



**Thames Valley Council
for Community Action, Inc.**

Community Action Plan 2017

Reviewed and approved by TVCCA's Board of Trustees May 23, 2017

Contents

Section 1: Contact Information.....	4
1a. Name of Agency	4
1b. Principle Contact Name	4
1c. Principle Contact E-mail	4
1d. Principle Contact Phone.....	4
1e. Fiscal Year.....	4
Section 2: Comprehensive Community Needs Assessment Summary	4
2a. Needs Assessment	4
2b. Prioritized Issues	4
2c. Primary Information Sources (Organizational Standard 1.2).....	4
2d. Primary Sources from Key Sectors (Organizational Standard 2.2)	6
2e. Causes and Conditions of Poverty (Organizational Standard 3.4).....	6
2f. Customer Satisfaction Data and Customer Input (Organizational Standards 1.2 & 6.4).....	6
2g. Board Acceptance	6
Section 3: Description of Service Delivery System.....	6
3a. CSBG Service Delivery System and How It Is Operationalized	6
3b. Human Services Infrastructure (HSI) and How It Is Operationalized.....	7
3c. How HSI Activities/Functions Support CSBG within the Agency’s Catchment Area	7
3d. Key TVCCA Personnel.....	8
3e. Alliances with Key Community Partners and Providers.....	9
3f. Service Locations	9
3g. Staff Trainings.....	10
3h. ROMA Training.....	10
3i. Board Roster by Sector	10
Section 4: Identifying and Meeting Needs.....	10
4a. Plan to Address Service Gaps (Organizational Standard 2.1).....	11
4b. Expected Outcomes and Anti-Poverty Focus (Organizational Standard 4.2)	13
Section 5: Linkages.....	14
5a. TVCCA’s Three Closest Partners.....	14
5b. On-going Partner-Involved Initiative	14
5c. Additional Linkages to Fill Identified Gaps	15

5d. Cultivating Additional Partnerships	15
Section 6: Coordination of Funding	16
6a. CSBG and HSI Leveraging	16
6b. Utilization of In-Kind Services	16
6c. Creative Processes to Obtain Additional Funding for CSBG/HSI Services.....	17
6d. Planned New Funding Streams to Address Identified Needs	17
Section 7: Performance Measurement.....	17
7a. Agency Client Data Systems	17
7b. Issues with Client Data Quality	18
7c. Unduplicated Client Counts for CSBG Annual Report	18
7d. Changes to Goals and/or Priorities as a Result of Data Collected	18
7e. Tracking Agency, Family and Community Goals	19
7f. ROMA Goal(s) and National Performance Indicator(s).....	20
7g. Progress Toward Previous Goals.....	20
7h. Governing Board’s Receipt of Annual Update to Community Action Plan.....	23
7i. Changes to Goals and/or Strategies as Result of Changes in Community Needs.....	23
Section 8: Results Oriented Management and Accountability (ROMA)	23
8a. Agency’s Use of ROMA Cycle in Development of Community Action Plan	23
8b. Interaction with Nationally Certified Roma Trainer (NCRT) or Implementer (NCRI).....	24

Section 1: Contact Information

1a. Name of Agency Thames Valley Council for Community Action, Inc.

1b. Principle Contact Name Megan Brown, CFRE, NCRI, Senior Director of Marketing & Development

1c. Principle Contact E-mail megan.brown@tvcca.org

1d. Principle Contact Phone 860-425-6514

1e. Fiscal Year April 1, 2017 – March 30, 2018

Section 2: Comprehensive Community Needs Assessment Summary

Agencies are federally required to submit a Community Needs Assessment as part of their Community Action Plan. NASCSP's Community Action Guide to Comprehensive Community Needs Assessments states, "[t]he CAA's assessment is unique within its community and state. It offers a focus on local conditions, analyzing the economic opportunities and barriers for all residents who are at risk of remaining or becoming economically insecure. It identifies existing and potential resources to expand opportunities. It prepares the CAA leadership to plan a multi-year strategy."

2a. Needs Assessment

Please see attached file titled "Attachment_A_2017_Community_Needs_Assessment"

2b. Prioritized Issues

- #1 Affordable Housing
- #2 Budgeting and Paying For Bills and Debts
- #3 Healthy Food Access
- #4 Translation Services

2c. Primary Information Sources (Organizational Standard 1.2)

Data Sources	
Quantitative Data Source (e.g. - Census, client database, etc.)	Partner Organization/Stakeholder Engaged (if Applicable)
CERC Town Profiles 2016	
Comprehensive Health Needs Assessment	Ledge Light Health District
Comprehensive 4-Year Plan: 2016-2020	Eastern Workforce Investment Board
US Department of Labor, Bureau of Labor Statistics. 2016 - May. Source geography: County	
U.S. Census Bureau, 2015 American Community Survey 1-Year Estimates	
United Way ALICE Report for Connecticut	United Way of Southeastern CT
The Self Sufficiency Standard for Connecticut 2015. Diana M. Pearce, PhD	
2014 American Community Survey	
US Census Bureau, American Community Survey. 2010-14. Source geography: County	
Community Health Assessment 2016	L+M Healthcare / Ledge Light Health

