returning clients represented 83%.

Figure 2

Percentage of Returning Clients and New Clients in FY 2014

	SEPT '13	OCT '13	NOV '13	DEC '13	JAN '14	FEB '14	MAR '14	APR '14	MAY '14	JUN '14	JUL '14	AUG '14	MEAN
New Clients	11%	15%	14%	18%	17%	24%	25%	27%	22%	16%	10%	20%	17%
Returning Clients	89%	85%	86%	82%	83%	76%	75%	73%	78%	84%	90%	80%	83%

■ Returning Clients   ■ New Clients
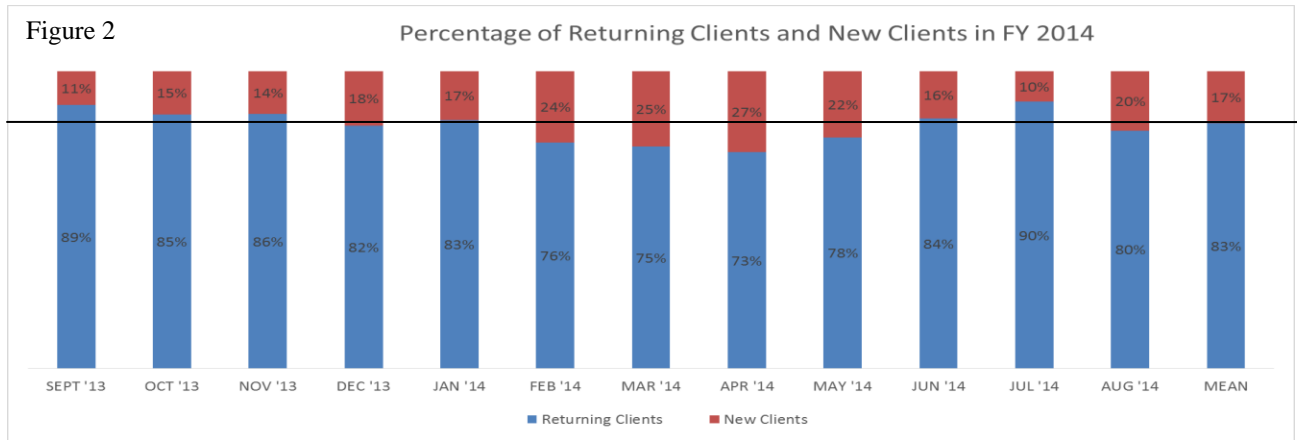
The number and percentage of clients who used public health/ WIC services in FY 2014 are illustrated in Figure 3.25% of clients used public health/ WIC services whereas 75% did not. 1/4 of the clients used public health/ WIC services.

Figure 3 Number and Percentage of Clients Using Public Health/WIC Services

119, 25%

355, 75%

■ Yes
■ No
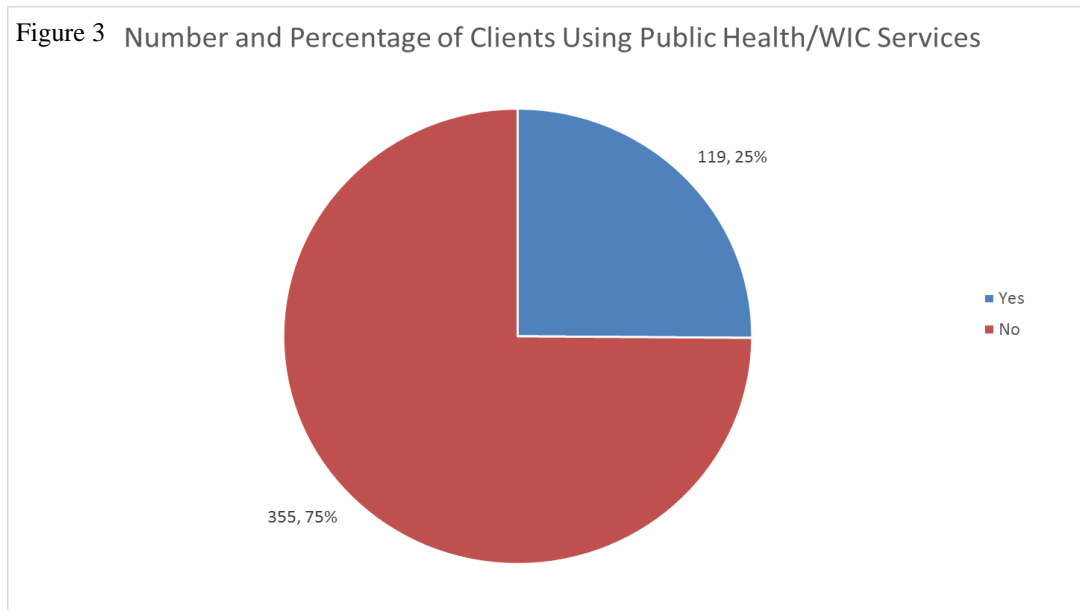
Employment

Among the average monthly clients served of 497, most of them were unemployed. 32.19% were unemployed due to disability. There were 20.92% of unemployed people searching jobs, and 8.45% unemployed people not searching jobs. That is to say, the unemployment rate of the clients was 61.57%. Compared with the unemployed clients, the number of clients with jobs- either part-time or full-time- were much fewer. (Figure 4)

