



City of Lawrence

2021 Application for Special Alcohol Funding

APPLICATION INFORMATION

General Information: The State of Kansas has created an Alcoholic Liquor Fund and Charter Ordinance No. 33 describes how those moneys are to be distributed for the City of Lawrence. Pursuant to K.S.A. 79-41a04, the City shall credit 1/3 of the deposit to the General Fund, 1/3 to the Special Recreation Fund, and 1/3 to the Special Alcohol Fund. The City Commission considers requests for the allocation of 1/3 that goes to the Special Alcohol Fund to help support agencies that provide programming in accordance with Charter Ordinance No. 33 (summarized below).

Expenditures in the Special Alcohol Fund shall be used for programs, services, equipment, personnel, and capital as the governing body determines is in the best interest of the public to address one or more of the following:

- a) Prevention of alcoholism and drug abuse, including but not limited to education, counseling, public information efforts and related activities; or
- b) Alcohol and drug detoxification efforts and related activities; or
- c) Intervention in alcohol and drug abuse or treatment of persons who are alcoholics or drug abusers or are in danger of becoming alcoholics or drug abusers; or
- d) Law enforcement, prosecution, court activities and programs, or portions thereof, related to apprehending, prosecuting, adjudicating or monitoring individuals who are alcoholics or drug abusers or are in danger of becoming alcoholics or drug abusers, including individuals who are or may be charged with violating laws related to alcohol or drug use; or
- e) Education, counseling, public information efforts, and related and associated activities related to preventing drug abuse and alcohol abuse, including but not limited to efforts to encourage healthy youth and family development and related efforts which include as a partial element drug abuse and alcohol abuse education, counseling, or public information efforts; or
- f) Programs, activities, or efforts related to preventing or intervening in drug abuse and alcohol abuse, including programs, activities, or efforts for which drug abuse and alcohol abuse prevention or intervention comprises a partial element of the complete program, activity or effort; or
- g) Any program, activity, or effort, or a portion thereof, that the governing body determines seeks to discourage, prevent, intervene, or address issues related to alcohol or drug abuse.

Applications will be reviewed by the Special Alcohol Funding Advisory Board. Following their review, the Board will make a recommendation for funding to the City Commission. Recommendations will be based on available resources, the need demonstrated through the agency's application, the stated objectives of the agency's program, past performance by the agency in adhering to funding guidelines (as appropriate), and the ability to measure progress toward the programs objectives.

Other Information. Collaboration and/or coordination between agencies is highly recommended and multi-agency proposals to address an identified community need is encouraged. All programs must have goals with measurable outcomes.

Reporting Requirements. All recipients of Special Alcohol Funding will be required to submit an annual report to the City of Lawrence outlining how the funds were used and whether the stated objectives were met by February 15, 2022.

Distribution of Funds. Funds will be distributed in two equal disbursements and in accordance with the Kansas Cash-Basis Law of 1933, codified as amended at K.S.A. 10-1101 *et seq.* The first distribution is to occur no earlier than April 1 of the grant year and the second distribution is to occur no earlier than October 1 of the grant year.

SECTION 1. APPLICANT INFORMATION

Legal Name of Agency: **DCCCA, Inc.**

Name of program for Which Funding is Requested: **First Step at Lake View**

Primary Contact Information (must be available by phone on December 11, 2020 from 8:30 to 12:30. Contacts are also welcomed to attend the meeting to provide a brief overview of the submitted application)

Contact Name and Title: **Sandra Dixon, LMSW; Chief Clinical Officer**

Address: **3312 Clinton Parkway, Lawrence, KS 66047**

Telephone: **785-840-5179**

Email: **sdixon@dccca.org**

Name(s) and Title(s) of person(s) responsible for program supervision and/or financial administration of program.

Name	Title	Responsibilities (Supervision, Financial, etc.)
a. Ashley Countryman, LCPC, LCAC	Clinical Coordinator	Direct Program Supervision
b. Sandra Dixon, LMSW	Chief Clinical Officer	Administrative Supervision
c. Kerye Jackson	Chief Financial Officer	Financial Services

Please outline the amount of funds being requested for each category in 2021

Category	2021 Requested Amount	% of Total
Prevention	\$ _____	_____
Detoxification	\$ _____	_____
Intervention	\$45,000	100%
Law Enforcement	\$ _____	_____
Education	\$ _____	_____
Other	\$ _____	_____
Total	<u>\$45,000</u>	<u>100%</u>

If your agency received funding from the City in 2020, please fill out the chart below.