	District
CT State Department of Education. High School Reports on College Enrollment, Persistence, and Graduation	
CT State Department of Education. College Enrollment, Retention, and Graduation: Statewide Results	
2015 Housing Data Profiles: New London County	Partnership for Strong Communities
Connecticut Counts: 2015 Report on Homelessness in Connecticut	Connecticut Coalition to End Homelessness
Nelson\Nygaard Consulting Associates & ASG Planning. Regional Human Services - Public Transit Gap Analysis	
Annual Child Care Capacity, Availability and Enrollment Survey 2015	2-1-1 Childcare
Qualitative Data Source* <i>(e.g. - Surveys, focus Groups, interviews)</i>	Partner Organization/Stakeholder Engaged <i>(if Applicable)</i>
Campbell, Susan. "Reaching the Unreachable: Connecticut's Homeless Youths". Accessed at http://wnpr.org/post/reaching-unreachable-connecticuts-homeless-youths	
CT Early Childhood Alliance. "Care4Kids Update". Accessed at: http://www.earlychildhoodalliance.com/care4kids_update	
Key Informant Surveys	TEEG, Covenant Shelter of New London, Mystic Area Shelter & Hospitality, UCFS, Alliance for Living, Habitat for Humanity, Madonna Place, Backus Hospital, Beckish Senior Center, Chase Manor 1, City of Norwich, Colchester Senior Center, Community Enterprises, CSSD – Juvenile Probation, CT Dental Health Partnership, DDS, DMHAS/SMHA, Doherty Beals & Banks PC, Eastern Workforce Investment Board, Higher Edge, L+M Healthcare, Lighthouse Psychoeducational Services, Mansfield Senior & Wellness Center, Natchaug Hospital, Quinebaug Valley Senior Citizen Center, Rose City Senior Center, Senior Resources, Southeastern Employment Services, St. Vincent De Paul Place, Stonington Human Services, Thames River Community Services, Salvation Army, Town of Lisbon, Town of Montville, United Community Family Services, Uncas Health District
Client Surveys	United Community & Family Services

2d. Primary Sources from Key Sectors (Organizational Standard 2.2)

Community Based Organization(s)

- United Community & Family Services
- Alliance for Living
- Habitat for Humanity

Faith-Based Organization(s)

- Covenant Shelter of New London
- The Salvation Army
- St. Vincent de Paul Place

Private Sector

- Southeastern Employment Services
- Doherty, Beals & Banks, PC
- William W. Backus Hospital

Public Sector

- DMHAS/ Southeastern Mental Health Authority
- Eastern CT Workforce Investment Board
- Stonington Human Services

Educational Institution(s)

- Higher Edge

2e. Causes and Conditions of Poverty (Organizational Standard 3.4)

Please see attached file titled “Attachment_A_2017_Community_Needs_Assessment”, page 21

2f. Customer Satisfaction Data and Customer Input (Organizational Standards 1.2 & 6.4)

Thames Valley Council for Community Action (TVCCA) deployed a supplemental survey tool developed in English, Spanish, and Haitian Creole in TVCCA and United and Community Family Services’ clinic waiting rooms and online through the TVCCA website and Facebook page. Two hundred seventy low-income residents answered the survey in full. Information gathered from these surveys informed the needs identified throughout the assessment.

2g. Board Acceptance: February 28, 2017 (See attached file titled “Attachment_B_Board_Minutes_022817”, Exhibit 6.3)

Section 3: Description of Service Delivery System

The Community Action Plan must provide a description of CAA’s service delivery system, including how CSBG and Human Services Infrastructure (HSI) funds are used in the delivery of services. Responses should focus on the economic and social conditions of the catchment area and provide context for strategic planning and programmatic decision making.

3a. CSBG Service Delivery System and How It Is Operationalized

Describe the CSBG Service Delivery system & how it is operationalized within your agency. Please include the following elements in your description: (1) listing of communities your agency serves, including designated CSBG service areas and undesignated areas; (2) reference to current quantitative and qualitative data specific to poverty and its prevalence related to gender, age and race/ethnicity for your service area as described in the needs assessment; and (3) how services targeted to low-income individuals and families will be provided or coordinated with CSBG funds.

TVCCA’s primary CSBG service area encompasses all of New London County, 665 square miles, and is made up of 21 towns and cities. TVCCA also serves households in Windham County and Tolland County through our Meals on Wheels and Retired & Senior Volunteer programs.

Significant inequalities in income and poverty rates exist statewide and in TVCCA’s service area by ethnicity, race, gender, and household composition. Hispanics in New London County earn, on average, 47% less than their white counterparts and female-headed households (no husband present) earn less

than half of male-headed households (no wife present). According to U.S. Census estimates, 15.3% of female-headed households (no husband present) in the county with children under 18 live in poverty; for female-headed households with children under five, this jumps to 36.9%.

According to the American Community Survey 5-year data, an average of 12.8% percent of children in New London County lived in a state of poverty during the survey calendar year, less than the national average of 21.9 percent. The poverty rate for seniors (persons age 65 and over) in New London County is 6% percent, again, less than the national average of 9.4%.

New London County is predominantly White (85.9%), as is most of Connecticut (79.9%); but the Ethnic and Racial composition of the county has seen drastic changes from 2000-2010. Significant increases in Hispanic, Asian, and Black populations have occurred across the county. Blacks and Latinos experience poverty at significantly higher rates than Whites and higher than the community as a whole.

Poverty in TVCCA's service area is concentrated in two of the three cities, Norwich and New London, which each have poverty rates more than double that of county and state. When asked in the DataHaven survey: "If you lost all your current sources of household income, including your paycheck, public assistance, or other forms of income, about how long do you think you could continue to live as you live today," one-third of Norwich and New London respondents indicated "Less than one month".

CSBG funds support the core functions of TVCCA, ensure its accountability to serve those residents who are most in need, and allow our agency flexibility to manage multiple programs throughout the region. These resources have been invested into building a comprehensive, outcome-based approach to service delivery that brings all of our disparate programs together to help people attain self-sufficiency.

3b. Human Services Infrastructure (HSI) and How It Is Operationalized

The Human Services Infrastructure, or HSI, is a statewide social service delivery system focused on the coordination of social service programs in order to address client needs holistically and comprehensively. HSI is designed to protect and increase one's self sufficiency over time, reducing the client's dependency on social service programs in the future.

