



# City of Las Cruces®

PEOPLE HELPING PEOPLE

## Council Action and Executive Summary

Item # 7 Ordinance/Resolution# 10-192 Council District: All

For Meeting of February 2, 2010  
(Adoption Date)

**TITLE:** A RESOLUTION ADOPTING A REVISED "HEALTH-RELATED PUBLIC SERVICES GUIDE," AS RECOMMENDED BY THE HEALTH AND HUMAN SERVICES ADVISORY COMMITTEE.

**PURPOSE(S) OF ACTION:** To approve a revised "Health-Related Public Services Guide," as recommended by the Health and Human Services Advisory Committee for use starting in the FY 2011 funding cycle.

<b>Name of Drafter:</b> Jean Barnhouse-Garcia <i>JBG</i>		<b>Department:</b> <i>DD</i> Community Development		<b>Phone:</b> 528-3048	
<b>Department</b>	<b>Signature</b>	<b>Phone</b>	<b>Department</b>	<b>Signature</b>	<b>Phone</b>
Community Development	<i>RW</i>	528-3066	Budget	<i>Richard Yehudis</i>	541-2300
			Assistant City Manager	<i>Antonio San</i>	541-2271
Legal	<i>Hy Mida Lomally</i>	541-2128	City Manager	<i>Lupe</i>	541-2076

**BACKGROUND / KEY ISSUES / CONTRIBUTING FACTORS:** Based on the recommendations of the Health and Human Services Advisory Committee (HHSAC) and public comments from non-profit organizations and the general public about the new application form and guide, the HHSAC and City staff have developed a new "Health-Related Public Services Guide" for use starting FY 2011. HHSAC members and City staff met in public meetings on November 4, 2009 and January 6, 2010, to make collaborative revisions to the Guide. Community meetings that included public comment regarding the 2010 Action Plan and FY 2011 Health-Related Public Services Guide were held on December 9-10, 2009.

Based on the HHSAC recommendations and public comment, the revised Guide focuses on five (5) major areas of improvement:

1. A more user-friendly application process;
2. Emphasis on funding those activities that directly relate to health care for the low-income;
3. An improved evaluation, scoring and ranking process;
4. Greater emphasis on organizational capacity of the applicant agency to implement their proposed project(s);
5. Improved presentations by applicants at the HHSAC Public Meetings.

**SUPPORT INFORMATION:**

<b>Fund Name / Account Number</b>	<b>Amount of Expenditure</b>	<b>Budget Amount</b>
N/A	N/A	N/A

1. Proposed Resolution
2. Exhibit "A" – Health-Related Public Services Guide
3. Attachment "B" – Previous Health-Related Public Services Guide
4. Attachment "C" – HHSAC meeting minutes of November 4, 2009 (approved) and January 6, 2010 (unapproved)
5. Attachment "D" – Public Input meeting minutes of December 9, 2009 and December 10, 2009.

**OPTIONS / ALTERNATIVES:**

1. Vote "YES" and approve the Resolution. Such action would approve the revised "Health-Related Public Services Guide" as recommended by the Health and Human Services Advisory Committee with public input from various non-profit agencies and the general public.
2. Vote "NO" and deny the Resolution. Such action would not approve the revised "Health-Related Public Services Guide", and thus not adopt the recommendations of the Health and Human Services Advisory Committee, and both the public input from various non-profit agencies and the general public.
3. Modify the Resolution at the Council's discretion, then vote "YES" on the modified Resolution. Modification would be based on the Council's direction.
4. Table / Postpone the Resolution and provide direction to staff.

**RESOLUTION NO. 10-192****A RESOLUTION ADOPTING A REVISED "HEALTH-RELATED PUBLIC SERVICES GUIDE," AS RECOMMENDED BY THE HEALTH AND HUMAN SERVICES ADVISORY COMMITTEE.**

The City Council is informed that:

**WHEREAS**, Health-Related Public Services funding "supports the physical, mental, developmental, emotional or social continued well-being, safety or improvement to the lives of the sick, indigent or low income people;" and

**WHEREAS**, the Health and Human Services Advisory Committee, public comment from various non-profit agencies at the 2010 Action Plan community meetings, and City staff from the Neighborhood Services Section of the Community Development Department, have collaborated since the fall of 2009 to update and revise the "Health-Related Public Services Guide;" and

**WHEREAS**, if approved and adopted by the City Council, the Guide would be used to develop the Health-Related funding recommendations for the upcoming City FY 2010/11 budget adoption process.

**NOW, THEREFORE**, Be it resolved by the governing body of the City of Las Cruces:

**(I)**

**THAT** the "Health-Related Public Services Guide," as shown in Exhibit "A," attached hereto and made part of this Resolution, is hereby approved.

**(II)**

**THAT** the staff and the Health and Human Services Advisory Committee are hereby authorized to update the Guide for dates and non-substantive issues

in future fiscal years beyond FY2011 and until replaced by a new Guide, in the future, if any.

(III)

THAT City staff is hereby authorized to do all deeds necessary in the accomplishment of the herein above.

DONE and APPROVED this \_\_\_\_\_ day of \_\_\_\_\_ 2010.

(SEAL)

APPROVED:

\_\_\_\_\_  
Mayor

ATTEST:

\_\_\_\_\_  
City Clerk

VOTE:

Mayor Miyagishima: \_\_\_\_\_  
Councillor Silva: \_\_\_\_\_  
Councillor Connor: \_\_\_\_\_  
Councillor Pedroza: \_\_\_\_\_  
Councillor Small: \_\_\_\_\_  
Councillor Sorg: \_\_\_\_\_  
Councillor Thomas: \_\_\_\_\_

Moved by: \_\_\_\_\_

Seconded by: \_\_\_\_\_

APPROVED AS TO FORM:

*Deputy City Attorney*  
*[Signature]*  
Deputy City Attorney

**CITY OF LAS CRUCES  
FY 2010-2011 HEALTH-RELATED PUBLIC SERVICES APPLICATION**

**Submit one UNSTAPLED original application only (with required attachments) by:**

**March 5, 2010, 4:30 p.m. Use binder clips only.**

**LATE OR INCOMPLETE APPLICATIONS WILL NOT BE ACCEPTED.**

**HEALTH-RELATED PUBLIC SERVICES PRIORITIES**

Priority	Health-Related Public Services Priorities	Check only one (1)
1	Health / Mental Health Programs (includes direct treatment, prevention and intervention, and education)	
2	Food and Nutrition Programs	
3	Homeless Services	
4	Social Services (Not elsewhere classified)	

**GENERAL INFORMATION**

Applicant Organization Information:	
Name of Organization:	
Address/City/State/Zip:	
Phone:	Fax:
Primary Contact Information:	Alternative Contact Information:
Project Manager:	Alternative Contact:
Title:	Title:
Phone:	Phone:
Email:	Email:
Fax:	Fax:
Grantwriter Information:	
Name of Grantwriter:	
Phone:	Email:

Amount of Health-Related Public Services funds requested:	\$	
Total project cost from <u>all</u> funding sources:	\$	
Number of persons to benefit from Health-Related Public Services funds:	#	
Matching or other funds available from other sources(s):	Yes:	No:
Is this project:	Yes:	No:
	To be continued in subsequent years?	No:
		Yes:

If the funding request includes salaries or wages, list the name of current employee, title, number of hours per week, hourly rate and brief description of duties for each position. If the position is currently vacant or if a new position, list as vacant and the projected date of employment.

Type of client populations to be served:

Type of Clients	Number of Clients to be Served (check all that apply)	Primary Project Beneficiary (check only one)
Low/Moderate income clients		
Individuals with Disabilities		
Elderly Individuals (age 62+)		
Homeless		
Children and Youth		
Other		
<b>Total:</b>		

History of your organization's **overall** annual operating budget for the past three (3) calendar years:

Calendar Year	Total Operating Budget
2009	\$
2008	\$
2007	\$



**3) List the Objectives of Your Proposed Program:**

**Minimum Points: 1; Maximum Points: 20**

**4) What specific Health-Related Public Services Priorities (see page 2) does this project address, and why?**

**Minimum Points: 1; Maximum Points: 10**

**5) What is the lifespan of the proposed project? Will this program provide significant long-term benefit to the City of Las Cruces?**

**Minimum Points: 1; Maximum Points: 10**

**6) BUDGET SUMMARY & BUDGET JUSTIFICATION**

**Minimum Points: 1;**

**Maximum Points: 30**

**Part A – Budget Summary**

Organization:	
Project:	

Instructions: Please complete the budget summary. Indicate the amount of Health-Related Public Service funds needed for each expenditure classification. Also include other funds for the project from federal, state and private sources. Columns A, B, C & D must add up to Column E (Total Budget) needed for the project.

		A	B	C	D	E
EXPENDITURE CLASSIFICATION		HEALTH-RELATED PUBLIC SERVICE FUNDS	FEDERAL FUNDS	STATE FUNDS	PRIVATE FUNDS	TOTAL BUDGET**
610-101	Permanent Position, Full Time					
610-102	Permanent Position, Part Time					
610-103	Temporary Positions					
620-100	Employment Liability Insurance					
620-200	Other Employee Benefits *					
710-100	Office Supplies					
710-110	Operating Supplies					
710-120	Repair & Maintenance Supplies					
710-130	Small Tools					
710-140	Motor Oil and Fuel					
710-210	Library Books and Periodicals					
710-220	Magazines and Periodicals					
710-280	Audio Visual Aids					
720-100	Wearing Apparel					
720-200	Postage and Federal Express					
730-100	City Service (water, waste, etc)					
730-200	Electricity					
730-300	Telephone					
730-400	Utility Services – Other					
740-100	Legal Services					
740-110	Auditing Services					
740-120	Maintenance Agreements					
740-130	Fees or Service Charges					
740-140	Advertising					
740-150	Landscape Maintenance					
740-160	Required Building Repair & Maintenance					
740-170	Auto or Truck Repair					

740-180	Equipment Repair					
740-190	Data Processing					
750-110	Building or Land Rental					
750-120	Vehicle Rental					
750-130	Equipment Rental					
760-100	Liability Insurance					
760-110	Property Insurance					
760-120	Fidelity Insurance					
770-100	Transportation (in-state only)					
770-110	Per Diem (in-state only)					
770-200	Registration Fees					
770-300	Miscellaneous Costs					
770-400	Training and Education					
840-100	Furniture and Fixtures					
840-110	Office Equipment					
840-120	Shop Equipment					
850-100	Automobiles					
850-110	Trucks and Vans					
900-110	Client Housing (rent, utilities, deposit)					
900-120	Client Support (medical, classes)					
<b>TOTAL:</b>						

A                      B                      C                      D                      E

\* Other Employee Benefits may include costs of health insurance, workers' compensation, FICA, unemployment insurance

*All funding sources for this proposed project must be listed below:*

Name of Funding Sources for this Project	Amount
1.	\$
2.	\$
3.	\$
4.	\$
5.	\$
6.	\$
7.	\$
8.	\$
9.	\$
10.	\$
<b>Total:</b>	<b>\$</b>

**Part B – BUDGET JUSTIFICATION**

Organization:	
Project:	

Briefly and specifically describe each line item listed on Form B in a separate paragraph below (limit to the space provided):

**Salaries** (Category 610-620): Specify all full-time and part-time position(s), hours per week and rate of pay per hour (including salary positions), insurance and other employee benefits.

**Operating Expenses and Postage** (Categories 710-720): Specify the type(s) of expenses and services.

**Utilities** (Category 730): Specify the type of utility and company name(s) if known. If subject to bid, please state "To seek bids" and include a brief summary of the bidding process.

**Services, Repairs, Rentals and Insurance** (Categories 740, 750, 760): Specify the type of utility and company name(s) if known. If subject to bid, please state "To seek bids" and include a brief summary of the bidding process.

**Travel and Training** (Category 770): Allowable travel and training costs are for in-state only. Specify reason for travel, mode of transportation and distance to be traveled. If daily or weekly travel, please indicate as such and provide average mileage with calculations. For training, provide type of training, duration, date(s) of training and location(s).

**Capital Expenditures** (Categories 840-850): Specify what type of item(s) and equipment, including technical specifications if applicable.

**Client Housing and Support** (Category 900): Specify what type of client housing (rent, utilities, security deposits, etc.) or client support (medications, medical screenings, health care classes, etc.)

**APPLICATION SUBMISSION CHECKLIST**

**All applications must include the following documents to be considered for processing. Do not submit in spiral covers, binders, folders or plastic covers. Use binder clips only. Submit in the following order:**

- One (1) **UNSTAPLED** original application with required attachments. Use binder clips only.

Required Attachments include:

- Proof of Non-Profit Status – IRS Tax Exemption Determination Letter
- IRS Form 990 for 2007
- IRS Form 990 for 2008
- Most Recent Independent Audit or Financial Statement
- List of Current Board Members' names, physical addresses, phone numbers, and email addresses
- Articles of Incorporation and By-Laws
- Statement of Insurance
- Signed letter from the Board of Directors or designated authorized official requesting submission of the application
- One (1) page (maximum) Resume of Program Administrator or other program staff
- One (1) page (maximum) Resume of Fiscal Officer
- One (1) page (maximum) Resume(s) of current employees to be funded by the project

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**All Applications must be submitted by:**  
**Friday, March 5, 2010, 4:30 p.m.**

Applications submitted after the 4:30pm deadline will not be accepted.

## I. PURPOSE

The purpose of this document is to define the general procedures for the grant application process to the City of Las Cruces Health-Related Public Services Program. Health-Related Public Services programs are funded by the City of Las Cruces in the amount of \$300,000 for each of Fiscal Years 2009, 2010 and 2011. The information presented herein should provide guidance so that applications submitted are reflective of the needs and priorities established by the City of Las Cruces.

The City defines "Health Care Programs" that are eligible for Public Services funding as projects that "support the physical, mental, developmental, emotional or social continued well-being, safety, or improvement to the lives of sick, indigent, or low-income people." **Starting with Fiscal Year 2010, services that provide animal care, such as spaying and neutering of domestic pets, are not eligible for Health-Related Public Services funding.** The program allows for funding of a broad spectrum of public services that prevents or improves a health-related condition of an individual or family of low-to-moderate income, such as:

1. Health / Mental Health Programs (includes direct treatment, prevention and intervention, and education)
2. Food and Nutrition Programs
3. Homeless Services
4. Social Services – Not elsewhere classified

## II. PROGRAM CONSIDERATIONS

### A. Funding Policies

Organizations interested in submitting proposals should be aware that Health-Related Public Service funds are committed by the City of Las Cruces for only one year at a time, regardless of the type of program. Funding priorities are regularly reviewed, and no organization is assured of funding in subsequent years.

Health-Related Public Service funds are limited by City of Las Cruces regulations. The City will make available a \$300,000 allocation for Health-Related public service programs which is the maximum amount authorized under current City resolutions. These programs must represent either a new service or an increased effect in an existing level of service and exclusively serve City residents, the homeless or migrant workers.

***"Incomplete applications will not be considered."***

The Committee uses the applicants' final scores, as determined by the application and presentation, to allocate the recommended funding amount for each grant award. The maximum amount for each recommended grant award is \$30,000. The minimum amount for each recommended grant award is \$10,000. The Committee will make their funding recommendations starting with the top ranked applications in Priority #4, then Priority #3, then Priority #2, then Priority #1, as shown on the chart below.

