

Community Development Block Grant 2021 Program Year Subgrantee Application - Submission #6478

Date Submitted: 3/4/2021



**CITY OF SARATOGA SPRINGS**

OFFICE OF COMMUNITY DEVELOPMENT

City Hall - 474 Broadway  
Saratoga Springs, New York 12866  
518.587.3550 x2575 www.saratoga-springs.org



**Community Development Block Grant (CDBG) Entitlement Program  
2021 Program Year – Subgrantee Application**

**IMPORTANT**

**2021 CDBG Guidebook**

**\*\*DO NOT attempt to complete this application prior to reviewing the 2021 CDBG Guidebook (link provided above). Questions should be directed to the Community Development Planner at [lindsey.connors@saratoga-springs.org](mailto:lindsey.connors@saratoga-springs.org)\*\***

Activity Name\*

Coordinated Entry

Applicant Organization\*

CAPTAIN Community Human Services

Address\*

5 Municipal Plaza, Suite 3

City\*

Clifton Park

State\*

NY

Zip Code\*

12065

**Phone Number\***

518-371-1185

**Email Address\***

fern@captaincares.org

**Contact Person\***

Fern Hurley

**Title\***

Associate Executive Director

**Applicant Type\***

Choose 1

- City Department
  Non-Profit Organization
  Other Public Agency

**List Department\***

**Federal ID #\***

14-1637304

**DUNS #\***

363692385

**Specify\***

**National Objective\***

Choose 1

- Benefit persons of low-moderate income
  Address slum/blight conditions
  Urgent need

**Specify\***

Low-Mod Income Housing Activities

Choose 1

**Requested CDBG Entitlement Funding\***

27,111

**Funding leveraged from other sources\***

7,247

**Total activity cost\***

34,358

If zero, please indicate.

20% of total project costs strongly recommended, but not required. If zero, please indicate.

**Proposal Abstract \***

CAPTAIN Community Human Services (CHS) is applying for CDBG Entitlement funding to support a high functioning, robust, and comprehensive Coordinated Entry System (CE), which will serve homeless individuals and families of the City of Saratoga Springs. Specifically, the funding will support the important and vital work of the CE Coordinator, who is responsible for coordinating the housing services network of the Saratoga-North Country Continuum of Care for the benefit of homeless individuals and families seeking supportive and permanent housing options available to them within the community of Saratoga Springs. The CE System is a collaborative and collective effort by HUD-funded agencies, and participating partners, working to prevent, address, and end homelessness in all forms by helping homeless individuals and families quickly secure housing that best fits their needs.

The entire CE system is based on the principle of collaboration and “No Wrong Door”. It doesn’t matter where a homeless individual or family presents within the network, because they receive the same experience from all points of contact. Once a homeless individual or family (participant) engages with one of the identified Points of Contact, a common CE Assessment form is completed, which is then forwarded to the CE Coordinator. The CE Coordinator then maintains an active “Priority List”. The Priority List is the secure, real-time list of those homeless individuals and families looking for permanent housing, which are prioritized by vulnerability. The CE Coordinator organizes the Priority List by vulnerability and participant needs to determine the most appropriate referral to housing options in a client-centered and Housing First approach. The CE Coordinator refers the participant to appropriate housing providers. The CE Coordinator also maintains an active Vacancy List, updated weekly, with available housing options from the various housing providers. The CE Coordinator convenes a monthly meeting with all housing providers to review the priority list, discharges, and case conference about participants.

Please provide a BRIEF overview of your proposal.

**Persons served\***

55

**This activity is...\***

continuing from previous years

How many low-moderate income persons will be served through this activity?

**Priorities Addressed\***

Coordinated Entry addresses the permanent housing needs of persons who are homeless by referring them to appropriate housing providers based upon their specific needs. The CE Coordinator works with the permanent housing providers to prioritize participants and connect them to permanent housing.

Coordinated Entry addresses public service needs by helping to prevent homelessness through referring people who are at risk of homelessness to programs which may be able to help them to avoid eviction or find new housing that is affordable. Coordinated Entry also helps people staying in temporary housing connect to sources of permanent housing.

List which of the community development priorities listed in the City's 2020 Consolidated Plan this project will address. Describe how the project fill those identified needs.

**Activity Beneficiaries\***

The beneficiaries of the Coordinated Entry (CE) System and a paid CE Coordinator position will be homeless individuals and families ages 18+ in and around the City of Saratoga Springs, as well as those at risk of homelessness. Generally these individuals have no income or are in the low to moderate income range. Individuals will be identified by multiple agencies in the Continuum of Care and referred to the Coordinated Entry project. Intake screening for entry to the project includes household income information.

