

**PRIORITIES FOR THE
CONSOLIDATED COMMUNITY FUNDING POOL (CCFP)**

for Fiscal Years 2011-2012

**Approved by the
Fairfax County Board of Supervisors**

July 13, 2009



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Purpose:

This document presents the Consolidated Community Funding Advisory Committee's (CCFAC) recommendations on priorities for the Consolidated Community Funding Pool (CCFP) for the two-year funding cycle beginning in Fiscal Year 2011 (July 1st, 2010). These recommendations were approved by the Fairfax County Board of Supervisors on July 13, 2009. The recommendations were developed by the Consolidated Community Funding Advisory Committee (CCFAC), the citizen group established by the Fairfax County Board of Supervisors and charged with the responsibility to recommend CCFP priorities based on community and staff assessments of the human service and community development needs within the County. Members of the CCFAC are appointed by the County Executive and represent various public and private citizen advisory or administrative boards, councils and committees within the County.

The purpose of the CCFP is to provide public support for private community-based human-service programs through an orderly process that is responsive to changing community needs.

Background:

Over the past twelve years, the Fairfax County Board of Supervisors has provided approximately \$100 million local, state and federal resources through the CCFP to hundreds of human-service and community-development programs managed by non-profit and faith-based organizations in every part of the County. Through the CCFP, the funds are allocated among worthwhile applicants in accord with the priorities set by the Board of Supervisors through open procurement competition conducted by the County using citizen volunteer review panels.

Throughout its history, the CCFP has adjusted priorities and contracting requirements to meet changing needs and to recognize the changing nature of community-based providers. As recipients of resources from the funding pool have grown in sophistication, they have been asked to do more to measure outcomes, show clients' progress toward self-sufficiency, and collaborate with other providers to ensure that beneficiaries receive the many services they need. Services may benefit communities as well as individuals.

Needs Assessment:

The Fiscal Year 2011-12 CCFP priorities are based on a review and analysis of information regarding human service and community development needs and conditions in the County obtained from a variety of sources. These sources include:

- **Public Hearing:** The CCFAC conducted an announced formal public hearing on November 18th, 2008. Six representatives from Community-Based organizations presented information concerning needs that could be addressed with CCFP assistance and through the Annual Consolidated One-Year Action Plan.
- **Budget Comments:** The CCFAC reviewed key themes from community meetings on the budget held in the fall of 2008 and comments made about the Fairfax County budget in public hearings held March 30th, 31st and April 1st, 2009.
- **Briefings from County Staff** regarding ongoing County Initiatives to end homelessness, prevent gang involvement, and improve mental health services.

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- Review of Studies: The Survey of Fairfax County Basic Needs Providers: Trends in Participation, Demand and Service Levels 4th Quarter 2007 v.v. 4th Quarter 2008.
- Discussion at the CCFAC meeting held on June 9th, 2009, with representatives from potential recipient organizations, which modified an earlier draft of this document.

Focus:

For the next two-year funding cycle, beginning in FY 2011, CCFAC recommended that the Funding Pool priorities be based on the changing needs of county residents, and noted the fluid state of the economy, the growing diversity, the aging population, and increasing capacity to collaborate within the service providing community. Particularly, CCFAC noted the significant and steady rise in demands for emergency services and the sustainability challenges facing nonprofits in the current economy.

The CCFP will continue its historic focus on programs that provide direct human services. As in the past, some institutional activities to support direct services such as organizational development, professional development, case management, public education, outreach, and networking will be appropriate components of a human service program proposal. Yet, indirect services cannot be the entire project proposal nor should they be the majority. This cycle, the Fund explicitly recognizes the value of programs serving neighborhoods (geographically defined) and communities (shared interests, not bound to one location), as well as those for individuals and families.

The Fund will not provide general support for organizations.

The CCFP will focus on measurable outcomes for individuals, families, neighborhoods and communities, rather than on types of services or particular populations of clients. When appropriate, these outcomes should be long-lasting and measurable to advance the human services goal asserted by the Board of Supervisors in the County's 2007 Comprehensive Plan.

Fairfax County should provide a range of services and facilities for all residents, so that they may sustain and secure a productive lifestyle. Each individual should have the opportunity to achieve self-sufficiency and function to the limits of his or her ability, particularly in providing family stability.

The CCFAC recommendations for Funding Pool priorities listed in the attachment respond to and support the Fairfax County Board of Supervisors initiatives to:

- Prevent and end homelessness within ten years,
- Preserve and increase the availability of safe affordable housing for low/moderate income residents,
- Reduce the incidence and consequences of youth involvement in gangs,
- Address the incidence and consequences of domestic violence,
- Meet the special housing and human service needs of seniors and persons with disabilities,
- Reduce the disproportionate representation of minorities among youth experiencing educational or other developmental problems,
- Enhance efforts to prevent conditions or behaviors that undermine health, stability, growth and development or independent living in the community.

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The CCFAC believes that the four outcome-focused priorities described in the attachment reflect a continuum of services. We recognize that many programs could fit more than one of these categories. Further, we know that most situations require more than one service to achieve lasting results. However, we do not expect every application to meet every need or fall under every category. To the contrary, we expect that programs will address specific needs and produce specific outcomes within one or at most two categories.