Figure 4

Employment Status

DISABLED/NOT EMPLOYED	160	32.19%
UNEMPLOYED/JOB SEARCHING	104	20.92%
PART-TIME	75	15.19%
RETIRED	68	13.68%
FULL-TIME	53	10.66%
UNEMPLOYED/NOT JOB SEARCHING	42	8.45%
FULLTIME WITH BENEFITS	10	2.01%
PART-TIME WITH BENEFITS	5	1.00%
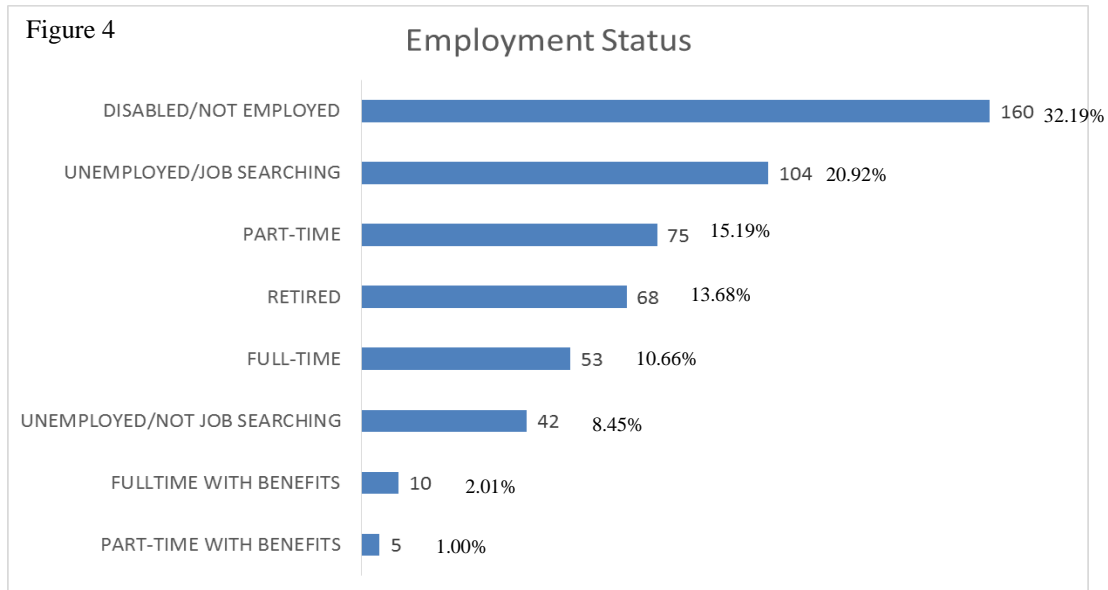
In terms of barriers to employment, the most common issue was permanent health or disability problem reported by 31.59% of clients, followed by lack of reliable transportation (9.66%), lack of high-school diploma/ GED (6.64%), lack of reliable childcare (4.83%), and emotional problems (4.63%). Many more clients were experiencing permanent health or disability problem. (Figure 5)