TVCCA's "No Wrong Door" philosophy is the agency's internal implementation of the HSI service delivery system. The No Wrong Door Philosophy ensures that clients receive full access to agency and community services regardless of what "door" they enter.

Based on these key, influential concepts, all TVCCA Case Management programs utilize the information gained by the initial universal intake, comprehensive needs assessment and goal assessment to create a Service Plan with the Client. This Service Plan coordinates access to the full array of eligible social service programs through the State of Connecticut's Department of Social Services, TVCCA, and the extensive network of support programs throughout New London County. This coordination of services is designed to address access to basic needs and to stabilize client crisis.

3c. How HSI Activities/Functions Support CSBG within the Agency's Catchment Area

HSI provides the core funding for all front line emergency services staff and their administrative support at TVCCA. These individuals are charged with responding to families in crisis and providing seamless access to the myriad services available in our community. In the 2015-16 program year, they provided basic needs assistance to nearly 1,500 families in New London County. In addition to emergency services, HSI funding provides the core support for a number of otherwise unfunded initiatives including the Volunteer Income Tax Assistance (VITA) that provided tax preparation for 827 individuals and infused \$1.8 million into the economy of Southeastern Connecticut.

3d. Key TVCCA Personnel

Name	Title	Roles & Responsibilities	How R & R relate to CSBG and/or HSI
Deborah Monahan	Executive Director	Overall direction and operations of TVCCA	She works very closely and in accordance with the policies formulated by the agency’s Board of Trustees. She is responsible for meeting with federal, state and local officials to keep them informed of what TVCCA provides to the communities that it serves and to secure funding for the agency. Furthermore, she meets with various funding sources to advocate for the programs and to ensure that TVCCA has the resources necessary to meet the goals of the programs and to serve those who are in need of the agency’s services.
Brian Vanasse	Chief Financial Officer	Overall financial direction of the agency	He is responsible for meeting federal, state and local audit compliance standards and internal control over financial reporting guidelines to secure funding for the agency. Additionally, he oversees the agency budget to ensure that the agency has the necessary resources to meet the needs of the many programs that TVCCA operates.
Marylouise Underwood	Chief Operations Officer	Oversees daily operations of the agency’s programs and client services	She works directly with program directors as they direct and implement the contracts/programs for which they are responsible.
Janine Dunn	Senior Director, Human Resources	Responsible for all aspects of human resources as they relate to all TVCCA employees	Responsibilities include: employee relations, performance management, compensation and benefits, strategic HR, legal compliance, training and policies and procedures. She is a certified Senior Professional in Human Resources (SPHR).
Tom Sullivan	Senior Director, Finance	Responsible for the daily financial operations of TVCCA	He provides direct assistance to Program Directors, oversight of grants management, and direct support for the agency’s financial activities in his role to ensure funds are available for the agency to carry out its work.
Megan Brown	Senior Director, Marketing & Development	Responsible for all fundraising and marketing of the agency, grant and contract compliance, quality assurance, and oversight of Employment & Training program.	She works with program directors and staff to ensure sufficient funding is available for programs and special projects, markets the agency and programs to the public, ensures compliance with current contracts and Organizational Standards, and leads the organization’s strategic planning process. She is a Certified Fund Raising Executive and Nationally Certified ROMA Implementer.

3e. Alliances with Key Community Partners and Providers

Please see attached file titled "Attachment_C_TVCCA_Partnerships"

3f. Service Locations

TVCCA Office Address	Towns Served
401 West Thames St., #201, Norwich	Lebanon, Franklin, Sprague, Lisbon, Griswold, Voluntown, Colchester, Bozrah, Norwich, Preston, North Stonington, Ledyard, Montville, Salem
83 Huntington St., New London	Stonington, Groton, New London, Waterford, East Lyme, Lyme, Old Lyme
American Jobs Ctr: 113 Salem Tpk., North Building, #200, Norwich	Lebanon, Franklin, Sprague, Lisbon, Griswold, Voluntown, Colchester, Bozrah, Norwich, Preston, North Stonington, Ledyard, Montville, Salem
American Jobs Ctr: Shaw's Cove Six, New London	Stonington, Groton, New London, Waterford, East Lyme, Lyme, Old Lyme
Childcare Center: 380 Taftville-Occum Rd., Taftville	Norwich
Childcare Center: 387 Bayonet St., New London	New London
Head Start and Early Head Start: Colchester Elementary School, 315 Halls Hill Road, Colchester, CT 06415	Colchester
Little Learners: 267 Slater Avenue, Griswold	Griswold
Early Head Start: UCFS, 70 Main St., Jewett City	Griswold
Head Start: 36-38 Central Avenue, Groton	Groton
Little Learners: 40 Central Avenue, Groton	Groton
Head Start: Charles Murphy School, 500 Chesterfield Rd., Oakdale	Montville
Head Start/Public School Collaboration: Bishop School, 526 E. Main St., Norwich	Norwich
Head Start: West Broad Street School, 131 W. Broad St., Pawcatuck	Stonington
Head Start/Public School Collaboration: Friendship School, 24 Rope Ferry Rd., Waterford	Waterford
Commissary: 81 Stockhouse Rd., Bozrah	Brooklyn, Canterbury, Eastford, Killingly, Plainfield, Pomfret, Putnam, Sterling, Thompson, Union, Woodstock, Ashford, Chaplin, Columbia, Coventry, Hampton, Lebanon, Mansfield, Scotland, Willington, Windham, Griswold, Jewett City, Glasgo, Groton, Ledyard, Gales Ferry, Lisbon, Montville, Chesterfield, , Oakdale, Uncasville, New London, No. Stonington, Norwich, Taftville, Occum, Yantic, Preston, Salem, Sprague, Baltic, Hanover, Versailles, Stonington, Old Mystic, Pawcatuck, Voluntown,

