Household Assistance to the Intellectually and Developmentally Disabled (I/DD)

RFP for Coronavirus State and Local Fiscal Recovery Funds

The Arc of Buncombe County

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Application Form

Question Group
Buncombe County requests proposals for projects to help the community recover from and respond to COVID-19 and its negative economic impacts.

Buncombe County has been awarded $50,733,290 in Coronavirus State and Local Fiscal Recovery Funds (Recovery Funding), as part of the American Rescue Plan Act. This infusion of federal resources is intended to help turn the tide on the pandemic, address its economic fallout, and lay the foundation for a strong and equitable recovery.

Buncombe County is committed to investing these funds in projects that:

• Align to county strategic plan and community priorities
• Support equitable outcomes for most impacted populations
• Leverage and align with other governmental funding sources
• Make best use of this one-time infusion of resources
• Have a lasting impact

Proposals shall be submitted in accordance with the terms and conditions of this RFP and any addenda issued hereto.

Click here for the full terms and conditions of the RFP

Coronavirus State and Local Fiscal Recovery Funds*
Name of Project.

Household Assistance to the Intellectually and Developmentally Disabled (I/DD)

Amount of Funds Requested*
$50,000.00

Recovery Fund Eligible Category*
Please select one:

Assistance to households

Brief Project Description*
Provide a short summary of your proposed project.

The Arc of Buncombe County, Inc. (Arc/BC) is the only local agency serving I/DD citizens and their families/caregivers and offer Crisis Intervention services. Arc/BC defines Crisis Intervention similarly as “Assistance to Households” in the RFP. The primary focus will be home repairs, rent/mortgage/utility assistance and counseling/legal assistance to prevent eviction/homelessness. The remaining items in
“Assistance to Households” may also be provided as a secondary grant focus based on client needs. Unemployment due to COVID-19 resulted in many home repairs to include leaking roofs, broken toilets, sagging floors, and mold being put on the “back burner” waiting for the return of a steady income. Generally, the I/DD population began the pandemic with minimal levels of income, little reserve, and high expenditures due to medical needs that co-exist with an I/DD diagnosis. The Arc/BC systems for managing such requests are stable and effective but are increasing in number and cost.

**Project Plan**

Explain how the project will be structured and implemented, including timeframe.

“Assistance to Households” type requests come from the client, family members, social workers, neighbors, school staff and medical staff. The Arc/BC establishes files for each client at intake to collect personal, financial, and/or medical information to assist in understanding and planning for client needs.

The Arc/BC prides themselves in strong and numerous collaborative relationships built and maintained throughout its history. These groups are supportive and willing to assist which results in the Arc/BC Executive Director (ED) coordinating “financial packages” to fulfill requests. Projects funds come from Arc/BC grants, donations and fundraisers coupled with time, supplies and funds from collaborative partners. Requests are processed/organized within 3-5 days with completion occurring in a timely fashion. The Arc/BC Executive Director (ED) monitors projects ensuring tasks are completed according to schedule and satisfactorily. Upon completion, payments are always made to the vendor/contractor.

To be noted is the strain COVID-19 has placed on area non-profits, making the coordination efforts typically provided for locating funding via the Arc/BC even more difficult to accomplish.

Throughout the process, Arc/BC visits clients to determine assistance to proactively manage future needs. Clients have received financial education/counseling from OnTrackWNC with those services providing positive and productive outcomes for I/DD clients. As the possibility of eviction/homelessness increases as COVID-19 supports decrease, the Arc/BC will coordinate needed legal representation/funding for overdue payments and/or counseling services. If eviction/homelessness occurs without timely notice, the Arc/BC has arrangements with hotels to provide emergency temporary housing. Shelters are an unfriendly option for the I/DD person; especially for children/females. Clients may be bullied and taken advantage of by other shelter residents. For safety and security reason, staff remove any client adaptive equipment (wheelchairs, canes, communication devices/I-pads). However, this leaves clients unable to get to a restroom or communicate their needs and may result in a behavioral outburst. Therefore, the Arc/BC avoids utilizing shelters, even though it results in more time-consuming coordination efforts of housing for the homeless. The receipt of grant funds will increase the availability and expediency of support delivery.