**Priorities and Ranking Order for Funding Recommendations  
by the Health and Human Services Advisory Committee**

<b>Priority</b>	<b>Ranking Order</b>	<b>Minimum Grant Award / Maximum Grant Award</b>	<b>Minimum Allocation / Maximum Allocation of Funding per Priority</b>
Social Services	#4	\$10,000 / \$30,000	\$ 0 to \$ 30,000
Homeless Services	#3	\$10,000 / \$30,000	\$ 0 to \$ 60,000
Food & Nutrition Services	#2	\$10,000 / \$30,000	\$ 0 to \$ 90,000
Health / Mental Health Services	#1	\$10,000 / \$30,000	\$ 0 to \$120,000
		<b>Total:</b>	<b>\$ 300,000</b>

The Committee reserves the right to allocate partial funding of one or more Priorities, depending on the quality of the application and presentation. *Partial funding* of a Priority will result in the remaining balance being distributed to the next higher Priority. For example, the original allocation of funds targeted for Priority #4 is \$30,000. However, the Committee members may agree to partially fund only one application for a \$10,000 award in Priority #4, leaving a balance of \$20,000 to be allocated to Priority #3. Any fund balance remaining in Priority #3 will be allocated to Priority #2, and any fund balance remaining in Priority #2 will be allocated to Priority #1.

The Committee also reserves the right to allocate zero funding of one or more Priorities, depending on the quality of the applications and presentations. *Zero funding* of a Priority will result in no funding, or zero (0) funds, being allocated to a Priority, and the maximum allocation will be distributed among the remaining Priorities (as described in *Partial funding*). For example, the original allocation of funds for Priority #3 is \$60,000. However, the Committee members agree to zero fund all applications in Priority #3, leaving a balance of \$60,000 to be allocated to Priority #2. In a similar manner, any remaining balance in Priority #2 will be allocated to Priority #1.

After completing the initial ranking process and making their final funding recommendations for Priority #1, the Committee may agree to recommend funding of applications in other Priorities, if any fund balance remains. For example, the Committee completes the initial ranking process and makes their funding recommendations in the amount of \$230,000 for Priority #1, leaving a fund balance of \$70,000. The Committee then recommends funding for two (2) awards of \$10,000 in Priority #4, one (1) \$20,000 award in Priority #3, and three (3) \$10,000 awards in Priority #2, for a total of \$70,000. After completion of the entire funding allocation process, the Committee will recommend funding the total amount of \$300,000 (or the total amount of funds available in any given year) in the Health-Related Public Services budget for applicants with the highest overall rankings.

Rankings and funding recommendations are then sent to City Council for final decision as a separate Resolution, and as part of the City Annual Budget approval process.

**B. Organizations Eligible To Submit Applications**

Non-profit organizations may submit proposals for Health-Related Public Services. Non-profit entities, to be eligible, must already have an established exemption status and must be able to provide a copy of their most current 501(c)3 designation from the Internal Revenue Service. The City may request additional information or documentation to verify corporate status of agencies applying for or to support application statements. This could include up-to-date licenses for all qualified personnel.

Non-profit entities, to be eligible, must also have the organizational capacity to carry out the proposed activity and to meet the record keeping and reporting requirements of the Health-Related Public Services Program.

Applications for funding will be accepted from all eligible organizations whether they have previously received Health-Related Public Service grants or not, with no limitation set on the number of years an organization can receive funding. However, organizations that have never received funding before or are not currently funded will be given due consideration in the scoring process to allow new recipients their chance to enhance the lives of low-income and moderate-income areas and/or clients.

For organizations previously funded, failure to perform in a timely manner or meet program requirements may be grounds for not being considered for future funding. This is to encourage timely completion of the previously funded programs and to maximize participation in the Health-Related Public Service Program. Additionally, any findings of noncompliance from a monitoring visit of any program must be resolved by the next application deadline date.

**C. Final Decisions**

City Council retains final authority to make the final funding determination on all projects. The recommendation from the Health and Human Services Advisory Committee is only a recommendation to help guide the City Council.

Duplication of programs currently addressing the same need within the community may be grounds for disqualification from consideration. Such decisions will be made by the City Council based on a recommendation from the Health and Human Services Advisory Committee.

**III. CLIENT CITIZENSHIP AND QUALIFIED ALIEN ELIGIBILITY**

Effective July 2008, a program directive was issued stating that all City funded programs, including CDBG and Health-Related Public Service, must provide proper documentation of citizenship or qualified alien eligibility for each client the agency serves. The program directive is in accordance with established federal laws and guidelines to ensure that ineligible clients do not receive public benefits, and that clients with disabilities will not be discriminated against in obtaining the required evidence. A copy of the City's five page program directive is found in Appendix B.

#### IV. CONTRACTUAL REQUIREMENTS

Under City regulations, certain requirements must be met in order to negotiate an agreement and disburse funds. These requirements include the following:

- A. Applicants must demonstrate that they are a non-profit agency.
- B. After an application is approved for funding, a contract will be prepared and sent by the City to the person identified by the applicants as the authorized official for signature (See Appendix C). The contract will specify the amount of the award, the period for which the project is approved, duration dates, and administrative provisions. Grantee recipients will be required to file regular reports on expenditures, progress towards goals, and beneficiaries. Forms for these reports will be provided.
- C. If the application is awarded funding, any deviation from the original proposed project may require review and recommendation from the Neighborhood Services staff, Health and Human Services Advisory Committee and final approval by the City Council.
- D. Grantee recipients will be required to obtain adequate insurance covering worker's compensation, bodily injury, property damage, or automobile liability, depending on the nature of the project. Grantees will be responsible for obtaining any necessary licenses and for complying with applicable federal, state, and municipal laws, codes and regulations.

#### V. SUBMISSION REQUIREMENTS - GENERAL

##### A. Letter of Intent (LOI)

1. Each potential applicant must submit a Letter of Intent (LOI). Publication of the LOI process is posted annually on the City's website at [www.las-cruces.org](http://www.las-cruces.org). The LOI will be mailed to potential applicants and emailed to citywide information and referral websites for maximum distribution.
2. **Only one (1) LOI may be submitted by an organization for Health-Related Public Services funding.**
3. **CITY STAFF'S REVIEW OF ALL LOI'S IS FOR INITIAL DETERMINATION OF PROGRAM ELIGIBILITY ONLY.** After the initial determination of program eligibility, City staff will email or send an application for Health-Related Public Service funding to the eligible applicant agency.

##### B. Applications

1. The Health and Human Services Advisory Committee and City staff reviews the Health-Related Public Services applications.
2. **Only one (1) application may be submitted by an organization for Health-Related Public Services funding.**
3. Applications may be either hand-delivered or mailed. In either case, the **UNSTAPLED original application (with required attachments)** must be received

in the Neighborhood Services Office **no later than 4:30 p.m. on March 5, 2010.**  
**(Note: the application deadline date shall be changed for each calendar year at the discretion of staff and the Health and Human Services Advisory Committee.)**  
**Submit one (1) original application only, with required attachments, to:**

Jean Barnhouse-Garcia  
Neighborhood Programs Specialist – Public Services  
Community Development Department – Neighborhood Services Section  
City of Las Cruces  
Physical: City Office Center, 575 S. Alameda, Room 153, Las Cruces, NM  
Mailing: P.O. Box 20000, Las Cruces, NM 88004

4. An applicant may submit an amended application before the closing time and date stated above. Such amended applications must be complete replacements from the previously submitted application and must be clearly identified as such in the transmittal letter. The City will not merge, collate or assemble application materials.
5. **Applications received after the deadline of March 5, 2010, 4:30 p.m. will not be considered for funding.**
6. Incomplete applications may be rejected by the City of Las Cruces staff or the Health and Human Services Advisory Committee. The City of Las Cruces and the Committee reserve the right to deny all applications that do not meet the minimum requirements of the application process or other City regulations.
7. **Applicants must forward only the documents and attachments required by the application, the City of Las Cruces staff and the Health and Human Services Advisory Committee. All other documents and attachments will be refused and may result in disqualification of the application.**
8. Joint applications are allowed when two or more eligible organizations wish to address a common problem. One organization will be designated to serve as the lead applicant, will be the recipient of the funds, and will be subject to the administrative requirements. Joint applications must be accompanied by a letter of agreement, from all of the organizations stating their intention to cooperate on the project. Authorized individuals from each organization must sign the letter of agreement.
9. Subcontractors and other business associations to be used by the applicant in performance of the scope of work shall be identified with specificity in the application.

## VI. STEPS TO THE SELECTION AND EVALUATION PROCESS

- Step 1** Applicants must complete the Letter of Intent process as outlined in Section V.A.
- Step 2** Applicants must complete the application and submit the application by the deadline. (See application checklist on page 9).
- Step 3** Staff reviews applications for eligibility determination and full submittal requirements.
- Step 4** Staff provides a notice of eligibility to all applicants.
- Step 5** Copies of all eligible applications are submitted by City staff to the Health and Human Services Advisory Committee. Eligible applications must meet one of the four (4) Health-Related Public Services Priorities listed on the front of the application. Applications will be grouped according to each priority. Applications in Priority #1 group will be given the strongest consideration for funding, and Priority #4 group given the least consideration.
- Step 6** Committee members read all eligible applications and individually score all applications. All eligible applications are sorted for review by Health-Related Public Services Priorities. The maximum number of points allowed for each application is 100, and the minimum number of points is 10. Committee members may not score more than a maximum of 100 points nor score less than the minimum number of points of 10 for each eligible application.
- Step 7** City staff will provide the Committee with a brief update on the performance of current applicants who were previously awarded Health-Related Public Services funding. The update will include general information about the applicant's overall grant performance such as the timeliness of monthly invoice submissions, ability to expend project funds, and general capacity to meet program requirements.
- Step 8** City staff will make an initial determination of the correct Priority for each application submitted, based on the information submitted by the applicant and after review of the application. If the Committee disagrees with the Priority determination made by the applicant or City staff, the Committee has the option to hold a public hearing make their own determinations of the correct Priority for each application submitted.
- Step 9** The Committee will hold a public hearing to listen to presentations from all of the eligible applicants. The Committee members may add additional points to the original application score (up to a maximum of 100 points) if the applicant's presentation meets the expected criteria as described in Steps 10 and 11. The Committee members may also deduct points from the original score (down to a minimum of 10 points) previously given if the applicant's presentation does not meet the expected criteria as described in Steps 10 and 11.

**Step 10** Applicants must arrive on time and be present at the beginning of the HHSAC public hearing, regardless of the scheduled time slot for their presentation.

**Step 11** Applicants will make a presentation of their proposal to the Committee. Presentations by the applicant organizations are limited to three (3) to five (5) minutes, and a one (1) minute response by the Presenter to each Committee member's question. Each Committee member is allowed only one (1) question of each Presenter. If possible, the grant-writer should make the presentation since s/he is likely the most informed about the proposed project. If the grant-writer is unable to make the presentation, the presenter must be informed about the details of the application, including budgetary and programmatic issues. Only one (1) presenter is allowed for the presentation. Presentations about the proposed projects should be clear, concise, informative and accurate. Presenters should not bring their clients to the presentation. No brochures, posters, or Powerpoint presentations are allowed at the presentation to the Committee.

**Step 12** The Committee members submit completed score sheets to staff for tabulation at the public hearing after all presentations.

**Step 13** Staff tabulates the totals for each application.

**Step 14** The tabulations are then presented to the Committee in public hearing, which are the final rankings.

**Step 15** The Committee uses the applicants' final scores, as determined by the application and presentation, to allocate the recommended funding amount for each grant award. The maximum amount for each recommended grant award is \$30,000. The minimum amount for each recommended grant award is \$10,000. The Committee will make their funding recommendations starting with the top ranked applications in Priority #4, then Priority #3, then Priority #2, then Priority #1, as shown on the chart below.

**Priorities and Ranking Order for Funding Recommendations  
by the Health and Human Services Advisory Committee**

Priority	Ranking Order	Minimum Grant Award / Maximum Grant Award	Minimum Allocation / Maximum Allocation of Funding per Priority
Social Services	#4	\$10,000 / \$30,000	\$ 0 to \$ 30,000
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		<b>Total:</b>	<b>\$ 300,000</b>

The Committee reserves the right to allocate partial funding of one or more Priorities, depending on the quality of the application and presentation. *Partial funding* of a Priority will result in the remaining balance being distributed to the next higher Priority. For example, the original allocation of funds targeted for Priority #4 is \$30,000. However, the Committee members may agree to partially fund only one application for a \$10,000 award in Priority #4, leaving a balance of \$20,000 to be allocated to Priority #3. Any fund balance remaining in Priority #3 will be allocated to Priority #2, and any fund balance remaining in Priority #2 will be allocated to Priority #1.

The Committee also reserves the right to allocate zero funding of one or more Priorities, depending on the quality of the applications and presentations. *Zero funding* of a Priority will result in no funding, or zero (0) funds, being allocated to a Priority, and the maximum allocation will be distributed among the remaining Priorities (as described in *Partial funding*). For example, the original allocation of funds for Priority #3 is \$60,000. However, the Committee members agree to zero fund all applications in Priority #3, leaving a balance of \$60,000 to be allocated to Priority #2. In a similar manner, any remaining balance in Priority #2 will be allocated to Priority #1.

After completing the initial ranking process and making their final funding recommendations for Priority #1, the Committee may agree to recommend funding of applications in other Priorities, if any fund balance remains. For example, the Committee completes the initial ranking process and makes their funding recommendations in the amount of \$230,000 for Priority #1, leaving a fund balance of \$70,000. The Committee then recommends funding for two (2) awards of \$10,000 in Priority #4, one (1) \$20,000 award in Priority #3, and three (3) \$10,000 awards in Priority #2, for a total of \$70,000. After completion of the entire funding allocation process, the Committee will recommend funding the total amount of \$300,000 (or the total amount of funds available in any given year) in the Health-Related Public Services budget for applicants with the highest overall rankings.

**Step 16** Rankings and funding recommendations are then sent to City Council for final decision as a separate Resolution, and as part of the City Annual Budget approval process.

**APPENDIX A**

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**LOW INCOME VERIFICATION**

**HUD INCOME GUIDELINES  
LAS CRUCES MSA INCOME LIMITS  
Income Levels by Family Size**

**EFFECTIVE DATE: March 19, 2009**

**MEDIAN FAMILY INCOME (MFI): \$43,000**

<b>Family Size</b>	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>	<b>6</b>	<b>7</b>	<b>8</b>
30%	\$ 9,300	\$10,600	\$11,950	\$13,250	\$14,300	\$15,350	\$16,450	\$17,500
50%	\$15,450	\$17,650	\$19,850	\$22,050	\$23,500	\$25,600	\$27,350	\$29,100
80%	\$24,700	\$28,250	\$31,750	\$35,300	\$38,100	\$40,950	\$43,750	\$46,600
100%	\$30,100	\$34,400	\$38,700	\$43,000	\$46,422	\$49,894	\$53,316	\$56,778

**APPENDIX B**

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**PROGRAM DIRECTIVE ON CITIZENSHIP  
and  
QUALIFIED ALIEN STATUS**

Program Directive  
CDBG, HOME, and applicable City-funded  
Public Service Programs to  
Non-National Citizens of the United States

Date: July 7, 2008

**ISSUE:**

The City of Las Cruces, as a federal entitlement community or participating jurisdiction, for the U.S. Department of Housing and Urban Development (HUD) for the Community Development Block Grant (CDBG) and Home Investment Partnerships (HOME) Programs has had both inquires and other issues related to providing services to potential non-nationals of the United States from these funding sources. This Program Directive is intended to provide clear direction to all sub-recipients of both CDBG and HOME funds related to this issue, in accordance with established Federal Laws and/or guidance. Furthermore, this shall be the directive related to those public service programs that fall within this category that are funded using local funds. This Program Directive is being issued to ensure that ineligible clients do not receive public benefits provided by these programs, either directly by City staff and/or outside funded agencies, through the required documentation within the federal guidance.