Amount of Funding	Funding Source (i.e. General Fund, Special Alcohol, CDBG, Housing Trust Funds)	Program/Purpose
\$ 45,000	Special Alcohol Fund	Substance Use Disorder Treatment
\$ _____	_____	_____
\$ _____	_____	_____
\$ _____	_____	_____

Total projected operating budget for your agency in 2021: \$ **29,305,114**

SECTION 2. SPECIAL ALCOHOL FUND INFORMATION

A. How is the proposed program consistent with City Charter Ordinance 33? Please cite specific subsections of City Charter Ordinance 33 and explain how it aligns with your program.

First Step at Lake View is one of only eight substance use disorder treatment programs in Kansas, and the only one in northeast Kansas that specializes in services for pregnant women and women with children. Our efforts speak directly to City Charter Ordinance 33, (c) "Intervention in alcohol and drug abuse or treatment of persons who are alcoholics or drug abusers or are in danger of becoming alcoholics or drug abusers." First Step offers a continuum of treatment options specifically designed to respond to the biological psychological, and social factors influencing women's substance use and recovery. The continuum includes non-medical social detoxification, short term residential treatment, intensive outpatient with supportive housing, traditional outpatient services and aftercare.

DCCCA services have evolved as community needs, substances of choice, and treatment interventions have changed. Our commitment to evidence based, data driven interventions was recognized when DCCCA became one of only three Kansas SUD providers to achieve national accreditation in 2011. Through our participation with Council on Accreditation, our facilities are held to standards more rigorous than those required by state licensing. We must not only say we provide safe, supportive, and quality care; we must prove that we implement that care daily. Accreditation also requires processes for reviewing critical incidences, addressing client and public complaints, and routinely gathering and addressing stakeholder feedback.

First Step at Lake View is licensed by the Kansas Department for Aging and Disability Services. Its service continuum is credentialed by the three Medicaid Managed Care Organizations, Blue Cross Blue Shield of Kansas, and a variety of other private insurance companies. Substance Abuse Counselors are licensed addiction counselors, and most are dually licensed as master's level mental health therapists. Our commitment to meeting the increasing acuity and complex needs of our clients has resulted in an integrated service delivery system that includes medical oversight, contractual arrangements for primary health, mental health and psychiatric care, standardized depression and anxiety screening, care coordination with social service and partner treatment agencies, integration of Medication Assisted Treatment (MAT) and Peer Support services, and use of technology to expand access and support recovery post discharge. Implementation of CareLogic, our electronic health record, in 2012 demonstrates our commitment to thorough clinical records and financial stewardship and ensures that only authorized, documented services are billed.

DCCCA is requesting Special Alcohol Funding in 2021 for:

- 25% FTE substance abuse counselor to facilitate treatment interventions
- 50% FTE peer support specialist to engage in recovery supports
- Barrier reduction funds to address tangible, specific needs that support treatment retention and sustain recovery

Data document the positive impact of our efforts. Satisfaction survey feedback, National Outcome Measures, and screening data overwhelmingly reflect client improvements in health care, mental health care, family relationships, housing, abstinence, depression and anxiety.

SECTION 3. STATEMENT OF PROBLEM / NEED TO BE ADDRESSED BY PROGRAM

- A. Provide a brief statement of the problem or need your agency proposes to address with the requested funding. How will your program make an impact to meet the need? The statement should include characteristics of the client population that will be served by this program. If possible, include statistical data to document this need.**