Families need appropriate housing/accommodation, not only for safety but also as part of the client’s therapeutic plan. For example, therapy often begins in home with caregivers to learn how to arrange furniture, locate client belongs and make all items accessible to promote independence. This pattern of therapy beginning at home continues for all therapies (speech, PT, OT, etc.) that have been identified as a need. As the client learns and is more comfortable, these therapeutic skills are transferred to school and community.

**Statement of Need**

Describe the need that this project will address. Include data to demonstrate the need, and cite the source of the data.

The CDC reports attitudes are a main barrier to the disabled. While most understand the needs of the physically disabled, many continue to stereotype and discriminate against the cognitively disabled. When
assuming disabilities limit participation in life or viewed as a personal tragedy, the I/DD person, consciously/unconsciously, may be excluded from life activities. Exclusion results in inadequate diagnosis, services, advocacy and family support blocking one’s ability to reach their fullest potential. Two pediatric studies report increased I/DD diagnoses in children 3-17 from 16.2% in 2011 to 17.8% in 2017. While reasons are not clear, the increased rate along with attitudinal barriers support a need for increased services.

Arc/BC demographics show that of families supported, 6% have two parents, 3% are headed by grandparents and 91% are single mothers. Gender data shows males are 57% of their clientele with 43% being females. Racial demographics show 45% are Caucasian, 38% are African American, 2% are Latino. The remaining 14% identify as “mixed” or “other”.

The 2020 WNC Healthy Impact Data project provides American Community Survey and US Census data to be used for prioritizing local health related goals. Disability figures are reported for 16 WNC counties. The Buncombe County (BC) disability rate is 13.6%, lower than the overall WNC rate of 18.0% and equal to the state rate. In BC, the highest rates belong to American Indians (33.1%) and African Americans (17.1%). In BC, 7.2% of the disabled are living independently with difficulty, 7.1% have ambulatory issues, 6.0% have cognitive issues, 4.2% have hearing deficits, 3.2% have self-care deficits and 2.5% have visual impairments. Buncombe County exceeds the state rate in hearing deficits, cognitive deficits and in living independently with difficulty. This data does not cover all details of living with a disability but indicate support needs exists locally.

**Link to COVID-19**

Identify a health or economic harm resulting from or exacerbated by the public health emergency, describe the nature and extent of that harm, and explain how the use of this funding would address such harm.

The CDC reports those with I/DD are 3X more likely to have chronic medical conditions (lung disease, heart condition or weakened immune system) than a person without disabilities. This increases the chances of becoming seriously ill from COVID-19. Congregate living settings and social inequities increase the likelihood of becoming severely ill.

While funding cannot impact the harm of COVID-19, it can address the social inequities that put the I/DD person at more harm than the non-disabled person. All items in “Assistance to Households” are key in addressing social inequities. Examples are summarized:

- **Rent/mortgage/utility assistance, eviction/homelessness prevention, home repairs:** These address the ability to provide safe/affordable housing needs that are covered in this grant.
- **Food assistance:** Due to lower salaries, many rely on food banks for adequate food. Underlying medical conditions, may require fresh fruits/vegetables (rather than processed foods) not readily available at food banks.
- **Internet/job training:** Both are needed for school age and adults with I/DD to provide marketable employment skills.
- **Emergency assistance for burials:** Providing an adequate burial allows for the “goodbye” which can be important for the family.
- **Cash assistance:** Can provide for tires, car repairs, medical care co-pays, childcare, etc.