**APPLICABLE FEDERAL GUIDANCE (attached):**

1. Interim Guidance on Verification of Citizenship, Qualified Alien Status and Eligibility Under Title IV of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (aka Welfare Reform Act of 1996), as issued in the Federal Register, Vol. 62, No. 221, November 17, 1997, pages 61344 to 61371.
2. Guidance on Standard and Methods for Determining Whether a Substantial Connection Exists between Battery or Extreme Cruelty and Need for Specific Public Benefits, as issued in the Federal Register, Vol. 62, No. 238, December 11, 1997, pages 65285-65287.
3. Verification of Eligibility for Public Benefits, as issued in the Federal Register, Vol. 63, No. 149, August 4, 1998, pages 41662-41686..
4. Final Specification of Community Programs Necessary for Protection of Life or Safety under Welfare Reform Legislation, as issued in the Federal Register, Vol. 66, No. 10, January 16, 2001, pages 3613 to 3616.

**CITY FUNDED PROGRAMS SUBJECT TO THIS DIRECTIVE:**

- A. Home Rehabilitation Program;
- B. All CDBG and non-CDBG Public Services Program that provide an in-kind (non-cash) service outside the scope of City Program Exceptions outlined below;
- C. All HOME or other housing programs, excluding those programs that provide emergency shelter of less than 90 days.

**EXEMPT FUNDED PROGRAMS:**

Those activities and/or programs that provide a direct or indirect service through City, State, or Federal sources and/or appropriated funds that fall within this category are hereby excluded from this directive, except as for proper documentation of the service provided and client's general eligibility of the applicable program (i.e. income or class eligibility requirements) (See Federal Register, Vol. 66, No. 10, dated January 16, 2001, paged 3613 through 3616 and Federal Register, Vol. 63, No. 149, dated August 4, 1998, page 41676):

- A. Public Facility & Infrastructure Programs, as provided on an Area wide basis;
- B. Community Housing Development Organizations (CHDO) Operating Assistance;
- C. Aliens receiving a benefit as of August 22, 1996 and continuing to receive said benefits under the programs for housing and community development assistance or financial assistance administered by the Secretary of HUD, or any program under title V of the Housing Act of 1949;
- D. Public Safety & Community Service Programs at large, including fire, police, ambulance, emergency medical transport, public transportation and para-transit, sewer and sanitation services, and other

regular, widely available services or programs, services, and assistance delivered at a community or community-wide level, including but not limited to those services for the necessary protection of life or safety, such as:

- a. Crisis counseling and intervention programs, services and assistance relating to child protection, adult protective services, violence and abuse prevention, victims of domestic violence or other criminal activity; or treatment of mental illness or substance abuse;
- b. Short-term shelter or housing assistance for the homeless, for victims of domestic violence, or for runaway, abused or abandoned children for a period less than or equal to 90 days;
- c. Programs, services or assistance to help individuals during periods of heat, cold, or other adverse weather conditions;
- d. Soup kitchens, community food banks, senior nutrition programs, or other such community nutritional services for persons requiring special assistance (e.g. disabled adults);
- e. Medical and public health services (including treatment and prevention of diseases and injuries) and mental health, disability, or substance abuse assistance necessary to protect life or safety;
- f. Activities designed to protect the life or safety of workers, children and youths, and community residents; and
- g. Any other programs, services, or assistance necessary for the protection of life or safety.

**EXPECTATIONS RELATED TO DOCUMENTATION OF CLIENT ELGIBILITY:**

- A. Except for Exempt Funded Programs, all City funded programs shall provide proper documentation of client citizenship or qualified alien eligibility, as specified in both the Interim Guidance (Federal Register, Vol. 62, No. 221, dated November 17, 1997, page 61347) and Verification of eligibility (Federal Registers, Vol. 63, No. 149, dated August 4, 1998, page 41680, sections 104.21, 104.22, 104.23, and 104.24). The steps are as follows:
  - a. Ask for Declaration of Status, under penalty of perjury related to whether that person is a "citizen" or "non-national citizen" of the U.S. and
  - b. Proof of **Primary, legitimate supporting documentation** to verify the person's identity and citizenship/national status as being eligible (Federal Register, Vol. 62, No. 221, 11/17/1997, Attachment 4, page 61363, et. seq.)
    - i. Birth certificate from one of the 50 states;
    - ii. United States Passports, other than limited passports which are issued for periods of less than 5 years;
    - iii. Report of birth abroad of a U.S. citizen (FS-240 issued by the Department of State to U.S. Citizens);
    - iv. Certificates of birth (FS-545 issued by a foreign service post) or Certification of Report of Birth (DS- 1350 issued by the U.S. Department of State);
    - v. Certificate of Naturalization (N-550 or N-570);
    - vi. Certificate of Citizenship (N-560 or N-561);
    - vii. United States Citizen Identification Card (I-197);
    - viii. Northern Mariana Identification Card (issued by the INS to persons born in the Northern Mariana Islands before November 3, 1986);
    - ix. Statement provided by U.S. Consular Officer of an individual as a U.S. Citizen (for individuals born outside the U.S. to a citizen parent but doesn't have a FS-240, FS-545, or DS-1350 card); or
    - x. American Indian Card with a classification code of "KIC" and statement on the back.
  - c. **Secondary evidence**, for persons that can't provide primary documentation:
    - i. Religious record from one of the 50 states;
    - ii. Evidence of civil service employment by the U.S. government prior to June 1, 1976;
    - iii. First school records, showing dates of admission, child's place and date of birth, and names and places of birth of both parents;
    - iv. Census records showing name, U.S. citizenship or place of U.S. birth and date of birth/age of applicant;

- v. Adoptions Finalization Papers from one of the 50 states and certain territories; or
  - vi. Any other document that establishes a U.S. place of birth or in some way indicates U.S. citizenship (hospital records).
- d. Collective Citizenship, Derivative Citizenship, Adoption of Foreign-Born child by a U.S. Citizen, U.S. Citizenship by Marriage, , if they can't provide either Primary or Secondary evidence above, then you need to look at these situations identified on Pages 31634 of the 11/17/1997 Federal Register.
  - e. Qualified Alien requirements are specified in Attachment 5 on Page 61364 of the Federal Register dated 11/17/1997 and should be verified with those supporting evidentiary documents.
  - f. Applicants with disabilities and nondiscrimination. Every effort should be made to provide assistance to those applicants with disabilities to obtain the required evidence, and they should not be discriminated against because of the disability and any of the other protected classes.
- B. Despite exemptions for certain programs, for certain City funded public benefit services provided to persons being subjected to extreme cruelty and/or battery, care should be taken to ensure that the agency can provide a public service that adheres to or meets the "Standard and Methodology for determining a substantial connection existing between the cruelty/batter and the need for the specific public benefit," prescribed in the Federal Register, Vol. 62, No. 238, dated 12/11/1997, pages 65285 through 65287. The agency and City will work proactively to document the service standard to be provided for the intended clients as part of the agreement process between the agency and the City, prior to commencement of services.
- a. In addition to general program eligibility and item "B." immediately above, and including establishing the standards related to the benefit and the cruelty/battery, certain programs that provide services to certain classes of individuals (namely those aliens that are victims of domestic violence or subject to battery and/or extreme cruelty), must follow those procedures and documentation as specified in Federal Register, Vol. 62, No. 221, dated November 17, 1997 on page 61366 and 61364 as part of Exhibit "B" to Attachment 5, Item I, 1 through 4, and Federal Register, Vol. 53, No. 149, dated August 4, 1998, Section 104.48, et. seq. on page 41683. This includes proper documentation of the abuse and/or cruelty and coordination with the INS's predecessor.
- C. For emergency shelter or emergency housing programs, verification of citizenship is not required; however, if the program is structured in such a way that the person/household would receive a public benefit through a transitional and/or permanent housing program funded by the City or federal funding sources beyond the emergency shelter/housing program period (i.e. for a period longer than 90-days), then the verification is required at the time of emergency sheltering/housing. Further, those victims of domestic violence are not generally eligible for transitional or permanent housing if they are non-citizens.
- D. All other general program eligibility requirements, including income eligibility or documentation to the effect that the person and/or household is within the identified class not requiring income verification (i.e. homeless, battered or abused spouses, abused or neglected children, those suffering from HIV/AIDS, etc.) and as dictated within the City's written Agreement/Contract with the outside agency is still required.
- E. If the program requires access to the SAVE System through the Department of Homeland Security, the City, as part of the Agreement/Contract may allow the use of its funds to pay for access to SAVE.
- F. For any exception for Non-profit charitable organizations under the Federal Register, Vol. 63, No. 149, dated August 4, 1998, page 41677, this exception shall not apply for funds directly received from the City, as part of its own sources and/or pass through of federal funds from the City to the organization.

G. Agencies are encouraged to review the attached federal guidance and coordinate specific questions about specific client eligibility issues with your City staff person coordinating the Agreement/Contract.

Issued and Effective on: July 28, 2007

Version No. 1

Issued by: David P. Dollahon, Neighborhood Services Administrator

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Approved by: David Weir, Community Development Director

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Approved as to Form: Fermin Rubio, City Attorney

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**APPENDIX C**

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**SAMPLE CONTRACT**



## PROFESSIONAL SERVICES AGREEMENT

**THIS AGREEMENT**, made and entered into on this date, \_\_\_\_\_ 2010, by and between the City of Las Cruces, New Mexico, hereinafter called "City" and Company Name \_\_\_\_\_, of Street Address, City, Town, State, Zip Code, \_\_\_\_\_, hereinafter called "Contractor" for a term of \_\_\_\_\_ days.

### SCOPE OF WORK:

#### 1. PROJECT DESCRIPTION

#### 2. SCOPE OF SERVICES

CONTRACTOR shall render in a satisfactory and proper manner the SERVICES set forth in Contract Exhibit A, attached hereto and made a part of this Agreement.

#### 3. COMPENSATION

The CITY shall compensate CONTRACTOR for the performance of SERVICES under this Agreement not to exceed an amount of \$ \_\_\_\_\_, excluding NMGRT.

CONTRACTOR will pay the State of New Mexico the Gross Receipts Tax levied on the amounts payable under this contract.

CONTRACTOR agrees to comply with all federal and state tax payments and report all items of gross receipts as income from the operations of its business.

#### 4. CHANGES AND EXTRA SERVICES

The CITY may make changes within the general scope of this Agreement. If CONTRACTOR is of the opinion that any proposed change causes an increase or decrease in the cost and/or the time required for performance of this Agreement, CONTRACTOR shall so notify the CITY of that fact. An agreed-upon change will be reduced to writing signed by the parties hereto and will modify this Agreement accordingly. CONTRACTOR may initiate such notification upon identifying a condition, which may change the SERVICES agreed to on the effective date of this Agreement.

That party of the other party's written notification of a proposed change must provide any such notification within five (5) days from the date of receipt. In the event that the parties hereto as to a particular change cannot reach agreement, the issue shall be resolved pursuant to Article 17.

The CITY may request CONTRACTOR to perform extra services not covered by the SCOPE OF SERVICES as set forth in Exhibit A, and CONTRACTOR shall perform such extra services and will be compensated for such extra services when they are reduced to writing, mutually agreed to, and signed by the parties hereto amending this Agreement accordingly.

The CITY shall not be liable for payment of any extra services nor shall CONTRACTOR be obligated to perform any extra services except upon such written amendment.

#### 5. SCHEDULE

CONTRACTOR shall perform the SERVICES in accordance with the time set forth as agreed upon by the CITY and Contractor in Exhibit B. CONTRACTOR will initiate services following City Council acceptance of the proposal and with approval of Project Manager.

#### 6. DELAYS

CONTRACTOR shall perform its SERVICES with due diligence upon receipt of a written Notice to Proceed from the CITY. The CITY cannot authorize costs to be incurred prior to such written Notice to Proceed. In the event that performance of its SERVICES is delayed by causes beyond reasonable control of CONTRACTOR, and without the fault or negligence of CONTRACTOR, the time and total compensation for the performance of the SERVICES shall be equitably adjusted by written amendment to reflect the extent of such delay. CONTRACTOR shall provide the CITY with written notice of delay, including therein a description of the delay and the steps contemplated or actually taken by CONTRACTOR to mitigate the effect of such delay. The CITY will make the final determination as to reasonableness of delays.

#### 7. DISCLOSURE AND OWNERSHIP OF DOCUMENTS, PRODUCTS, DESIGN, ELECTRONIC FILES

All technical data, electronic files, and other written and oral information not in the public domain or not previously known, and all information, electronic files, and data obtained, developed, or supplied by the CITY will be kept confidential and CONTRACTOR will not disclose to any other party, directly or indirectly, without the CITY's prior written consent unless required by lawful order.

All technical data, electronic files, products developed, operational parameters, blueprints, and other information and work of the CONTRACTOR contained shall be the sole property of the CITY and shall be delivered to the CITY when requested and at the end of the Agreement.

#### 8. SCOPE OF AGREEMENT

That this Agreement incorporates all of the agreements, covenants, and understandings between the parties hereto concerning the subject matter hereof and that all such covenants, agreements, and understandings have been merged into this written agreement. No prior agreement or understanding verbal or otherwise of the parties or their agents shall be valid or enforceable unless embodied in this agreement.

#### 9. INDEPENDENT CONTRACTOR

CONTRACTOR represents that it has, or will secure, at its own expense, all personnel required in performing the SERVICES under this Agreement. Such personnel shall not be employees of, nor have any contractual relationship with the CITY. CONTRACTOR, consistent with its status as an independent contractor, further agrees that its personnel will not hold themselves out as, nor claim to be officers or employees of the CITY by reason of this Agreement.

To the extent that CONTRACTOR employs any employees, CONTRACTOR shall be solely responsible for providing its own form of insurance for its employees and in no event shall CONTRACTOR's employees be covered under any policy of the CITY.

CONTRACTOR's retention hereunder is not exclusive. Subject to the terms and provisions of this Agreement: (i) CONTRACTOR is able, during the Term hereof, to perform services for other parties; and (ii) CONTRACTOR may perform for its own account other professional services outside the scope of this Contract.

CONTRACTOR is and shall be an Independent Contractor and shall be responsible for the management of its business affairs. In the performance of the work under this Agreement, CONTRACTOR will at all times be acting and performing as an Independent Contractor, as that term is understood for federal and state law purposes, and not as an employee of the CITY. Without limitation upon the foregoing, CONTRACTOR shall not accrue sick leave, jury duty pay, retirement, insurance, bonding, welfare benefits, or any other benefits, which may or may not be afforded employees of the CITY. CONTRACTOR will not be treated as an employee for purposes of: Workers' Compensation benefits; the Federal Unemployment Tax Act; Social Security; other payroll taxes, federal or any state income tax withholding; or the employee benefit provisions described in the Internal Revenue Code of 1986, as amended. Neither the CITY, nor its agents or representatives, shall have the right to control or direct the manner, details or means by which CONTRACTOR accomplishes and performs its services. Nevertheless, CONTRACTOR shall be bound to fulfill the duties and responsibilities contained in the Agreement.

#### 10. DEVOTION OF ADEQUATE TIME

CONTRACTOR will devote the necessary hours each week to the performance of such projects that are required by the CITY and it will serve the CITY diligently and faithfully, and according to its best ability in all respects and will promote the best interests of the CITY.

#### 11. INSURANCE

CONTRACTOR shall obtain and maintain insurance at its own cost and expense to protect itself from claims as follows:

- a. Professional Liability: \$1,000,000 per claim
- b. Must be Occurrence form coverage

#### 12. INDEMNITY AND LIMITATION

CONTRACTOR shall indemnify, defend, and hold harmless the CITY from and against any and all claims, suits, actions, judgments, demands, losses, costs, expenses, damages, and liability caused solely by, resulting solely from, or arising solely out of the negligent acts, errors, or omissions of CONTRACTOR, its officers, employees, agents, or representatives in the performance of SERVICES under this agreement.

