



**Community Services  
Funding Recipients  
2011 Final Reports**

# Community Services Funding Recipients 2011 Final Reports

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# **Bainbridge Island Child Care Centers**

**Preschool through School Age Nonprofit Organization Established 1974**

1. *Summarize the activities undertaken in providing the services described in Attachment A.*

Through the COBI Social Services Grant, BICCC provided:

- ⇒ Direct Scholarship to 24 children from 19 families totaling 7220 hours of service in childcare, preschool, after school care and summer camp.
- ⇒ Staffing for children with Special Needs throughout the summer for 16-18 children with established IEP's (special needs).
- ⇒ Implementation and Coordination of Scholarship Program for families to help transition into our programs.

2. *Reference the project objectives specified in Attachment A. Were those objectives achieved? Why or why not? Were there any unexpected positive outcomes or challenges?*

Objective achieved in Direct Scholarship as our hours of service increased totaling 7220 hours of service. We served fewer children than predicted, but for more hours. During 2011 there was a steady decrease in families that qualified for DSHS subsidies. There were higher restrictions placed on families due to less WA state funding and fewer could qualify.

The exception to this is that we have more foster children who require more sensitivity and staffing. DCFS requires foster children to attend only fully licensed childcare centers. All of the children are school age.

The Staffing for children with Special Needs throughout the summer is of paramount importance. Our ability to have this creates a more harmonious environment, smoothes transitions and provides the best possible positive experience for all children in the program. We served children with special needs with autism, sensory integration issues, delays, blindness, and behavior issues. The unexpected outcomes included enrolling a child who was blind. We were very concerned about he would navigate the building and if he would socialize with the other children. He quickly learned to maneuver and made "best friends".

Implementation and Coordination of Scholarship Program for families to help transition into our programs is a minor but necessary component of the entire program. The actual costs are at least double, but BICCC manages the funding. The majority of families in the program are also young or have very limited resources.

Our ability to guide them to services and discuss best methods adds to their ability to stay in jobs or completely schooling.

3. *Reference the specific measurable results specified in Attachment A. Were they achieved? If not, what challenges prevented the achievement of the anticipated results?*

We estimated that 6050 hours of service would be required for 2011, however we actually provided 7220 hours of service. This projection was based on previous year's averages. Fewer children were served due to stricter DSHS guidelines, families in transition that moved out of the area and job losses.

4. *Describe involvement of any partners specified in Attachment A, as well as any unexpected cooperative relationships that developed through implementation of the project.*

Our ability to review and qualify families is due to the involvement of social workers from Helpline House. They conduct financial reviews and assess families for other services. This partnership allows us to distribute the funds with confidence so that the children of island families can have a positive childcare experience while parents are at work.

The larger group of social service agencies continue to work together to coordinate and communicate in regards to changes in systems. BICCC works primarily with BYS, B&G Club, HRB, Special Needs Foundation, and YWCA-Alive Program.

5. *Reference the project budget specified in the Attachment A. Provide an analysis of actual expenses and income in relation to the projected budget.*

The expenses and income synchronized exactly. Direct scholarship did exceeded the budget, which makes the 2% increase for 2012 beneficial. Funding for the excess is provided by other community grants.

Grants-COBI	
a) Direct Scholarship	\$22,250.00
c) Special Ed Support	\$2,000.00
d) Implementation	\$2,000.00

**Final Report of Services Provided by Bainbridge Island Special Needs Foundation in 2011**

1. The Bainbridge Island Special Needs Foundation performed over 12,000 hours of direct client care in our community throughout this past year of 2011. We served 37 different individuals with a day program that gave improved physical health, mental wellbeing, and social interaction, while providing vocational training and community interaction in everything we do.
  
2. During 2011 we have seen an evolution of our programs to keep up with the changing needs of our client base. Many of our clients have achieved the original objectives of educational, vocational, and community access for these young adults as they made their transition from public school to community life. As their lives have stabilized after high school, our programs have provided a push toward continued daily physical activities, cognitive challenges to improve mental acuity, and social exercises to improve their relationships both within their peer group at the Stephens House as well as out in the community at large.
  
3. Our vocational and community outreach programs have achieved measurable results. Five of the clients whom we see weekly have part-time jobs that have lasted more than 3 years at local businesses such as Safeway, Central Market, Salmon Creek Cafe, and the Kitsap E-Z Earth compost manufacturers. Working clients with developmental disabilities still return to Stephens House for our weekly programs of swimming, bowling, craft projects, and outings to local museums and sports activities. We have observed enduring friendships between clients that gather at our facility. This social interaction is a key factor in achieving a high quality of life.
  
4. Because the majority of our clients come to our program immediately after leaving public school, we work very closely with the BISD's Adult Living Program. Several of those students are already clients at the Stephens House on school breaks and summer vacation. We also work with the other school district's special education instructors and share in community-wide social activities such as dances and parties put on by the People First organization. Music is an important part of our program and we work with the Island Music Center to provide regular concerts that are available to everyone in the special needs community.
  
5. Analysis of Actual versus Projected Budget for BISNF in 2011.

<b>INCOME</b>	<b>PROJECTED BUDGET</b>	<b>ACTUAL FIGURES</b>
Program Fees	\$39,200.00	\$41,703.00
Grants	\$30,000.00	\$31,690.00
Individual Donations	\$10,000.00	\$15,520.35
Fund Raiser Events	\$3,600.00	\$2,643.50
Fund Raiser Merch.	\$5,000.00	\$2,580.42
 Total Income	 \$87,800.00	 \$94,137.27
 <b>EXPENSES</b>		
Employee Salaries	\$56,400.00	\$51,778.70
Rent of Facility	\$15,000.00	\$15,000.00
Maintenance of Facility	\$1,000.00	\$2,135.67
Utilities	\$3,600.00	\$15,729.85
Insurance	\$3,500.00	\$3,283.00
Program Supplies	\$2,000.00	\$3,649.77
Outing costs	\$1,000.00	\$2,567.19
Licenses & Permits	\$400.00	\$242.00
Professional Dues	\$200.00	\$85.00
Fundraising Materials	\$900.00	\$473.20

Advertising	\$500.00	\$428.38
Postage	\$100.00	\$120.40
Miscellaneous	\$3,200.00	\$755.25
Total Expenses	\$87,800.00	\$96,248.41
		-\$2,111.14
		Income - Expenses for 2011

The \$7,500 Funding from COBI provided 7.8% of our actual annual expenses in 2011. Thank you.