Not only will grant funds address the items that impact inequities, the act of supporting the I/DD person results in more social contact and conversation. Friendships and caring relationships develop, and it is easier to discover additional needs to assist the I/DD person in becoming more independent. It is impossible to determine the full extent of benefit the I/DD person may derive from this support, but it is much easier to see the results of not having these supports. We all need supports in life to be our best person, and the person with I/DD is no exception.
Population Served*
Define the population to be served by this project, including volume and demographic characteristics of those served.

Throughout this grant application, all figures are based on current client data as an estimate for those that would be served in FY 2022:

Arc/BC serves 3,000-3,500 individuals/families each year. Diagnoses include Down Syndrome, Autism, Cerebral Palsy, Fetal Alcohol Syndrome, chromosome disorders, and other I/DD. Additional challenges include physical disabilities and socioeconomic issues. Arc/BC serves all WNC counties with the majority being from Buncombe County (75%).

Using the HUD tables with $72,500 as the median income for a family of four, all clients will be 50% ($36,250) or lower than the median.

While COVID-19 impacted the local I/DD clientele of Arc/BC, there were unexpected increases that resulted from the pandemic. Fourteen families with disabled children requested services from the Arc/BC that had not done so prior to the pandemic. The pandemic restrictions and the resulting unemployment, meant that those that had previously managed a household, jobs and the care/expense that comes with raising a disabled child, were no longer able to do so. Several families with I/DD children moved to Asheville with no place to live. The number of referrals due to domestic violence increased as the pandemic lingered.

Several of the families seeking assistance had not heard of the Arc/BC and available services at the time they were referred which resulted in an increased understanding of local I/DD services. These families were especially appreciative of the support they received stating they “did not know what we would have done” otherwise.

Results*
Describe the proposed impact of the project. List at least 3 performance measures that will be tracked and reported. If possible, include baselines and goals for each performance measure.

1. Client requests in “Assistance to Households” category are met 80+% of the time.
2. Arc/BC staff will include client in planning phases 80+% of the time.
3. Arc/BC and client will develop plans for any additional education/counseling support 80% of the time.

The current Arc/BC Crisis Intervention measures have tasks (i.e., medical emergencies and transportation) that are not included in this grant under “Assistance to Households”. Therefore, baseline data is not available as the parameters of these measures were developed specifically based on the “Assistance to Households” category. It is not uncommon for the Arc/BC to be in this position, as every grant may define things a bit differently. Therefore, the data collection measures may be adjusted to meet the requests of the grantor. The goals/objectives that were put in place for this grant are certainly attainable based on historical data.

Evaluation*
Describe the data collection, analysis, and quality assurance measures you will use to assure ongoing, effective tracking of contract requirements and outcomes.
While evaluation responsibility falls with the ED and Board of Directors, the Arc/BC has volunteer committees with a wide range of experience. Working committees assist with all Arc/BC functions to include grant projects. One specific volunteer has extensive knowledge of construction/home repairs and assists with similar Arc/BC projects. The Arc/BC process is to obtain the contract work/price/plan for the project that notes the required approvals from city/county. The Arc/BC meets with contractor at various stages of the job to assess progress and apprise the client of progress. The Arc/BC maintains records of inspections/approvals from the city/county. Should work adjustments be required as a result of inspections, the Arc/BC will ensure they are completed and obtain a copy of final inspections. Prior to payment, the Arc/BC will ensure work is complete and required inspections have been done and are passed.

The Arc/BC grant budget requests funding for a .25FTE Administrative Grant Manager. The position would assist the ED with the determination of client eligibility/intake and need for services/supports coupled with the tracking of tasks/work completion. In working with the clients and/or vendors, this position will be responsible for troubleshooting, solution assistance, coordinating schedules for the purpose of providing reporting information to justify grant expenditures, delivery of resources/supports and to identify ways to improve the process of service/support delivery.

Quality assurances measures include quality of vendor work, efficient identification of needs, satisfaction of client and sound financial decision-making. Staff and Board members review actions, identifying points in the process where performance/satisfaction could be improved. The processes are modified to ensure the best possible outcome for the client and for the prudent use of funds.