#### 13. NO JOINT VENTURE OR PARTNERSHIP

Nothing contained in this Agreement shall create any partnership, association, joint venture, fiduciary or agency relationship between CONTRACTOR and CITY. Except as otherwise specifically set forth herein, neither CONTRACTOR nor CITY shall be authorized or empowered to make any representation or commitment or to perform any act which shall be binding on the other unless expressly authorized or empowered in writing.

#### 14. EXTENSIONS, CHANGES, AND AMENDMENTS

This Agreement shall not be extended, changed, or amended except by instrument in writing executed by the parties. Such written approval shall indicate the date said extension, change, or amendment is effective and shall be signed by both parties to this Agreement.

#### 15. TERMINATION

This Agreement may be terminated by either party hereto upon fifteen (15) calendar days written notice in the event of substantial failure by the other party to perform in accordance with the terms of this Agreement through no fault of the terminating party. This Agreement may also be terminated by the CITY for its convenience or because the PROJECT has been permanently abandoned, but only upon fifteen (15) calendar days written notice to CONTRACTOR.

In the event of termination, CONTRACTOR shall be compensated for all services performed and costs incurred up to the effective date of termination for which CONTRACTOR has not been previously compensated.

Upon receipt of notice of termination from the CITY, CONTRACTOR shall discontinue the SERVICES unless otherwise directed and upon final payment from the CITY deliver to the CITY the required number of copies of all data, drawings, reports, estimates, summaries, and such other information and materials as may have been accumulated by CONTRACTOR in the performance of this Agreement, whether completed or in process.

#### 16. BREACH

In the event CONTRACTOR breaches any obligation contained in this Agreement, prior to instituting any action or dispute resolution procedure, the CITY shall give CONTRACTOR written notice of such breach. In the event CONTRACTOR fails to remedy the breach within five (5) working days of receiving such written notice, the CITY, at its sole discretion, without any obligation to do so and in addition to other remedies available under applicable law, may remedy CONTRACTOR's breach and recover any and all costs and expenses in so doing from CONTRACTOR.

#### 17. DISPUTE RESOLUTION

In the event that a dispute arises between City and Contractor under this Agreement or as a result of breach of this Agreement, the parties agree to act in good faith to attempt to resolve the dispute.

#### 18. ASSIGNMENT.

CONTRACTOR shall perform all the services under this Agreement and shall not assign any interest in this Agreement or transfer any interest in same or assign any claims for money due or to become due under this Agreement without the prior written consent of the CITY.

#### 19. RECORDS AND AUDITS

CONTRACTOR will maintain records indicating dates, length of time, and services rendered. The CITY has the right to audit billings both before and after payment, and contest any billing or portion thereof. Payment under this Agreement does not foreclose the CITY's right to recover excessive or illegal payments.

20. APPROPRIATIONS

The terms of this Agreement are contingent on sufficient appropriations and authorization being made by the CITY for the performance of this Agreement. If sufficient appropriations and authorizations are not made by the City Council, this Agreement shall terminate upon written notice given by the CITY to CONTRACTOR. The CITY's decision as to whether sufficient appropriations and authorizations exist shall be accepted by CONTRACTOR and shall be final.

21. APPLICABLE LAW

CONTRACTOR shall abide and be governed by all applicable state law, City ordinances, and laws regarding the CONTRACTOR'S services or any work done pursuant to this Agreement.

This Agreement and the rights and obligations of the parties shall be governed by and construed by the laws of the State of New Mexico applicable to Agreements between New Mexico parties made and performed in that state, without regard to conflicts of law principles. Venue shall be in the Third Judicial District, State of New Mexico.

22. NOTIFICATION

All notices required or permitted under this Agreement shall be in writing and shall be deemed sufficiently served if served by Registered Mail addressed as follows:

TO CITY: City of Las Cruces  
PO Box 20000  
Las Cruces, NM 88004  
ATTENTION: \_\_\_\_\_,

With Copies to: City Attorney  
Purchasing Manager

TO CONTRACTOR: *Company Name*  
*Address and Street*  
*City, State and Zip*

ATTENTION:

\_\_\_\_\_ Company

THE CITY OF LAS CRUCES

By: \_\_\_\_\_  
**Principal Officer**

By: \_\_\_\_\_  
**Purchasing Manager**

Date: \_\_\_\_\_

APPROVED AS TO FORM:

\_\_\_\_\_  
City Attorney

**HEALTH-RELATED PUBLIC SERVICES APPLICATION**

FY 2008-2009

Community Development Department – Neighborhood Services  
City of Las Cruces**TABLE OF CONTENTS**

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**CITY OF LAS CRUCES  
HEALTH RELATED PUBLIC SERVICES APPLICATION  
FY 2008 - 2009 Community Development Department – Neighborhood Services**

**Submit one UNSTAPLED original application only (with required attachments) by:**

**March 6, 2009, 4:30 p.m. Use binder clips only.**

**NO LATE OR INCOMPLETE APPLICATIONS WILL BE ACCEPTED.**

GRAY SHADED AREAS ARE FOR STAFF USE ONLY

PROJECT #

Date Received

**Directions: Use 12 point font only, single space, half inch margins and limit answers to the space provided. All questions must be answered and all forms completed to be eligible for review by staff.**

**Applicant Information**

Applicant Organization: \_\_\_\_\_

Address: \_\_\_\_\_

Website Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Fax: \_\_\_\_\_

Project Manager: \_\_\_\_\_

Alternate Contact: \_\_\_\_\_

Title: \_\_\_\_\_

Title: \_\_\_\_\_

Phone: \_\_\_\_\_

Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

E-mail: \_\_\_\_\_

Non-profit Organization?  Yes  No

Collaborative Project?  Yes  No. If yes, list partner organizations: \_\_\_\_\_

**Project Information**

Project Name: \_\_\_\_\_

Location of Proposed Project: \_\_\_\_\_

Brief Description of Project:

Amount of Health Related Public Service funds requested: \$ \_\_\_\_\_

Total Project Cost: \$ \_\_\_\_\_

Number of persons to benefit from Health Related Public Service funds: \_\_\_\_\_

Matching funds available from another source:  Yes  No.

If yes, amount and source: \_\_\_\_\_

In-kind Funds for project:  Yes  No.

If yes, amount and source: \_\_\_\_\_

Is this Project:  a previous year continuation?  to be continued in subsequent years?

Has this project received prior City of Las Cruces Health Related Public Service Funding?

Yes  No.

If yes, list years of funding:

**APPLICANT AND PROJECT INFORMATION**

1) Describe the proposed project:

- 2) Why is this project needed and how have you determined that there is a need for this project?  
(Please include any statistical information that helped you determine this need.)

- 3) Briefly describe the background of your organization:

4) What specific health-related issues for the City of Las Cruces does this project address?

5) Project Implementation:

a) Detailed information regarding main elements of project, including time schedule with forecasted expenditures for each milestone.

b) Personnel involved in carrying out the project and their related experience with program implementation.

c) Number of volunteers and amount of agency staff time needed to carry out the project.

d) If the funding request includes salaries or wages, list name of current employee, title, number of hours per week, hourly rate and brief description of duties for each position. If the position is currently vacant or if a new position, list as vacant or new and the projected date of employment.

e) What licenses are needed, if any, and what does your organization/staff have currently?

6) What is the lifespan of the project? Will this program provide significant long-term benefit to the City of Las Cruces or the low-income and moderate-income areas? If yes, please state the benefit and the methodology used to reach this conclusion.

7) List goals of the project. In addition, please indicate, the best you can, the number of persons or households to benefit from your proposed project according to the following categories.

**Project Goals:**

<b>Type of Clients</b> <b>(Mark all that apply)</b>	<b>No. of clients to be served</b>	<b>Primary Project Beneficiary*</b> <b>(Check only one)</b>
<input type="checkbox"/> Low and/or Moderate income clients	_____	<input type="checkbox"/>
<input type="checkbox"/> Individuals with Disabilities	_____	<input type="checkbox"/>
<input type="checkbox"/> Elderly Individuals ( <b>age 62 years or older</b> )	_____	<input type="checkbox"/>
<input type="checkbox"/> Homeless	_____	<input type="checkbox"/>
<input type="checkbox"/> Children & Youth	_____	<input type="checkbox"/>
<input type="checkbox"/> Other (Specify) _____	_____	<input type="checkbox"/>
<b>TOTAL</b>	_____	

**FUNDING INFORMATION**

8) a) Future Funding - If awarded the Health Related Public Service funds, are they being used as matching funds?

Yes  No

If yes, from whom and what amount is being matched?

b) Current Funding – Does your organization currently receive or anticipate receiving in the next 12 months:

Health Related Public Service Funds  
Funds

CDBG Funds

HOME

If any of the boxes are checked, list program titles and funding amounts:

<u>Program</u>	<u>Funding Amount</u>

9) If Health-Related Public Service funds are not awarded, will the project/ program continue?

a) Yes  or No

b) If yes, what is the minimum amount of money necessary for the program to operate?

10) List other groups or organizations that were asked to contribute to or fund this project within the past two years and the status of those funds (Include anticipated dates of funding awards). Include the type of support, such as cash, in-kind or matching funds.

<u>Contributor Name</u>	<u>Type of Support</u>	<u>Funding or Decision Date</u>	<u>Funding Amount</u>	<u>Status</u>

11) List current project partners:

<u>Name</u>	<u>Funding Contribution to Project (Dollar Amount or In-Kind)</u>

12) With the unit of service being one unduplicated person for the duration of your complete service to that person, what is the average cost of a unit of service?

13) How many of the unduplicated clients is the planned increase over your previous year of operation?

14) List all known public or private programs/projects in the City of Las Cruces or adjacent communities that currently address the same needs and Target Group as the program you are proposing:

15) What is your organization's **overall** annual operating budget for:

- a. 2008 - 2009?      \$ \_\_\_\_\_
- b. 2007 - 2008?      \$ \_\_\_\_\_
- c. 2006 - 2007?      \$ \_\_\_\_\_

FORM A  
BUDGET SUMMARY

Organization:

Project:

**Instructions:** Please complete the budget summary. Please indicate the amount of Health Related Public Service funds (Column A) needed for each expenditure classification. Also include outside or matching funds from federal, state and private sources (Columns B, C & D). Columns A, B, C & D must add up to the total budget (Column E) needed for the project. **List the name(s) of all other funding sources for the project. Attach an additional page if needed.**

A		B	C	D	E		
EXPENDITURE CLASSIFICATION		HEALTH RELATED PUBLIC SERVICE FUNDS	FEDERAL FUNDS	STATE FUNDS	PRIVATE FUNDS	TOTAL BUDGET**	
610-101	Permanent Position, Full Time*						
610-102	Permanent Position, Part Time*						
610-103	Temporary Positions*						
620-100	Employment Liability Insurance						
620-200	Other Employee Benefits						
710-100	Office Supplies						
710-110	Operating Supplies						
710-120	Repair & Maintenance Supplies						
710-130	Small Tools						
710-140	Motor Oil and Fuel						
710-210	Library Books and Periodicals						
710-220	Magazines and Periodicals						
710-280	Audio Visual Aids						
720-100	Wearing Apparel						
720-200	Postage and Federal Express						
730-100	City Service (water, waste, etc)						
730-200	Electricity						
730-300	Telephone						
730-400	Utility Services – Other						
740-100	Legal Services						
740-110	Auditing Services						
740-120	Maintenance Agreements						
740-130	Fees or Service Charges						
740-140	Advertising						
740-150	Landscape Maintenance						
740-160	Required Building Repair & Maintenance						
740-170	Auto or Truck Repair						

\* Salary categories may include costs of health insurance, workers' compensation, FICA, unemployment insurance

\*\*All funding sources must be listed including in-kind support. An explanation sheet may be attached (1 page maximum).

FORM A - BUDGET SUMMARY (continued)

Organization:

Project:

EXPENDITURE CLASSIFICATION		HEALTH RELATED PUBLIC SERVICE FUNDS	FEDERAL FUNDS	STATE FUNDS	PRIVATE FUNDS	TOTAL BUDGET**
740-180	Equipment Repair					
740-190	Data Processing					
750-110	Building or Land Rental					
750-120	Vehicle Rental					
750-130	Equipment Rental					
760-100	Liability Insurance					
760-110	Property Insurance					
760-120	Fidelity Insurance					
770-100	Transportation (in-state only)					
770-110	Per Diem (in-state only)					
770-200	Registration Fees					
770-300	Miscellaneous Costs					
770-400	Training and Education					
840-100	Furniture and Fixtures					
840-110	Office Equipment					
840-120	Shop Equipment					
850-100	Automobiles					
850-110	Trucks and Vans					
900-110	Client Housing (rent, utilities, deposit)					
900-120	Client Support (medical, classes)					
	TOTAL					

A B C D E

\* All funding sources must be listed. An explanation sheet may be attached (1 page maximum).

1. Projected Units to be served Existing: \_\_\_\_\_  
New Units: \_\_\_\_\_  
Total Units: \_\_\_\_\_
2. Total Health Related Public Service Funds (Column A)  
\$ \_\_\_\_\_
3. Column A total divided by total number of Units to be served (Cost per unit of service)  
\$ \_\_\_\_\_
4. Percentage increased of units served from last year, if applicable: \_\_\_\_\_%

**INSTRUCTIONS FOR FORM B  
BUDGET DETAIL**

Please refer to the sample Budget Detail which has been provided to assist with the detail information required for the Budget preparation.

**A. Salaries**

If the proposed program includes the cost of salaries, please provide a description of the positions to be funded.

**B. Employee Benefits**

If the proposed program includes the cost of employee benefits, please provide a description of those benefits which are not self-explanatory, such as what will be included in the group insurance costs.

**C. Operating Expenses**

If the proposed program includes the cost of operating expenses, please provide a description of how these expenses will be determined. Please keep in mind that only those expenses directly related to the proposed program can be funded. No pro rating of such expenses as telephone, building rents, and utilities is allowed unless a direct cost method is first established. If there are any questions regarding direct costing, please consult with Neighborhood Development staff.

**D. Capital Expenditures**

If the proposed program includes equipment purchases, specifications for the equipment must be included in the proposal.

**E. Utilities**

If the proposed program includes use of utilities, please provide specification on how much (in dollars) is needed for the duration of project.

**F. Services, Repairs, Rental, and Insurance**

If the proposed program includes services, repairs, rentals, or insurance, please provide specifications on all needed services for the project.

**G. Transportation and Training**

If the proposed program includes training or transportation, please provide specifications for how much it will cost. Allowable costs for transportation and training are for in-state only.