Submitted by Norman Johnson, president BISNF

1/24/12



## City of Bainbridge Island

### 2011 Final Report

**Organization:** Bainbridge Youth Services

**Contact Person:** Lori Midthun, Executive Director **Phone:** 842-9675

**Email Address:** lori@bainbridgeyouthservices.org

**Organization's Mailing Address:**

P.O. Box 11173 Bainbridge Island, WA 98110

**Summary of services provided, partnerships, and trends:**

Services provided by these funds supported the BYS mission to promote the social and emotional well being of all community adolescents through counseling and diverse outreach programs and services. Funds paid counselors, primarily, with some dollars supporting administrators, trainings, and support staff.

Founded in 1962, BYS's primary function is to provide counseling for teens. Bainbridge Youth Services (BYS) provides professional, confidential counseling to youth ages 12 through 19. Although BYS receives many referrals from school teachers, guidance counselors, the school nurse, and parents, many students self refer to BYS counselors.

In 2011, BYS counselors provided over 1,200 client contact hours to youth struggling with a wide variety of issues including depression, anxiety disorders, family conflict, drug and alcohol issues, eating disorders, social relationship problems, academic and peer pressures, divorce or family change issues, grief and loss and physical, sexual and emotional abuse, and sexual orientation issues. Long and short-term counseling has proven successful over our long history, and demand has increased markedly over the last several years.

BYS counselors report an increase over the last year in the number of students reporting stress and anxiety due to financial challenges at home. The Bainbridge Island School District guidance counselors primarily provide academic counseling, and the need for BYS to help fill the gap for other issues continues to grow. This is illustrated by an increase in referrals from the high school and middle school guidance teams.

BYS is the only agency on Bainbridge and in North Kitsap County that provides no-fee, confidential mental health counseling to youth in need.

In addition to our core program of Counseling, BYS provided additional programs and services in 2011 to support the Bainbridge Community and its youth. For example, through a partnership with the Kitsap County Juvenile Court System, BYS provided Diversion services to local families, providing an alternative to the traditional court experience. BYS also provided a Jobs Posting Service online for teens and community members. Through our Kids With a Heart Compassionate Action awards, BYS recognizes teen volunteers. Collaboration with agencies like Helpline House, the Boys and Girls Club, the Just Know Coalition and others furthered our ability to meet needs of local teens.

**Deliverables and Objectives:**

Objectives and measurable results that were laid out in our work plan were met and exceeded in 2011. With the benefit of consistent staffing, effective partnerships with the schools, concentrated outreach, and a positive reputation among students, Bainbridge Youth Services was able to provide nearly 1300 hours of counseling to teens in need. In the first and second quarters of 2011, we were concerned about a steady increase in demand for counseling - concerned we would not be able to meet the need. This was challenge to be sure, and we added an additional therapist at that time. By the latter part of the year, however, we started to see the demand plateau, which ensured we were able to continue meeting demand.

**Organization's Budget vs. Actual:**

		Budgeted	Actual
Income	Total Fundraising	80,000	81,700
	Total Grants	45,000	42,250
	Other	3,500	6,050
	Use of Reserve Funds	31,800	15,600
<b>Total Income</b>		<b>160,300</b>	<b>145,600</b>
Expense	Business Insurance	3,100	3,100
	Contract Labor	3,500	4,000
	Custodial, Rent, Utilities	1,700	1,200
	Diversion Expense	400	850
	Dues and Sub - Membership	100	400
	Employee Medical Insurance	2,400	2,150
	Total Fundraising Expense	11,500	14,500
	Office Equipment, Supplies	900	700
	Payroll Expenses	120,000	114,500
	Printing, Postage, etc.	7,500	1,500
	Professional Fees	9,200	2,700
<b>Total Expense</b>		<b>160,300</b>	<b>145,600</b>



**BOYS & GIRLS CLUBS  
OF BAINBRIDGE ISLAND**

**Report on Execution of Services for 2011: Boys & Girls Club of Bainbridge Island**

2011 proved to be a very successful, yet challenging year for the Boys & Girls Club of Bainbridge Island. From a service delivery standpoint, the Club saw an increased need for the services it offers. The following is a statistical comparison of services provided over the last two years:

	<b>2010</b>	<b>2011</b>	<b>% Increase</b>
<b>Aggregate Service Hours</b>	33,432	39,973	20%
<b>Total Youth Served</b>	296	358	21%
<b>Average Daily Attendance</b>	40	50	24%
<b>Single Day High Attendance</b>	64	78	23%

As the numbers above indicate, Bainbridge Islanders are utilizing the Club at an unprecedented rate. In addition, with increased attendance and program participation, the Club saw an increase in need-based scholarships granted to ensure that no child is turned away at our door due to financial limitations. In 2011, the Club granted \$31,000 in scholarships that enabled over 30 Island kids to engage in the valuable programs that the Club provides.

In addition to the dramatic increase in attendance, 2011 also marked a successful year from a programmatic perspective. The following outcomes were achieved in 2011:

- The Club received the Program Excellence Award from the Boys & Girls Clubs of King County for its partnership with Kids in Concert that brought innovative music and improv programming to Club members.
- The Club's Culinary Arts and Gardening Program has received a great deal of attention being featured on the front page of the *Kitsap Sun* and by having a piece on King 5 Evening News.
- The Club's teen volunteers logged over 3,800 hours of service working directly with the Club's younger members.
- Every Club member received 45 minutes of educational development support and at least 60 minutes of physical activity daily.

