

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

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

Submitted by:

El Dorado County

Date Submitted:

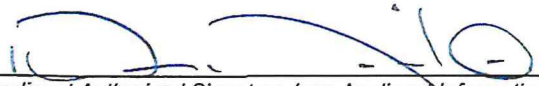
May 12, 2021

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 EI Dorado County		B. TAX IDENTIFICATION NUMBER	
NAME OF APPLICANT County of EI Dorado		TAX IDENTIFICATION #: 9460051	
STREET ADDRESS 3974 Durock Rd. Suite 205	CITY Shingle Springs	STATE CA	ZIP CODE 95682
MAILING ADDRESS (if different)	CITY	STATE	ZIP CODE
C. PROJECT TITLE:	Cedar Program		
D. PROJECT SUMMARY (100-150 words):			
Cedar Program is a secure track program located at the Juvenile Treatment Center in South Lake Tahoe for youth who fall under the jurisdiction of Welfare and Institutions Code Section 707(b) and require long-term treatment, services, and interventions prior to returning to the community. Cedar will provide long-term individualized treatment utilizing evidence-based programming models and cognitive-based intervention curriculum. Each youth will be assessed and provided specific treatment goals while evaluating the youth's strengths and stabilizing factors. Cedar will focus on preparation to return to the community with professional development skills, reduction in criminal thinking, practical vocational training, secondary education, and healthy lifestyle habits. Cedar will be offered to applicable EI Dorado County and contract county youth as appropriate.			
E. GRANT FUNDS REQUESTED: (See Appendix F: County Juvenile Population Index)			
\$ 47,086.00			
F. DEFERRED SPENDING: Is the application for a deferred spending award?		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
G. LEAD PUBLIC AGENCY:	EI Dorado County Probation Department		
H. PROJECT DIRECTOR:			
NAME Kaci Smith	TITLE Superintendent	TELEPHONE NUMBER (530)573-7985	
STREET ADDRESS 1041 Al Tahoe Blvd.		FAX NUMBER (530)387-2197	
CITY South Lake Tahoe	STATE CA	ZIP CODE 96150	EMAIL ADDRESS kaci.smith@edcgov.us
I. FINANCIAL OFFICER:			
NAME Nikki Moeszinger	TITLE Chief Fiscal Officer	TELEPHONE NUMBER (530)621-6066	
STREET ADDRESS 3974 Durock Rd. Suite 205		FAX NUMBER (530)387-2254	
CITY Shingle Springs	STATE CA	ZIP CODE 95682	EMAIL ADDRESS nikki.moeszinger@edcgov.us
PAYMENT MAILING ADDRESS (if different)	CITY	STATE	ZIP CODE
J. DAY-TO-DAY PROGRAM CONTACT:			
NAME	TITLE	TELEPHONE NUMBER	

Kyle Heller	Supervising Deputy Probation Officer	(530)573-7991	
STREET ADDRESS 1041 Al Tahoe Blvd.		FAX NUMBER (530)387-2198	
CITY South Lake Tahoe	STATE CA	ZIP CODE 96150	EMAIL ADDRESS kyle.heller@edcgov.us

K. DAY-TO-DAY FISCAL CONTACT:			
NAME Deborah Dill	TITLE Administrative Analyst	TELEPHONE NUMBER (530)621-6082	
STREET ADDRESS 3974 Durock Rd. Suite 205		FAX NUMBER (530)387-2251	
CITY Shingle Springs	STATE CA	ZIP CODE 95682	EMAIL ADDRESS deborah.dill@edcgov.us
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 Brian Richart	TITLE Chief Probation Officer	TELEPHONE NUMBER (530)621-5958	EMAIL ADDRESS brian.richart@edcgov.us
STREET ADDRESS 3974 Durock Rd. Suite 205	CITY Shingle Springs	STATE CA	ZIP CODE 95682
EMAIL ADDRESS brian.richart@edcgov.us			
APPLICANT'S SIGNATURE (Signed by the authorized signatory with a digital signature OR a wet signature in blue ink.) X 			DATE 5.11.21

CONFIDENTIALITY NOTICE

All documents submitted as a part of the Youth Programs and Facilities Grant (YPPFG) 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.)

Section 1: Project Need

1.1 El Dorado County's Cedar program will serve El Dorado County and contract county male youth who have committed the presenting offense between the ages of twelve to eighteen, who have been adjudicated for committing an offense described in Section 707(b) of the Welfare and Institutions Code (WIC), who would otherwise be eligible for a commitment to the Division of Juvenile Justice (DJJ) prior to its closure. The Cedar program will include enhanced vocational skill building through the existing commercial grade kitchen and will implement additional Evidence Based, best practices, Cognitive Behavioral Therapy focused curriculum to provide intensive individualized treatment to youth over a multi-year commitment. Further, the Cedar program will offer educational opportunities up to and including post-secondary classes for youth to continue their educational paths.