Equity Impact*

How will this effort help build toward a just, equitable, and sustainable COVID-19 recovery? How are the root causes and/or disproportionate impacts of inequities addressed?

The National Core Indicators (NCI) states those with I/DD experience poorer health outcomes than those without disabilities. While some are related to a diagnosis, health disparities for the disabled are greatest among the “socioeconomically disadvantaged” meaning they come from a background of poverty that limits access to opportunity. This results in limited access to quality healthcare/health promotions programs.

The United States Interagency Council on Homelessness (USICH) notes safe/affordable housing results in a lower rate of homelessness. Studies show children in stable housing are less likely to experience mental health issues, developmental delays, poor cognitive outcomes, to repeat a grade and drop out of school. Safe/affordable housing strengthens family well-being and reduces domestic violence. With safe/affordable housing, the family is more able to manage transportation, childcare, food, medical and other necessities. Safe houses are more likely to be free from physical hazards that contribute to chronic disease and injuries.

For the disabled with SSI as the sole income source, they are unable to afford safe/decent housing anywhere in the US. Rental assistance is a necessity and without it, they are the group most likely to be homeless. The Federal monthly SSI maximum in 2021 is $794 for an individual.

Assisting with items in “Assistance to Households” is key to addressing root causes of inequities faced by I/DD persons who struggled pre-pandemic. Pre-pandemic, 82% of the general population was employed and 52% of those with disabilities was employed. Of the disabled population not employed, 72% said they would like to work (US Census). The post-pandemic economic recovery for all will be slow to reach the pre-pandemic levels and for those with disabilities, it will be slower.
**Project Partners***
Identify any subcontractors you intend to use for the proposed scope of work. For each subcontractor listed, indicate:
1.) What products and/or services are to be supplied by that subcontractor and;
2.) What percentage of the overall scope of work that subcontractor will perform.

Also, list non-funded key partners critical to project.

Since the projects within the grant would be classified as home repair as opposed to a building project, the products and/or services and the overall scope of the work will be identified for each project. For some projects, grant funds may be used to buy materials and/or pay contractors. In some instances, portions of the time may be donated.

During the development stages, staff always look for the most cost effective products and vendors. The Arc/BC has also developed collaborative relationships with vendors and contractors that are willing to go into homes of the disabled clients to complete the work. The Arc/BC will continue to utilize those vendors that have demonstrated skills over time in working successfully with and for the clients. Examples of long term vendors include, but are not limited to: TP Howard, Jay’s Roofing, Chris Lawn Care and Minor Repairs. The Arc/BC will continue to interview new contractors as well to ensure the most efficient use of funds.

Each subcontractor, following meeting(s) and on-site visits as needed with the ED, will present the work to be done and materials to be purchased. If funding is provided for the .25FTE, much of this work will be completed by that employee. Once the work itself and the materials are identified with all assignments made and agreed upon, the subcontractor will be responsible for 100% of the work. If a project is shared between one or more subcontractors, the division of labor will be identified. Timeframes/deadlines will be identified and will be modified should weather, shipping deadlines, etc. interrupt the planned completion. All parties will sign in agreement and will initial any modifications that occur.

These are the non-funded key partners:
- Eblen Foundation
- WNC Bikers
- Buncombe County DHHS
- St. Vincent DePaul
- Family Preservation Services
- Asheville-Buncombe Community Christian Ministry
- Swannanoa Valley Christian Ministry
- Vaya Health

**Capacity***
Describe the background, experience, and capabilities of your organization or department as it relates to capacity for delivering the proposed project and managing federal funds.

