

**CITY OF DAVIS**  
**2004-2005 COMMUNITY DEVELOPMENT BLOCK GRANT APPLICATION**

**Organization Name:** CITIZENS WHO CARE, INC. / *In-Home Respite Program*

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Total Proposal Request: \$9,170 \_\_\_\_\_

  X   On-going Support              \_\_\_\_\_ New Project

**CDBG Eligible Category:** \_\_\_\_\_ Public Service  
(See List A)

**National Objective Compliance/Low and Mod Benefit:** Limited Clientele  
(See List B)

**City Council Identified Critical Needs:** (See List C)

- 1) Programs to Support Independent Living
- 2) \_\_\_\_\_
- 3) \_\_\_\_\_

PUBLIC SERVICE   X                        NON-PUBLIC SERVICE \_\_\_\_\_

**Beneficiary Information:**

- 70   Total number of beneficiaries in program
- 40   Total number of beneficiaries in program served with CDBG funds
- 75   Percentage of the CDBG beneficiaries with low/moderate income
- \$ 229   Cost per CDBG beneficiary (CDBG Request/CDBG Beneficiaries)

## **PROJECT NARRATIVE**

### **a. Need**

People are living longer. By 2010, nearly 40% of California's population will be over 65 years. As we live longer, our needs change. Too often, the frail elderly risk premature institutionalization. The In Home Respite Program supports independent living by avoiding premature institutionalization. In Home Respite places a volunteer with a frail senior for two hours each week. The two hours of respite care are often the difference between a senior remaining independent or being placed in a convalescent hospital prematurely.

The In Home Respite Program costs only \$62 per family per month. Families forced to pay for private respite services encounter fees of \$20 to \$25 per hour with a four-hour minimum. This equates to \$100 for only one day of respite care. Convalescent hospital care averages \$3,000 to \$4,000 per month. The financial impact alone substantiates the need for the program. Additional benefits include maintaining the emotional and physical health and reduction of unnecessary strain on the long-term care system.

The benefits extend beyond the frail senior. Caregivers experience clinical depression at significantly higher rates than their non-caregiving peers. In fact, over half (55%) of family caregivers are diagnosed with clinical depression. They are twice as likely to experience physical injury because of caregiving (Family Caregiver Alliance, 2000).

In 2002, the In Home Respite Program served 25 unduplicated seniors and their caregivers. In 2003, 28 seniors were served. Eight of these seniors received services in 2002 but 20 were new to the program. In the first two months of 2004, the program has already served 17 seniors with six new clients in this very short time frame. CWC anticipates serving at least 40 clients in the 2004-05 fiscal year. The dramatic increase reflects growing need, improvement in CWC's outreach efforts, and increased referrals from other senior serving organizations.

As our aging population increases, the availability of affordable respite care will become increasingly important. Volunteer-driven home based respite care offers the frail elderly and their families with the support needed to maintain quality of life and avoid premature institutionalization.

### **b. Benefit**

The In Home Respite Program avoids premature institutionalization of frail seniors. The program will benefit at least 40 Davis residents in the 2004-05 fiscal year. The proposed services are Limited Clientele Activities. This designation presumes the clients are principally low to moderate-income persons.

The proposed project also offers an improved approach. CWC analyzed its services throughout 2003. Analysis included staffing patterns, program delivery, and overall efficiency. As a result, CWC implemented several significant changes during 2003. Staffing patterns were adjusted to eliminate duplication and maximize individual strengths. As a result, the organization will increase the number of clients served in 2004-05 *and* decrease its cost per client.

In 2003-04, the cost per beneficiary was \$336. In 2004-05, CWC has reduced the cost per beneficiary to \$229 – a \$107 per beneficiary reduction. The agency now serves more clients at a reduced cost without compromising service quality. CWC remains committed to internal evaluation of its operations to ensure its funders receive the highest quality service at the most effective cost.