With the numerous successes that the Club saw in 2011 also came a handful of challenges. The Club continued significant cuts to staffing, supplies and professional development that were set in place in 2008. The adage of having to make more out of less is a daily reality within the Club. The long-term austerity measures taken by the Club have ensured that it remains financially viable during an extraordinarily challenging economic period. However, the Club must begin to strategically expand its budget heading into 2012 to continue to meet the needs of its clients and staff.

Additionally, the Club is nearing full-capacity on high volume days. The staff and Board are in the process of developing a strategy to ensure that the Club will continue to be able to meet the need of Bainbridge Island youth and teens heading into the future.

In conclusion, the Club's members and their families, staff and Board of Directors are extremely appreciative of ongoing support of the City of Bainbridge Island. The financial support provided by the City ensures that the Club continues to meet the needs of hundreds of Bainbridge Island families.



City of Bainbridge Island  
Elder and Adult Day Services – Birkenfeld Center Final Report for 2011

Due: January 31, 2012

**1. Summary of activities undertaken in providing services described in contract.**

- Offering a variety of health, social and support services to an average of 42 individuals per day in a safe environment.
- Providing day care at less than one-fourth the cost of nursing home care.
- Delivering a minimum of three rehabilitative activities per person each day.

These overall activities were achieved. The State Medicaid Program cuts in October 2011 reduced eligibility for many of our participants. However, prior to October we served 65 individuals and after October we served 44 individuals. This is above the goal of 42 individuals.

**2. Project Objectives:**

- Maintain or improve current level of systemic health.
- Improve strength and endurance.
- Reduce incidences of falls.
- Maintain or improve current level of social interaction.

These objectives were achieved. Participants have improved medical oversight and improved social interaction opportunities as part of the EADS Programs. Each participant is monitored for compliance with their prescribed care plan. As an example, several individuals have experienced reduced episodes of anxiety and other individuals have improved their ability to ambulate, therefore reducing the number of falls a person could experience. Blood pressure has also been controlled. Finally, due to increased social interaction, personal hygiene has been improved.

**3. Specific Measurable Results:**

- Compliance to prescribed medication plan.
- Engage participant in walking program for chair bound or fragile participants.
- SAIL (Stay Active and Independent for Life) fitness test = # of pounds lifted in 10 seconds, measure feet walked with support, # of times rising from chair for 10 seconds.
- Fall data tracking program participation including home incidences.
- Assess Affect (smiles, eye contact, responses to voice) number of participant initiated conversations, participation in group sing, level of interest in personal hygiene, and participation in social activities.

..... EADS gives life back.



These measurable results were achieved and noted in individual charts. Each person's chart outlines weekly review of medication compliance with the skilled care provider (nurse). The nurse also interview's the Caregiver of each participant to note home fall incidence or other changes observed by Caregivers. The daily observations of the EADS Day Health Assistants are also recorded in the individual charts.

**4. Describe the involvement of any partners specified in Attachment A.**

None.

**5. Reference the project budget specified in the Attachment A.**

During 2011, the Birkenfeld Center on Bainbridge Island provided **Day Health Services to an average of 60 individuals** from the area. Of those 60 individuals about 30 attended each day. In attachment A (Scope of Services) EADS proposed to serve 42 individuals per day in a safe environment. While not all 60 individuals attended each day, the service outreach to the community exceeds 42 by 18 individuals. We request that you also consider the State of Washington's Medicaid eligibility restrictions imposed beginning October 1, 2011. These eligibility restrictions caused our participant base to shrink from 65 prior to October to 44 after October. This was a 4<sup>th</sup> Quarter loss of 32 % of our participants due to no fault of our own. We continue to provide care at less than one-fourth the cost of nursing home care. We also continue to provide a minimum of three rehabilitative activities per person every day of attendance.

With the State Medicaid cuts in effect October 1<sup>st</sup>, EADS actual funding gap for the Birkenfeld Center has increased from an **estimated \$ 4.91 per person per day** to an **average of \$ 6.28 per person per day**. In our original proposal, outlined in Attachment A, EADS estimated a shortfall of about \$ 105,000. The actual shortfall is somewhat less than that for the year (\$66,325) but will far surpass that estimate in the coming year unless the State changes eligibility for Medicaid participants in 2012.

The Birkenfeld Center, EADS served on average 30 participants per day for 260 days during 2011. This is reflects 7,800 participant service days during 2011.

EADS is now in discussion with the State concerning changes to the State Medicaid DD Waiver which would allow greater eligibility to Medicaid coverage for Day Health participants in the future. We are very hopeful that these discussions will prove fruitful in 2012. But as you can see from the information provided above, we continue to need strong support from the communities we serve to be able to continue to provide Day Health Services to your community members.

..... EADS gives life back.

Helpline House  
Performance Report  
4th Quarter 2011

Scope of Services provided:

Funding from COBI paid for case management of our professional social work team. It addressed 1351 problems of more than 300 unduplicated household, including:

- Assessment of immediate crisis needs and access to local, county, state and federal emergency funds
- Coordination and advocacy with local, county, state and federal programs to maximize all available resources towards longer term solutions. We are a bridge
- Active coordination of services with key agencies, including Kitsap Mental Health, the YWCA ALIVE Program and Kitsap Community Resources
- Daily support for volunteers on working with persons with serious mental health issues and families in crisis
- A bridge to resources for the island's senior population
- Regular contact with managers of low-income housing for those in need of housing
- Advocacy on mental health, transportation and Medicare issues to the most vulnerable segment of this population
- A bridge to resources for providers and users of services to the disabled
- Face-to-face meetings for assistance with prescription drug plans, for applications to the federally funded Basic Food Program, and for resources that support seniors to remain independent while growing older in this community
- Supervision and interaction with a staff of four professional social workers
- Supervision of Bainbridge Youth Services Counseling Program
- Coordination of direct services and referrals for local veterans

Specific deliverables for the 4<sup>th</sup> quarter of 2011: The Social Work team addressed:

- Financial problems of 281 clients with 535 services
- Housing problems of 64 clients with more than 141 services
- Medical problems for 88 clients with 157 services
- Mental health problems for 130 clients with 250 services
- Assistance and consultation with development and implementation of Serenity Home
- Medicare, Medicaid and Basic Food advocacy and referral for 10 households

Other information/trends:

Helpline House still deals with an increase in households where the breadwinner is out of work, where savings are exhausted. Veterans require help to be linked to resources for veterans, and more seniors and disabled clients require help with applications for subsidized transportation programs. Several employees received two-day training as representatives of the Statewide Health Insurance Benefits Advisors program (SHIBA) to more effectively provide information on insurance issues.

