

**Youth Programs and Facilities Grant Program
(YPFG)**

**Part B All County Distribution Application
Package Coversheet**

Submitted by:

COUNTY OF SONOMA

Date Submitted:

May 12, 2021

Part B All County Distribution Application Checklist

A complete application package for funding under the Youth Programs and Facilities Grant (YPFG) Program must contain the following items:

	Required Items:	✓
1	Cover Sheet (previous page) <ul style="list-style-type: none"> • Insert Applicant Name and Date of Submission 	<input checked="" type="checkbox"/>
2	YPFG Proposal Checklist <ul style="list-style-type: none"> • Signed by the authorized signatory with a digital signature OR a wet signature in blue ink. 	<input checked="" type="checkbox"/>
3	Applicant Information Form <ul style="list-style-type: none"> • Signed by the authorized signatory with a digital signature OR a wet signature in blue ink. 	<input checked="" type="checkbox"/>
4	Application Narrative <ul style="list-style-type: none"> • 2 pages or fewer 	<input checked="" type="checkbox"/>
5	Budget Attachment	<input checked="" type="checkbox"/>
6	Certification of Compliance with BSCC Policies on Debarment, Fraud, Theft and Embezzlement (Appendix D) <ul style="list-style-type: none"> • Signed by the authorized signatory with a digital signature OR a wet signature in blue ink. 	<input checked="" type="checkbox"/>
	Optional:	
7	Governing Board Resolution (Appendix E) <i>Note: The Governing Board Resolution is due prior to contract execution but is not required at the time of proposal submission.</i>	<input type="checkbox"/>

I have reviewed this checklist and verified that all required items are included in this proposal packet.

X 
Applicant Authorized Signature (see Applicant Information Form, Part L, next page)

Part B All County Distribution Applicant Information Form

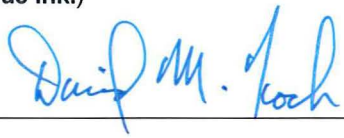
A. APPLICANT < Name> County					B. TAX IDENTIFICATION NUMBER				
NAME OF APPLICANT Sonoma County Probation Department					TAX IDENTIFICATION #: 94-6000539				
STREET ADDRESS 370 Administration Drive			CITY Santa Rosa		STATE CA		ZIP CODE 95403		
MAILING ADDRESS (if different) 600 Administration Dr., Room 104 J			CITY Santa Rosa		STATE CA		ZIP CODE 95403		
C. PROJECT TITLE:					Sonoma County Realigned Youth Programs and Facilities Project				
D. PROJECT SUMMARY (100-150 words):									
Prioritizing the local continuum of care, the Department's aim is to bolster the existing case management model for local realigned youth flowing from their longer commitments and heightened needs, in three ways: Information system upgrades; redesign improvements for visitation, therapy, and tele-health spaces; and the virtual systems upgrades to support those spaces.									
E. GRANT FUNDS REQUESTED: (See Appendix F: County Juvenile Population Index)									
\$ 82,400.00									
F. DEFERRED SPENDING: Is the application for a deferred spending award?					<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO				
G. LEAD PUBLIC AGENCY:					Sonoma County Probation Department				
H. PROJECT DIRECTOR:									
NAME Vanessa Fuchs			TITLE Deputy Chief Probation Officer			TELEPHONE NUMBER 707-565-6258			
STREET ADDRESS 7425 Rancho Los Guilicos Rd., Dept. B					FAX NUMBER 707-565-6329				
CITY Santa Rosa		STATE CA		ZIP CODE 95409		EMAIL ADDRESS Vanessa.Fuchs@sonoma-county.org			
I. FINANCIAL OFFICER:									
NAME Christine Williams			TITLE Administrative Services Director			TELEPHONE NUMBER 707-565-2145			
STREET ADDRESS 370 Administration Drive					FAX NUMBER 707-565-2878				
CITY Santa Rosa		STATE CA		ZIP CODE 95403		EMAIL ADDRESS Christine.Williams@sonoma-county.org			
PAYMENT MAILING ADDRESS (if different) 600 Administration Dr., Room 104 J			CITY Santa Rosa		STATE CA		ZIP CODE 95403		
J. DAY-TO-DAY PROGRAM CONTACT:									
NAME Daniel Flamson			TITLE Asst. Director Juvenile Hall			TELEPHONE NUMBER 707-565-6234			
STREET ADDRESS 7425 Rancho Los Guilicos Rd., Dept. B					FAX NUMBER 707-565-6329				
CITY Santa Rosa		STATE CA		ZIP CODE 95409		EMAIL ADDRESS Daniel.Flamson@sonoma-county.org			