The program offers an additional benefit by using volunteers. Volunteers contribute two hours of respite care per family per week. While the client and volunteer may decide on a different schedule, the two hours per week represents the service standard. If forced to hire employees to pay for this service, the project's cost would increase by almost \$29,000 annually.

In-Home Respite Care contributes to the quality of life of the caregiver and the senior. By providing the service at no cost (contributions are encouraged but not required), the program remains available to Davis residents, regardless of income. Home based respite services result in strengthened families, decreased caregiver depression, and a substantial cost savings to the senior and our community.

**c. Other Resources and Collaboration**

As CWC improved its efficiency, it also expanded its funding sources during 2003. The agency continues to successfully leverage additional private support for all of its programs and services.

In addition to Davis CDBG funds, CWC supports the In Home Respite Program through donations and Area 4 Agency on Aging funds. The agency also benefited from a one-time \$25,000 grant from Catholic Healthcare West for 2004. The funds are intended to build capacity and increase clients and volunteers. The agency continues to raise almost 70% of its budget through fundraising revenues.

Collaboration is key to CWC's success. The organization believes it provides a unique and critical service that is strengthened by other community organizations. The agency strives to fill its unique niche while avoiding duplication of services.

Key partners include Yolo Hospice, Yolo Adult Day Health Center, Elderly Nutrition Program, and Davis Senior Center. The agency regularly communicates with these groups to provide referrals, solicit feedback, and discuss emerging trends.

Each year, the Executive Directors of CWC, the Elderly Nutrition Program, and Yolo Adult Day Health Center meet to identify clients utilizing multiple programs. In 2003, only one In Home Respite client used the program while receiving Elderly Nutrition Program services. Two other clients used both programs but at different times during the year – eliminating any perceived duplication. Three In Home Respite clients also used Yolo Adult Day Health Center. Records validate that the services were being received on different days and represent an augmenting, not duplication, of services. Two clients used both In Home Respite and Time Off for Caregivers. Neither client received respite care on the weekends so perceived duplication was again avoided. While clients may use the services of more than one agency, each agency's programs are unique. As a result, Davis's frail elderly have several resources to support their independence.

**d. Organizational Capacity:**

Citizens Who Care began in 1975 as an advisory committee of the Mental Health Association of Yolo County. By 1985, the organization established its Convalescent Hospital Visiting Program and its In-Home Respite Program in 1986. In 1988, the agency obtained nonprofit status per IRS 501(c)(3) criterion. Citizens Who Care currently implements five programs: In-Home Respite, Convalescent Hospital Visiting, Pet Visiting, Time Off for Caregivers, and Community Education. These programs function as part of a countywide service continuum supporting the frail elderly.

Citizens Who Care has a history of effective program management. The agency has managed grants from Woodland United Way, United Way California Capital Region, The California Endowment, Sierra Health Foundation, Sacramento Regional Foundation, and Catholic Healthcare West.

The agency's financial activities are managed through QuickBooks software. Each grant contract is tracked independently with all income and expenses being allocated by grant source. All expenditures require documentation (invoice, time sheet, etc.). The organization is in the process of reviewing all fiscal policies for appropriateness and to ensure internal and external accountability.

Program data is tracked through multiple sources. All referrals are forwarded to the Assessment Nurse. The Assessment Nurse visits the client's home and determines their suitability for the program. Upon admittance, the Assessment Nurse completes an In Take Packet. This documents basic data including age, ethnicity, medical conditions, income, etc. Each month, the Assessment Nurse updates the client's file. Updates document any improvements or declines in health. The Assessment Nurse maintains a client file with a second copy maintained at the agency's office.

All volunteers are screened and trained before being placed in any program. In Home Respite volunteers also submit to fingerprinting. Volunteers receive monthly contact from the Volunteer Director. Volunteers have access to monthly training opportunities through CWC and other senior service agencies

A 10 to 15 member board of directors governs Citizens Who Care. The board is comprised of standing committees including Finance, Human Resources, Programs, and Fundraising. The board reviews financial statements monthly. The agency completes an annual independent audit. Julie Bornhoeft, Executive Director, has nine years of nonprofit management experience. The Assessment Nurse, Susie McGibbon, R.N., has over three decades experience in public health and gerontology. Ellie Slaven, Volunteer Director, has seven year's experience managing volunteer programs.