	Waterford, Quaker Hill
RSVP: 185 Broad St, Danielson	Danielson, Killingly

3g. Staff Trainings

Please see attached file titled “Attachment_D_TVCCA_Staff_Trainings”

3h. ROMA Training

ROMA training was provided by Rhonda Evans, NCRT on July 11, 2016 and the following staff attended:

- Kim Hudson, Family Advocate, Head Start
- Kerry Callaghan, Director of Contract Compliance & Quality Assurance
- Faith Chatterton, Case Manager, Energy & Support Services
- Nick Zito, Program Manager, Permanent Supportive Housing
- Melanie White, Case Manager, Energy & Support Services
- Yamaira Badillo, Case Manager, Hispanic Human Resource Development
- Matthew Reynolds, Case Manager, Energy & Support Services
- Kim Barry, Financial Education Coordinator, Energy & Support Services
- Lee Carezza, Assistant Director, Energy & Support Services
- Chris Sardo, Director, Energy & Support Services
- Jason Martin, Social Services Manager, Energy & Support Services
- Tina Huard, Case Manager, SSBG
- Johanna Schmitt, Case Manager, SSBG
- Robin Millovitsch, Case Manager, Assurance 16
- Monica Jenkins, Case Manager, Eviction & Foreclosure Prevention

Additionally, the Senior Director of Marketing & Development completed the ROMA Implementer certification program on 02/15/2017 to become a Nationally Certified ROMA Implementer (NCRI).

3i. Board Roster by Sector

Please see attached file titled “Attachment_E_TVCCA_Board_April_2017”

Section 4: Identifying and Meeting Needs

The Community Action Plan must identify service gaps and describe how the agency plans to address them. The information should be presented for the three-year period to be updated on an annual basis as priorities and conditions change. The description should highlight the roles and responsibilities of community partners with specifically identified purposes (Organizational Standard 2.1).

A compliant response will address the following questions: How will the agency use linkages to fill identified gaps in services through the provision of information, referrals, case management, and follow-up consultations? In other words, if an identified community need exceeds your agency’s capacity to meet it and/or there are others already working to meet it in the community, have you answered questions such as: Can our agency bring more attention to this need in the community? Can our agency leverage resources to meet this need? Can our agency fill a service gap by coordinating with others to address this need?

4a. Plan to Address Service Gaps (Organizational Standard 2.1)

Prioritized Issues	Narrative on How Agency Plans to Address	Associated Partners with specifically identified purpose(s)
Affordable Housing	<ul style="list-style-type: none"> • Ensure to the greatest extent possible that there is access to the affordable housing opportunities that are currently in the community • Better integration of case management and Housing programs • Partnership in the CAN – regional approach to addressing affordable housing in our community • Strengthen relationships with HOPE, Inc. (NL), Habitat for Humanity • Convene interested groups in New London County to discuss how we can provide an holistic approach to addressing affordable housing and how we can all work together to keep households stable – if they are in need of “affordable” housing, they are likely in need of other social services • Board and ED – agency as a whole advocating in the community – political clout <ul style="list-style-type: none"> ○ Strength that we have as an agency, not just a department ○ Deb sits on SECHA board 	<p><u>Southeastern CT Coordinated Access Network</u> – regional collaboration</p> <p><u>Southeastern CT Housing Alliance</u> - education and advocacy services to promote the development of affordable housing</p>
Budgeting and Paying For Bills and Debts	<ul style="list-style-type: none"> • Provide financial literacy training to staff throughout Agency – everyone will have basic budgeting skills/tools to provide to clients • Understanding when the right time is for a client to look at budgeting – people need to be committed to the process but also have appropriate income (any at all sometimes) to adequately budget for expenses • IDA pilot – look at expanding • Budgeting/saving education programs for kids, adults, seniors • Financial education as education but also as an intervention tool • Needed – more funding and a population that makes sense to participate (see bullet 2) 	<p><u>Liberty Bank</u> – IDA program funding</p> <p><u>United Way of Southeastern CT</u> – IDA program funding</p>
Healthy Food Access	<ul style="list-style-type: none"> • New London Area Food Coalition – Jason is member • SNAP Outreach • Partnership with Backus Hospital – Brenda Viens, RD 	<p><u>New London Area Food Coalition</u> – food access</p> <p><u>Backus Hospital</u> – Healthy living</p>

	<ul style="list-style-type: none"> • Provide direct access to the Senior Nutrition, SNAP and WIC Programs. • Provide nutritious meals and snacks for children by participating in CACFP (NUTRITION/ HEAD START/ LITTLE LEARNERS) • Provide nutritious meals to homebound seniors age 60+ through title 3 Meals on Wheels program. (NUTRITION) • Provide nutritious meals and socialization to seniors 60 and older at the title 3 café meal program. (NUTRITION) • Conduct fundraising efforts to provide additional meals for the community. (NUTRITION) • Complete outreach in the New London County in regards to the benefits of the WIC program, and program eligibility. Provide outreach materials both English and Spanish. (WIC) • Work with Local Health Care providers, Pregnancy testing sites and Health Care Centers to send referrals directly to the WIC program. (WIC) • Offer non-standard office hours, including monthly Saturday appointments to remove barriers to working families and more access to families with transportation problems. (WIC) • Resource Handouts to assist clients in seeking other services including food pantries and food donation sites will be translated into multiple languages. (WIC) • Participants of the WIC program will be asked by Nutrition staff about their food insecurity at a minimum of 2x a year. (WIC) • All WIC participants will have access to Nutrition information at least quarterly. Topics will include eating healthy on a budget. (WIC) • WIC will conduct an annual participant survey (English and Spanish) focused on how services can be improved and any potential challenges to the program. WIC will include these results in the Annual Local Agency Plan. (WIC) 	<p>initiatives</p> <p><u>CAFCA</u> – SNAP Outreach</p> <p><u>Local healthcare providers</u> - referrals</p>
<p>Translation Services</p>	<ul style="list-style-type: none"> • Ensure all TVCCA materials are translated into at least Spanish • Review use of Cyacom translation service – re-train staff if necessary and strengthen its usage • AHEC medical translation training available for staff 	