**BUDGET DETAIL**

XXX FOUNDATION  
123 MAIN STREET  
LAS CRUCES, NM 88001

<u>ITEMS</u>	<u>REQUESTED</u>
Salaries:	
610-101 Program Coordinator (40 hrs @ \$8.50 per hour)	\$17,680
NM State Unemployment Compensation	\$ 200
Operating Expenses:	
740-110 Audit	\$ 300
720-200 Postage	\$ 100
Travel:	
770-110 In-state - Santa Fe	\$ 300
(To include in-state mileage and per diem on other than company vehicle. Allowable mileage costs are for in-state only.)	
Capital Expenditures:	
840-110 Equipment:	
Typewriter	\$ 500
File cabinet	\$ 250
Desk	\$ 300
Chair	\$ 175
Telephone	\$ 400
	\$ <u>1,625</u>
 GRAND TOTAL	 \$ 21,830

**FORM B  
BUDGET DETAIL**

**Organization:**

**Program:**

**TOTAL AMOUNT REQUESTED**

\$ \_\_\_\_\_

**ITEMS REQUESTED**

**AMOUNT**

**Salaries (includes benefits): (Category 610-620)**

- 1. \_\_\_\_\_
- 2. \_\_\_\_\_
- 3. \_\_\_\_\_

**TOTAL**

**Operating Expenses and Postage: (Categories 710-720)**

- 1. \_\_\_\_\_
- 2. \_\_\_\_\_
- 3. \_\_\_\_\_
- 4. \_\_\_\_\_

**TOTAL**

**Utilities: (Category 730)**

- 1. \_\_\_\_\_
- 2. \_\_\_\_\_
- 3. \_\_\_\_\_
- 4. \_\_\_\_\_

**TOTAL**

**Services, Repairs, Rentals and Insurance: (Categories 740, 750, 760)**

- 1. \_\_\_\_\_
- 2. \_\_\_\_\_
- 3. \_\_\_\_\_
- 4. \_\_\_\_\_

**TOTAL**

**Travel and Training: (Category 770)**

- 1. \_\_\_\_\_
- 2. \_\_\_\_\_
- 3. \_\_\_\_\_

**TOTAL**

**Capital Expenditures: (Categories 840-850)**

- 1. \_\_\_\_\_
- 2. \_\_\_\_\_
- 3. \_\_\_\_\_
- 4. \_\_\_\_\_

**TOTAL**

**Client Housing & Support (Category 900)**

- 1. \_\_\_\_\_
- 2. \_\_\_\_\_
- 3. \_\_\_\_\_
- 4. \_\_\_\_\_

**TOTAL**

**MUST USE THIS FORM  
FORM C  
BUDGET DESCRIPTION AND JUSTIFICATION**

**Organization:**

**Program:**

Briefly and specifically describe each line item listed on Form B in a separate paragraph below (limit to the space provided):

**Salaries** (Category 610-620): Specify all full-time and part-time position(s), hours per week and rate of pay per hour (including salary positions), insurance and other employee benefits.

[Empty rectangular box for Salaries description]

**Operating Expenses and Postage** (Categories 710-720): Specify the type(s) of expenses and services.

[Empty rectangular box for Operating Expenses and Postage description]

**Utilities** (Category 730): Specify the type of utility and company name(s) if known. If subject to bid, please state "To seek bids" and include a brief summary of the bidding process.

[Empty rectangular box for Utilities description]

**Services, Repairs, Rentals and Insurance** (Categories 740, 750, 760): Specify the type of utility and company name(s) if known. If subject to bid, please state "To seek bids" and include a brief summary of the bidding process.

**Travel and Training** (Category 770): Allowable travel and training costs are for in-state only. Specify reason for travel, mode of transportation and distance to be traveled. If daily or weekly travel, please indicate as such and provide average mileage with calculations. For training, provide type of training, duration, date(s) of training and location(s).

**Capital Expenditures** (Categories 840-850): Specify what type of item(s) and equipment, including technical specifications if applicable.

**Client Housing and Support** (Category 900): Specify what type of client housing (rent, utilities, security deposits, etc.) or client support (medications, medical screenings, health care classes, etc.)

**FORM D**

**PROPOSED NUMBER OF CLIENTS TO BE SERVED**  
**PROPOSED SERVICES BASED ON UN-DUPLICATED COUNT OF:**  
 ( ) Households ( ) Individuals

Organization/Program:

1. If not a new project, how many units were (will be) served from July 1, 2009 through June 30, 2010?

--

2. If funded, please list the anticipated number of units that will be served from July 1, 2009 through June 30, 2010?

MONTH	Low Income (80% of median or below)	Moderate Income (81% to 99% of median)	Other Income (100% of median or above)	TOTAL
Jul 2009, proposed				
Aug 2009, proposed				
Sep 2009, proposed				
Oct 2009, proposed				
Nov 2009, proposed				
Dec 2009, proposed				
Jan 2010, proposed				
Feb 2010, proposed				
Mar 2010, proposed				
Apr 2010, proposed				
May 2010, proposed				
Jun 2010, proposed				
<b>TOTAL PROPOSED</b>				
New Units, (TOTAL PROPOSED – TOTAL EXISTING) (If applicable)				

**Primary Activity of the Application**

Check the primary activity of the program for which funds are requested (check only one box):

Health Related Public Service Needs *	Primary Activity
Public Services (General)	
Senior Services	
Handicapped Services	
Youth Services	
Legal Services	
Child Care Services	
Substance Abuse Services	
Health Services	
Mental Health Services	
Abused/Neglected Children	
Battered/Abused Spouses	
Lead-Based Paint Hazard Screening	
Homeless Services	
Rental Housing Subsidies	
Security Deposits	
Subsistence Payments	
Migrant farm workers	
Other Health Related Public Service Need	

Briefly explain how your program qualifies for this activity:

**APPLICATION SUBMISSION CHECKLIST**

**All applications must include the following documents to be considered for processing. Do not submit in spiral covers, binders, folders or plastic covers. Use binder clips only. Submit in the following order:**

- One (1) **UNSTAPLED** original application with required attachments. Use binder clips only.

Required Attachments include:

- Proof of Non-Profit Status – IRS Tax Exemption Determination Letter
- Most Recent Independent Audit or Financial Statement
- List of Current Board Members
- Articles of Incorporation and By-Laws
- Resume of Program Administrator or other program staff
- Resume of Fiscal Officer
- Resume(s) of current employees to be funded by the project
- Statement of Insurance
- Signed letter from the Board of Directors or designated authorized official requesting submission of the application

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Optional Attachments:

- List of All funding sources in addition to those listed in the application (1 page maximum).

**All Applications must be submitted by: March 6, 2009, 4:30 p.m.**

## I. PURPOSE

The purpose of this document is to define the general procedures and for the grant application process to the City of Las Cruces Health-Related Public Services Program. Health-Related Public Services programs are funded by the City of Las Cruces in the amount of \$300,000 for each of Fiscal Years 2009, 2010 and 2011. The information presented herein should provide guidance so that applications submitted are reflective of the needs and priorities established by the City of Las Cruces.

The City defines "Health Care Programs" that are eligible for Public Services funding as projects that "support the physical, mental, developmental, emotional or social continued well-being, safety, or improvement to the lives of sick, indigent, or low-income people." **Starting with Fiscal Year 2010, services that provide animal care, such as spaying and neutering of domestic pets, are not eligible for Health-Related Public Services funding.** Utilizing a broad definition of "Health Care Program" allows the funding of a broad spectrum of public services that improve the economic opportunities, or prevents and corrects a condition that contributes to an individual or family living in poverty, such as:

- Housing Assistance (non-construction)
- Services for the Homeless
- Education and Job Training
- Child Care Services
- Services for the Elderly
- Drug Abuse Counseling and Treatment
- Emergency Rent and Utility Assistance
- Recreational Programs
- Access to Health and Mental Health Care
- Assistance for Migrant Workers

## II. PROGRAM CONSIDERATIONS

### A. Funding Policies

Organizations interested in submitting proposals should be aware that Health Related Public Service funds are committed by the City of Las Cruces for only one year at a time, regardless of the type of program. Funding priorities are regularly reviewed and changed and no organization is assured of funding in subsequent years.

Health Related Public Service funds are limited by City of Las Cruces regulations. The City will make available a \$300,000 allocation for health related public service programs which is the maximum amount authorized under current City resolutions. These programs must represent either a new service or an increased effect in an existing level of service and exclusively serve City residents, the homeless or migrant workers.

Non-profit service agencies (i.e. 501(c)(3)) will be considered for funding. The City may request additional information or documentation to verify corporate status of agencies applying for or to support application statements. This could include up-to-date licenses for all qualified personnel.

***"Incomplete applications will not be considered."***

**B. Organizations Eligible To Submit Applications**

Non-profit organizations may submit proposals for Health Related Public Services. Non-profit entities, to be eligible, must already have an established exemption status and must be able to provide a copy of their most current 501(c)3 designation from the Internal Revenue Service.

Non-profit entities, to be eligible, must also have the organizational capacity to carry out the proposed activity and to meet the record keeping and reporting requirements of the Health Related Public Services Program. An indication of the record keeping and reporting requirements may be obtained by review of the "Sample Agreement as contained in Appendix B.

Applications for funding will be accepted from all eligible organizations whether they have previously received Health Related Public Service grants or not, with no limitation set on the number of years an organization can receive funding. However, organizations that have never received funding before or are not currently funded will be given due consideration in the scoring process to allow new recipients their chance to enhance the lives of low-income and moderate-income areas and/or clients.

For organizations previously funded, failure to perform in a timely manner or meet program requirements may be grounds for not being considered for further funding. This is to encourage timely completion of the previously funded programs and to maximize participation in the Health Related Public Service Program. Additionally, any findings of noncompliance from a monitoring visit of any program must be resolved by the next application deadline date.

**C. Final Decisions**

City Council retains final authority to make the final funding determination on all projects. The recommendation from the Health and Human Services Advisory Committee is only a recommendation to help guide the City Council.

Duplication of programs currently addressing the same need within the community may be grounds for disqualification from consideration. Such decisions will be made by the City Council based on a recommendation from the Health and Human Services Advisory Committee.

### III. CLIENT CITIZENSHIP AND QUALIFIED ALIEN ELIGIBILITY

Effective July 2008, a program directive was issued stating that all City funded programs (including CDBG and Health Related Public Service) must provide proper documentation of citizenship or qualified alien eligibility for each client the agency serves. The program directive is in accordance with established federal laws and guidelines to ensure that ineligible clients do not receive public benefits, and that clients with disabilities will not be discriminated against in obtaining the required evidence. A copy of the City's five page program directive is found in Appendix C.

### IV. CONTRACTUAL REQUIREMENTS

Under City regulations, certain requirements must be met in order to negotiate an agreement and disburse funds. These requirements include the following:

- A. Applicants must demonstrate that they are a non-profit agency.
- B. After an application is approved for funding, a contract will be prepared and sent by the City to the person identified by the applicants as the authorized official for signature (See Appendix B). The contract will specify the amount of the award, the period for which the project is approved, duration dates, and administrative provisions. Grantee recipients will be required to file regular reports on expenditures, progress towards goals, and beneficiaries. Forms for these reports will be provided.
- C. If the application is awarded funding, any deviation from the original proposed project may require review and recommendation from the Neighborhood Services staff, Health and Human Services Advisory Committee and final approval by the City Council.
- D. Grantee recipients will be required to obtain adequate insurance covering worker's compensation, bodily injury, property damage, or automobile liability, depending on the nature of the project. Grantees will be responsible for obtaining any necessary licenses and for complying with applicable federal, state, and municipal laws, codes and regulations.

### V. SUBMISSION REQUIREMENTS - GENERAL

#### A. Letter of Intent (LOI)

1. Each potential applicant must submit a Letter of Intent (LOI). Publication of the LOI process is posted annually on the City's website at [www.las-cruces.org](http://www.las-cruces.org). The LOI will be mailed via postal service to potential applicants and emailed to citywide information and referral websites for maximum distribution.
2. **More than one LOI may be submitted by an organization. If an organization proposes two different programs, two separate LOI's are required.**
3. **CITY STAFF'S REVIEW OF ALL LOI'S IS FOR INITIAL DETERMINATION OF PROGRAM ELIGIBILITY ONLY.** After the initial determination of program eligibility, City staff will email or send an application for Health-Related Public Service funding to the applicant agency.

**B. Applications**

1. The Health and Human Services Advisory Committee and City staff conduct a comprehensive review of Health Related Public Service applications that includes technical, subjective and organizational capacity ranking criteria (See Appendix A). **Potential applicants should study the ranking criteria in Appendix A carefully prior to making a formal application to ensure their agency is eligible for new or continued funding.**
2. **More than one application may be submitted by an organization. If an organization proposes two different programs, two separate applications are required.**
3. Applications may be either hand carried or mailed. In either case, the **UNSTAPLED original application (with required attachments)** must be received in the Neighborhood Services Office **no later than 4:30 p.m. on March 6, 2009.** **(Note: the application deadline date shall be changed for each calendar year at the discretion of staff and the Health and Human Services Advisory Committee.** Late applications will not be considered by the Health and Human Services Advisory Committee for funding. **Submit one (1) original application only (with required attachments) to:**

Jean Barnhouse-Garcia  
 Neighborhood Programs Specialist – Public Services  
 Community Development Department – Neighborhood Services Section  
 City of Las Cruces  
 P.O. Box 20000 (mailing address) Las Cruces, NM 88004  
 or  
 Room 153, 575 S. Alameda (hand carried address)

4. An applicant may submit an amended application before the closing time and date stated above. Such amended applications must be complete replacements from the previously submitted application and must be clearly identified as such in the transmittal letter. The City will not merge, collate or assemble application materials.
5. **Applications received after the deadline will not be considered for funding.**
6. Incomplete applications may be rejected by the City of Las Cruces staff or the Health and Human Services Advisory Committee. The City of Las Cruces and the Committee reserve the right to deny all applications that do not meet the minimum requirements of the application process, the State of New Mexico, and/or the City of Las Cruces.
7. **Applicants must forward only the documents and attachments required by the application, the City of Las Cruces staff and the Health and Human Services Advisory Committee. All other documents and attachments will be refused and may result in disqualification of the application.**

8. Joint applications are allowed when two or more eligible organizations wish to address a common problem. One organization will be designated to serve as the lead applicant, will be the recipient of the funds, and will be subject to the administrative requirements. Joint applications must be accompanied by a letter of agreement, from all of the organizations stating their intention to cooperate on the project. Authorized individuals from each organization must sign the letter of agreement.
9. Subcontractors and other business associations to be used by the applicant in performance of the scope of work shall be identified with specificity in the application.

## VI. STEPS TO THE SELECTION AND EVALUATION PROCESS

- Step 1** Complete the Letter of Intent process as outlined in Section V.A.
- Step 2** Complete the application and submit the application by the deadline. Submit one **UNSTAPLED original application only (with required attachments)** (See application checklist on page 24).
- Step 3** Staff reviews applications for eligibility determination and full submittal requirements, and completes the technical scoring on eligible applications.
- Step 4** Staff provides notice of eligibility to all applicants.
- Step 5** Eligible applications are submitted to the Health and Human Services Advisory Committee.
- Step 6** Health and Human Services Advisory Committee members read all eligible applications and individually score all applications. All scoring will be accomplished using the provided worksheet for each application (see Appendix A), which includes scoring provisions for subjective aspects.
- Step 7** The Health and Human Services Advisory Committee will hold a public hearing to listen to presentations from all of the eligible applicants. **Applicants must be arrive on time and be present at the beginning of the HHSAC public hearing, regardless of the scheduled time slot for their presentation.** Presentations will be limited to 5 minutes, and a 5 minute period for question and answers by the Committee of the applicants. A limited number of additional points will be given to each agency by the HHSAC members, depending on the quality of the agency's presentation at the public hearing. Rankings will be conducted separately from the public hearing. The Committee members can use the information gathered from the presentations to help in scoring the applications for the subjective provisions of the worksheet only and make any revisions to their rankings/scores at that time.
- Step 8** The Health and Human Services Advisory Committee members submit completed worksheets to staff for tabulation at the public hearing after all presentations.