The Arc/BC has managed 60+ years of state grants since its formation as the primary source of income to serve the clients. The Board of Directors has several long-term members that are Accountants, Attorneys, and prominent local business owners that assist with and review the work of the Arc/BC. The world of grants and subsequent reporting is quite familiar to the Arc/BC and compliance with all requirements has been a necessity for their continued operation. The Arc/BC’s reputation in the community is one of being fiscally responsible in the delivery of services and financial management. Other non-profits in the local area respect the work of the Arc/BC and welcome collaboration with the Arc/BC and the clientele they serve. Additionally, all financial audits to include the Form 990 and the Independent Accountant’s Review Report are submitted as required and are in full compliance with no findings noted.
Being familiar with the increasing complexities of grant reporting/record keeping, the Arc/BC is requesting a .25 FTE position to assist with the grant management. A summary of duties follows. Should the position be funded, a more detailed job description will be created.

Administrative Grant Manager:
Duties will include, but not be limited to assisting with the determination of client eligibility and need for services/supports requested coupled with the tracking of the varied tasks and completion of the work. In working with the clients and/or vendors associated with the delivery of services, this position will be responsible to troubleshooting, assisting with solutions, coordinating schedules, with the primary purpose of providing information for reporting that clearly justifies the spending of funds and delivery of resources/supports are in compliance with the grant.

Budget*
Provide a detailed project budget including all proposed project revenues and expenditures, including explanations and methodology. For all revenue sources, list the funder and denote whether funds are confirmed or pending. For project expenses, denote all capital vs. operating costs, and reflect which specific expenses are proposed to be funded with one-time Buncombe County Recovery Funds.

Download a copy of the budget form HERE. Complete the form, and upload it using the button below.
BunCo Recovery Funds budget template.xlsx

Special Considerations*
Provide any other information that might assist the County in its selection.

Of special consideration is the impact that COVID-19 had on the income for the Arc/BC. During the pandemic shutdowns, the Arc/BC was unable to have two annual fundraisers. The two fundraisers supplied $65,000-$85,000 annually over several years. These funds were designated to programming needs.

Therefore, at a time when the Arc/BC clientele was unemployed, the needs rose. In spite of the additional unemployment funds supplied by the state, the need for basic items saw and continue to see inflated prices. Medical appointments continued to require attention. The Arc/BC worked with clients to encourage even small amounts of money be paid for rents/mortgage/utilities each month to ease the burden when the time came to “catch up”.

The stress of the pandemic resulted in increased divorces and domestic violence across the country to include the Arc/BC clientele. As previously mentioned, families that had never needed the support of the Arc/BC, now came to them for financial assistance.

The Arc/BC has increased its grant submissions to close the gap created by the lack of fundraisers. However, all non-profits found themselves in this same situation. Grantors shared that the number of grants submissions had doubled and even tripled. In some instances, grantor that had supported the Arc/BC chose not to do so and/or did not support at the level requested.

The Arc/BC managed to keep its doors open with the CARES funding but had to prioritize the order and amount of requests to be filled at a level not previously experienced. Through the diligent efforts of the ED, needs were met one way or another. Fundraisers are to resume this year, but not at the capacity of previous years.
As COVID-19 variants continue to spread, the true end of the pandemic is not clear. The Arc/BC appreciates your careful consideration of support for our most vulnerable citizens.
File Attachment Summary

Applicant File Uploads

• BuncCo Recovery Funds budget template.xlsx
## Coronavirus State and Local Fiscal Recovery Funds
### Proposed Project Budget

**Organization Name:** The Arc of Buncombe County, Inc  
**Project Name:** Coronavirus Fiscal Recovery, IDD Clients & Families  
**Amount Requested:** $25,000 over 2 years + $50,000

#### Proposed Project Revenue Funder

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<th>Amount</th>
<th>Confirmed or Pending?</th>
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<tr>
<td>Arc of Buncombe County Fundraising Events, Program Specific Ask</td>
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**Total** $ 85,344.00

#### Proposed Project Expenses

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<th>Proposed Recovery Funds</th>
<th>Other Funds</th>
<th>Total</th>
<th>Capital or Operating Expense?</th>
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<td>$ 22,200.00</td>
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**Total** $ 85,344.00