Helpline House acknowledges support from COBI  
in all promotional materials

**Hope House of Bainbridge Island  
City of Bainbridge Island Final Report 2011**

**1. Summarize the activities undertaken in providing the services described in Attachment A.**

The services that were provided from this grant were to help pay for approximately 5 weeks to the two full-time and 1 part-time employee at Hope House of Bainbridge Island.

**2. Reference the project objectives specified in Attachment A. Were those objectives achieved? Why or why not? Were there any unexpected positive outcomes or challenges?**

The objective of the grant was able to be achieved because it helped reduce the payroll expenses for our organization and allowed Hope House of Bainbridge Island to reallocate so funds to other projects for its residents.

**3. Reference the specific measurable results specified in Attachment A. Were they achieved? If not, what challenges prevented the achievement of the anticipated results?**

Most of the measurable results were achieved as predicted from the grant proposal. The only problem that arose was the part-time employee's hours were reduced due to an injury sustained in a car accident. Therefore, the employee only worked 10 hours per week on average.

**4. Describe involvement of any partners specified in Attachment A, as well as any unexpected cooperative relationships that developed through implementation of the project.**

For this particular grant proposal, there were no partners or unexpected cooperative relationships that helped foster the implementation of the project.

**5. Reference the project budget specified in the Attachment A. Provide an analysis of actual expenses and income in relation to the projected budget.**

5.5 weeks paid x \$725.00 (total employee wages per week)\* = \$3,987.50

\* 35 + 27.5 + 10 = 72.5 total weekly hours x \$10.00 per hour = \$725.00

## **Housing Resources Board – Independent Living Program Annual Report - 2011**

The Independent Living status report highlights the impact of the program through December 31, 2011. Since January of this year, 55 households sought recommendations for health and safety improvements to sustain their ability to reside at home.

14 Bainbridge Island households benefited from home modifications managed and funded by Independent Living. Recipients were over 55 years old, and most were over 65.

In 2011, Independent Living frequently worked cooperatively with local agencies and support groups to facilitate additional resources needed in the home such as medical transportation, and social services. Isolation contributes to unhealthy living environments for individuals with chronic conditions/disabilities. Fewer community supports are available. Bainbridge residents are fortunate to have professionals and volunteers familiar to them readily providing services through Helpline, Bainbridge Island Senior Center, Interfaith Volunteer Caregivers, Elder Adult Daycare, and the Visually Impaired Persons along with other support groups.

Three 2011 clients are qualified and waitlisted to receive “weatherization” grants through Kitsap Community Resources doing this work in Kitsap County. An IL client received extensive insulation and appliance upgrades to conserve utility usage.

### **2011 INDEPENDENT LIVING COMPLETED PROJECTS JUNE 30, 2011:**

A resident rehabilitating at home after a stroke received interior accommodations, grab bars, and exterior handrails.

A second client also affected by stroke received interior accommodations, grab bars, exterior handrails, and reconstruction of garage exit stairs for safety.

An income qualified senior without a qualifying health circumstance received volunteer assistance to provide a safe exit, stairs, from her home. HRB contacted BIs Community Woodworkers who completed the work. An arrangement between HRB and BCW will take on other similar projects.

A client with neurological deficits was provided an occupational therapist assessment followed by extensive grab bar installation as recommended.

A visually impaired person requested safety improvements to the bathroom. Grab bars were installed and a bath bench selected by the client.

After a punishing fall a resident received the installation of grab bars for mobility after the patient was determined medically stable.

A disabled resident with mobility limitations was provided installation of a handheld shower. Grab bars had been previously installed.

An elder couple, both with mobility concerns, had hazardous and uneven entry steps reconstructed. Uneven and deteriorating brickwork had caused several falls.

A senior asking for assessment of her bath chose a bath bench from Helpline and was assisted in contacting the apartment manager to request grab bar installation. The senior is now being further assessed for social services.

After lengthy hospitalization a senior returned home to rehabilitate needing safety improvements installed. Accommodations were made to her bath and bedroom.

#### 2011 INDEPENDENT LIVING COMPLETED PROJECTS DECEMBER 31, 2011:

Client with limited mobility, resides alone, but is able to manage health, personal needs, and meals. Hazards were cleared in the home so health and safety needs could be assessed. Modifications were completed in stages to improve air quality and replace deteriorated, hazardous flooring which was a trip hazard. Medical equipment was provided for bathroom safety. Client was assisted with utility, structural, and insulation assessments to sustain the home environment. Social services are introduced to support independent living.

Independent Living provided resources, contractors, and project management to rehabilitate an unhealthy home. Client was found temporary quarters. Belongings were stored; cleaning and painting were completed; flooring installed; and effective rodent control completed. Exterior work made necessary improvements required to continue fire insurance coverage. Out of state family arranged for cost of the rehabilitation labor and materials. Volunteer efforts contributed.

Health and safety modifications completed for a senior maintaining employment with chronic health concerns: deteriorated bathtub/shower surround is replaced and safety tub/shower valve installed in the only bathroom. Lavatory/vanity cabinet is replaced. Countertop around kitchen sink is replaced with hygienic material.

Client requested assistance with unresolved electrical problems affecting the function of the furnace. IL engaged a contractor to assess the difficulty. Community supports paid for replacement of the electrical service meter found damaged.

Client requesting safety recommendations for a complex chronic condition received a safety assessment as well as a second visit prompted by falls at home. Client's income exceeds IL eligibility criteria. Client and wife are provided Kitsap County resources which may be supportive. Personal care and respite assistance was engaged. Client engaged contractor to install entry handrails.

#### ACTIONABLE ITEMS 2012:

Very low income client received emergency furnace repair during the holidays. Client was without heat but also in need of safety improvements. Needs are being assessed.