K. DAY-TO-DAY FISCAL CONTACT:

NAME	TITLE	TELEPHONE NUMBER	
Marcella Chandler	Department Analyst	707-565-6211	
STREET ADDRESS		FAX NUMBER	
7425 Rancho Los Guilicos Rd. Dept. B		707-565-6329	
CITY	STATE	ZIP CODE	EMAIL ADDRESS
Santa Rosa	CA	95409	Marcella.Chandler@sonoma-county.org

L. AUTHORIZED SIGNATURE

By signing this application, I hereby certify that I am vested by the Applicant with the authority to enter into contract with the BSCC, and that the grantee and any subcontractors will abide by the laws, policies and procedures governing this funding.

NAME OF AUTHORIZED OFFICER	TITLE	TELEPHONE NUMBER	EMAIL ADDRESS
David Koch	Chief Probation Officer	707-565-2732	David.Koch@sonoma-county.org
STREET ADDRESS	CITY	STATE	ZIP CODE
370 Administration Drive	Santa Rosa	CA	95403
EMAIL ADDRESS David.Koch@sonoma-county.org			
APPLICANT'S SIGNATURE (Signed by the authorized signatory with a digital signature OR a wet signature in blue ink.)			DATE
X 			12 May 2021

Authorized Signature: Must be a representative with the authority to sign documents and obligate the applicant

CONFIDENTIALITY NOTICE

All documents submitted as a part of the Youth Programs and Facilities Grant (YPMG) Program are public documents and may be subject to a request pursuant to the California Public Records Act. The BSCC, as a state agency, may have to disclose these documents to the public. The BSCC cannot ensure the confidentiality of any information submitted in or with this proposal. (Gov. Code, §§ 6250 et seq.)

APPLICATION NARRATIVE

SECTION 1: PROJECT NEED

1.1 Senate Bill 823 presents the Sonoma County Probation Department with a transformative opportunity to improve outcomes for realigned youth through meaningful community connections and trauma informed, culturally relevant, gender appropriate services grounded in research and efficacy. Prioritizing the local continuum of care, the Department's aim is to bolster the existing case management model for local realigned youth flowing from their longer commitments and heightened needs, in three ways: Information system upgrades; redesign improvements for visitation, therapy, and tele-health spaces; and the virtual systems upgrades to support those spaces. The current information system is not set up to track and manage these youth, the facility is not configured for the long-term treatment needs of the population, nor is the equipment available to provide virtual visitation and programming services.

1.2 The anticipated service population, based on previous commitment data, are most likely male (only three females sent to DJJ since 2017), 17 and 18 years old, Hispanic and White, that were involved in aggravated assault (assault with a deadly weapon), followed by robbery and sex offenses. The Department estimates eight to twelve realigned local youth committed to Juvenile Hall's Secure Youth Treatment Facility. We estimate the average stay for realigned youth will be 22 months.

SECTION 2: PROJECT DESCRIPTION

2.1 The facility infrastructure and improvement funds being requested will be used at Sonoma County Juvenile Hall, Probation Camp, and Juvenile Probation Services. These improvements will enhance Probation's existing provision of care and services that are humane, promote safety, and are evidence-based.

First, improvements to the information systems are necessary to include and track the realigned youth, ensuring their needs are met by programming in support of positive youth development while in our care.