The need for women's treatment is critical, as both research and clinical evidence have identified gender-specific risk factors for substance use disorder. Women are more likely than men to be subjected to sexual violence as both children and adults. Co-occurring mental health disorders often accompany substance use as women use alcohol or drugs to cope with anxiety, depression, eating disorders, and trauma resulting from childhood abuse and domestic violence. Women's physiology makes them more vulnerable to a substance use disorder. Women advance more rapidly in their progression from initial to regular use to abuse. Parenting and care giving are important roles and identity aspects for women and must be accounted for in treatment. Effectively addressing the needs of women includes consideration of their children's needs for whom they are responsible. (Substance Abuse and Mental Health Services Administration, "Addressing the Needs of Women and Girls: Developing Core Competencies for Mental Health and Substance Abuse Service Professionals," 2011)

First Step at Lake View served 525 adults and 52 children in calendar year 2019 reflecting a 12% increase from the prior year. Seventy percent were uninsured with incomes less than \$25,000 annually. Methamphetamine continues to be the primary substance identified at client admission in residential services, followed closely by alcohol. Marijuana and opiates as secondary and concurrent drugs of choice were reported more frequently in 2020. First Step clients have histories of childhood and adult physical, sexual and emotional abuse; chronic health conditions that have not been treated; frequent periods of homelessness and unemployment; have children in the child welfare system; are often human trafficking victims; and have limited personal resource to improve their lives. Quality, effective treatment at First Step creates an opportunity to improve their lives, obtain gainful employment and become productive parents and community members. Limiting access to such treatment increases more costly alternatives, including incarceration.

The number of women and children served in 2020 dropped significantly due primarily to the COVID-19 pandemic. Concerns for client and staff safety required DCCCA to temporarily suspend residential services for two months. Outpatient services continued using tele-health virtual technology while the facility and staff engaged in extensive preparations needed to accept admissions. First Step reopened in June at limited capacity. One woman or family per room reduced potential virus spread and allowed the facility to quarantine clients as needed. First Step has served 351 women through October 31, 2020.

How was the need for this program determined?

1. Addiction contributes directly to many medical conditions. Heavy drinking, for example, contributes to illness in each of the top five causes of death: heart disease, cancer, chronic, lower respiratory disease, accidents and strokes (Center for Disease control and Prevention, Health United States, 2015).
2. Methamphetamine use is identified as a drug of choice for uninsured individuals more frequently in northeast Kansas than statewide. Individuals engaging in residential services in the third quarter of 2020 identified methamphetamine in 50% of those admissions. First Step data indicates 60% of residential admissions reported methamphetamine use. (Kansas Department for Aging and Disability Services)
3. Visits to LMH Health Emergency Department specifically for substance use related issues increased slightly in 2019, averaging four patients daily. Twenty-seven percent of these patients were uninsured, a higher percentage than those with Medicaid, Medicare or private insurance. (LMH Health)
4. Children of parents with a substance use disorder are three times more likely to be abused and more than four times likely to be neglected than children of parents who do not abuse substances (U.S. Department of Health and Human Services, Administration of Children and Families, 2009). Parental substance use is one of five key factors that predict a call to child protective services. Children whose parents have substance use issues are more likely to be placed out of home once a report is made and stay in care longer than other children. (DHHS/ACF Child Welfare Information Gateway, 2014)

How will First Step at Lake View continue to make an impact?

Substance use has a detrimental social and financial impact on our community. Lost tax revenue due to unemployment, law enforcement, incarceration and emergency room visits are just a few of the costs that are more expensive than funding treatment. Research supports this assertion.

Healthcare Benefits of Addiction Treatment - Regular health and addiction care for people with substance use disorders can decrease hospitalizations by 30%. Two or more primary medical care visits have shown to improve abstinence from substances by 50% and those in recovery who have other medical conditions are three times more likely to achieve remission of those disorders over five years. (SAMHSA Center for Integrated Health Solutions, "Innovations in Addictions Treatment: Addiction Treatment Providers Working with Integration Primary Care Services," May 2013) The United States Surgeon General, in the landmark 2016 "Facing Addiction in America," stated "Well-supported evidence shows that substance use disorders can be effectively treated, with recurrence rates no higher than those for other chronic illnesses such as diabetes, asthma, and hypertension. Well-supported scientific evidence shows that treatment for substance use disorders – including inpatient, residential, and outpatient - are cost-effective compared with no treatment."