- Step 9** Staff tabulates the totals for each application. If at least five (5) members of the seven member committee have scored worksheets, then the staff shall eliminate high and low scored worksheets. If fewer than five members score worksheets, then all shall be tabulated. All scores for that application are combined (except for high and low scores if at least five are submitted) giving a total score for each application.
- Step 10** The tabulations are then presented to the Health and Human Services Advisory Committee in public hearing, which are the final rankings.
- Step 11** The Health and Human Services Advisory Committee uses the final rankings to determine funding amounts for each agency, starting with the top ranked agencies and working down the list. However, this does not necessarily mean that any application will be funded at the full requested amount. If the Committee members agree, by majority vote of the Committee members present in a public meeting, that any lower ranked application will not be considered further, City staff will record the affected applications and the applicant organization's name.
- Step 12** Rankings and funding recommendations are then sent to City Council for final decision as a separate Resolution, and as part of the City annual Budget approval process.

**APPENDIX A**

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**APPLICATION RANKING CRITERIA**

**Technical Ranking Criteria for Health Related Public Services Funding**

These criteria focus on how well the applicant designs its project, how it fits into the overall organization's concept, and the extent to which it hopes to provide new services. **For all factors, the lower the score the higher the rating.**

Organization or Application Title: \_\_\_\_\_

1. **New or existing. (10 points maximum)**
  - a. Older than 6 years = 0
  - b. Less than 2-5 years old = 5
  - c. New Organization (last two years) = 10 \_\_\_\_\_ Points
  
2. **Prior Health Related Public Service Funding (20 points maximum)**
  - a. Previously funded agency with a new project that will significantly raise the service level in the community = 0
  - b. Previously funded agency, but with same project and a small but justifiable increase or justifiable decrease in service levels = 10
  - c. Previously funded agency with same project, no change in service levels = 15
  - d. Never funded and/or new agency founded in last two years = 20 \_\_\_\_\_ Points
  
3. **Meets one of the Health Related Public Service priority needs (10 points maximum)**
  - a. Yes = 0
  - b. No = 10 \_\_\_\_\_ Points
  
4. **Commonality of New Project with Current Activities/Mission (10 points maximum)**
  - a. Excellent fit with current mission = 0
  - b. Works in concert with current mission = 5
  - c. Has no commonality with current mission = 10 \_\_\_\_\_ Points
  
5. **Increase/Decrease in Service (15 points maximum)**
  - a. 71-100% service increase from last year (or new project) = 0
  - b. 31-70% increase in services from last year = 5
  - c. Up to 30% increase in services from prior year = 10
  - d. No increase in services from prior year, new project or program = 15 \_\_\_\_\_ Points
  
6. **Matching Funds (including in-kind) as part of budget (15 points maximum)**
  - a. Yes, 51% or more of project budget = 0
  - b. Yes, 5 – 50% of project budget = 5
  - c. Yes, 1 – 4% of project budget = 8
  - d. None = 15 \_\_\_\_\_ Points
  
7. **Quality of the Proposed Project (15 points maximum)**
  - a. Method of implementation is workable = (0 to 5)
  - b. Clarity, consistency and clear logic of proposal = (0 to 5)
  - c. Ability to manage the project = (0 to 5) \_\_\_\_\_ Points

**TECHNICAL TOTAL \_\_\_\_\_ POINTS (max. = 105, min. = 0)**

**A brief summary of the applicant organization's prior program history or a research review of new applicants may be attached by staff.**

Staff Person Completing Review \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

**Subjective Ranking Criteria for Health Related Public Services Funding**

The subjective ranking criteria are looser, with more flexibility in scoring. They focus on the organization's ability to partner, community and neighborhood needs, and extent of leveraging. **For all factors, the lower the score the higher the rating.**

Organization or Application Title: \_\_\_\_\_

**1. Partnership application (10 points maximum)**

- a. Yes = 0
- b. No = 10 \_\_\_\_\_ Points

**2. Stake of Partner (15 points maximum)**

- a. Partner is fully experienced in the proposed project area and is committing funds to the project = 0
- b. Partner is experienced in the proposed program area = 5
- c. Partner has no experience in the proposed program area = 10
- d. No partnership in proposed project = 15 \_\_\_\_\_ Points

**3. Leveraging Resources (10 points maximum)**

- a. Project or agency leverages Human Resources (volunteers or other in-kind) or financial resources = (0 to 9)
- b. Project does not leverage funds or resources with other agencies = 10 \_\_\_\_\_ Points

**4. Feasibility (15 points maximum)**

- a. Is the project budget justified by documented costs that are reasonable and consistent? (0 to 5)
- b. The level of public subsidy is needed, as shown by the Health-Related Public Services needs as established by the HHSAC = (0 to 5)
- c. Has the applicant documented efforts to get other funding? \_\_\_\_\_ Points

**5. Community Need for the Project (10 points maximum)**

- a. High = 0
- b. Medium = 5
- c. Low = 10 \_\_\_\_\_ Points

**6. Need / Priority Addressed by the Project (10 points maximum)**

- a. Has the applicant documented a need for the project? = (0 to 5)
- b. Does the project provide direct assistance for persons to gain self-sufficiency or maintain independence? = (0 to 5) \_\_\_\_\_ Points

**7. Cost per "unit of service" is reasonable. (10 points maximum)**

- a. Low cost = 10
- b. Medium cost = 5
- c. High cost = 0 \_\_\_\_\_ Points

**8. The quality of the Proposal/Project (15 points maximum)**

- a. Method of Implementation ( 0-5 points) \_\_\_\_\_ Points
- b. Clarity of Proposal ( 0-5 points) \_\_\_\_\_ Points
- c. Ability to manage the project ( 0-5 points) \_\_\_\_\_ Points

**SUBJECTIVE TOTAL \_\_\_\_\_ POINTS (max. = \_\_\_\_\_, min. = 0)**

Signature of Person Completing Review \_\_\_\_\_ Date \_\_\_\_\_

**APPENDIX B**

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**LOW INCOME VERIFICATION**

**HUD INCOME GUIDELINES  
LAS CRUCES MSA INCOME LIMITS  
Income Levels by Family Size  
HEALTH RELATED PUBLIC SERVICES - GENERAL FUND  
EFFECTIVE DATE, FEBRUARY 13, 2008  
CORRECTED FOR 100% MFI ON MARCH 13, 2008  
MEDIAN FAMILY INCOME (MFI): \$42,100**

FAMILY SIZE # OF PERSONS	EXTREMELY LOW INCOME (30% of Median)	VERY LOW INCOME (50% of Median)	LOW INCOME (80% of Median)	MODERATE INCOME (100% of Median)
1	\$9,050	\$15,100	\$24,200	\$29,450
2	\$10,350	\$17,300	\$27,650	\$33,700
3	\$11,650	\$19,450	\$31,100	\$37,900
4	\$12,950	\$21,600	\$34,550	\$42,100
5	\$14,000	\$23,350	\$37,300	\$45,450
6	\$15,000	\$25,050	\$40,100	\$48,850
7	\$16,050	\$26,800	\$42,850	\$52,200
8	\$17,100	\$28,500	\$45,600	\$55,590

Source: The U.S. Department of Housing and Urban Development (HUD) Office of Policy Development and Research (PD&R), FY 2008 Income Limits from website at [http://www.huduser.org/Datasets/IL/IL08/nm\\_fy2008.pdf](http://www.huduser.org/Datasets/IL/IL08/nm_fy2008.pdf)

Income limits for families with more than eight-persons, 8% of the four person base should be added to the either person income limit.

Income limits are rounded to the nearest \$50. For simplicity, this is optional for income limits for nine-plus person families.

**APPENDIX C**

---

**PROGRAM DIRECTIVE ON CITIZENSHIP  
and  
QUALIFIED ALIEN STATUS**

Program Directive  
CDBG, HOME, and applicable City-funded  
Public Service Programs to  
Non-National Citizens of the United States

Date: July 7, 2008

**ISSUE:**

The City of Las Cruces, as a federal entitlement community or participating jurisdiction, for the U.S. Department of Housing and Urban Development (HUD) for the Community Development Block Grant (CDBG) and Home Investment Partnerships (HOME) Programs has had both inquires and other issues related to providing services to potential non-nationals of the United States from these funding sources. This Program Directive is intended to provide clear direction to all sub-recipients of both CDBG and HOME funds related to this issue, in accordance with established Federal Laws and/or guidance. Furthermore, this shall be the directive related to those public service programs that fall within this category that are funded using local funds. This Program Directive is being issued to ensure that ineligible clients do not receive public benefits provided by these programs, either directly by City staff and/or outside funded agencies, through the required documentation within the federal guidance.

**APPLICABLE FEDERAL GUIDANCE (attached):**

1. Interim Guidance on Verification of Citizenship, Qualified Alien Status and Eligibility Under Title IV of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 (aka Welfare Reform Act of 1996), as issued in the Federal Register, Vol. 62, No. 221, November 17, 1997, pages 61344 to 61371.
2. Guidance on Standard and Methods for Determining Whether a Substantial Connection Exists between Battery or Extreme Cruelty and Need for Specific Public Benefits, as issued in the Federal Register, Vol. 62, No. 238, December 11, 1997, pages 65285-65287.
3. Verification of Eligibility for Public Benefits, as issued in the Federal Register, Vol. 63, No. 149, August 4, 1998, pages 41662-41686..
4. Final Specification of Community Programs Necessary for Protection of Life or Safety under Welfare Reform Legislation, as issued in the Federal Register, Vol. 66, No. 10, January 16, 2001, pages 3613 to 3616.

**CITY FUNDED PROGRAMS SUBJECT TO THIS DIRECTIVE:**

- A. Home Rehabilitation Program;
- B. All CDBG and non-CDBG Public Services Program that provide an in-kind (non-cash) service outside the scope of City Program Exceptions outlined below;
- C. All HOME or other housing programs, excluding those programs that provide emergency shelter of less than 90 days.

**EXEMPT FUNDED PROGRAMS:**

Those activities and/or programs that provide a direct or indirect service through City, State, or Federal sources and/or appropriated funds that fall within this category are hereby excluded from this directive, except as for proper documentation of the service provided and client's general eligibility of the applicable program (i.e. income or class eligibility requirements) (See Federal Register, Vol. 66, No. 10, dated January 16, 2001, paged 3613 through 3616 and Federal Register, Vol. 63, No. 149, dated August 4, 1998, page 41676):

- A. Public Facility & Infrastructure Programs, as provided on an Area wide basis;
- B. Community Housing Development Organizations (CHDO) Operating Assistance;
- C. Aliens receiving a benefit as of August 22, 1996 and continuing to receive said benefits under the programs for housing and community development assistance or financial assistance administered by the Secretary of HUD, or any program under title V of the Housing Act of 1949;

- D. Public Safety & Community Service Programs at large, including fire, police, ambulance, emergency medical transport, public transportation and para-transit, sewer and sanitation services, and other regular, widely available services or programs, services, and assistance delivered at a community or community-wide level, including but not limited to those services for the necessary protection of life or safety, such as:
- a. Crisis counseling and intervention programs, services and assistance relating to child protection, adult protective services, violence and abuse prevention, victims of domestic violence or other criminal activity; or treatment of mental illness or substance abuse;
  - b. Short-term shelter or housing assistance for the homeless, for victims of domestic violence, or for runaway, abused or abandoned children for a period less than or equal to 90 days;
  - c. Programs, services or assistance to help individuals during periods of heat, cold, or other adverse weather conditions;
  - d. Soup kitchens, community food banks, senior nutrition programs, or other such community nutritional services for persons requiring special assistance (e.g. disabled adults);
  - e. Medical and public health services (including treatment and prevention of diseases and injuries) and mental health, disability, or substance abuse assistance necessary to protect life or safety;
  - f. Activities designed to protect the life or safety of workers, children and youths, and community residents; and
  - g. Any other programs, services, or assistance necessary for the protection of life or safety.

**EXPECTATIONS RELATED TO DOCUMENTATION OF CLIENT ELGIBILITY:**

- A. Except for Exempt Funded Programs, all City funded programs shall provide proper documentation of client citizenship or qualified alien eligibility, as specified in both the Interim Guidance (Federal Register, Vol. 62, No. 221, dated November 17, 1997, page 61347) and Verification of eligibility (Federal Registers, Vol. 63, No. 149, dated August 4, 1998, page 41680, sections 104.21, 104.22, 104.23, and 104.24). The steps are as follows:
- a. Ask for Declaration of Status, under penalty of perjury related to whether that person is a "citizen" or "non-national citizen" of the U.S. and
  - b. Proof of **Primary, legitimate supporting documentation** to verify the person's identity and citizenship/national status as being eligible (Federal Register, Vol. 62, No. 221, 11/17/1997, Attachment 4, page 61363, et. seq.)
    - i. Birth certificate from one of the 50 states;
    - ii. United States Passports, other than limited passports which are issued for periods of less than 5 years;
    - iii. Report of birth abroad of a U.S. citizen (FS-240 issued by the Department of State to U.S. Citizens);
    - iv. Certificates of birth (FS-545 issued by a foreign service post) or Certification of Report of Birth (DS- 1350 issued by the U.S. Department of State);
    - v. Certificate of Naturalization (N-550 or N-570);
    - vi. Certificate of Citizenship (N-560 or N-561);
    - vii. United States Citizen Identification Card (I-197);
    - viii. Northern Mariana Identification Card (issued by the INS to persons born in the Northern Mariana Islands before November 3, 1986);
    - ix. Statement provided by U.S. Consular Officer of an individual as a U.S. Citizen (for individuals born outside the U.S. to a citizen parent but doesn't have a FS-240, FS-545, or DS-1350 card); or
    - x. American Indian Card with a classification code of "KIC" and statement on the back.
  - c. **Secondary evidence**, for persons that can't provide primary documentation:
    - i. Religious record from one of the 50 states;
    - ii. Evidence of civil service employment by the U.S. government prior to June 1, 1976;
    - iii. First school records, showing dates of admission, child's place and date of birth, and names and places of birth of both parents;

- iv. Census records showing name, U.S. citizenship or place of U.S. birth and date of birth/age of applicant;
  - v. Adoptions Finalization Papers from one of the 50 states and certain territories; or
  - vi. Any other document that establishes a U.S. place of birth or in some way indicates U.S. citizenship (hospital records).
- d. Collective Citizenship, Derivative Citizenship, Adoption of Foreign-Born child by a U.S. Citizen, U.S. Citizenship by Marriage, , if they can't provide either Primary or Secondary evidence above, then you need to look at these situations identified on Pages 31634 of the 11/17/1997 Federal Register.
- e. Qualified Alien requirements are specified in Attachment 5 on Page 61364 of the Federal Register dated 11/17/1997 and should be verified with those supporting evidentiary documents.
- f. Applicants with disabilities and nondiscrimination. Every effort should be made to provide assistance to those applicants with disabilities to obtain the required evidence, and they should not be discriminated against because of the disability and any of the other protected classes.
- B. Despite exemptions for certain programs, for certain City funded public benefit services provided to persons being subjected to extreme cruelty and/or battery, care should be taken to ensure that the agency can provide a public service that adheres to or meets the "Standard and Methodology for determining a substantial connection existing between the cruelty/batter and the need for the specific public benefit," prescribed in the Federal Register, Vol. 62, No. 238, dated 12/11/1997, pages 65285 through 65287. The agency and City will work proactively to document the service standard to be provided for the intended clients as part of the agreement process between the agency and the City, prior to commencement of services.
- a. In addition to general program eligibility and item "B." immediately above, and including establishing the standards related to the benefit and the cruelty/battery, certain programs that provide services to certain classes of individuals (namely those aliens that are victims of domestic violence or subject to battery and/or extreme cruelty), must follow those procedures and documentation as specified in Federal Register, Vol. 62, No. 221, dated November 17, 1997 on page 61366 and 61364 as part of Exhibit "B" to Attachment 5, Item I, 1 through 4, and Federal Register, Vol. 53, No. 149, dated August 4, 1998, Section 104.48, et. seq. on page 41683. This includes proper documentation of the abuse and/or cruelty and coordination with the INS's predecessor.
- C. For emergency shelter or emergency housing programs, verification of citizenship is not required; however, if the program is structured in such a way that the person/household would receive a public benefit through a transitional and/or permanent housing program funded by the City or federal funding sources beyond the emergency shelter/housing program period (i.e. for a period longer than 90-days), then the verification is required at the time of emergency sheltering/housing. Further, those victims of domestic violence are not generally eligible for transitional or permanent housing if they are non-citizens.
- D. All other general program eligibility requirements, including income eligibility or documentation to the effect that the person and/or household is within the identified class not requiring income verification (i.e. homeless, battered or abused spouses, abused or neglected children, those suffering from HIV/AIDS, etc.) and as dictated within the City's written Agreement/Contract with the outside agency is still required.
- E. If the program requires access to the SAVE System through the Department of Homeland Security, the City, as part of the Agreement/Contract may allow the use of its funds to pay for access to SAVE.
- F. For any exception for Non-profit charitable organizations under the Federal Register, Vol. 63, No. 149, dated August 4, 1998, page 41677, this exception shall not apply for funds directly received

from the City, as part of its own sources and/or pass through of federal funds from the City to the organization.