2.2 The Detention Management System (known as KJS) will be modified to manage the realigned population and measure program performance to assess the program's success in reducing recidivism and entry to the Adult system. This includes modifying data collection and reports to include the new population. In support of realigned youths' Individual Rehabilitation Planning (IRP), the Behavior Management System will be upgraded to more fully document youth participation in programmatic activities. Finally, the Case Planning system (the Noble Assessments platform) will be modified to support an IRP that follows the youth through each phase of supervision with the Sonoma County Probation Department, including in custodial settings and in the community.

2.1 Second, redesigned areas will be created in the detention facility to deliver trauma-informed care for the realigned youth in a space that feels less-institutional. **2.2** These spaces will allow the Department to work closely with local realigned youths and their families with supportive and necessary therapeutic services. The redesign will help facilitate family engagement in a more relaxed and welcoming environment, which is a key part of this transition process. The Sonoma County Probation Department intends to engage with families while the youth is housed within the facility and throughout their transition onto aftercare; and ultimately, successful completion of probation supervision.

2.1 To address the need for virtual visitation, tele-health appointments, virtual programming, virtual career and technical education, and virtual education services at the Juvenile Hall, and Probation Camp, Sonoma County Probation will purchase and configure virtual meeting equipment and connectivity. **2.2** The virtual meeting equipment provides increased connection to natural supports by facilitating virtual visitation, virtual therapy, and virtual child and family team meetings including meetings with other preexisting community connections. In the event the youth has a therapist or individual counselor in the community, Sonoma County Probation will use these spaces to maintain that vital relationship as the youth moves toward reentry.

BUDGET – see attached file: *Sonoma County YPFG PART B Budget*

Appendix D: Certification of Compliance with BSCC Policies on Debarment, Fraud, Theft and Embezzlement

It is the policy of the BSCC to protect grant funds from unreasonable risks of fraudulent, criminal, or other improper use. As such, the Board will not enter into contracts or provide reimbursement to applicants that have been:

- a. debarred by any federal, state, or local government entities during the period of debarment; or
- b. convicted of fraud, theft, or embezzlement of federal, state, or local government grant funds for a period of three years following conviction.


Furthermore, the BSCC requires grant recipients to provide an assurance that there has been no applicable debarment, disqualification, suspension, or removal from a federal, state or local grant program on the part of the grantee at the time of application and that the grantee will immediately notify the BSCC should such debarment or conviction occur during the term of the Grant contract.

BSCC also requires that all grant recipients include, as a condition of award to a subgrantee or subcontractor, a requirement that the subgrantee or subcontractor will provide the same assurances to the grant recipient. If a grant recipient wishes to consider a subgrantee or subcontractor that has been debarred or convicted, the grant recipient must submit a written request for exception to the BSCC along with supporting documentation.

By checking the following boxes and signing below, applicant affirms that:

- I/We are not currently debarred by any federal, state, or local entity from applying for or receiving federal, state, or local grant funds.
- I/We have not been convicted of any crime involving theft, fraud, or embezzlement of federal, state, or local grant funds within the last three years. We will notify the BSCC should such debarment or conviction occur during the term of the Grant contract.
- I/We will hold subgrantees and subcontractors to these same requirements.

A grantee may make a request in writing to the Executive Director of the BSCC for an exception to the debarment policy. Any determination made by the Executive Director shall be made in writing.

AUTHORIZED SIGNATURE			
(This document must be signed by the person who is authorized to sign the Grant Agreement.)			
NAME OF AUTHORIZED OFFICER David Koch	TITLE Chief Probation Officer	TELEPHONE NUMBER 707-565-2731	
STREET ADDRESS 370 Administration Drive	CITY Santa Rosa	STATE CA	ZIP CODE 95403
EMAIL ADDRESS David.Koch@sonoma-county.org			
AUTHORIZED OFFICER SIGNATURE ((Blue Ink Only or E-signature)) x 		DATE 12 May 2021	