Disabled client in senior complex seeks assistance to make the kitchen accessible.

Disabled client seeks grab bars and safety recommendations for the bath.

A client is in need of bathroom modifications to provide an accessible shower, and improved handrails at the entry as well as the garage exit. Work is expected to begin when materials are available.

A longtime resident with mobility concerns approached IL regarding moving of furnishings while his apartment is renovated by management. This is likely to be a volunteer project and is postponed from 2011.

A fall precipitated a request for modifications from a disabled client.

## **Housing Resources Board – Emergency Rental Assistance Annual Report - 2011**

In 2011 Housing Resources Board disbursed \$12,056.25 in emergency rental assistance funds. We issued vouchers to 26 families on Bainbridge Island. The dollar amounts ranged from \$115 to \$1000. Reasons for needing the assistance ranged from loss of income, emergency medical expenses and car repairs. This is on target with the number of families that we planned to assist for 2011.

Helpline House works with us to determine the client's eligibility. They interview those requesting assistance, help determine their needs for rental assistance, and ensure that the client has a realistic plan in place to meet their rental obligations in the future. Rental Assistance is only available to any particular individual or family once every 12 months.

It is challenging to be able to assist all that need this help. Keeping a family housed is key to their stability. Because we want to be a good stewards of this funding, we require that the recipient have a plan for the future and that paying one month of rent is not just delaying an inevitable eviction. However, it is sometimes not realistic to expect that a one month reprieve will be enough to help truly get the client back on their feet. HRB plans to work with Helpline to see if making minor programmatic changes would be helpful with future funding. For example, a rental assistance commitment of 1-3 months combined with an action plan on the part of the client may allow us to assist folks that are currently not eligible, but who would benefit greatly in the long term from the assistance.

Please see the attached spreadsheet for more detail on the residents assisted this year.

## Housing Resources Board – HomeShare Program Annual Report - 2011

The HomeShare program at Housing Resources Board had some wonderful successes in 2011. This is a program built on personal relationships with HomeSeekers and HomeProviders. In 2011, we made 28 matches in total. We added 40 HomeSeekers to our list in 2011 and 24 Home Providers. This well exceeded our goal of making 10 matches and bringing in 20 HomeSeekers and 10 HomeProviders.

HomeSeekers came from all walks of society:

- Thirteen of our Home Seekers were homeless when they came to us and we were able to find homes for 5 of them.
- Another applicant was commuting over 2 hours a day for a part time job on Bainbridge Island. We were able to match her with a woman who had a garage apartment and needed some help around the house. Now the Home Seeker has a rent-free home and commutes 20 minutes a day while the Home Provider has the security of someone living on her property and helping with chores she no longer was capable of doing herself.
- Another Home Seeker was a young man who was employed on the Island but had no home or car. He now rents a room from a single woman and is able to ride his bike to work in Winslow.
- Another works at Messenger House – he wanted to live in Poulsbo but found a Home Provider near the Agate Pass bridge. He felt this was a good compromise since his work is on Bainbridge but his support system is closer to Silverdale.
- Nine of our Home Seekers found housing on their own and one of them ended up moving into one of HRB's rental properties.

The Home Providers came from various backgrounds as well.

- Some were single women going through divorce and having to make mortgage payments that were once shared with a spouse. The extra income from renting a room sometimes made the difference between losing their home and being able to house themselves and another person.
- There were Home Providers who were renters themselves yet they needed a roommate to help make their housing cost sustainable.
- Several were empty nesters who felt they had more room than they knew what to do with and understood that someone could benefit from that.
- A number of them were home owners who needed the extra income to be able to stay in their homes.

There are challenges with this program. We sometimes find that HomeProviders need to charge more rent than the HomeSeeker is able to pay. The rents charged by the Home Providers ranged from free to \$850 per month. Those Home Providers asking higher rents were told that HRB usually deals with lower income clients and a high rent might be out of reach. We encourage both parties to be open to negotiation and to consider exchanging rent for services. This year, many Home Seekers came from very low income brackets. Some could afford to pay some rent but many had little or no income and therefore needed to find a situation where

they could work off the rent. While always challenging, being able to work with everyone is what makes the HomeShare program unique. Establishing personal relationships with HomeSeekers and HomeProviders and helping facilitate relationships between the two parties is key to this Program. We believe that we can work with all parties to find the best situation for all. But that work involves establishing the personal relationships that are key to the Program.

In 2011, Homeshare was marketed through the Library News, the Little Nickel, Kitsap Newspaper group, and Kitsap Sun. We also worked with Inside Bainbridge to develop an ongoing online ad. Currently, we are designing yard signs that will be placed around the Island to advertise the Program.

## **2011 Annual Report Interfaith Volunteer Caregivers of Bainbridge Island**

### **Mission**

To help individuals and families maintain their dignity and quality of life, and bring together persons of good will to serve within the community where there are unmet needs.

### **Scope of Service**

IVC, a Washington State, non-profit 501 (c) (3) corporation, provides volunteer services to those in the community by serving the: 1.) Elderly or chronically ill who want to continue to remain in their homes and need help with routine activities which they can no longer manage on their own; 2.) People who may be recovering from a medical condition or mental stress and need temporary help with their day-to-day living; 3.) Over-burdened family caregivers who need respite care for a loved one; 4.) Those who live in skilled nursing and assisted care facilities that need companionship for emotional support.

Services provided are: 1.) Transportation for medical appointments throughout Kitsap County and downtown Seattle; 2.) In-Home services: companionship, reading, respite, pet care, light housekeeping and yard/home maintenance; 3.) Errands: grocery shopping, delivering flowers, picking up laundry and prescriptions at local pharmacies; 4.) Phone Reassurance; 5.) Advocacy and referrals to other local agencies; 6.) Visitation to skilled nursing facilities to provide companionship, pet therapy, reading, and music.

All services are free of charge with no age or income restrictions. People do not have to be part of a faith community to access services. Every care receiver receives an in-home visit to assess eligibility and personal needs. Every volunteer completes an application, personal interview, background check, orientation, and on-going training.