Identify who will benefit from the proposed activity. If the activity is designed to benefit: 1) individual persons of low- to moderate-income, describe the process you will use to identify these persons and determine their income eligibility and the number of persons you expect to serve. 2) the inhabitants of a predominantly low-moderate income area, identify the Census Block Group in which the activity is located. 3) a low-moderate income “limited clientele”, identify the “limited clientele” group.

### Performance Goals and Indicators\*

The CE Project will serve 55 homeless individuals from the City of Saratoga Springs annually with housing coordination services, assessment, and referrals to housing providers, and other coordination activities to rapidly move them from homeless to stable housing.

Each individual will be entered into the Homeless Management Information System (HMIS) database, which provides robust service coordination and reporting.

The performance indicators to measure success will be:

The number of homeless participants who have been referred to permanent housing providers.

The number of homeless participants that have been discharged from CE to permanent housing.

Identify your performance goals and the types of indicators you will use to document activity accomplishments and success. (Examples should include: # of persons with new/improved access to services, # of affordable houses rehabilitated, # of businesses assisted, # of jobs saved or created, etc.)

### Activity Timeframe/Schedule \*

The work of the CE Project and the CE Coordinator is ongoing. Meetings are held monthly (currently on the second Tuesday of each month) with housing providers from the Continuum of Care to case conference and review the priority list. Vacancy lists are updated and distributed weekly. Quarterly, statistics are compiled to review the performance indicators.

Include start, completion dates, and other significant performance stages.

### Required Approvals/Permits\*

not applicable

Identify whether the activity requires additional local, state or federal approval (license, permit, design/historic/environmental review, etc.). For construction/site development/land acquisition projects, provide evidence of site control.

### Site Control Documentation (if applicable)

No file chosen

Deed, MOU, purchase contract, etc.

### Organization Overview

CAPTAIN Community Human Services (CHS) is a non-profit, grassroots, community service agency that serves as an advocate for the unmet needs of disadvantaged children, individuals, and families. Since its humble beginnings in 1977, CAPTAIN CHS has grown to operate over 32 different programs that address serious social issues such as homelessness, hunger, economic crisis, as well as community support and empowerment programs. Our goal is to Lift People Up and Build Brighter Futures.

The 2021 Board of Directors list is attached.

Provide an overview of your organization including length of time in existence. List current officers and board members.

### Organization Capacity Documentation

2021 Board Members.pdf

OPTIONAL: Upload board list, org chart, yearly accomplishment summary, etc.

### Previous CDBG awards\*

Has your organization been a previous sub-recipient of City CDBG funds and/or any other federal award?

- Yes  
 No

### Award Completion\*

Have these activities been completed and all federal requirements met?

- yes  
 no

## Experience

CAPTAIN CHS has been involved with the Saratoga Housing Alliance and the Continuum of Care for many years and the CCHS Executive Director, Andy Gilpin, serves as co-chair of the Alliance. CCHS has been addressing the needs of unsheltered youth for over 25 years through our Runaway and Homeless youth Shelter, and has expanded our service offerings to address homelessness with programs such as Street Outreach, Family Assistance, Solutions to End Homelessness Program (STEHP), Supportive Housing for Homeless Youth, and most recently the CARES Act Emergency Solutions Grant- Covid Funds. CCHS has been successfully operating the Coordinated Entry Project with a paid Coordinator since the fall of 2020 and is seeking funding to continue that paid position. (Note that the Award Completion question is answered "no" because the grant time frame is not yet completed.)

Describe your organization's experience in successfully conducting this type of activity. Identify any skills, current services, or special accomplishments that demonstrate your capacity for success.

## Key Persons

Jessica Valcik, Homeless Community Services Manager- Jessica is the CE Coordinator for the Saratoga North Country  
Fern Hurley, Associate Executive Director- Fern oversees multiple programs that address homelessness at CAPTAIN CHS including Coordinated Entry  
Andy Gilpin, Executive Director of CAPTAIN CHS and co-chair of the Saratoga Alliance to end Homelessness

Identify the person(s) responsible for program and financial management of the activity. Identify all other persons involved in this activity noting whether these positions are current or new, pending this award. For construction/site development projects, identify the development team including proposed contractors, subcontractors, and project manager.