Figure 5

Barriers Regarding Employment

PERMANENT HEALTH/DISABILITY PROBLEM	157	31.59%
LACK OF RELIABLE TRANSPORTATION	48	9.66%
NO HS DIPLOMA/GED	33	6.64%
LACK OF RELIABLE CHILDCARE	24	4.83%
EMOTIONALLY UNABLE TO WORK	23	4.63%
TEMPORARY DISABILITY PROBLEM	19	3.82%
PREGNANCY	9	1.81%
OTHER	8	1.60%
LACK OF ADULT DEPENDENT CARE	3	0.60%
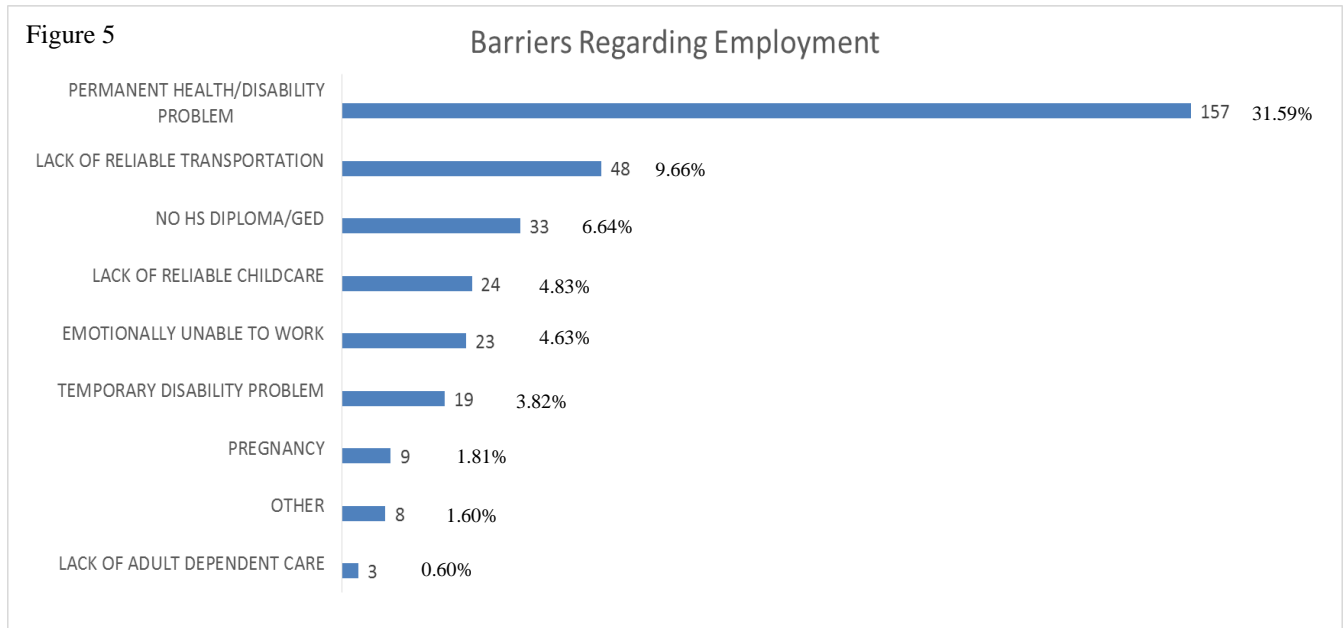
Education

Figure 6 illustrates the education status of the clients. 44.67% of clients were satisfied with their education. For the clients, the most common needs regarding education was earning a 2-or-4-year degree followed by obtaining a GED, training in a specific area, and improving math skills.

Figure 6

Education

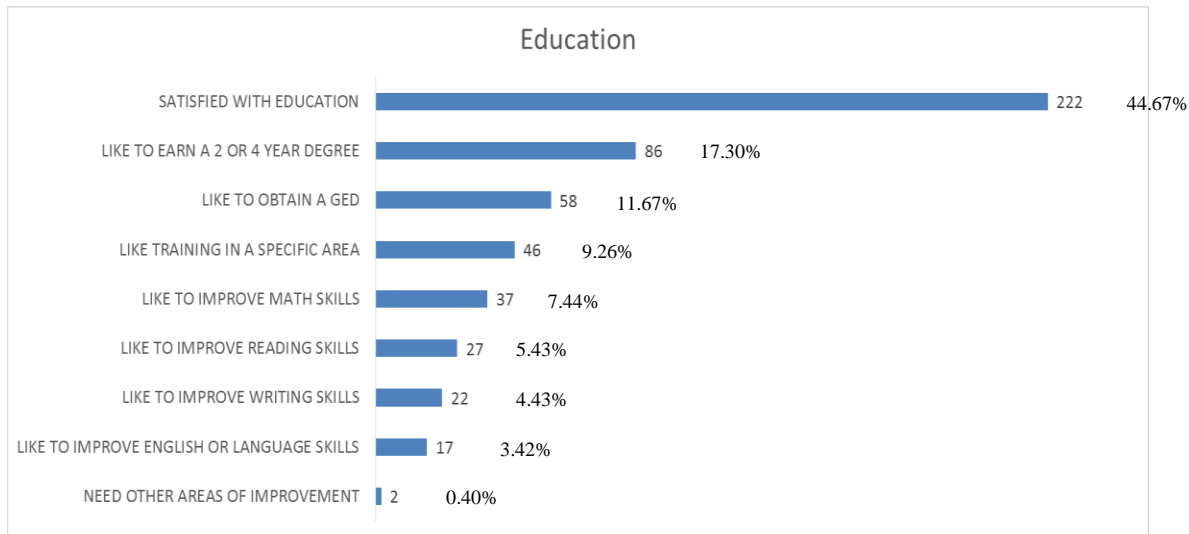|		
SATISFIED WITH EDUCATION	222	44.67%
LIKE TO EARN A 2 OR 4 YEAR DEGREE	86	17.30%
LIKE TO OBTAIN A GED	58	11.67%
LIKE TRAINING IN A SPECIFIC AREA	46	9.26%
LIKE TO IMPROVE MATH SKILLS	37	7.44%
LIKE TO IMPROVE READING SKILLS	27	5.43%
LIKE TO IMPROVE WRITING SKILLS	22	4.43%
LIKE TO IMPROVE ENGLISH OR LANGUAGE SKILLS	17	3.42%
NEED OTHER AREAS OF IMPROVEMENT	2	0.40%