At this time, IVC services are implemented by 14 Board Members, 2 full and 1 part time staff member(s), Administrative Director, Program Director and Bookkeeper.

### **Human Health and Welfare Benefits:**

As more Bainbridge Island as well as other Kitsap residents face the challenges of aging, dealing with chronic disease or living alone, they require help with the non-medical needs of everyday living, along with the emotional and social support to adjust to the changes in their lives. IVC provides the following health and welfare benefits:

- ✓ Decrease in health care costs, isolation and depression by providing companionship that keeps the elderly and those temporarily in need connected to their community, thus keeping them healthier mentally and physically.
- ✓ An increase in independence and self-worth that leads to the ability to remain in one's home.
- ✓ Support of the entire family system, both mentally and physically, allowing the 'sandwich generation' to remain productive in the workplace.
- ✓ Community participation in helping neighbors.
- ✓ Gifts of unconditional love and hope, basic ingredients to good health, happiness and wholeness.

**Major accomplishments for 2011 include, but not limited to:**

- ✓ Continuation of on-going services that help reduce the steadily rising, yet unmet needs of community members and their families, requiring services essential to maintain their dignity, independence and quality of life.
- ✓ Successful recruiting and training of volunteer caregivers in relative proportion to the rising number of people requesting essential services.
- ✓ Continuation of community education pertaining to the need for volunteers as well as the availability of services to meet the essential needs of our vulnerable population.
- ✓ Successful continuation of the *Flowers from the Heart Program*.
- ✓ Active participation with Directors' Forum, even after dissolution of HHHS.
- ✓ Engagement and conversation with City Council Members, old and new.
- ✓ Ongoing collaborations and referrals between other human service agencies.
- ✓ Active participation with Interfaith Council.
- ✓ Increased visibility and networking with other Social Service agencies to bridge the gap of services. Those agencies and community outreach programs include Helpline, Sr. Center, Gentiva, Social Services, VIPs, Sr. Information @Assistance, Harrison and Harrison Home Health Care, Kitsap Mental Health, Peninsula Cancer Services, Virginia Mason, Doctors' Clinic, Island Rehab, New Motion PT, Messenger House, Rotary, Kiwanis, etc.
- ✓ Outreach to various support/community groups: VIPs (Visually Impaired Persons), Parkinson's Group, MS support Group, Cancer, Caregiver and Grief Support Groups.
- ✓ With support from our sponsors, Harrison Hospital, the Suquamish Tribe (Port Madison Enterprises), Peninsula Cancer Center, New Motion Pt. and Hill Moving and Storage, IVC hosted another very successful fundraiser in August of 2011.

**Highlights of 2011**

IVC has most recently fostered partnerships with Harrison, Peninsula Cancer Services, the Suquamish Tribe, Hill Moving and Storage, and this year New Motion PT. Each of these groups helped sponsor our successful summer fundraiser. We are currently working on acquiring new sponsors from the medical arena.

Throughout the summer the *Flowers of the Heart Program* delivered flowers to just under 100 recipients. (It was an unusually cool summer, so the amount of flowers we received from our generous community was down.) Recipients were shut-ins, lonely, sick, or those simply needing a bit of cheer. Most were elderly and frail. IVC often finds itself the recipient of flowers from various memorial services and weddings held in the community. From these donations the 'flower ladies' are able to arrange many individual bouquets, as well as some larger arrangements which are usually delivered to the nursing facilities and various assisted living residences.

IVC is still learning and developing a new custom program, designed to help track scheduling and hours, etc. easier and more accurate.

IVC and the Senior Center will often times co-host trainings. Two separate trainings that were attended reciprocally by the two organizations this past year were: UNDERSTANDING MEDICARE, hosted by the Senior Center and ESTATE AND DISABILITY TRAINING hosted by IVC. This year a volunteer forum was provided by IVC for IVC volunteers. At this meeting, volunteers were allowed to share experiences, concerns, questions and ideas that were beneficial to not only the other volunteers, but staff as well.

Quarterly Newsletters continue to go to volunteers, donors and friends of IVC.

From March through August, 2011, the IVC Fundraising Committee successfully organized and implemented two fundraisers; an 'Ask' Letter which was sent out early spring, and then IVC's annual Dinner/Auction which was held in August of 2011. The net received was just under \$67,000. Our sponsors and generous donors made this possible.

IVC continues to partner with local social service agencies in outreach and continues to get word out about services via various mediums. Challenges of transportation for seniors around and off island are still being discussed. This year several IVC volunteers and the Senior Center volunteers took an all day Red Cross Training in preparation for the opening of the Warming Center at the Senior Center. Several volunteers from both organizations are signed up to be called in case of an outage to help take care of those who will need some warmth, a hot meal, or just a cup of coffee.

In the spring of 2011, IVC hosted a Volunteer/Donor Appreciation Night at the Commons. The event was well attended. It is now an annual event to coincide with "Random Acts of Kindness" week, which is mid-February.

Grateful care receivers and individuals/donors in the community donated over \$6,000 to IVC in 2011.

The IVC Board continues to actively recruit volunteers, each targeting his or her own faith community. The recruitment committee meets regularly to discuss and target other possibilities.

The IVC Caregiver Support group meets weekly with an average of 11 attendees with 21 members. The Grief Group is now meeting bi-weekly with an average of 7 people currently attending. There are 9 people in this group.

IVC continues to partner with the Holt Webster group and continues to help children and families having challenges at school and/or in the communities.

IVC enjoyed an energy charged retreat with focus on continued growth, quality of service, types of services and simply how to continue serving the community with the same type of care and response the care receivers have become accustomed to.

Towards the end of 2011 a Girl Scout troop asked how they could help IVC. With so much isolation among seniors in our community, a personal connection can and does mean so much. Two women, living alone, were chosen by IVC for a visit from the girls. The troop brought each lady a basket full of homemade cookies and then stayed for a visit with the ladies. The troop leader said that it had been an enjoyable experience all the way around.