## **SCOPE OF SERVICES**

### **a. Project Description**

The In-Home Respite Program will serve at least 40 Davis families, a 33% increase over 2003-04. Each family will receive two hours of weekly respite care resulting in 3,000 to 4,000 cumulative hours of respite care. Because families enter the program at different times, total respite hours vary annually.

The majority of referrals begin with a telephone call. The Office Manager or Executive Director documents calls and forwards the referral to the Assessment Nurse. The Assessment Nurse schedules an initial screening within 7 days.

The assessment occurs in the home. It determines appropriateness, identifies other necessary community services, and notes interests/challenges that influence volunteer placement. Within 30 days of assessment, a volunteer is placed. Following placement, families receive contact from the Assessment Nurse every 30 to 60 days. Volunteers communicate with the Volunteer Director monthly. The agency uses monthly case management meetings to assess the placement and ensure the family and volunteer are supported. The Assessment Nurse completes a status report on each client monthly. The report documents communication, challenges, etc. A duplicate file is maintained in the agency's office.

### **b. Target Group**

The program serves the frail elderly and their caregivers. Frail elderly is defined as a senior over 60 years of age experiencing one or more chronic conditions that affect daily living skills.

### **c. Outreach**

CWC promotes its programs through many methods. The agency distributes its brochures throughout the county. Brochures are maintained at senior centers, medical facilities, and churches. The agency requests its materials are provided in the "welcome packets" of local churches, as well. The agency maintains a website that includes printable forms for requesting services and becoming a volunteer.

CWC promotes itself through the media. The agency uses fundraisers, current events, and local contacts to leverage attention in newspapers and on television. These opportunities are also used to promote volunteer opportunities. The agency seeks out public speaking engagements. Each year the agency reaches over 1,000 citizens through presentations. The agency also participates in numerous health fairs and public events each year.

## **TIMELINE**

<b>Activity</b>	<b>Completion Date</b>
<ul style="list-style-type: none"><li>• Conduct client and volunteer satisfaction survey</li></ul>	July 2004
<ul style="list-style-type: none"><li>• Identify continuing families</li></ul>	July 1, 2004
<ul style="list-style-type: none"><li>• Conduct ongoing intake of families for a cumulative total of at least 40 Davis respite families.</li></ul>	June 30, 2005
<ul style="list-style-type: none"><li>• Maintain active caseload of at least 20 Davis respite families each month.</li></ul>	June 30, 2005
<ul style="list-style-type: none"><li>• Recruit and train at least 10 new respite volunteers serving Davis families.</li></ul>	June 30, 2005
<ul style="list-style-type: none"><li>• Provide four in-service trainings to respite volunteers.</li></ul>	June 30, 2004
<ul style="list-style-type: none"><li>• Provide quarterly listing of other educational in-services in county to volunteers.</li></ul>	June 30, 2004
<ul style="list-style-type: none"><li>• Telephone contact between client and Assessment Nurse every 30 to 60 days – assessed quarterly</li></ul>	September 30, 2004 December 31, 2004 March 31, 2005 June 30, 2005
<ul style="list-style-type: none"><li>• Monthly telephone or email communication between Volunteer Director and volunteers – assessed quarterly</li></ul>	September 30, 2004 December 31, 2004 March 31, 2005 June 30, 2005
<ul style="list-style-type: none"><li>• Conduct exit interviews with volunteer if/when service is cancelled.</li></ul>	June 30, 2004
<ul style="list-style-type: none"><li>• Provide quarterly status reports to the board of directors detailing case load and expenditures.</li></ul>	Quarterly

## **CITIZENS WHO CARE BOARD ROSTER**

### **President**

Maria Acuna-Feldman  
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**Committees:** Finance, Fund Development, Human Resources