Cost of school was reflected as the most common barrier preventing clients (16.50% of clients averagely per month) from obtaining education. (Figure 7) Lack of high-school diploma/ GED (9.25%) and lack of transportation (9.05%) were very common barriers as well. Having difficulty with school and lack of childcare were also reflected by some clients, but the first three issues were replied by far more clients.

Figure 7

Barriers Regarding Education

COST OF SCHOOL	82	16.50%
LACK HS DIPLOMA OR GED	46	9.26%
LACK TRANSPORTATION	45	9.05%
HAD DIFFICULTY WITH SCHOOL	26	5.23%
LACK CHILDCARE	20	4.02%
DISCRIMINATION	3	0.60%
LANGUAGE ISSUES	2	0.40%
OTHER	1	0.20%
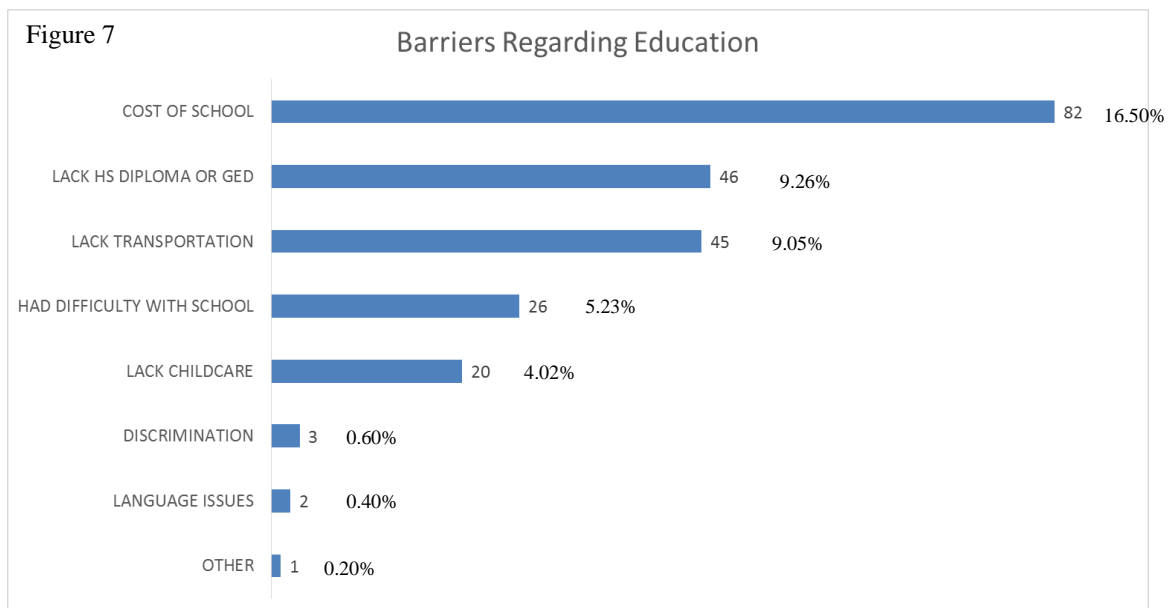
Housing

The housing problem which annoyed most clients (59.56) was high utility cost. This issue influenced about 3 times more people than the next two most common problems- high housing cost (15.90%) and minor repairs needed (14.29). Major repairs needed was another common problem which represented 9.66% of clients per month. (Figure 8)