	<ul style="list-style-type: none"> • Ensure availability of multi-lingual staff throughout the agency. When staff are not available the telephone relay system (CYRACOM) is used to communicate. • Increase access to the availability of community services for the Hispanic population through the HHD Program. (ENERGY & SUPPORT SERVICES) • When hiring for new positions or replacement positions, Agency programs will strongly consider applicants who are multi-lingual. 	
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4b. Expected Outcomes and Anti-Poverty Focus (Organizational Standard 4.2)

Prioritized Issues	Expected Outcome(s) - changes in status	Explain anti-poverty focus
Affordable Housing	Increase community resources around affordable housing.	Alleviate poverty by ensuring families and individuals are stably housed.
Budgeting and Paying For Bills and Debts	Households will receive budgeting assistance, social services, and referrals to meet monthly household expenses.	Alleviate poverty by helping households budget appropriately for monthly expenses.
Healthy Food Access	Families will have greater access to healthy foods.	Alleviate poverty by ensuring families receive adequate nutrition.
Translation Services	Translation services, translated materials, and multilingual staff will be available for non-English speaking clients.	Alleviate poverty by ensuring clients and the public receive services/materials in their first language.

Section 5: Linkages

CT CAAs are contractually required to establish linkages with other agencies in the community to improve coordination, avoid duplication, and enhance the delivery of services to alleviate the causes, and improve the effects of poverty on the target population. Such linkages shall be intended to promote the development of improved delivery systems for services that include, but are not limited to community-based services designed to promote active participation in the community; and other social services designed to specifically promote and facilitate strengthened family and other support systems.

5a. TVCCA’s Three Closest Partners

List the three organizations, either governmental or other social service agencies with anti-poverty programs, with whom your CAA works with the closest. Then describe how you work together to assure effective delivery of and coordination of CSBG services to low-income people and communities while avoiding duplication of services.

Organization	Coordination of activities to provide services & avoid duplication
Regional Education Service Centers: Eastconn and LEARN	<ul style="list-style-type: none"> • NAEYC Preparation and compliance • Provides Jobs First and WIOA Program Case Management Services to clients in the Northeast • Working procedures between Birth to 3 and TVCCA Child Dev. Programs in provision of services to children eligible for early intervention services.
Pawcatuck Neighborhood Center	<ul style="list-style-type: none"> • Increase accessibility to fuel resources • Provide free IRS tax assistance to low to moderate income households. • Meal Service providing Congregate Lunch and Meals on Wheels Lunch and Supper to senior residents • This agency has agreed to sponsor RSVP for volunteers to deliver meals and help in the kitchen.
United Community & Family Services	<ul style="list-style-type: none"> • Collaboration b/w programs to provide on-site dental clinics for enrolled children. • Permanent Supportive Housing • Outreach to each agency, monthly presence in WIC clinics • Co-location of TVCCA SNAP Outreach and SSBG case managers at UCFS healthcare center

5b. On-going Partner-Involved Initiative

Describe one on-going initiative that your agency has undertaken during the previous federal fiscal year in which you work with another community partner to leverage services and prevent duplication within your catchment area.

TVCCA healthcare partners – Lawrence + Memorial Hospital, Visiting Nurse Association of Southeastern CT, and New London Rehabilitation and Care – are currently working under a bundled payment model, whereby a single payment is made for all services performed for a specific “episode of care”. All service providers including hospital, skilled nursing facilities, and after care supports are reimbursed for their services from this single payment. If providers exceed the pre-arranged reimbursement for the episode, they bear financial responsibility. If the cost of the episode is less than the bundled payment set price, then providers can keep the difference. The greatest challenge with this model is managing costs of services that are out of provider control, many that are non-medical, are often tied to social

determinants, and could lead to adverse events. This is an opportunity for TVCCA CONNECT services to address certain ongoing needs that directly affect re-hospitalization and emergency room visits.

Health care transitions, such as transfer from Skilled Nursing Facilities to home, are cited as events when seniors are particularly vulnerable to factors contributing to a higher risk of re-admission. By becoming part of the discharge planning process and part of the “bundled” care process, TVCCA CONNECT is positioned to address many of the Social Determinants faced by this population.

Partnering with Lawrence + Memorial Hospital’s social work team and the Visiting Nurses Association of Southeastern CT, and New London Rehabilitation and Care, TVCCA has begun utilizing a dedicated phone line to quickly link healthcare staff to a case manager for TVCCA CONNECT services. In addition, a Patient Questionnaire is available to further refine the referral process. Upon receipt of a referral, the case manager performs triage, linking the household to both internal and external resources that may be available to address identified needs. Within the first month of service delivery, TVCCA CONNECT received 18 referrals ranging from simple Meals on Wheels linkages to individuals faced with complex housing needs. Tracking of client outcomes is captured in the TVCCA Tribeware software system.

TVCCA is actively seeking funding for an MSW or LCSW position to expand upon this successful pilot and interact more closely with the healthcare community.