**Term:** 3 **Term Expires:** 2005

**Birthday:** 12/13

### **Vice President**

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**Birthday:** 12/20

### **Treasurer**

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**Term:** 3 **Term Expires:** 2004

**Birthday:** 6/1

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**Birthday:** 1/17

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**Term:** 1 **Term Expires:** 2005

**Birthday:** 12/7

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**Term:** 3 **Term Expires:** 2005

**Birthday:** 3/7

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**Term:** 3 **Term Expires:** 2005  
**Birthday:** 3/17

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**Term:** 1 **Term Expires:** 2007  
**Birthday:**

#### **STAFF**

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**CITY OF DAVIS  
COMMUNITY DEVELOPMENT BLOCK GRANT PROGRAM**

**BUDGET SUMMARY FOR PROPOSED PROJECT**

Budget Category	Proposed Project	Other Sources	Total
<b>A. Salaries and Wages</b>			
Executive Director	\$0	\$2,496	\$2,496
Administrative Assistant	\$1,000	\$6,680	\$7,680
Assessment Nurse	\$2,000	\$4,624	\$6,624
Volunteer Director	\$4,000	\$4,320	\$8,320
Volunteer Labor (In-Kind)		\$28,709	\$28,709
<b>B. Fringe Benefits (10%)</b>	\$700	\$1,812	\$2,512
<b>TOTAL PERSONNEL BUDGET</b>	<b>\$7,700</b>	<b>\$48,641</b>	<b>\$56,341</b>
D. Office Rent		\$1,200	\$1,200
F. Telephone	\$120	\$350	\$470
G. Office Supplies	\$200	\$200	\$400
I. Printing/Duplication	\$350	\$350	\$700
J. Travel/Conferences		\$250	\$250
K. Other (Specify)			
Liability Insurance	\$450	\$1,400	\$1,850
Mileage	\$350	\$350	\$700
Fingerprinting	\$0	\$140	\$140
<b>TOTAL NON-PERSONNEL BUDGET</b>	<b>\$1,470</b>	<b>\$4,240</b>	<b>\$5,710</b>
<b>TOTAL PROJECT BUDGET</b>	<b>\$9,170</b>	<b>\$52,881</b>	<b>\$62,051</b>

**Budget Justification - Based on Total Program Costs**

**Salaries:** All requested salaries represent expenses associated with direct client assistance and program reporting.

**Executive Director:** The funds requested from CDBG reflect 8-9 hours per month devoted to completing telephone in-takes, supervising program, and preparing reports.

**Office Manager:** The CDBG requested funds are based on 35 - 40 hours per month for conducting telephone in-takes, maintaining client files, and preparing program billings.

**Assessment Nurse:** Reflects 20-24 hours per month conducting in-home assessments, providing support to families, and reporting program activities.

**Volunteer Director:** Time reflects 40 to 45 hours per month to screen, train, and coordinate program volunteers.

**Program Assistant:** Includes 10-11 hours per month spent in the program. Position assists with personal care needs of participants and program implementation.

**Volunteer Labor:** Reflects 2,300 to 2,500 cumulative hours at \$12 per hour. The in-kind value reflects the minimum number of volunteer hours expected by the program.

**Fringe Benefits:** Based on 10% of gross salaries per agency formula.

**Operating Costs: Reflect actual costs associated with program implementation.**

**Office Rent:** Reflects 25% of current rental costs. Office space provides location for confidential storing of client records at

**Telephone:** Based on \$39 per month to cover basic telephone service for three telephone lines used by staff.

**Office Supplies:** \$30 to \$34 per month for copies, client files, printer cartridges and desktop supplies.

**Liability Insurance:** Portion of required annual Liability Policy.

**Mileage:** Reimbursement for program staff to travel to client homes. Based on 160 to 170 miles per month.

**Fingerprinting:** Processing fees to cover the cost of fingerprinting 10 new Davis respite volunteers during the year.

2496  
7680  
6624  
8320  
2392      28704