Figure 8

Housing Problems
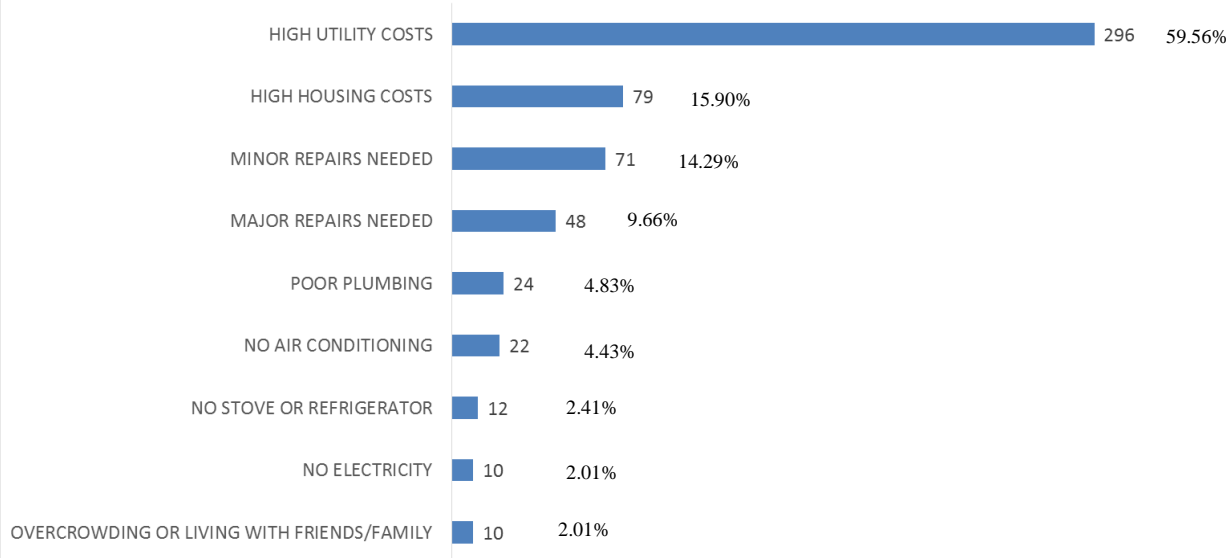
Category	Value	Percent
HIGH UTILITY COSTS	296	59.56%
HIGH HOUSING COSTS	79	15.90%
MINOR REPAIRS NEEDED	71	14.29%
MAJOR REPAIRS NEEDED	48	9.66%
POOR PLUMBING	24	4.83%
NO AIR CONDITIONING	22	4.43%
NO STOVE OR REFRIGERATOR	12	2.41%
NO ELECTRICITY	10	2.01%
OVERCROWDING OR LIVING WITH FRIENDS/FAMILY	10	2.01%

Client's interest in home weatherization was shown in Figure 9. 47.28% of clients were not interested in this service. Many people might not understand how this service help them. Besides, the agencies could only serve a limited number of clients due to the limited funds. 7.65% of clients were still on waiting list and 6.04% received home weatherization services provided by SCDCR per month.

Figure 9

Interest in Home Weatherization (HX)

Category	Value	Percent
NOT INTERESTED IN WX SERVICES	235	47.28%
APPLIED FOR WX AND ON WAITING LIST	38	7.65%
HOME WX BY SCDCR	30	6.04%
HOME WX BY A NON-SCDCR AGENCY	8	1.61%
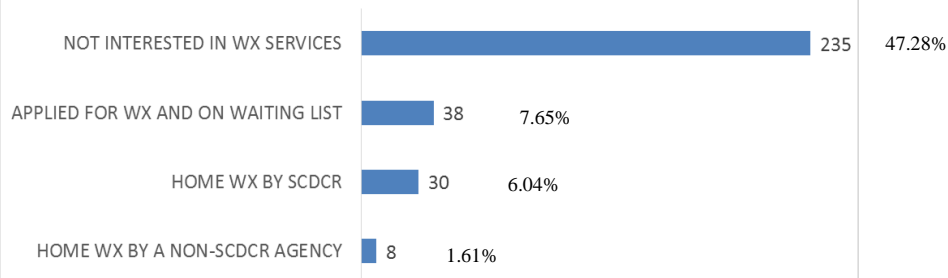
Nutrition

Figure 10 presents food adequacy of the clients. "Always" was the most frequent response, but the 221 responses of always having enough food represented only 44.47% of clients. Apparently, a majority of clients reported that they did not have enough food all the time. 34.41% of clients per month sometimes had enough food; 7.24%, seldom; and 4.02%, never.