Treatment and Recovery - Recovery from substance use is associated with dramatic improvements in all areas of life, including a healthier financial and family life, higher civic engagement, dramatic decreases in public health and safety risks, and significant increases in employment and work productivity. Recent research comparing substance abusing individuals to those in recovery noted the following (Faces and Voice of Recovery, "Life in Recovery: Report on Survey Findings," Alexandre Laudet, PhD., 4/2013):

- Involvement in domestic violence, as either a victim or perpetrator decreases dramatically in recovery.
- Frequent utilization of costly emergency room departments decreases tenfold for those in recovery.
- The percentage of uninsured decreases by half for those in recovery.
- Twice as many women and men regained custody of a child while in recovery.
- Individuals in recovery increasingly engage in health behaviors such as taking care of their health, having a healthy diet, getting regular exercise, and having dental checkups.
- 83% of people in recovery report stable employment

Innovative Treatment Approaches – Working with mothers with substance use disorders requires balancing adult recovery while promoting safety, permanency and well-being of their children. First Step’s continuum of service addresses many of the research-based interventions that effectively find this balance:

- Promotion of protective factors – social connection, concrete support and parent education
- Priority and timely access – pregnant women must be admitted within 48 hours of referral
- Gender sensitive treatment – services that address a woman’s holistic needs
- Family centered treatment – the opportunity to bring their children with them to treatment
- Recovery coaches or mentoring – Peer Support Specialists as part of the treatment team

B. Please describe what demographic disparities exist, and how the program is designed to increase equity. Who would benefit from or be burdened by this program?

Social determinants of health are the conditions within a home, family, school and community that can impact a person’s ability to be healthy. (Healthy People 2020) The negative or positive impact of social determinants of health can accumulate over a lifetime, alter a person’s life course, and be passed down to future generations. The World Health Organization suggests that 75% of health inequalities, or differences in outcomes, can be characterized as unfair and potentially avoidable. Poverty, adverse childhood experiences, intergenerational trauma and intergenerational substance use- all impacted by health disparities – increase the likelihood for substance use. People of color and indigenous people are more often impacted due in part to inequity in access to needed services and the system-wide decisions that benefit the community majority.

The Lawrence Douglas County Health Department 2018 Health Equity Report identified the following community challenges:

- Residents with a high school degree or less are more likely to be smokers, be uninsured, have poor mental health and report fair or poor general health.
- Residents earning less than \$35,000 are 6.6 times more likely to be uninsured. They are more likely to not access services due to cost and to have poor mental and physical wellbeing.
- The black, Hispanic, Native American, Asian and multiracial populations are uninsured at rates higher than both the white populations and county average.

Health inequities are sometimes best understood by overlapping the social determinants with a multi-level, social-ecological model that includes individual, interpersonal, community and societal influences. (Centers for Disease Control and Prevention,

“The Social-Ecological model: A Framework for Prevention) DCCCA’s work in the community, especially with uninsured individuals supported by Special Alcohol Funds, is intended to mitigate ongoing risk by addressing factors in each level:

- Individual: physical and mental health; trauma and resiliency; perception of risk; withdrawal symptom management
- Interpersonal: attitudes and opinions towards substance use; acceptance of Medication Assisted Treatment; substance use identification and prevention education; access to Peer and family support
- Community: access to culturally specific providers, peer networks and treatment services; access to Medication Assisted Treatment; public health and harm reduction programming
- Societal: stigma towards persons who struggle with substance use; policies that promote racial and health equity; economic wellbeing and housing stability; impacts of justice involvement on economic and social advantage

SECTION 4. DESCRIPTION OF PROGRAM

- A. Provide a brief description of the program services and activities using an evidence-based model. The description should describe as specifically as possible the interaction that will take place between the provider and the user of the service.**

The substance use disorder treatment interventions at First Step at Lake View are based on the National Institute of Drug Abuse (NIDA) best practices. Evidence based strategies, including Motivational Interviewing, Cognitive Behavioral Therapy and Trauma Informed care are the foundations of our service approach. Formal treatment strategies are complimented by individual counseling, 12 Step support group attendance, referrals for mental and physical health, and case management for housing, employment, parenting and other assessed needs.