And then: a group of elementary school children from St. Cecilia's also wanted to make a difference in some way and called IVC. It was decided that they would make some soups and deliver them to a woman with cancer and too weak to stand for long in the kitchen. They contributed a variety of soups and surely brightened the day for this particular care receiver.

The IVC Board formed a personnel committee which has been very useful and productive, and out of this came medical benefits for the staff for the first time in IVC history. Also, the staff now has a policy manual with which to refer.

## **Statistics\***

In the year 2011, IVC volunteers provided 8807 hours of service, another increase over the same time period in 2010, reflecting the continual need for our services. Our volunteers are currently providing an average of 734 hours of volunteer services each month.

IVC recruited 37 new volunteers and acquired 69 care receivers in 2011.

In 2011 IVC saw a 15% *decrease* in new care receivers and a 13% *increase* in volunteers. The hours for errands and chores saw a 48% increase; in-home services were up 18%.

**Transportation**, however, is now 70% of what IVC does and it is on the increase. Hours for transportation were up 16% in 2011 from 2010, 40% from 2009 and 143% since 2006. Going back to 2005 hours for transportation has increased by 343%!

The average age of an IVC care receiver this year (and usually) is 80 years +. The average age for the volunteer this year is 52.

\*See attached charts

	<b>2007</b>	<b>2008</b>	<b>2009</b>	<b>2010</b>	<b>2011</b>
<b>Number of Volunteers</b>	136 31 new	134 14 new	124 12 new	135 33 new	130 37 new
<b>Number of Care-Receivers</b>	143 57 new	135 57 new	127 61 new	151 81 new	203 69 new
<b>Direct Vol. Services Hrs</b>	<b>4981</b>	<b>6058</b>	<b>5671</b>	<b>5469</b>	<b>6689</b>
Errands/Chores	772	856	1666	623	921
Transportation-Medical & other	1911	2066	2214	3093	3143
In-Home	2167	2286	2464	2085	2451
Telephone Reassurance	104	166	218	73	59
<b>Administrative Services Hrs</b>	<b>2617</b>	<b>1930</b>	<b>2390</b>	<b>2853</b>	<b>2121</b>
<b>Totals Volunteer Hours</b>	<b><u>7598</u></b>	<b><u>7988</u></b>	<b><u>8278</u></b>	<b><u>8319</u></b>	<b><u>8811</u></b>

\* These numbers represent a sampling of services offered. They are included in, but not the whole of the total. (The support groups, for example, are not included in this table.)

\*\* The number of volunteers and care receivers are those **active** during the noted year.

## Future goals and trends for 2012

Fundraising Activities –

- ✓ 2012 Spring Fundraiser
- ✓ 2012 Annual Dinner Auction (at Kiana)

Continue well received volunteer and donor appreciation functions.

Continue popular weekly Caregiver and Grief Support Groups.

Maintain Board membership.

Stick to yearly fundraising calendar.

Increase Board attendance at various training opportunities.

Continue to increase awareness and connections with Faith Communities.

Continue Flowers from the Heart Program.

Create more relationships and projects with different youth groups.

Continue volunteer recruitment.

Continue to encourage former care receivers to give back by becoming volunteers.  
Increase staff/board training.  
Maintain care receivers' (and volunteers') trust by continuing to provide consistent and quality services.  
Foster partnerships and volunteer opportunities with Harrison, Peninsula Cancer Center, the Tribe and others from the medical arena.  
Continue partnership with BCF and Holt Webster to help better our community.  
Have Crisis Plan in place in event staff is unable or unavailable to handle program/administrative duties.

*Submitted by Kaycie Wood, Administrative Director 1/23/2012*



221 Winslow Way West #302  
Bainbridge Island, Washington 98110

The Service Provider shall submit a final report prior to or accompanying their last invoice, due on January 31, 2012. If the Service Provider is requesting funding for 2012, the second year of the current biennium, a preliminary report should be submitted with that request. In this report, the Service Provider shall:

1. *Summarize the activities undertaken in providing the services described in Attachment A.*  
The grant funded 108 hours of professional staff hours to provide advocacy services to improve access to local emergency and restorative dental care. These hours were spent on case management for current patients in the Smiles for Life program, and helping other adults, who called our office seeking dental care. Many were not eligible for the program but knew of no other place to call. Some adults who were requesting care needed more extensive services than those that were within the scope of the Smiles for Life program. Hours were also spent consulting with primary care providers and outreach at the annual Project Connect event for the homeless.
2. *Reference the project objectives specified in Attachment A. Were those objectives achieved?* The outreach and advocacy efforts resulted in greater visibility and understanding of the scope of the problem of lack of access to dental care for older and lower income adults. We tried to find care for some of the homeless, which proved to be difficult. An attempt to refer those who needed care to a free program held periodically in Bremerton was unsuccessful. One patient, who was a veteran, was seen and treated by a dentist who agreed to see veterans for a lower cost. Another patient was seen by a local dentist who agreed to see the patient pro bono. All were given the number of Peninsula Community Dental Center in Bremerton, but follow up to see if treatment was accessed wasn't possible. A consultation with two patients' primary care providers was helpful to better understand the unique needs of these patients, and resulted in scheduled dental cleanings being delayed. Another patient was found to have dangerously high blood pressure, and resulted in an immediate referral to his primary care provider on two separate occasions. The more primary care providers are consulted by dental professionals, and collaborate on strategies to improve health, the more they might see the relationship between poor oral health and chronic health problems. Hopefully, this will lead to dental and medical providers working more closely together.
3. *What are the measurable results specified in Attachment A?* The number of hours committed in the grant was spent on outreach and advocacy. The results of those efforts were successful some, but not all of the time. *If not, what challenges prevented the achievement of the anticipated results?* It was a hope to involve more local dental providers in treating those who historically cannot find care, but the result was that the same few dentists agreed to treat needy patients. The economy seemed to play a part in the reluctance of most dentists to see patients who couldn't pay the full fee, or take payments. We heard many reports from private dentists that as more and more patients were cutting back on

regular dental visits and expensive procedures like crowns, either because of losing a job or dental insurance, or not having funds to pay for dentistry.