Figure 10

How often does your family have enough food?
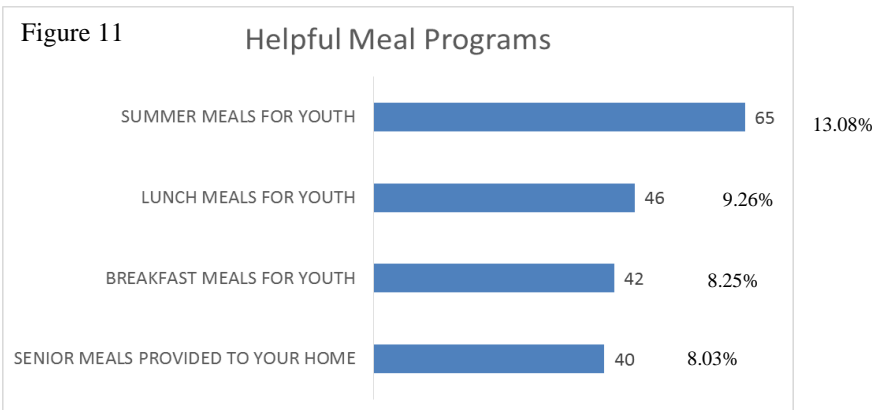
ALWAYS	221	44.47%
SOMETIMES	171	34.41%
SELDOM	36	7.24%
NEVER	20	4.02%
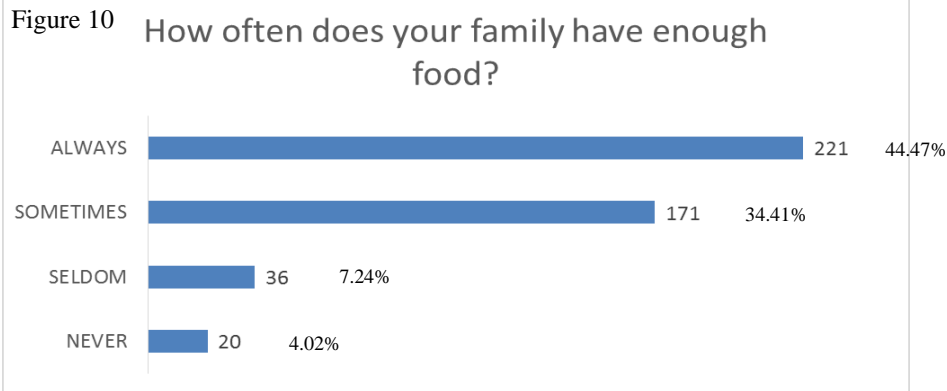
Regarding the meal programs which could help the clients. Summer meals for youth was supported by most people, 13.08% of clients per month. Lunch meals for youth, breakfast meals for youth, and senior meals were reported by similar numbers of people, 9.26%, 8.25%, and 8.03% respectively.

Figure 11

Helpful Meal Programs

SUMMER MEALS FOR YOUTH	65	13.08%
LUNCH MEALS FOR YOUTH	46	9.26%
BREAKFAST MEALS FOR YOUTH	42	8.25%
SENIOR MEALS PROVIDED TO YOUR HOME	40	8.03%

Transportation

52.52% clients reported that they owned cars averagely per month, which means about 1 out of 2 clients did not own their personal vehicles. (Figure 12) 30.78% of clients were able to use public transportation. 12.47% of clients thought transportation was a challenge for their families, and 8.65% were able to walk to job or shopping.

Figure 12

Available Transportation Options

ABLE TO WALK TO JOB OR SHOPPING	43	8.65%
TRANSPORTATION IS A CHALLENGE FOR MY FAMILY	62	12.47%
ABLE TO USE PUBLIC TRANSPORTATION	153	30.78%
OWN A CAR	261	52.52%
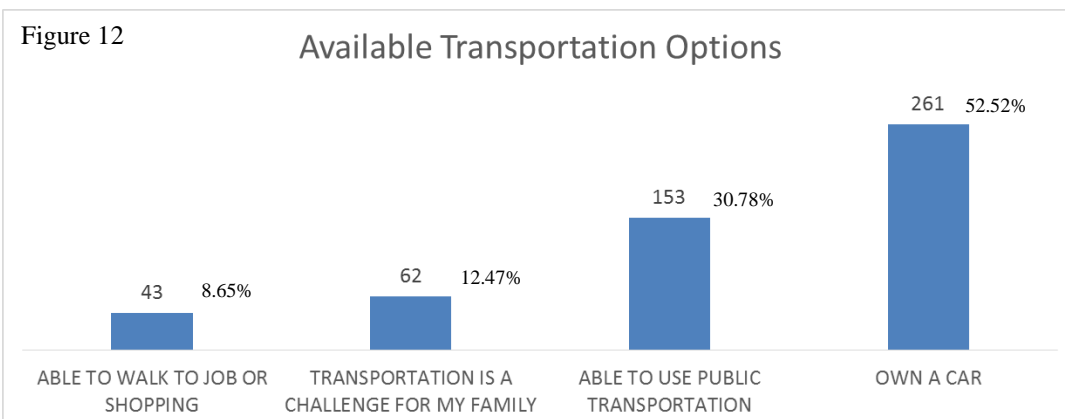
Health Care

According to Figure 13, dental services and vision services were the most common needs, followed by prescription medications, health insurance, and medical services. About 1/3 of clients needed dental services and about 1/5 of clients needed vision per month. 14.29% of clients were in need of prescription medications; 10.86%, health insurance; and 8.85%, medical services.