In this cycle, the CCFP will encourage and recognize program proposals that acknowledge the complexities of situations and needs, whether those services are all provided by one comprehensive service agency, or by a coordinated network of single- or multiple-service organizations.

The CCFP will also continue to work with contract recipients to strengthen their internal management and program outcome evaluation capacities.

The attachment describes four recommended priorities, the outcomes to be achieved, target funding ranges, and service examples.

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I. PREVENTION

Description: Services in this category are intended to help those who are at-risk of falling into, but are not yet in situations which would require significant, multiple or ongoing interventions or services. Those who are repeatedly falling into difficulties generally need more extensive and complex services than “prevention”. This category also includes community and neighborhood development programs that provide early and positive public engagement to identify emerging problems and solutions, and develop community-based prevention activities.

Outcome: Families and individuals get help to remain independent and have the tools and resources to prevent future or ongoing dependence. Communities increase their ability to develop and provide preventive services.

Target Funding Range: 10-20%

Service Examples (may include some of the following examples, but not limited to):

- Mentoring programs for youth, adults and families
- Conflict resolution and anger management training and counseling
- After-school or other programs that provide positive alternatives to risky behavior
- Courses that teach language or culture to help groups interact positively
- Life-skills and healthy choices programs
- Information about how to find and access services
- Financial literacy/management training and counseling to foresee and prevent financial crises
- Health fairs and health screening clinics, dental clinics; inoculations, nutrition education
- Community or neighborhood need/asset assessments to engage local resources for implementing community-based prevention programs

II. CRISIS INTERVENTION

Description : Services in this category assist individuals and families that need (due to personal or social crises such as those related to the economic downturn of 2008-09, a health crisis, or temporary disability) short-term or one-time assistance with basic needs (food, shelter, transportation, counseling) to avoid falling more deeply into dependency on public support. In addition, providers of these programs should conduct initial assessments or referrals to identify longer-term or chronic issues and steer recipients toward resources to address these more complex problems. This category would not cover ongoing services to address more chronic conditions such as illiteracy, substance abuse, long-term poverty, ongoing illness, or permanent disability.

Outcome: Individuals, families or communities in crisis get help to overcome short-term problems (generally not more than three months) and quickly move back to independence if appropriate.

Target Funding Range: 15-25%

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Service Examples:

- Food pantry
- Utility payments
- Rental assistance
- Financial counseling
- Furniture collection and distribution
- Disaster response
- Services to victims of domestic violence and their families
- Emergency medical assistance, including emergency counseling and pharmaceutical assistance
- Provision of temporary or emergency shelter to the homeless

III. SELF-SUFFICIENCY

Description: Services in this category recognize that many social problems are complex in origin, and require complex intervention. Sophisticated assessment, coordination, collaboration, and case management are generally required to provide these services effectively. The people, families, neighborhoods and communities served have long-term, but not permanent problems. Services in this category may link to prevention services, but should not be confused with them. This category should not include emergency short-term (category II) or ongoing needs (category IV) services for people or families.

Outcome: Families, individuals, neighborhoods and communities get comprehensive services addressing many facets and needs so that they can attain self-sufficiency over a period of three months to three years.

Target Funding Range: 45-55%

Service Examples:

- Evaluation of long-term needs
- Development of a comprehensive plan to achieve self-sufficiency, which may include phased services and/or referrals
- Acquiring/preserving/rehabilitating/constructing affordable, accessible and stable housing with accessible supportive social services
- Transition assistance requiring involvement with individuals or families over a period of more than three months
- Employment training/job skills/awareness of economic opportunities
- Primary medical/dental services
- Counseling services
- Trauma recovery
- Adult education

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- Cross cultural assistance
- Child-care to help parents stay employed
- Legal services
- Transportation to provide access to existing programs or services
- Financial asset formation

IV. ONGOING ASSISTANCE

Description: Services in this category meet the needs of people who because of age or other permanent conditions will need ongoing help, and likely will never achieve self-sufficiency. It may be difficult to initially assess whether an individual or family needs services from this category, as compared to another category. Indeed, those receiving ongoing services may also benefit from preventive programs, require emergency services, or move from dependence to self-sufficiency in some areas of their lives while needing ongoing assistance in others. Programs to help neighborhoods or communities address growing ongoing service needs would also fall into this category.

Outcome: People, neighborhoods and communities that have continuing and long-term needs achieve or maintain healthy, safe and independent lives to the maximum extent possible

Target Funding Range: 10-20%

Service Examples:

- Affordable, accessible and stable long-term housing with supportive social services
- Services to assist people transitioning from institutional to home or community based care
- Personal assistance with routine tasks
- Transportation to medical appointments
- Social environments for isolated individuals
- Home health visits
- Individual and family counseling
- Respite services to help caregivers
- Nutrition assistance
- Supportive employment

*Capital Projects from the Community Development Block Grant
may be awarded in multiple categories (generally self-sufficiency and ongoing services)
independently of the target funding percentage.*

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