DCCCA treatment programs offer individuals the skills, information and resources necessary to effectively address the long-term changes that substance use creates, even after individuals discontinue their use. Addiction is a chronic illness, requiring ongoing support and, in some instances, periodic interventions to help individuals sustain long term recovery.

The continuum of services at First Step at Lake View is designed to meet the unique, individualized needs of each woman and her child who enter treatment. A comprehensive bio-psycho-social assessment identifies strengths, challenges and resources, resulting in a formal diagnosis, determination of medical necessity and a holistic treatment plan. Women, their family and other social support members are actively involved in the development of their plans, treatment stay and discharge planning.

Women requiring a stable environment to detox from alcohol or other intoxicating substances are monitored in our non- medical detoxification unit for two to three days while staff assesses their ongoing treatment needs. Our intensive, short term residential program provides 40 hours weekly of therapeutic and structured activities. Typically lasting 21 to 28 days, residential treatment is intended for women whose substance use disorder is so severe they are unable to effectively achieve sobriety and work on their new recovery in an outpatient setting. The Intensive Outpatient Treatment with Supportive Housing option offers 15 hours of clinical services weekly over a six-week average time period. Women participating in this service typically lack safe housing and, with the assistance of staff, build financial resources needed to access a new living environment prior to their treatment completion. Women successfully completing residential treatment who have a safe living environment to return to may continue services on an outpatient basis, remaining connected to their recovery resources while living independently.

Peer Support Services, as an adjunct to primary treatment, incorporates trained individuals with lived experience in recovery. Meeting someone with shared life experiences who has successfully maintained recovery often breaks through resistance, fear and hesitancy, encouraging women to consider getting help and remaining engaged in treatment during difficult times.

Women benefit from our Peer Support Specialists before, during and after treatment in the following ways:

- Peer mentoring or coaching—developing a one-on-one relationship in which a peer leader with recovery experience encourages, motivates, and supports a peer in recovery.
- Peer recovery resource connecting—connecting the peer with professional and nonprofessional services and resources available in the community.
- Recovery group facilitation—facilitating or leading recovery-oriented group activities, including support groups and educational activities.
- Building community—helping peers make new friends and build healthy social networks through emotional, instrumental, informational, and affiliation types of peer support.

By design, First Step at Lake View is a family centered treatment program. Women no longer must choose between starting treatment or caring for their children. We encourage women to bring their children ages birth through 12 to live with them in treatment. Older children attend school at Sunflower Elementary during the day and return to First Step in the evening to participate in family focused activities. Younger children attend

the licensed, onsite childcare center during the day. Beginning in 2021, Positive Bright Start will operate the childcare center at First Step. This collaboration enhances both organization's commitment to trauma informed approaches for vulnerable families. In addition to serving children, PBS staff will facilitate a weekly parenting class for all mothers in treatment.

The family program at First Step extends to spouses, significant others, parents and others the client identifies as important to their recovery. Families and support persons attend group on Sundays designed to educate them on addiction and recovery as a family issue. Visitation between our clients and their families occurs at designated times weekly. Family and couples therapy are offered as needed.

First Step at Lake View's holistic approach to treatment is evidenced by our collaborative agreements with Heartland Community Health Center for primary medical care; medication and psychiatric evaluation via a contract psychiatrist; and partnership arrangements with multiple social service organizations. All formal treatment services are complimented by Twelve Step support group attendance and access to the myStrength smartphone application for self-directed recovery.

Continued treatment engagement and long-term recovery are often contingent on an individual's ability to address other basic needs. Lack of transportation, or lack of internet technology in the tele-health virtual environment, and the inability to pay for childcare when reentering the community results in the inability to attend treatment appointments and maintain employment. No insurance and limited income may prevent someone from purchasing needed medications or participating in mental health services. New in this year's funding request are dollars to help reduce these barriers and provide targeted support to sustain recovery.

Outputs:

- B. How many unduplicated clients will be served? 500**
- C. Please list any other output goals (i.e. # presentations delivered, # medications provided, etc.)**
- 50 uninsured clients will benefit from tangible, and recovery specific barrier reduction funds.