Figure 13

Health Needs

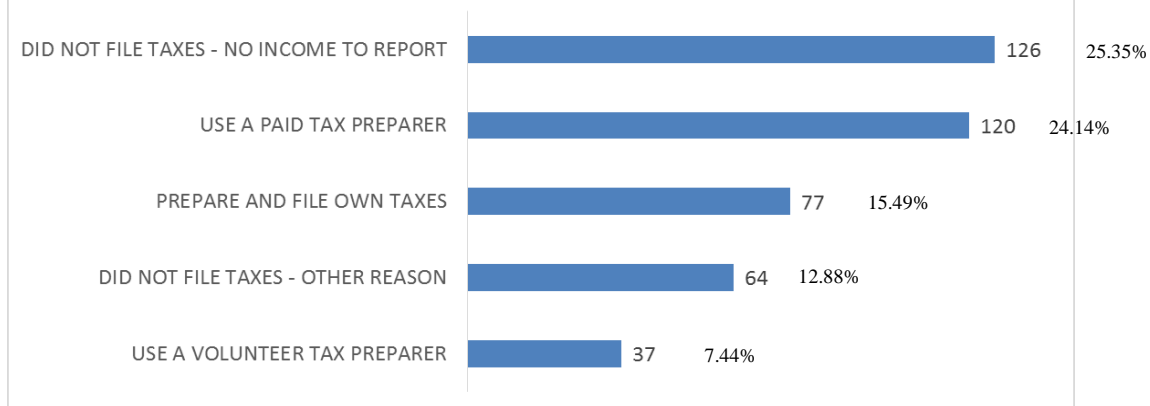| Service	Count	Percent
DENTAL SERVICES	158	31.79%
VISION SERVICES	107	21.53%
PERSCRIPTION MEDICATIONS	71	14.29%
LACK HEALTH INSURANCE FOR SELF...	54	10.86%
MEDICAL SERVICES	44	8.85%
COUNSELING/MENTAL HEALTH...	26	5.23%
HOME CHORE WORKER	14	2.82%
IN-HOME HEALTH WORKER	11	2.21%
IMMUNIZATION SERVICES	6	1.21%
FAMILY PLANNING	5	1.01%
PRENATAL CARE	5	1.01%
DRUG/ALCHOL ABUSE SERVICES	1	0.20%
HOSPICE SERVICES	1	0.20%
OTHER	1	0.20%

Household Finances

Regarding filing taxes, the most frequent response was "did not file taxes- no income to report" which made up 25.35% of the clients who did not file state and federal taxes due to no income. About 1/2 of clients filed their taxes through either paid or volunteer tax preparers, or they filed their taxes by themselves. 24.14% of clients used paid tax preparers, while only 7.44% of clients used volunteer tax preparers. (Figure 14)

Figure 14

How do you file your state & federal taxes each year?

DID NOT FILE TAXES - NO INCOME TO REPORT	126 25.35%
USE A PAID TAX PREPARER	120 24.14%
PREPARE AND FILE OWN TAXES	77 15.49%
DID NOT FILE TAXES - OTHER REASON	64 12.88%
USE A VOLUNTEER TAX PREPARER	37 7.44%

A majority of clients' families had past due utility bills, which represents 52.52% of clients per month. (Figure 15) 28.75% of clients per month had unpaid medical or hospital bills; 15.69%, past due rent or mortgage; and 12.68%, past due telephone bills. 1 of 4 families had to choose between necessities, which means these families in a negative financial status. Negative financial status was also shown by having TANF, Medicaid, or FSS sanctioned (22.94%), using pawn shops for cash needs (10.06%), using payday loans (6.64%), and using rent-to-own services (4.63%). On the other hand, positive financial status was reflected by a proportion of 34.21% of clients who maintained household budgets, 30.18% who had checking accounts, 13.08% who received EITC, 10.66% who had savings accounts, 7.85% who had credit cards, and 7.44% who had applied for child support. In general, having past due or unpaid bills, particularly utility bills, was the most serious issue.