1.2 The Cedar program will serve up to five youth and may retain jurisdiction in the program until age twenty-three unless the youth would have faced an aggregate sentence of seven or more years in Criminal Court then jurisdiction in the program remains until age twenty-five. The target youth is the former category with program lengths not exceeding the youth's twenty-third birthday. Special considerations may be considered for El Dorado County youth where appropriate jurisdiction would result in the youth remaining in residence until their twenty-fifth birthday.

Section 2: Project Description

2.1 El Dorado County will utilize the Juvenile Treatment Center (JTC) in South Lake Tahoe. The JTC is currently a co-ed, two unit, secure residential facility with a 40-bed maximum capacity. Each unit each has a capacity of 20-beds and are independent of the other with separate school settings, dayrooms, living quarters, and restroom facilities. The JTC has a Central Control Room located between the units, where assigned probation staff can observe both units concurrently. The JTC includes a medical office with exam area, a commercial kitchen, staff office areas, a secure covered recreational area and an outdoor recreational area. Funds will be utilized in the general living areas, classrooms, and commercial kitchen to create spaces for

appropriate individual and group learning, access to educational resources, and a culinary arts curriculum.

2.2 El Dorado County is pursuing the full funds to aid in the creation and enhancement of a long-term residential program in a facility which was programmed as a short term residential stay and rapid reintegration to the community. Funding is necessary to add appropriate treatment curriculum, post-secondary educational opportunities, and vocational programming for longer-term residential youth to be safely and successfully returned to the community. Funds will be utilized to augment and enhance current Evidence Based programs and interventions, purchase curriculum, and train staff to facilitate the program.

Section 3: Budget

3.1 See attached workbook.

Applicant:	El Dorado County, final budget anticipated 08/01/2021		
LINE ITEMS	SB 823 BUDGET		
	STATE REIMBURSED	CASH CONTRIBUTION	TOTAL
1. Construction			\$ -
2. Architectural			\$ -
3. Fixed Furnishings/Equipment			\$ -
4. Moveable Furnishings/Equipment			\$ -
5. Construction Management			\$ -
6. Transportation/Equipment			\$ -
7. Training Materials/Supplies	\$ 22,086.00		\$ 22,086.00
8. Programing Materials/Supplies	\$ 25,000.00		\$ 25,000.00
9. Other One-Time Personnel Costs (planning, development, and project management) (Not to Exceed 25% of total budget)			\$ -
10. Other			\$ -
Total Project Costs	\$ 47,086.00	\$ -	\$ 47,086.00
Percentage of Total	100%	0%	100%

Provide an explanation below of how the dollar figures were determined for each of the budget categories above that contain dollar amounts. Every cash contribution line item shall be included with a reporting of the full amount budgeted unless a line item is not an actual cash contribution project cost for the county. (In that case, indicate so below.) For each budget category explanation below, include how state funding and the county contribution dollar amounts have been determined and calculated (be specific).

LINE ITEMS	COMMENTS
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1. Construction	Describe any construction costs associated with the project:
2. Architectural	Describe the county's current stage in the architectural process: b) Define the budgeted amount for architectural design:
3. Fixed Furnishings/Equipment	Describe the items to be purchased and installed for the project:
4. Moveable Furnishings/Equipment	Describe the items to be purchased and where they are to be placed for the project:
5. Construction Management	Describe which portions/phases of the construction management services the county intends to claim as a) State Reimbursed b) Cash Contribution
6. Transportation Equipment	Describe the equipment to be purchased and the expected use:
7. Training Materials/Supplies	Training for staff to work with long term youthful residents, including CBT programming, Evidence Based programs focused towards Psycho Educational Resource Groups, individual services, group services, family support and counseling, and therapeutic activities. \$22,086.00

8. Programing Materials/Supplies	Tablets/computers for post-secondary educational program and vocational program. Software for remode education services including post high school education. Serve safe programming, testing, and equipment for Culinary Arts program. \$25,000.00
9. Other One-Time Personnel Costs (planning, development, and project management) (Not to Exceed 25% of total budget)	Describe any one-time personnel costs associated with the project:
10. Other	Describe any other cash contribution costs associated with the project:

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:

1. debarred by any federal, state, or local government entities during the period of debarment; or
2. 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.

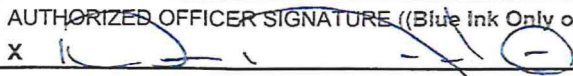
By checking the following boxes and signing below, applicant affirms that:

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			
<small>(This document must be signed by the person who is authorized to sign the Grant Agreement.)</small>			
NAME OF AUTHORIZED OFFICER Brian Richart	TITLE Chief Probation Officer	TELEPHONE NUMBER (530)621-5958	
STREET ADDRESS 3974 Durock Rd. Suite 205	CITY Shingle Springs	STATE CA	ZIP CODE 95682
EMAIL ADDRESS brian.richart@edcgov.us			
AUTHORIZED OFFICER SIGNATURE ((Blue Ink Only or E-signature)) X 			DATE 5.11.21