4. *Describe involvement of any partners specified in Attachment A, as well as any unexpected cooperative relationships that developed through implementation of the project.* We were incredibly lucky to have administrative expenses offset by the ability to use space at the Senior Center for no charge. The Marge Williams Center provides us with office space at an affordable rent, much less than what we could obtain elsewhere. The Bainbridge Community Foundation, the North Kitsap and Bainbridge Rotary Clubs helped increase our capacity by donating money for needed equipment.
  
5. *Reference the project budget specified in the Attachment A. Provide an analysis of actual expenses and income in relation to the projected budget.* Hours performed were greater than the contracted amount. During the third quarter, Smile Partners completed the 2011 annual contracted hours (108). The remaining 2011 hours went uncompensated by this contract and were contributed by Smile Partners. Our 2011 hourly rate was \$34.72 per hour that includes all direct and indirect costs to deliver the contracted services.

eliminating racism  
empowering women

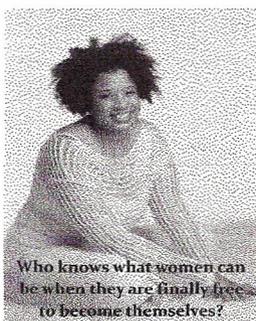
**yWca of Kitsap County**

**YWCA Community Center**  
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Phone: (360) 479-0522  
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## YWCA of Kitsap County Program Summaries FY 2011

### Mission Statement

*The YWCA of Kitsap County is dedicated to ensuring the personal safety, rights, welfare, and dignity of those who experience domestic abuse while building partnerships and increasing community awareness to create positive social change.*



during this time period.

**The YWCA ALIVE Shelter** provides temporary-emergency housing and a comprehensive range of supportive services for domestic violence victims and their children. The average stay for a family at the **ALIVE Shelter** is 4 – 6 weeks, while receiving advocacy based counseling, children's support, parenting education, housing and employment advocacy, assistance through weekly support groups, food, clothing and transportation: In 2011, the **ALIVE Shelter** provided residency for **52** women and **43** children for a total of **3,494** bednights. **131** women attended weekly community-based support groups. **4,805** crisis and information and referral calls were received. **101** children participated in activities. It is significant to note that **1,059** women and children were referred to other housing programs due to lack of space at the **ALIVE Shelter**

**YWCA Transitional Housing:** In 2011, **4** women and **9** children resided in Eli's House. **2** women and **5** children resided in the YWCA's Central Kitsap duplex. Services received included case management, advocacy-based counseling, parenting education, food, clothing and transportation.

**The YWCA ALIVE BAINBRIDGE ISLAND/NORTH KITSAP DOMESTIC VIOLENCE PROGRAM** provides more accessibility to services for families residing in North Kitsap communities. Services include advocacy-based counseling, legal advocacy, support groups, information, referrals, and community outreach and education. In 2011, this program provided services to **152** families. Community members were assisted with **11** orders of protection and **44** court hearings. **30** women participated in support groups offered in Suquamish and on Bainbridge Island.

**The YWCA HomePlus Project** was developed from an alliance with the Bill and Melinda Gates Foundation and the Washington State Coalition Against Domestic Violence. The YWCA HomePlus Project was implemented in January 2010. Based on the "Housing First" model, HomePlus helps survivors of domestic violence and their children rebuild their lives by assisting families with finding and sustaining permanent housing through extensive case management and from resources in collaboration with other community partners. In 2011, **7** women and **18** children were accepted in the HomePlus project. By year-end, **7** families remained active in the program and have sustained permanent housing. Referrals included: **2** from the **ALIVE Shelter** and **5** from other YWCA programs.



*"To thrust our collective power toward the elimination of racism wherever it exists  
and by any means necessary."*

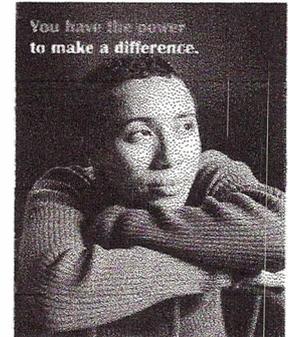


A United Way Agency



**The YWCA WRAPS** project, a professional clothing and everyday attire closet, provides clothing items and accessories for community members and their children. Clothing is utilized as attire for current employment, those who may be job hunting, looking for housing, for school, involved in volunteer work, etc. In 2011, 821 individuals accessed the WRAPS project.

**The YWCA ALIVE/DSHS WorkFirst Project** partners with the Department of Social and Health Services as a responder to families experiencing difficulties due to domestic violence, as they transition from welfare-to-work. This program is housed at the DSHS Bremerton Community Services Office, where services include advocacy-based counseling, resource referrals and case management. In 2011, 73 women received advocacy and referrals to other YWCA programs, as well as to other DSHS and community-based resources.



**The YWCA ALIVE Family Services** provides continued advocacy for families transitioning from the **ALIVE Shelter**, and ongoing outreach and case management services for other families who may be at risk due to domestic violence, socio-economic difficulties, parenting issues, language barriers, etc. In 2011, the YWCA ALIVE Family Services Program provided services for 362 New/Unduplicated families. There were 58 Unduplicated Latino support group participants. Kids KAMP provided activities for 120 children – through 10 projects. 85 children received supplies from the Back-to-School program. 76 families (140 children) were assisted through the Holiday Adopt-A-Family Project. 60 Latino families received bilingual outreach services.

**The YWCA ALIVE Legal Advocacy** provides countywide, no cost legal advocacy, safety planning and domestic violence response services: In 2011, the YWCA ALIVE Legal Advocacy Program provided services to 1200 clients: 600 New/Unduplicated clients, criminal advocacy for 300 unduplicated and civil advocacy for 204 unduplicated. In addition, 42 Latino families were assisted with bilingual legal advocacy support. The ALIVE Legal Advocacy staff also facilitated a 30-hour YWCA All Staff/Board Victims' Services Training and trainings offered to the community-at-large and helped facilitate a Cyber Stalking training.

Submitted By: Linda K. Joyce  
 YWCA Executive Director

Date: 1/5/2012