## Partner Agencies

The Coordinated Entry project is a partnership with multiple housing agencies. Each agency is a member of the Continuum of Care and has signed an MOU outlining roles and responsibilities. All agencies may attend the monthly meeting, be a "point of contact" for the no-wrong-door approach to housing, and make referrals to Coordinated Entry. The current members are:

- CAPTAIN Community Human Services
- Shelters of Saratoga
- Veterans & Community Housing Coalition, Inc.
- The Salvation Army
- Legal Aid
- RISE Healthy Housing and Support Services
- Wellspring
- Prevention Council/Healing Springs
- Wait House
- Saratoga Department of Social Services
- Warren Washington Association for Mental Health
- Warren County Department of Social Services
- Adirondack Vet House
- Supportive Ministries
- Soldier On
- Veterans Administration
- Washington County Department of Social Services
- Glens Falls Housing Authority
- Saratoga County Mental Health SPOA
- City of Saratoga Springs

Identify any other agencies/partners involved in this activity and define their roles and responsibilities.

### Authorized Electronic Signature Agreement\*

By checking the "I agree" box below, you agree and acknowledge that 1) your application will not be signed in the sense of a traditional paper document, 2) by signing in this alternate manner, you authorize your electronic signature to be valid and binding upon you to the same force and effect as a handwritten signature, and 3) you may still be required to provide a traditional signature at a later date.

I agree.

**Electronic Signature\***

Fern L. Hurley

**Date\***

3/4/2021

**Activity Budget \***

Complete and upload budget forms 1 and/or 2 (provided below) as appropriate. Depending on the activity, the applicant may need to submit one or both of the budget forms. On these forms, identify the amount and sources of leveraged funding for this activity. Include the status of these funds (i.e. cash on hand, grants received, planned fund-raising, etc.). Upload copies of funding commitment letters or other evidence of funding support in the space provided. \*In addition, more detailed budgets MAY be uploaded in the space provided. If an architect, engineer, or other personnel have conducted a cost analysis, upload a copy noting the author and date of analysis.

**Budget Form 1 - Proposed Activity Program Operating Budget**[Budget Form 1](#)

Required for public service or economic development activities as applicable. Complete and save to your local computer, then upload below.

**Upload Budget Form 1**
 No file chosen
**Optional: Evidence of Funding Support**
 No file chosen

Proof of leveraged funding (ie. grant award letter, private donation commitment letter, etc.)

**Budget Form 2 - Construction/Site Development Budget**[Budget Form 2](#)

Required for "bricks and mortar" activities (ie. construction, rehabilitation, land acquisition, etc.) as applicable. Complete and save to your local computer, then upload below.

**Upload Budget Form 2**
 No file chosen
**Optional: Detailed Budget/Cost Analysis**
 No file chosen
**OFFICE OF MANAGEMENT AND BUDGET (OMB) CIRCULAR A-133 -- MONITORING OF FEDERAL FINANCIAL ASSISTANCE TO SUBRECIPIENTS\*****Organization\***

CAPTAIN Community Human Services

**Mailing Address\***

5 Municipal Plaza

**Federal ID\***

14-1637304

**Phone #\***

518-371-1185

**Fax #**

518-383-7997

**DUNS #\***

363692385

**Please identify your fiscal year (mth/yr to mth/yr):\***

01/21-12/21

Please identify below the funding received during your **LAST FISCAL YEAR**.

**Community Development Block Grant Entitlement Funding (CDBG):**

**CDBG Activity Name\***

Coordinated Entry

**CDBG Program Year\***

2020

**CDBG Funding Amount\***

16,000

If not applicable, please reply N/A.

**Other Federal Financial Awards (cash & non-cash):**

**Name & Catalog of Federal Financial Assistance (CFDA)#\***

Basic Center Program #93.623

**Federal Funding Amount\***

166,169

If not applicable, please reply N/A.

**Name & CFDA #**

**Federal Funding Amount**

**Name & CFDA #**

**Federal Funding Amount**

**During your last fiscal year, has your organization expended more than \$750,000 in total federal financial awards (incl. CDBG & all other federal assistance)?\***

- Yes  No

**Single Audit Report\***

No file chosen

Upload a copy of your organization's latest Single Audit Report.

**Are you aware of any financial audit violations, findings or questioned costs relating to any activity funded with federal financial assistance? \***

- Yes  
 No  
 N/A

**Please describe:\***

**Other Saratoga County Awards (cash & non-cash):**

**Program Name\***

Saratoga County Office of the Aging- CareLinks and Wellness Expres

**Year\***

multiple years

**Award Amount\***

\$45,000

If not applicable, please reply N/A.

**Program Name**

Saratoga County Youth Bureau- RHY, ORC, CAPteens, Job Assist,

**Year**

multiple years

**Award Amount**

\$48,500

**Program Name**

Saratoga County Dept. of Mental Health- FSS

**Year**

multiple years

**Award Amount**

\$56,000

**Authorized Electronic Signature Agreement\***

By checking the "I agree" box below, you agree and acknowledge that 1) your application will not be signed in the sense of a traditional paper document, 2) by signing in this alternate manner, you authorize your electronic signature to be valid and binding upon you to the same force and effect as a handwritten signature, and 3) you may still be required to provide a traditional signature at a later date.