- G. Agencies are encouraged to review the attached federal guidance and coordinate specific questions about specific client eligibility issues with your City staff person coordinating the Agreement/Contract.

Issued and Effective on: July 28, 2007

Version No. 1

Issued by: David P. Dollahon, Neighborhood Services Administrator

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Approved by: David Weir, Community Development Director

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Approved as to Form: Fermin Rubio, City Attorney

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**APPENDIX D**

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**SAMPLE CONTRACT**



**City of Las Cruces**  
PEOPLE HELPING PEOPLE

II.  
III.

**IV. Professional Services Agreement**

**THIS AGREEMENT**, made and entered into on this date, \_\_\_\_\_ 2008, by and between the City of Las Cruces, New Mexico, hereinafter called "City" and Company Name \_\_\_\_\_, of Street Address, City, Town, State, Zip Code, \_\_\_\_\_ hereinafter called "Contractor" for a term of \_\_\_\_\_ days.

**SCOPE OF WORK:**

**1. PROJECT DESCRIPTION**

**2. SCOPE OF SERVICES**

CONTRACTOR shall render in a satisfactory and proper manner the SERVICES set forth in Contract Exhibit A, attached hereto and made a part of this Agreement.

**3. COMPENSATION**

The CITY shall compensate CONTRACTOR for the performance of SERVICES under this Agreement not to exceed an amount of \$ \_\_\_\_\_, excluding NMGRT.

CONTRACTOR will pay the State of New Mexico the Gross Receipts Tax levied on the amounts payable under this contract.

CONTRACTOR agrees to comply with all federal and state tax payments and report all items of gross receipts as income from the operations of its business.

**4. CHANGES AND EXTRA SERVICES**

The CITY may make changes within the general scope of this Agreement. If CONTRACTOR is of the opinion that any proposed change causes an increase or decrease in the cost and/or the time required for performance of this Agreement, CONTRACTOR shall so notify the CITY of that fact. An agreed-upon change will be reduced to writing signed by the parties hereto and will modify this Agreement accordingly. CONTRACTOR may initiate such notification upon identifying a condition, which may change the SERVICES agreed to on the effective date of this Agreement.

That party of the other party's written notification of a proposed change must provide any such notification within five (5) days from the date of receipt. In the event that the parties hereto as to a particular change cannot reach agreement, the issue shall be resolved pursuant to Article 17.

The CITY may request CONTRACTOR to perform extra services not covered by the SCOPE OF SERVICES as set forth in Exhibit A, and CONTRACTOR shall perform such extra services and will be compensated for such extra services when they are reduced to writing, mutually agreed to, and signed by the parties hereto amending this Agreement accordingly.

The CITY shall not be liable for payment of any extra services nor shall CONTRACTOR be obligated to perform any extra services except upon such written amendment.

#### 5. SCHEDULE

CONTRACTOR shall perform the SERVICES in accordance with the time set forth as agreed upon by the CITY and Contractor in Exhibit B. CONTRACTOR will initiate services following City Council acceptance of the proposal and with approval of Project Manager.

#### 6. DELAYS

CONTRACTOR shall perform its SERVICES with due diligence upon receipt of a written Notice to Proceed from the CITY. The CITY cannot authorize costs to be incurred prior to such written Notice to Proceed. In the event that performance of its SERVICES is delayed by causes beyond reasonable control of CONTRACTOR, and without the fault or negligence of CONTRACTOR, the time and total compensation for the performance of the SERVICES shall be equitably adjusted by written amendment to reflect the extent of such delay.

CONTRACTOR shall provide the CITY with written notice of delay, including therein a description of the delay and the steps contemplated or actually taken by CONTRACTOR to mitigate the effect of such delay. The CITY will make the final determination as to reasonableness of delays.

#### 7. DISCLOSURE AND OWNERSHIP OF DOCUMENTS, PRODUCTS, DESIGN, ELECTRONIC FILES

All technical data, electronic files, and other written and oral information not in the public domain or not previously known, and all information, electronic files, and data obtained, developed, or supplied by the CITY will be kept confidential and CONTRACTOR will not disclose to any other party, directly or indirectly, without the CITY's prior written consent unless required by lawful order.

All technical data, electronic files, products developed, operational parameters, blueprints, and other information and work of the CONTRACTOR contained shall be the sole property of the CITY and shall be delivered to the CITY when requested and at the end of the Agreement.

#### 8. SCOPE OF AGREEMENT

That this Agreement incorporates all of the agreements, covenants, and understandings between the parties hereto concerning the subject matter hereof and that all such covenants, agreements, and understandings have been merged into this written agreement. No prior agreement or understanding verbal or otherwise of the parties or their agents shall be valid or enforceable unless embodied in this agreement.

#### 9. INDEPENDENT CONTRACTOR

CONTRACTOR represents that it has, or will secure, at its own expense, all personnel required in performing the SERVICES under this Agreement. Such personnel shall not be employees of, nor have any contractual relationship with the CITY. CONTRACTOR, consistent with its status as an independent contractor, further agrees that its personnel will not hold themselves out as, nor claim to be officers or employees of the CITY by reason of this Agreement.

To the extent that CONTRACTOR employs any employees, CONTRACTOR shall be solely responsible for providing its own form of insurance for its employees and in no event shall CONTRACTOR's employees be covered under any policy of the CITY.

CONTRACTOR's retention hereunder is not exclusive. Subject to the terms and provisions of this Agreement: (i) CONTRACTOR is able, during the Term hereof, to perform services for other parties; and (ii) CONTRACTOR may perform for its own account other professional services outside the scope of this Contract.

CONTRACTOR is and shall be an Independent Contractor and shall be responsible for the management of its business affairs. In the performance of the work under this Agreement, CONTRACTOR will at all times be acting and performing as an Independent Contractor, as that term is understood for federal and state law purposes, and not as an employee of the CITY. Without limitation upon the foregoing, CONTRACTOR shall not accrue sick leave, jury duty pay, retirement, insurance, bonding, welfare benefits, or any other benefits, which may or may not be afforded employees of the CITY. CONTRACTOR will not be treated as an employee for purposes of: Workers' Compensation benefits; the Federal Unemployment Tax Act; Social Security; other payroll taxes, federal or any state income tax withholding; or the employee benefit provisions described in the Internal Revenue Code of 1986, as amended. Neither the CITY, nor its agents or representatives, shall have the right to control or direct the manner, details or means by which CONTRACTOR accomplishes and performs its services. Nevertheless, CONTRACTOR shall be bound to fulfill the duties and responsibilities contained in the Agreement.

#### 10. DEVOTION OF ADEQUATE TIME

CONTRACTOR will devote the necessary hours each week to the performance of such projects that are required by the CITY and it will serve the CITY diligently and faithfully, and according to its best ability in all respects and will promote the best interests of the CITY.

#### 11. INSURANCE

CONTRACTOR shall obtain and maintain insurance at its own cost and expense to protect itself from claims as follows:

- a. Professional Liability: \$1,000,000 per claim
- b. Must be Occurrence form coverage

#### 12. INDEMNITY AND LIMITATION

CONTRACTOR shall indemnify, defend, and hold harmless the CITY from and against any and all claims, suits, actions, judgments, demands, losses, costs, expenses, damages, and liability caused solely by, resulting solely from, or arising solely out of the negligent acts, errors, or omissions of CONTRACTOR, its officers, employees, agents, or representatives in the performance of SERVICES under this agreement.

#### 13. NO JOINT VENTURE OR PARTNERSHIP

Nothing contained in this Agreement shall create any partnership, association, joint venture, fiduciary or agency relationship between CONTRACTOR and CITY. Except as otherwise specifically set forth herein, neither CONTRACTOR nor CITY shall be authorized or empowered to make any representation or commitment or to perform any act which shall be binding on the other unless expressly authorized or empowered in writing.

#### 14. EXTENSIONS, CHANGES, AND AMENDMENTS

This Agreement shall not be extended, changed, or amended except by instrument in writing executed by the parties. Such written approval shall indicate the date said extension, change, or amendment is effective and shall be signed by both parties to this Agreement.

#### 15. TERMINATION

This Agreement may be terminated by either party hereto upon fifteen (15) calendar days written notice in the event of substantial failure by the other party to perform in accordance with the terms of this Agreement through no fault of the terminating party. This Agreement may also be terminated by the CITY for its convenience or because the PROJECT has been permanently abandoned, but only upon fifteen (15) calendar days written notice to CONTRACTOR.

In the event of termination, CONTRACTOR shall be compensated for all services performed and costs incurred up to the effective date of termination for which CONTRACTOR has not been previously compensated.

Upon receipt of notice of termination from the CITY, CONTRACTOR shall discontinue the SERVICES unless otherwise directed and upon final payment from the CITY deliver to the CITY the required number of copies of all data, drawings, reports, estimates, summaries, and such other information and materials as may have been accumulated by CONTRACTOR in the performance of this Agreement, whether completed or in process.

#### 16. BREACH

In the event CONTRACTOR breaches any obligation contained in this Agreement, prior to instituting any action or dispute resolution procedure, the CITY shall give CONTRACTOR written notice of such breach. In the event CONTRACTOR fails to remedy the breach within five (5) working days of receiving such written notice, the CITY, at its sole discretion, without any obligation to do so and in addition to other remedies available under applicable law, may remedy CONTRACTOR's breach and recover any and all costs and expenses in so doing from CONTRACTOR.

#### 17. DISPUTE RESOLUTION

In the event that a dispute arises between City and Contractor under this Agreement or as a result of breach of this Agreement, the parties agree to act in good faith to attempt to resolve the dispute.

#### 18. ASSIGNMENT

CONTRACTOR shall perform all the services under this Agreement and shall not assign any interest in this Agreement or transfer any interest in same or assign any claims for money due or to become due under this Agreement without the prior written consent of the CITY.

#### 19. RECORDS AND AUDITS

CONTRACTOR will maintain records indicating dates, length of time, and services rendered. The CITY has the right to audit billings both before and after payment, and contest any billing or portion thereof. Payment under this Agreement does not foreclose the CITY's right to recover excessive or illegal payments.

20. APPROPRIATIONS

The terms of this Agreement are contingent on sufficient appropriations and authorization being made by the CITY for the performance of this Agreement. If sufficient appropriations and authorizations are not made by the City Council, this Agreement shall terminate upon written notice given by the CITY to CONTRACTOR. The CITY's decision as to whether sufficient appropriations and authorizations exist shall be accepted by CONTRACTOR and shall be final.

21. APPLICABLE LAW

CONTRACTOR shall abide and be governed by all applicable state law, City ordinances, and laws regarding the CONTRACTOR'S services or any work done pursuant to this Agreement.

This Agreement and the rights and obligations of the parties shall be governed by and construed by the laws of the State of New Mexico applicable to Agreements between New Mexico parties made and performed in that state, without regard to conflicts of law principles. Venue shall be in the Third Judicial District, State of New Mexico.

22. NOTIFICATION

All notices required or permitted under this Agreement shall be in writing and shall be deemed sufficiently served if served by Registered Mail addressed as follows:

TO CITY: City of Las Cruces  
PO Box 20000  
Las Cruces, NM 88004  
ATTENTION: \_\_\_\_\_,

With Copies to: City Attorney  
Purchasing Manager

TO CONTRACTOR: *Company Name*  
*Address and Street*  
*City, State and Zip*

ATTENTION:

\_\_\_\_\_ Company

THE CITY OF LAS CRUCES

V. By: \_\_\_\_\_  
Principal

By: \_\_\_\_\_  
Purchasing Manager

Date: \_\_\_\_\_

APPROVED AS TO FORM:

  
City Attorney

**HEALTH AND HUMAN SERVICES ADVISORY COMMITTEE**  
**November 4, 2009**

Following are the summary minutes from the Health and Human Services Advisory Committee meeting held on Wednesday, November 4, 2009, at 6:00 p.m., at City Office Center, 575 S. Alameda, Room 101, Las Cruces, New Mexico.

**MEMBERS PRESENT:** Mary Simmons, Chair  
Sue Patterson, Vice-Chair  
Kevin Kay  
William Corbett  
Earl Nissen  
David Telford

**STAFF PRESENT:** David Dollahon  
Jean Barnhouse-Garcia  
Diana Garcia-Parra (recording secretary)

**PUBLIC PRESENT:** Lee Gemoets

**I. CALL TO ORDER**

Meeting was called to order by Mary Simmons at 6:00 p.m.

**II. ROLL CALL**

Jean Barnhouse-Garcia called the roll of the HHSAC members (above).

NOTE: David Telford was not present at the time of roll call.

**III. CONFLICT OF INTEREST INQUIRY BY BOARD CHAIRPERSON IN ACCORDANCE WITH ESTABLISHED PROGRAM PROCEDURES.** At the opening of each Board Meeting, the Chairperson shall ask if any member of the Board or any member of the City staff has any known Conflict of Interest with any item on the Agenda.

Committee members turned in their conflict of interest (COI) forms. David Dollahon advised that the COI forms are to be filled out once a year. The COI inquiry is to be asked at the beginning of each meeting.

Chairperson Simmons asked Jean Barnhouse-Garcia if all members had signed the forms and were cleared from a COI. Ms. Barnhouse-Garcia quickly reviewed the forms and stated yes, all forms had been signed and they were all clear.

1 Ms. Simmons did ask if any committee member had a COI with the agenda at  
2 hand. None stated.

3  
4 **IV. APPROVAL OF MINUTES – October 14, 2009 & October 21, 2009**

5  
6 ***October 14, 2009***

7 Earl Nissen moved to accept the minutes.

8  
9 Bill Corbett seconded.

10  
11 All in favor. None opposed. Motion carried.

12  
13 ***October 21, 2009***

14 Earl Nissen moved to accept the minutes.

15  
16 Sue Patterson seconded.

17  
18 All in favor. None opposed. Motion carried.

19  
20 **V. RECOMMENDATION OF ROLLOVER / USE OF UNENCUMBERED**  
21 **PUBLIC SERVICES FUNDS**

22 **A. PY 2008 - \$5,000.00**

23 David Dollahon advised that the \$5,000 was public service funds from the  
24 Community Action Agency for lack of performance. Staffs' recommendation was  
25 to put the money back into the pool for an Action Plan Amendment. There are  
26 some open 2008 projects that staff can dedicate the money too that are not  
27 public service projects.

28  
29 Earl Nissen moved to rollover the \$5,000 to another project.

30  
31 Bill Corbett seconded.

32  
33 All in favor. None opposed. Motion carried.