5c. Additional Linkages to Fill Identified Gaps

TVCCA’s community stakeholder survey, conducted as part of our recent Community Needs Assessment, asked questions about the network of services in the community, i.e. how the stakeholders are meeting needs, how well TVCCA is doing in meeting needs, and how our organizations might work together to meet needs. Many respondents commented that our agencies already provide a valuable partnership in the community. However, some responded that greater dissemination of information, streamlining of referrals, and partnering to secure funding resources would be of value in meeting the community’s needs. TVCCA will continue to work with our existing partners, strengthening those partnerships when needed, and will seek out new collaborations in pursuit of opportunities for funding and expansion of services and new programs.

TVCCA has been innovative and open-minded in the formation of partnerships and collaborations to meet the needs of our communities. The needs identified through TVCCA’s Needs Assessment fall under the umbrella of Social Determinants of Health. Recognizing that this is a growing concern in our community, we began piloting the TVCCA CONNECT program mentioned above, forming partnerships with Lawrence + Memorial Hospital and the Visiting Nurses Association of Southeastern CT. With each of these partners, it was necessary to work with “frontline” staff to begin formation of the partnership instead of the traditional top-down approach. We have found this approach to be very successful in forming meaningful partnerships that best serve our community.

5d. Cultivating Additional Partnerships

TVCCA collaborates with hundreds of other organizations to assure the best possible support and outcomes for program participants. These include local governments, schools and colleges, state agencies, private non-profits and community organizations, medical and mental health providers, local businesses, and faith-based organizations. We also participate in numerous local and statewide advocacy, planning, and coordinating groups that address community conditions and systems change and offer the opportunity to form new partnerships with participating organizations. We place a high priority on having staff participate in and provide leadership in such groups.

Section 6: Coordination of Funding

6a. CSBG and HSI Leveraging

As a CAA, we reach out to low-income people in their communities, address their multiple needs through a comprehensive approach, develop partnerships with other community organizations, involve low-income clients in the agency's operations, and administer a full range of coordinated programs designed to have a measurable impact on poverty.

For every CSBG/HSI \$1 TVCCA receives, we are able to leverage an additional \$8 in non-state, non-federal funds. These resources have been invested into building a comprehensive, outcome-based approach to service delivery that brings all of our disparate programs together to help people attain self-sufficiency. If our programs are like individual bricks, then CSBG funds are the mortar which binds them all together into a solid wall. The influence of these funds and the functions they support extend inextricably throughout all aspects of our programming; without the CSBG we would not be a community action agency, but a conglomeration of disjointed programs.

TVCCA directly leverages funding with its partner organizations, acting as subcontractor with some agencies and awarding subcontracts to others. For example:

- TVCCA is both a subcontractor of and subcontracts to EASTCONN for several workforce programs through the Eastern Workforce Investment Board
 - TVCCA subcontract to EASTCONN (JFES & WIOA): \$686,912
 - TVCCA subcontractor of EASTCONN (OSY): \$63,600
- TVCCA subcontracts with United Community & Family Services (UCFS) to provide Permanent Supportive Housing services for \$5,700. However, we also work collaboratively with UCFS in non-monetary ways, i.e. we have co-located a SNAP Outreach worker and SSBG case manager at the UCFS offices one day a week each in order to better reach our common clientele.
- TVCCA subcontracts with WRCC to provide Next Steps Supportive Housing services in Windham County for \$57,571. WRCC also contracts with TVCCA to provide fiscal support for \$51,500.
- Backus Hospital provides a grant of \$66,000 to TVCCA to support a registered dietitian who works jointly between Backus and TVCCA on nutrition related projects such as our previous H.E.A.T. program.

With more than 300 partnerships, MOU's, and subcontracts, there is much more funding leveraged against CSBG and HSI than can be listed in this document, but suffice to say that TVCCA works diligently to ensure that dollars are used throughout the community and in the most efficient manner possible.

6b. Utilization of In-Kind Services

Yes, TVCCA utilizes in-kind services and contributions for the delivery of services.

In-kind services vary, but they generally fall into the categories of providing space (rental and utility/maintenance costs associated with same), providing personnel, and providing supplies, materials, and foodstuffs. Many towns where we provide Senior Nutrition services provide us with storage and kitchen space, personnel to deliver the meals, and use of vehicles for meal delivery. Meeting space is provided by many area churches, businesses, and non-profits.

Time is usually a corporation's most valued commodity and, therefore, the rarest yet very welcome in-kind service. TVCCA mobilizes more than 30 volunteers annually from area businesses to process tax returns through our Volunteer Income Tax Assistance (VITA) program. Additionally, several groups in our

community including the U.S. Navy, United Way Day of Caring groups, and religious organizations often assist our facilities with Spring/Fall clean-ups, facility painting, landscaping, etc.

6c. Creative Processes to Obtain Additional Funding for CSBG/HSI Services

TVCCA has for many years worked with local agencies and funders to leverage resources from the private sector, i.e. local foundations, local banks, local employers’ community service funds and local municipal CDBG funds, to complement and supplement Federal and State funding for the work that our programs do throughout New London County and throughout Eastern Connecticut in some programs.

TVCCA employs a small but productive Development and Planning (D&P) staff that has been a key driver of many successful funding proposals and relationships. Beyond D&P efforts, Senior Administrators and Program Directors have augmented funding efforts by relaying funding opportunities to D&P, sometimes preparing applications themselves, and, importantly, appealing directly to local officials and other funding source decision makers to open their funding gates.

These combined efforts have proven very successful in leveraging hundreds of thousands of dollars throughout the years from these local sources. Below are some examples of our creative efforts:

- Annual Carnevale fundraiser for Meals on Wheels program, which brings together chefs from local restaurants and caterers, raises around \$50,000 annually
- Share the Love participation with local Subaru dealer raises about \$30,000 annually, also for Meals on Wheels
- Shared position of Senior Director of Finance with another area non-profit
- Solicitation of all municipalities in TVCCA’s service area for contributions toward services

6d. Planned New Funding Streams to Address Identified Needs

TVCCA continually seeks new funding opportunities and joint ventures with other community agencies, businesses, projects and foundations to leverage CSBG funds. TVCCA integrates sustainability strategies into its program development activities.