 I agree.
**Electronic Signature**

Fern L. Hurley

**Date**

3/4/2021

**-----ENVIRONMENTAL IMPACT & RISK ASSESSMENT FOR NEW CONSTRUCTION PROJECTS-----  
 ----- (INCLUDING EXPANSIONS OF EXISTING BUILDING FOOTPRINTS OR REHAB  
 PROJECTS OF 75% OR MORE)**

**Does your proposed project include new construction, expansion of an existing building footprint, or rehabilitation of 75% or more of an existing building? \***

- Yes  
 No

**Brief description of project and location. Include size of building, scope of impact, land disturbance, and construction schedule:\***

**Location Map\***
 No file chosen

upload pdf

**Does the project require a permit or approval from any other government agency (local, state or federal)?**

- Yes  
 No



List required permits and/or approvals:\*

Is the project a permitted use under current zoning regulations?\*

- Yes
- No

Is the project consistent with the adopted Comprehensive Plan?\*

- Yes
- No

Will the project require or lead to a change in land use of the affected property (e.g. from non-residential to residential, commercial to industrial, or from one industrial use to another)?\*

- Yes
- No

Describe:\*

Is the project on or adjacent to farmland?\*

- Yes
- No

If the project is residential, how many units will be created?

Is the project site within 2,500 feet of the Saratoga County Airport? \*

- Yes
- No

Are there floodplains on or adjacent to the parcel on which the project is to be constructed?\*

- Yes, 100 yr floodplains.
- Yes, 500 yr floodplains.
- No.

Are there wetlands on or adjacent to the parcel on which the project is to be constructed?\*

- Yes
- No

Is the project within 1,000' of a state or county roadway/highway OR I-87?\*

- Yes
- No

Which roadways?\*

Is the project within 3,000' of a rail line? \*

- Yes
- No

Is there an industrial facility within line of site of the project location?\*

- Yes
- No

Which facility?\*

Has the project site or adjoining property ever been used as a gasoline station, motor repair facility, commercial printing facility, dry cleaners, photo developing laboratory, junkyard or landfill, or as a waste treatment storage, disposal, processing or recycling facility?\*

- Yes
- No

Are there any EPA monitored facilities within a 1 mile radius or the project location?\*

- Yes
- No

List street address:\*

Are there above-ground flammable or explosive storage tanks within a 1 mile radius or the project site?\*

- Yes
- No

Is the project located in an environmental justice area?\*

- Yes
- No

Does the project site contain, or is it substantially contiguous to, a building, archaeological site, or district which is listed on the National or State Register of Historic Places, or that has been determined by the Commissioner of the NYS Office of Parks, Recreation and Historic Preservation to be eligible for listing on the State Register of Historic Places?\*

- Yes
- No

Is the project site, or any portion of it, located in or adjacent to an area designated as sensitive for archaeological sites on the NYS Historic Preservation Office (SHPO) archaeological site inventory?\*

- Yes
- No

Does the project site contain any species of animal, or associated habitats, listed by the State or Federal government as threatened or endangered?\*