Outcomes:

- D. Please provide two to three specific program SMART objectives for 2021. Examples include, "75% of clients receiving job training will retain their job one year after being hired," "increased fundraising efforts will result in a 15% increase in donations in 2021," Applicants will be expected to report their progress toward meeting these objectives in an annual report to the City.**
- i. 85% of adult women will report a decrease in substance use at completion.
 - ii. 70% of women will successfully complete residential substance use disorder treatment as defined by meeting goals and objectives on their treatment plan.
 - iii. 80% of women who complete the discharge satisfaction survey will report improvements in their physical health.
- E. Please describe the priority population you are working with.**

First Step at Lake View serves adult women who have been assessed as having a moderate to severe substance use disorder and meet the American Society of Addiction Medicine criteria for residential treatment. The facility prioritizes pregnant women and women with dependent children under the age of 12 years. Priority is also given to women who are uninsured and have no means to pay for treatment on their own.

F. What other agencies in the community are providing similar types of services, and how do you coordinate services?

There is no other organization in the community that provides a full continuum of substance abuse treatment services for women and their children. DCCCA and First Step at Lake View are unique in that role. We do, however, work closely with partners who are impacted by, or are involved with individuals struggling with substance abuse. Our successful treatment interventions are contingent on our ability to effectively address our clients' holistic needs through effective community collaborations.

Domestic Violence and Sexual Assault - DCCCA entered into a Memorandum of Understanding with The Willow Domestic Violence Center and The Sexual Trauma and Abuse Care Center in 2012. The partnership focuses on communication among agencies regarding shared clients, as well as drawing upon the expertise of each organization to avoid duplication. Ongoing efforts target reducing access barriers for women in any of the three programs by offering screening and assessment in their location. Currently, staff from The Willow facilitate a weekly group at First Step as part of the residential treatment schedule.

Nutrition – The Community Mercantile Foundation's "Growing Food Growing Hope" project supports a 5,000 square food garden on the First Step property. Student gardeners and their adult mentors work with First Step's women and children throughout the entire process, from preparing the garden, planting, caring and harvesting. Food gleaned is used in the First Step kitchen. Nancy O'Connor, the lead adult mentor, teaches a cooking class for the women twice monthly. Just Food facilitates an additional two classes.

Healthcare - DCCCA and Heartland Community Health Center implemented a formal working relationship in 2014 that provides primary medical care for women and children during and beyond their First Step stay. Heartland provides a physician to serve as DCCCA's Medical Director, offering oversight and coordinated service delivery in the treatment setting. Medication Assisted Treatment was added to our collaboration in 2019.

Mental Health - DCCCA refers to Bert Nash Community Mental Health Center when treatment clients need specialized services for Serious Profound Mental Illness. Limited access to needed psychiatric evaluation and medication management resulted in DCCCA contracting with an out of state psychiatrist who offers twelve hours of service monthly via tele-medicine. We also provide outpatient mental health services, using dually licensed therapists, to address limited community capacity for uninsured women.

Housing and Employment - The DCCCA team works closely with the Lawrence Douglas County Housing Authority and local Oxford Houses (sober living homes) for access to affordable housing. The Lawrence Workforce Center is the primary source for employment opportunities.

Douglas County Collaborations - DCCCA is a primary partner with the Behavioral Health Leadership Coalition, working collaboratively to reduce emergency room visits and incarceration, enhance Correctional Facility Reentry services, and expand the continuum of services for individuals struggling with addiction and mental health disorders. Continuing since 2018, Douglas County funds First Step at Lake View to deploy Peer Support Specialists to Lawrence Memorial Hospital when an Emergency Department patient is in need of social detoxification. The County has also funded a project in collaboration with the Douglas County District Attorney to offer a diversion program for non-violent, repeat female offenders whose substance use is directly related to their criminal offense. The project offers eight women annually a continuum of treatment and community-based services at First Step at Lake View. These new initiatives are incorporated into First Step's service delivery, but do not fund the primary substance use disorder treatment currently supported by The City of Lawrence.