As mentioned previously, TVCCA has begun piloting the TVCCA CONNECT program with local healthcare partners. To bring this project to a larger scale and serve more than 12-20 clients per year, TVCCA will need additional funding resources to support the high-level case management required for this medically fragile clients.

TVCCA is also preparing for the possibility of its services, such as CONNECT, Supportive Housing, and Senior Nutrition, eventually becoming Medicaid/Medicare reimbursable. TVCCA staff has undergone Medicaid/Medicare trainings and we have completed necessary paperwork to be a Medicaid/Medicare billing agency.

Section 7: Performance Measurement

7a. Agency Client Data Systems

System	Programs Associated	In Warehouse - y/n
TribeWare	Case-management, housing, VITA, SSBG, HHD (Head Start, Little Learners, WIC , Employment &	Y

	Training pending)	
FuelWare	LIHEAP, Assurance 16	Y
SSAID	Meals on Wheels	N
Cost Guard	Nutrition Services	N
ChildPlus	Head Start and Little Learners	N (client data will be reported through TribeWare including outcomes)
RSVP Reporter	RSVP	N
CTWBS	Employment Services (tracking through TribeWare pending)	N
SWIS	WIC (tracking through TribeWare pending)	N
TaxWise	VITA (All clients tracked through TribeWare)	N

7b. Issues with Client Data Quality

There are minor issues with data-integrity at the end-user-staff level when inputting client data, i.e. while income information is usually input correctly; some statistics have not been recorded correctly such as Education Level. This has been addressed through staff training and the data has been looking better and more consistent.

7c. Unduplicated Client Counts for CSBG Annual Report

The CSBG Annual Report (formerly CSBG-IS) is generated through the TribeWare system, which ensures unduplicated client counts in reporting across all program client data entered, including Energy.

7d. Changes to Goals and/or Priorities as a Result of Data Collected

Yes, goals and/or priorities have changed as a result of data collected by our client management systems:

- Better end-user-staff training for consistent accurate data
- More use of pre and full assessment information to address client needs
- Discussion on how to increase case-management client follow-up
- More cross-program agency referrals
- New management reports being created to better manage client and household data as well as program and staff deadlines

Additionally, TVCCA has begun a process to standardize case management processes and systems across the agency. A cross-agency team is working to define the basic approach that TVCCA expects all its staff to adopt when delivering individualized support services to program participants. The core standards represent the agency’s minimum expectations, regardless of a program’s staffing, setting, size, or target population. They were developed to:

- Define and describe a consistent process that all TVCCA “case managers” are expected to adopt in assessing and responding to the needs of individual participants.
- Clarify service expectations and required documentation across all TVCCA programs that provide services on an individualized basis.
- Promote quality improvement in the way programs respond to individual needs.

- Set the foundation upon which additional and complementary standards tailored to particular settings, objectives, target populations, and/or TVCCA initiatives can be established.

7e. Tracking Agency, Family and Community Goals

ROMA Outcomes and National Performance Indicators are fully integrated into ESS Case Management. ROMA and NPI's capture and measure the impact ESS Case Management services have on clients' self-sufficiency and well-being. Staff is trained to understand the importance of ROMA and NPI's and how these outcomes and indicators are essential to the success of ESS Case Management.

TVCCA's electronic Case Management tracking software, TribeWare, has fully integrated ROMA outcomes and National Performance Indicators. A Program Goal is a program specific tool within the TribeWare software designed to record and report standardized ROMA Outcomes and NPI's. A Program Goal is initiated for each client receiving ESS Case Management services and is updated throughout the client's involvement in the program to ensure the ongoing recording of ROMA outcomes and National Performance Indicators.

7f. ROMA Goal(s) and National Performance Indicator(s)

Prioritized Issues	Associated ROMA Goal	Associated National Performance Indicator (NPI)
Affordable Housing	ROMA Goal 2: The conditions in which low-income people live are improved.	NPI 1.2H: Obtained and/or maintained safe and affordable housing NPI 2.1 C: Safe and affordable housing units created in the community NPI 2.1D: Safe and affordable housing units in the community preserved or improved through construction, weatherization or rehabilitation achieved by Community Action activity or advocacy NPI 6.4E: Obtained and/or maintained safe and affordable housing
Budgeting and Paying For Bills and Debts	ROMA Goal 1: Low-income people become more self-sufficient.	NPI 1.2 J: Obtained non-emergency LIHEAP energy assistance. NPI 1.3D: Number and percent of participants demonstrating ability to complete and maintain a budget for over 90 days
Healthy Food Access	ROMA Goal 2: The conditions in which low-income people live are improved.	NPI 6.3 B: Infant and child health and physical development are improved as a result of adequate nutrition NPI 6.4F: Obtained food assistance
Translation Services	ROMA Goal 1: Low-income people become more self-sufficient. ROMA Goal 2: The conditions in which low-income people live are improved.	NPI 6.5E: Information and referral calls

7g. Progress Toward Previous Goals

Identified Need	Description	Progress To-Date
Need for Discretionary Funds	TVCCA’s goal is to better coordinate its own discretionary funds with those in the community to close the gap between client financial hardships and the programmatic impact of social service programs. TVCCA will propose to establish a community network composed of key stakeholders noted above	TVCCA launched a concerted fundraising effort around discretionary funds for client emergencies and consistently raises approximately \$20,000 annually through grants and donations for our Client Assistance Emergency Fund.