- Yes
- No

Is this a rehabilitation project?\*

- Yes
- No

Was the building constructed prior to 1978?\*

- Yes
- No

If so, has it been inspected for lead?\*

- Yes
- No

Is there currently lead present?\*

- Yes
- No

Has it been inspected for asbestos?\*

- Yes
- No

Is there currently asbestos present?\*

- Yes
- No

## 2021 Board of Directors – CAPTAIN Community Human Services

Board Member	Email Address	Street Address
Phone Numbers		
<b>Mike Holley, President</b> LCSW	15 Forestbrook Drive Ballston Lake, NY 12019	518-384-1299 (h) 518-369-9022 (c) Mholl1299@gmail.com Since 2017
<b>Claire Brown, Past President</b> Community Volunteer	17 Robinwood Drive Clifton Park, NY 12065	518-371-3144 (h) 518-495-0964 (c) bcross@hedleycpa.com Since 2013
<b>Kate Gurley, 1<sup>st</sup> VP</b> K-12 ELA & Reading RTI/AIS Dept. Dir., BH-BL Central School District	15 Forestbrook Drive Ballston Lake, NY 12019	518-384-1299 (h) 518-369-9022 (c) kgurley@bhbl.org kgurley67@gmail.com Since 2017
<b>Patti Ellis, Secretary</b> Community Volunteer	37 Covington Dr. Mechanicville, NY 12118	518-652-2804 (h) 518-69-8482 (c) Pellis26@gmail.com Since 2010
<b>Scott DeMarco, Treasurer</b> CEO, Equitable Value LLC	14 Cordoba Ct. Clifton Park, NY 12065	518-810-6249 (c) scott@equitable.expert Since 2020
<b>Rob Picotte, VP Development and Marketing</b> CFO, Desmond Media	27 Kajen Dr. Diamond Point, NY 12824	518-584-1690 (w) 518-668-5466 (h) 518-727-5904 (c) Rob@desmondmedia.com Since 2012
<b>John Kuznia, VP Personnel</b> Truman Solutions, Owner	4 Country Squire Court Saratoga Springs, NY 12866	518-859-4325 (c) john@trumansolutions.com Since 2018
<b>Thomas Savino</b> Commercial Real Estate Agent CBRE - Albany	7A Falcon Trace Drive Clifton Park, NY 12065	518-281-4497 (c) 518-452-2700 (w) Tom.Savino@CBRE-Albany.com Since 2011
<b>Denise Desmond</b> Owner, Desmond Media	27 Kajen Dr. Diamond Point, NY 12824	518-584-1690 (w) 518-668-5466 (h) 518-727-5927 (c) Denise@desmondmedia.com Since 2012
<b>Belinda Cross Kucharski</b> Financial Advisor Hedley Kobylar Wealth Management	454 Stage Rd. Ballston Lake, NY 12119	505-1824 (c) 348-2079 (w) bcross@hedleycpa.com Since 2013
<b>Jim Pugliese</b> Community Volunteer	4 Eagles Glen Clifton Park, NY 12065	518-369-7748 speakerjim@prodigy.net Since 2015
<b>Terry Mango</b> Senior Program Administrator Northeast Parent & Child Society	94 Lakehill Road Burnt Hills, NY 12027	518-399-7602 (h) William.mango@verizon.net Since 2017
<b>Bob O'Connell</b> Community Volunteer	1 Zamora Court Clifton Park, NY 12065	518-371-8210 (h) 518-320-5871 (c) roconnell@nycap.rr.com Since 2017
<b>Kishani Choudhury</b> Business Development Officer Saratoga National Bank	11 Parkside Drive Mechanicville, NY 12118	518-321-8847 (w) 518-466-2006 (c) Kishani.choudhury@arrowbank.com Since 2019
<b>Ashlynn Savarese</b> Associate Attorney Luibrand Law Firm	1226 Wendell Ave. Apt 2 Schenectady, NY 12308	518-783-1100 (w) 919-606-4184 (c) Asavarese323@gmail.com Since 2019
<b>Dan Bazile</b> Anchor, Spectrum News	4 Sundial Place Clifton Park, NY 12065	518-364-0338 (c) baziled@gmail.com Since 2019
<b>Richard Ferguson</b> Community Volunteer	PO Box 1065 Saratoga Springs, NY 12866	518-879-9526 (c) 518-583-2125 (h) fergstar@me.com Since 2019
<b>Nithya Chockalingam</b> Student	11 Stuart Drive Mechanicville, NY 12118	518-618-5642 (c) 518-253-2796 (h) nithya.isu@gmail.com Since 2020
<b>Riane Richard</b> Student	578 Clifton Park Center Rd. Clifton Park, NY 12065	408-250-6808(c) 518-371-5642 (h) riane.2432@gmail.com Since 2020

**Budget Form 1**  
**Proposed Activity Program Operating Budget**

	Entitlement Grant	Leveraged Funding	Total Activity Cost	Source of leveraged Funds and In-Kind Services
<b>PERSONNEL</b>				
Salaries	\$ 22,593.00	\$ 3,987.00	\$ 26,580.00	
Fringe	\$ 4,518.00	\$ 798.00	\$ 5,316.00	
Other (consultants, etc.)			\$ -	
<i>Subtotal</i>	\$ 27,111.00	\$ 4,785.00	\$ 31,896.00	
<b>OVERHEAD</b>				
Advertising/Marketing		\$ -	\$ -	
Program Supplies		\$ 300.00	\$ 300.00	
Rent & Utilities		\$ 1,712.00	\$ 1,712.00	
Other (please list below)				
IT Support		\$ 150.00	\$ 150.00	
Travel		\$ 300.00	\$ 300.00	
			\$ -	
<i>Subtotal</i>	\$ -	\$ 2,462.00	\$ 2,462.00	
<b>TOTAL COST</b>	<b>\$ 27,111.00</b>	<b>\$ 7,247.00</b>	<b>\$ 34,358.00</b>	