Figure 15

Household Financial Status

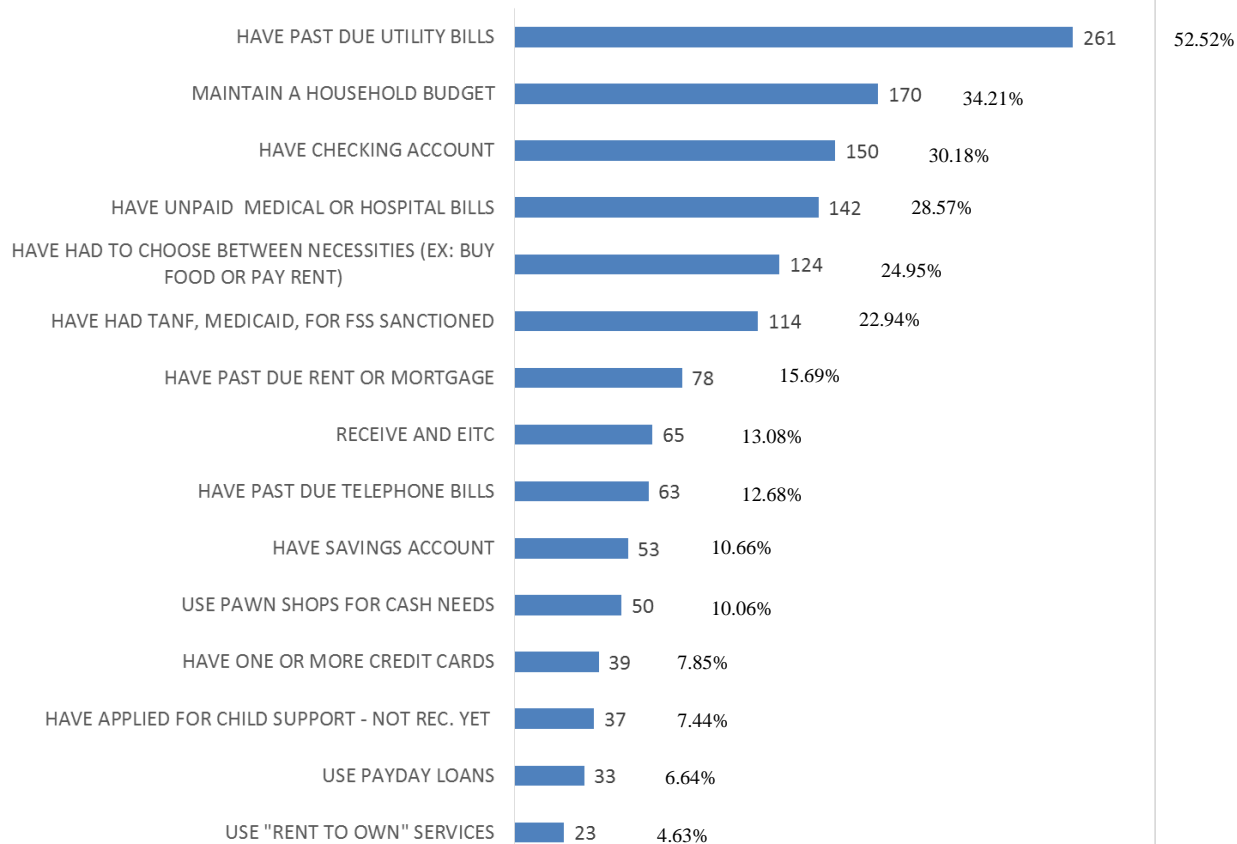| Category	Value	Percentage
HAVE PAST DUE UTILITY BILLS	261	52.52%
MAINTAIN A HOUSEHOLD BUDGET	170	34.21%
HAVE CHECKING ACCOUNT	150	30.18%
HAVE UNPAID MEDICAL OR HOSPITAL BILLS	142	28.57%
HAVE HAD TO CHOOSE BETWEEN NECESSITIES (EX: BUY FOOD OR PAY RENT)	124	24.95%
HAVE HAD TANF, MEDICAID, FOR FSS SANCTIONED	114	22.94%
HAVE PAST DUE RENT OR MORTGAGE	78	15.69%
RECEIVE AND EITC	65	13.08%
HAVE PAST DUE TELEPHONE BILLS	63	12.68%
HAVE SAVINGS ACCOUNT	53	10.66%
USE PAWN SHOPS FOR CASH NEEDS	50	10.06%
HAVE ONE OR MORE CREDIT CARDS	39	7.85%
HAVE APPLIED FOR CHILD SUPPORT - NOT REC. YET	37	7.44%
USE PAYDAY LOANS	33	6.64%
USE "RENT TO OWN" SERVICES	23	4.63%

Figure 16 reveals client's interest in finances training and credit improvement. More people showed no interest in finances training and credit improvement than those who showed interest. In terms of household finances training, 12.48% of clients showed their interest whereas 75.05% were not interested. Regarding credit improvement, more people were interested (26.96% of clients), and fewer people were not interested (39.84%).

Figure 16

Interest in Household Finances Training & Improving Credit