	and otherwise to better communicate the discretionary fund/monetary-related services that are available in the community.	
The H.E.A.T. (Healthy Eating Advocate Training) Program	TVCCA envisions additional need to work with Backus Hospital, if at all possible especially from a funding standpoint, to expand the roll-out of this H.E.A.T. Program	<p>The H.E.A.T. Program was operated as a train-the-trainer model and has since concluded. Approximately 60 healthy eating advocates completed the HEAT program. The reach of this program is multiplied exponentially, however, by those advocates as they return to their respective agencies and teach other professionals, families, and individuals the principles of healthy eating. Trained advocates have created spin-off programs to engage larger community groups as well, such as a nutrition series developed by a HEAT graduate at Norwich's Otis Library.</p> <p>While the H.E.A.T. Program has concluded, TVCCA continues to work in the community to promote nutrition. For example, TVCCA Executive Director Deborah Monahan participates in the Eastern CT Health Collaborative, working on the social determinants of health and how healthcare organizations can link with community services to deliver the most effective services to patients/clients.</p>
Homelessness	TVCCA plans to wind down and, ultimately, eliminate our shelter and just provide rapid re-housing and diversion services.	<p>In July 2016, TVCCA officially closed its Shelter for Homeless Families. Instead of offering a temporary bed, we will now provide the dollars and support services needed for a family or individual to be rehoused as quickly as possible. We will offer new interventions in response to a housing crisis:</p> <ol style="list-style-type: none"> 1) Prevention Services: In some cases, we may be able to save a tenant's current housing. This may take dollars and/or it may take negotiation and mediation with the landlord. 2) Diversion Services: For families and singles that are literally homeless but have not yet entered a shelter, we will try to provide services which keep them from entering shelter. This may include speaking with family and friends to see if housing can be obtained, even temporarily. It may include help with a large utility bill due to

		<p>extra people in the house or help with the food bill.</p> <p>3) Rapid Rehousing Services: This is exactly as it sounds, getting families and singles back in rental units as quickly as possible, preferably in less than 30 days.</p>
<p>Food insecurities for seniors living at or below 200% of poverty</p>	<p>TVCCA is launching Diners Clubs and Supper Clubs - similar program alternatives to the well-established congregate setting at senior centers. These alternatives are intended for seniors to decrease social isolation; increase the ability to be in a group; allow participants to eat socially; improve/maintain nutritional status; and, provide a forum for seniors to receive information that will help them age in place. These program alternatives also provide the opportunity for seniors to be in more control of the time of day that they choose to eat; who their eating partners are; nutritional choices; and, menu options.</p>	<p>The Supper Club program consisted of a dinner meal 2x/week at housing sites in New London (G.W Carver Apartments and Williams Park Apartments). It was coordinated with a TVCCA Case Manager and funded through Title IIIB. The program was well received by participants and proved to be a good socialization opportunity with a nutritious meal for them. Unfortunately, due to a lack of funding, the program was discontinued.</p>

7h. Governing Board’s Receipt of Annual Update to Community Action Plan

Please see attached file titled “Attachment_F_Board_Minutes_052416”

7i. Changes to Goals and/or Strategies as Result of Changes in Community Needs

Yes, TVCCA has shifted goals and strategies as a result of the community needs identified through its Comprehensive Community Needs Assessment. Based on feedback from our community’s low-income population and community stakeholders, and quantitative data analysis, we have targeted the issues of Affordable Housing, Budgeting and Paying for Bills and Debts, Healthy Food Access, and Translation Services.

The needs identified through TVCCA’s Needs Assessment fall under the umbrella of Social Determinants of Health: “the structural determinants and conditions in which people are born, grow, live, work and age”. They include factors like socioeconomic status, education, the physical environment, employment, and social support networks, as well as access to health care. Recognizing that this is a growing concern in our community, we began piloting the TVCCA CONNECT program mentioned above, forming partnerships with Lawrence + Memorial Hospital and the Visiting Nurses Association of Southeastern CT. By assessing and addressing the *social determinants of health* that negatively impact clients’ lives, this project seeks to prove that social service interventions can significantly improve overall outcomes.

Section 8: Results Oriented Management and Accountability (ROMA)

8a. Agency’s Use of ROMA Cycle in Development of Community Action Plan

	Community Action Plan
Assessment	<ul style="list-style-type: none">• Reviewed and revised mission statement• TVCCA conducted a community needs assessment that identified needs and resources in the community.• Evaluated current services to determine effectiveness in meeting identified needs.
Planning	<ul style="list-style-type: none">• Charts within TVCCA’s Community Action Plan form a logic model for meeting the prioritized needs.• Measurable outcomes have been identified.• Services have been matched to the needs to achieve outcomes.• TVCCA’s Tribeware system will track services and outcomes.
Implementation	<ul style="list-style-type: none">• TVCCA staff will implement identified services tied to strategies within the Strategic Plan and Community Action Plan.• TVCCA reports on progress made within the Strategic and Community Action Plans at least annually.
Achievement of Results	<ul style="list-style-type: none">• Results will be measured for each outcome.
Evaluation	<ul style="list-style-type: none">• At least annually, TVCCA will analyze data and review the demographics of the population served.• Performance goals will be adjusted if needed. Strategies will be revised based on performance in meeting identified needs.

8b. Interaction with Nationally Certified Roma Trainer (NCRT) or Implementer (NCRI)

Name of Certified ROMA Trainer or Implementer	Megan Brown
Relationship of Trainer/Implementer to Agency (on staff, consultant, State Association, Other)	Staff
Type of Interaction (in person or by phone/web meeting)	In Person
Date(s) of Interaction	Continuous
Brief Description of Interaction	Ms. Brown is the primary preparer of the Community Action Plan, as well as the Community Needs Assessment and Strategic Plan. She also oversees the agency's fundraising, contract compliance, and quality assurance.