SECTION 5. PROGRAM BUDGET INFORMATION

A. Provide a detailed budget for the proposed program using the form below (you may attach a supporting document).

Category	Requested Amount	Applicant Amount	Total Amount	Explanation
Personnel	34,476	1,009,140	1,043,616	Salary and 30% fringe benefit calculation for service delivery staff. The Special Alcohol Fund will offer funding for .25 FTE licensed counselor and .50 FTE certified Peer Support Specialist.
Fees & Services		108,288	108,288	Consulting, insurance, equipment maintenance
Estimates/Bids		0	0	
Travel		4,920	4,920	Travel and mileage reimbursement
Marketing			0	
Cost of Materials		0	0	
Operating Expenses	10,524	506,759	517,283	Supplies, trainings, utilities, licenses, facility allocations for office space. The Special Alcohol Fund will provide for barrier reduction funds associated retention in residential treatment (medications); mental health services, daycare fees, and transportation necessary to engage in continuing outpatient treatment to sustain recovery.
Other		168,729	168,729	10% overhead allocation
Grand Total	45,000	1,797,835	1,842,835	

B. Provide a list of all anticipated sources of funding for the proposed program in 2021. The total proposed program budget and total proposed program revenue should match.

Revenue Source	Anticipated Amount	Explanation/Status of Funding Request
City of Lawrence (Special Alcohol Funding)	45,000	
City of Lawrence (Other Sources) *	0	
Douglas County	32,000	Social detox access project, women's reentry project, behavioral health court
United Way	0	
Other (please describe) Fee for Service	1,188,355	Federal block grant, Medicaid, Kansas Sentencing Commission, Commercial Insurance, Self-Pay, childcare fees, food stamps
Other: DCCCA Subsidy/Contributions	577,480	Fund development, endowment annual investment, in-kind contributions
Grand Total	1,842,835	

*Other sources could include General Funding, Housing Trust Funds, Transient Guest Tax Funds, CDBG, etc.

C. What percent of the requested program costs are being requested from the City (include both Special Alcohol and Other)? 2.44%

D. Will these funds be used to leverage other funds? If so, how?

First Step at Lake View receives a finite allocation of federal substance use disorder block grant dollars that fund treatment for uninsured women. Funds are reimbursed on a per person per day rate, but do not cover the entire cost of care. Expenses

associated with these funds include personnel, food, supplies, primary medical care, psychiatry, and basic room and board expenses. Special Alcohol Funds allow First Step to offer the full comprehensive service continuum by ensuring sufficient staff coverage to meet licensure ratio requirements, implement Peer Support as an adjunct to primary treatment, and pay for barrier reduction needs that treatment dollars do not cover. First Step has received two new, but smaller revenue sources that partially reimburse prescriptions for Medication Assisted Treatment (not intended to be purchased with City dollars) and housing and utility costs for women returning to the community. These two sources blended with Special Alcohol Funds and primary treatment reimbursement ensure that women and their children experience the full complement of services to sustain recovery.

SECTION 6. SUPPLEMENTAL INFORMATION

Please attach your agency's most recent IRS Form 990, most recent financial audit, and most recent annual report if completed for your agency's board.

- A. If your agency has never filed an IRS Form 990, please select the check box.
- B. If your agency has never completed a financial audit, please select the check box.
- C. If your agency has never completed an annual report, please select the check box.

Based on the attached IRS Form 990, please answer the following questions:

- A. What is the total number of volunteers (estimate if necessary)? This is part I line 6 of the IRS Form 990.
60
- B. What are your agency's total liabilities? This is part I line 21 of the IRS from 990.
\$ 1,976,245
- C. What are your agency's total assets? This is part I line 20 of the IRS Form 990.
\$ 53,575,676
- D. What are your agency's total net assets or fund balances? This is part X line 33 of the IRS Form 990.
\$ 51,599,431
- E. What are your agency's permanently restricted net assets? This is part X line 29 of the IRS Form 990.
\$ 0
- F. What is your agency's land, building, or equipment fund? This is part X line 10c of the IRS Form 990.
\$ 7,268,020
- G. What are your agency's total expenses? This is part I line 18 of the IRS Form 990.
\$ 22,281,696

The signatures below attest that the information in this application is accurate and that, unless otherwise explicitly described in this application, no other source of City or community funding will be used to support the programming for which Special Alcohol Funds are being requested.

Sandra J. Dixon, LMSW

Sandra J. Dixon

11-19-2020

Agency Representative (PRINT)

Signature

Date