34  
35 **B. PY 2009 - \$16,407.00**

36 David Dollahon advised that the \$16,407 was from the Families and Youth  
37 Incorporated. Mr. Dollahon gave three options; 1) put money back into the pool  
38 for another eligible project that's not public services, 2) divided up to another  
39 public service agency, whether existing or one not funded, or 3) use for the  
40 Jefferson Road project.

41  
42 Sue Patterson asked if the road project would qualify under Health and Human  
43 Services.

44  
45 Mr. Dollahon stated because it was first dedicated as public service money,  
46 Council gave staff the directive to talk to the committee about reallocating the

1 funds, so it is the committees' choice. Mr. Dollahon did add that this is CDBG  
2 public service money, not health-related.

3

4 **NOTE:** Committee member David Telford joined the meeting at 6:11 p.m.

5

6 Ms. Patterson moved for the Community Development Department to determine  
7 the best needs for the monies.

8

9 Earl Nissen seconded.

10

11 All in favor. None opposed. Motion carried.

12

13 **VI. ADJOURNMENT**

14

15 Kevin Kay moved to adjourn.

16

17 Bill Corbett seconded.

18

19 All in favor. None opposed. Motion carried.

20

21 Meeting adjourned at 6:17 p.m.

22

23

24

25

---

Chairperson

**HEALTH AND HUMAN SERVICES ADVISORY COMMITTEE**  
**January 6, 2010**

1  
2  
3  
4  
5  
6  
7

The minutes of the Health and Human Services Advisory Committee meeting held on Wednesday, January 6, 2010, at 6:00 p.m., at City Office Center, 575 S. Alameda, Room 101, Las Cruces, New Mexico will be forthcoming in the next ten (10) days.

1                   **HEALTH AND HUMAN SERVICES ADVISORY COMMITTEE**  
2   **January 6, 2010**

3  
4   Following are the summary minutes from the Health and Human Services  
5   Advisory Committee meeting held on Wednesday, January 6, 2010, at 6:00 p.m.,  
6   at City Office Center, 575 S. Alameda, Room 101, Las Cruces, New Mexico.

7  
8   **MEMBERS PRESENT:**     Mary Simmons, Chair  
9                                   Sue Patterson, Vice-Chair  
10                                  Kevin Kay  
11                                  William Corbett  
12                                  Earl Nissen  
13                                  David Telford

14  
15   **STAFF PRESENT:**        David Dollahon  
16                                  Jean Barnhouse-Garcia  
17                                  Diana Garcia-Parra (recording secretary)

18  
19   **I.     CALL TO ORDER**

20  
21   Meeting was called to order by Mary Simmons at 6:00 p.m.

22  
23   **II.    ROLL CALL**

24  
25   Jean Barnhouse-Garcia called the roll of the HHSAC members (above).

26  
27   **III.   CONFLICT OF INTEREST INQUIRY BY BOARD CHAIRPERSON IN**  
28   **ACCORDANCE WITH ESTABLISHED PROGRAM PROCEDURES.** At  
29   the opening of each Board Meeting, the Chairperson shall ask if any  
30   member of the Board or any member of the City staff has any known  
31   Conflict of Interest with any item on the Agenda.

32  
33   Committee members turned in their conflict of interest (COI) forms. David  
34   Dollahon advised that the COI forms are to be filled out once a year in January,  
35   thereafter each meeting, verbally.

36  
37   Ms. Simmons did ask if any committee member had a COI with the agenda at  
38   hand. None stated.

39  
40   **IV.    APPROVAL OF MINUTES – November 4, 2009**

41  
42   Earl Nissen moved to accept the minutes.

43  
44   Sue Patterson seconded.

45  
46   All in favor. None opposed. Motion carried.

1 **V. DISCUSSION OF CHANGES IN THE HEALTH-RELATED PUBLIC**  
2 **SERVICES APPLICATION PROCESS**  
3 **a. Review of latest draft of revised Health-Related Public**  
4 **Services Guide**

5  
6 The Committee discussed, in length, the minimum/maximum funding caps.

7  
8 **1) Kevin Kay** motioned for a minimum funding cap of \$10,000 and a maximum  
9 funding cap of \$30,000.

10  
11 David Telford seconded.

12  
13 All in favor. None opposed. Motion carried.

14  
15 The Committee discussed, in length, the priority list. The committee felt it would  
16 be beneficial to have a separate HHS meeting to review each applicant's priority  
17 and if changed, the applicant would need to be advised.

18  
19 Mr. Dollahon stated in that case, they would need a public hearing. However, by  
20 then they would know how many applicants are in each category and how much  
21 funding is being requested.

22  
23 Bill Corbett felt that priorities would introduce complexities that don't have  
24 anything to do with the application process and suggested they do away with it.

25  
26 Mr. Dollahon stated if the committee eliminates priority areas and allocates  
27 funding in advance, they will advise applicants, in advance, of such.

28  
29 Ms. Patterson felt they should parcel out the money first between the different  
30 categories in order to give more applicants a chance.

31  
32 Earl Nissen commented that the purpose of this committee is to send a message  
33 to the community that they have a health priority with the Health-related Public  
34 Service funds.

35  
36 Mr. Dollahon advised the committee it was well within their prerogative to refuse  
37 applications that don't fit into a category as the funds come from health care  
38 funds. The definition, as stated on page 10 of the guide, is as follows:

39  
40 "The City defines "Health Care Programs" that are eligible for Public  
41 Services funding as projects that "support the physical, mental,  
42 developmental, emotional or social continued well-being, safety, or  
43 improvement to the lives of sick, indigent, or low-income people."  
44 **Starting with Fiscal Year 2010, services that provide animal care,**  
45 **such as spaying and neutering of domestic pets, are not eligible for**  
46 **Health-Related Public Services funding."**

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2 The committee can modify and clarify the definition to include specific types of  
3 activities so as to do away with a portion of the priority list and only accept  
4 applications that will serve these areas and priorities.

5  
6 **2)** Ms. Patterson motioned to eliminate #5, #6 and #7 of the priority list. This  
7 would allow more money to fewer organizations.

8  
9 Mr. Nissen seconded.

10  
11 All in favor. None opposed. Motion carried.

12  
13 **3)** Mr. Nissen motioned to change #3 Homeless Prevention to Homeless  
14 Services.

15  
16 Mr. Corbett seconded.

17  
18 All in favor. None opposed. Motion carried.

19  
20 **4)** The Committee discussed, in length, the priority funding amounts. With input  
21 from the Committee, Mr. Dollahon made a chart on the dry erase board, as  
22 follows:

23  
24 Priority #1 - \$120,000  
25 Priority #2 - \$ 90,000  
26 Priority #3 - \$ 60,000  
27 Priority #4 - \$ 30,000  
28 **Total           \$300,000**

29  
30 Mr. Nissen moved to accept what was written on the dry board.

31  
32 Ms. Patterson seconded.

33  
34 Mr. Dollahon clarified the motion as: Priority #4 at \$30,000, Priority #3 at  
35 \$60,000, Priority #2 at \$90,000 and Priority #1 at \$120,000.

36  
37 All in favor. None opposed. Motion carried.

38  
39 **5)** Mr. Dollahon suggested two conditions to that motion; 1) start at Priority #4  
40 and work the way up the list; and 2) any unallocated balances move up to Priority  
41 #3, etc. Once all priority lists are done (#4 through #1), work in reverse and  
42 retain the right to reallocate across any category for any unfunded applications.  
43 That would include giving more money to other applications that were already  
44 funded.

45  
46 Mr. Corbett stated that he felt this would still cause issues and more work.

1

2 Mr. Dollahon advised that the committee can amend or clarify anything next year,  
3 but the only way to figure it out is to go through it first.

4

5 Ms. Simmons advised they would need an amendment to the motion and asked  
6 Mr. Nissen if he would be willing to accept an amendment.

7

8 Mr. Nissen stated yes.

9

10 Ms. Patterson motioned for an amendment as Mr. Dollahon stated.

11

12 Mr. Nissen seconded.

13

14 All in favor. None opposed. Motion carried.

15

16 The Committee discussed the two-year cycle.

17

18 Mr. Dollahon briefly stated that this is two-fold. 1) It would give some sense of  
19 security to the funded applications the second year. It would provide them the  
20 opportunity for continuity. It would be subject to their performance and the  
21 availability of funding. 2) A staffing operation issue that if we were to give them  
22 funding one year and guaranteed them funding a second year, subject to  
23 satisfactory performance and availability of funding, the Committee would not  
24 have to read applications over again, but just reallocate the money.

25

26 Ms. Patterson felt that giving a bigger amount of funding in a two-year cycle  
27 would not be what would have been voted on. There would be no new  
28 applications in case the Committee decides they don't want to give an applicant  
29 funding two-years in a row, automatically. Ms. Patterson felt a two-year cycle  
30 wouldn't be fair.

31

32 Mr. Nissen stated the pot of money isn't very big (\$300,000 perhaps) and felt  
33 they need to give a lot of the small organizations a shot at this amount of funding  
34 every year. He felt that if an applicant receives some of the money, it will keep  
35 them on their toes knowing they have to apply for the following year.

36

37 David Telford felt a two-year cycle would allow more planning and preparation for  
38 an applicant knowing they have funding secured.

39

40 6) Mr. Nissen moved to stay with annual applications.

41

42 Ms. Patterson seconded.

43

44 Ms. Simmons called for a voice vote.

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46 Earl Nissen stated yes.

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Kevin Kay stated yes.

Bill Corbett stated no.

David Telford stated no.

Sue Patterson stated yes.

Vote was 3-2 for a one-year cycle.

**b. Review of public comment from the Action Plan meetings of December 9 – 10, 2009**

David Dollahon stated that there was only one meeting because no one showed up at the other meeting. There were two representatives from Hospice, one from Big Brothers/Big Sisters, one representative from La Casa, and one representative from the Ability Center.

Ms. Barnhouse-Garcia summarized the public comment with three concerns:

- 1) Priority #1 would bear the most weight in the applications so the perspective grantees would be writing their grant to fit that priority.
- 2) Maximum cap of awards just being \$25,000. They suggested \$35,000 or more. They also felt there should be a minimum cap.
- 3) Two-year funding rotation with minimum award amount.

**c. HHSAC recommendation of final draft of revised Health-Related Public Services Guide to City Council**

Mr. Dollahon advised they needed to have a main motion on the formal recommendation of the whole guide. Staff will revise it, including the instructions as based on the action tonight and get it back to the Committee for review.

Mr. Nissen moved to accept the changes in the Guide with further review.

Ms. Patterson seconded.

All in favor. None opposed. Motion carried.

Mr. Dollahon advised Council meeting on February 2nd is subject to the Committee's review and approval, after staff revisions. At which time they would like to send Council a draft of the Guide so as to retain the right to take it to a worksession, delay, or bring it forward as a Resolution.

**4) OTHER DISCUSSION**

Mr. Barnhouse-Garcia advised that CDBG Public Service applications are due on January 22<sup>nd</sup>. Staff will get these applications to the Committee members on

1 February 3<sup>rd</sup>, if not sooner. The next HHSAC meeting is scheduled for 6:00 p.m.,  
2 February 24, 2010, at Council Chambers, for CDBG Public Services  
3 presentations.

4

5 **VII. ADJOURNMENT**

6

7 Earl Nissen moved to adjourn.

8

9 Kevin Kay seconded.

10

11 All in favor. None opposed. Motion carried.

12

13 Meeting adjourned at 8:16 p.m.

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Chairperson

**2009 Action Plan Amendment #2  
2010 Action Plan Public Hearing  
Health-Related Public Services Application Revisions and Public Input**

**December 9, 2009**

Following are the summary minutes of the 2009 Action Plan Amendment #2, 2010 Action Plan Initial Public Hearing, and Health-Related Public Services Application Revisions and Public Input held on December 9, 2009, at 5:30 p.m. at the Munson Senior Center, 975 S. Mesquite, Las Cruces, New Mexico.

Staff Present: David Dollahon (Community Development)  
Jean Barnhouse-Garcia (Community Development)  
Ray Sartin (Community Development)  
Jerry Nachison (Community Development)  
Vera Zamora (Community Development)  
Raymond Burchfield (Community Development)  
Diana Garcia-Parra (Community Development)

Public Present: Mary Simmons (HHSAC Board member)  
Tina Reeves (Mesilla Valley Hospice)  
Terra V. Winter (Mesilla Valley Hospice)  
Amy Bassford (La Casa)  
Rosie Talamantes (Ability Center)  
Stacie Christiano (Big Brothers / Big Sister)

David Dollahon gave a powerpoint presentation (attached) in which the following comments were made:

In reference to the **2009 Action Plan – Amendment #2**, Amy Bassford asked if the change included changes to Tenant Based Rental Assistance (TBRA).

Mr. Dollahon stated no, that would be an administrative action as it would just deal with HOME money.

Mary Simmons advised that in regards to the street project, the Health and Human Services (HHS) committee was concerned with the health and safety of the community around Jefferson Road because it's almost impossible for an ambulance to go down that street.

In reference to the **2010 Action Plan**, no comments or questions were made or asked.

Jean Barnhouse-Garcia gave the presentation from the powerpoint related to the **Health-Related Public Services Application Process**.

Under the two (2) year grant award cycle, Mr. Dollahon pointed out that the HHS committee did not recommend this cycle. The committee had concerns for the changing needs in the community within a two (2) year cycle in that if a new non-profit agency were to provide a needed service to the community, how would they cut a funded agency to help provide the new needed service.

Amy Bassford stated that she likes a lot of the changes mentioned, but was concerned about the priority areas list. She felt this list would make applicants make their project/program work under category #1 (Health / Mental Health Programs) as it would be given priority for funding. She suggested not giving priority to any one more than the other, but list programs to apply under specified priorities.

Mr. Dollahon stated that in that case, they would need to eliminate #7, other (specify), in the list. Mr. Dollahon asked applicants how they felt about the \$25,000 cap.

Ms. Bassford stated she understands the objective of limiting the amount of money (\$25,000), but would like the amount of money to be higher in order to be able to help more people. If the amount is too low, a program may not be able to be implemented to a wide number of people. She suggested looking at what was funded and the amount of money used for it, and then looking at the agency's performance to know if they were effective enough for that amount of money. Ms. Bassford suggested a minimum and maximum amount of money to be funded.

Mr. Dollahon asked if \$10,000 was to low for a minimum.

Ms. Bassford stated no.

Mr. Dollahon asked if \$50,000 was a good maximum.

Ms. Bassford and Ms. Terra Winter both stated yes.

Rosie Talamantes and Stacie Christiano suggested \$35,000 as a maximum.

Ms. Bassford also commented that she likes the idea of a 2 year funding cycle. She felt it would be easier for everyone, i.e., HHS committee, staff and the agencies.

Meeting ended at 6:41 p.m.

Approved:



David Dollahon

12/14/09

**2009 Action Plan Amendment #2  
2010 Action Plan Public Hearing  
Health-Related Public Services Application Revisions and Public Input**

**December 10, 2009**

Following are the summary minutes of the 2009 Action Plan Amendment #2, 2010 Action Plan Initial Public Hearing, and Health-Related Public Services Application Revisions and Public Input held on December 10, 2009, at 6:00 p.m. at the Henry Benavidez Center, 1045 McClure Rd., Las Cruces, New Mexico.

Staff Present:        David Dollahon (Community Development)  
                             Jean Barnhouse-Garcia (Community Development)  
                             Jan Lauterbach (Community Development)  
                             Maria Fahrenkrog (Community Development)  
                             Diana Garcia-Parra (Community Development)

No Public Present.

**Note:** Staff waited for 20 minutes to ensure attendance of members of the public.