

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

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

**Submitted by:**

**PLUMAS COUNTY PROBATION DEPARTMENT**

**Date Submitted:**

**MAY 12, 2021**

## Part B All County Distribution Application Checklist

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

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

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

X

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

## Part B All County Distribution Applicant Information Form


<b>A. APPLICANT &lt; Name&gt; County</b>		<b>B. TAX IDENTIFICATION NUMBER</b>	
NAME OF APPLICANT Plumas County Probation Department		TAX IDENTIFICATION #: 94-600528	
STREET ADDRESS 270 County Hospital Road, Suite 128	CITY Quincy	STATE CA	ZIP CODE 95971
MAILING ADDRESS (if different)	CITY	STATE	ZIP CODE
<b>C. PROJECT TITLE:</b>	Plumas County Youth Re-Entry Program		
<b>D. PROJECT SUMMARY (100-150 words):</b>			
Develop a Youth Re-Entry Program supported by community partners through a local CoC for justice-system involved youth and youth who may be diverted from entering the criminal justice system.			
<b>E. GRANT FUNDS REQUESTED: (See Appendix F: County Juvenile Population Index)</b>			
<b>\$ 47,086</b>			
<b>F. DEFERRED SPENDING: Is the application for a deferred spending award?</b>		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
<b>G. LEAD PUBLIC AGENCY:</b>	Plumas County Probation Department		
<b>H. PROJECT DIRECTOR:</b>			
NAME Keevin Allred	TITLE Chief Probation Officer	TELEPHONE NUMBER 530-283-6200	
STREET ADDRESS 270 County Hospital Road, Suite 128		FAX NUMBER 530-283-6165	
CITY Quincy	STATE CA	ZIP CODE 95971	EMAIL ADDRESS keevinallred@countyofplumas.com
<b>I. FINANCIAL OFFICER:</b>			
NAME Miguel Herrera	TITLE Department Fiscal Officer	TELEPHONE NUMBER 530-283-6529	
STREET ADDRESS 270 County Hospital Road, Suite 128		FAX NUMBER 530-283-6165	
CITY Quincy	STATE CA	ZIP CODE 95971	EMAIL ADDRESS miguelherrera@countyofplumas.com
PAYMENT MAILING ADDRESS (if different)	CITY	STATE	ZIP CODE
<b>J. DAY-TO-DAY PROGRAM CONTACT:</b>			
NAME Cathy Rahmeyer	TITLE PCIRC Director of Operations	TELEPHONE NUMBER 530-283-5515	
STREET ADDRESS 175 Main Street – P. O. Box 3005		FAX NUMBER 530-283-3539	
CITY Quincy	STATE CA	ZIP CODE 95971	EMAIL ADDRESS highsierragrants@yahoo.com

**K. DAY-TO-DAY FISCAL CONTACT:**

<b>NAME</b> Miguel Herrera	<b>TITLE</b> Department Fiscal Officer	<b>TELEPHONE NUMBER</b> 530-283-6529	
<b>STREET ADDRESS</b> 270 County Hospital Road, Suite 128		<b>FAX NUMBER</b> 530-283-6165	
<b>CITY</b> Quincy	<b>STATE</b> CA	<b>ZIP CODE</b> 95971	<b>EMAIL ADDRESS</b> miguelherrera@countyofplumas.com

**L. AUTHORIZED SIGNATURE**

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

<b>NAME OF AUTHORIZED OFFICER</b> Keevin Allred	<b>TITLE</b> Chief Probation Officer	<b>TELEPHONE NUMBER</b> 530-283-6200	<b>EMAIL ADDRESS</b> keevinallred@countyofplumas.com
<b>STREET ADDRESS</b> 270 County Hospital Road, Suite 128	<b>CITY</b> Quincy	<b>STATE</b> CA	<b>ZIP CODE</b> 95971
<b>EMAIL ADDRESS</b> keevinallred@countyofplumas.com			
<b>APPLICANT'S SIGNATURE</b> (Signed by the authorized signatory with a digital signature <u>OR</u> a wet signature in blue ink.)  X 			<b>DATE</b>  May 12, 2021

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

**CONFIDENTIALITY NOTICE**

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

**Section 1: Project Need**

- 1.1.** The Plumas County Probation Department is committed to supporting the intent of SB 823 and is in the process of developing a local continuum of care (CoC) for justice system-involved youth. The county does not operate a juvenile detention facility and contracts with other rural counties for confinement of youth. While Plumas County has enjoyed many years of formal and informal collaborative partnerships, the closure of DJJ will further the development of a local CoC focused on evidence-based and promising practices promoting positive youth development through a public health framework. Plumas County has a vision to design a multi-system approach to serve justice-system involved youth utilizing the following concepts:
- Develop a Youth Re-Entry Program supported by community partners through a local CoC for justice-system involved youth and youth who may be diverted from entering the criminal justice system.
  - Program eligibility will be triggered by entry to a Juvenile Hall System or through a diversion model for youth who are at risk of entering a juvenile hall system for an alleged 707(b) offense.
  - Utilize Ohana House Emergency & Transitional Shelter to address housing needs for youth as identified.
  - Engage re-entering youth between the ages of 16-24 into education, career readiness and job training to prepare for employment and housing stability through the Dragonfly Café Education & Training Center.
  - Engage youth of all ages into evidence-based program services (Power Source, Forward Thinking Journaling, Grief Recovery), individual and group mentoring, intensive case management and positive youth development activities.
  - Track all data regarding youth participation and successes.
  - Expand the Youth Re-Entry Program incrementally as the design evolves and funding allows.

The Plumas County Probation Department is requesting 60 days to submit a final draft of this project to allow time for the development of the CoC with community partners.

- 1.2.** There is no limit to the number of youths who may participate in the Dragonfly Café Education & Training Program. It is estimated that 2-3 youth may participate in the Ohana House Emergency & Transitional Shelter at any given time. All youth will engage in services through the Youth Re-Entry Program housed at the Dragonfly Café Education & Training Center.



**Section 2: Project Description**

**2.1.** The Plumas County Probation Department is working in collaboration with the community-based organization, Plumas Crisis Intervention & Resource Center (PCIRC), in the development of this capital facility project. The location will be established at 461 Main Street in Quincy, CA. PCIRC is purchasing the building and funding herein will support a portion of the needed renovations to prepare for the proposed use herein. This project will serve justice-involved youth over the long-term and will be sustained by PCIRC. This site solves the current barriers for transitioning justice-system involved youth as a place for support, employment, and long-term safety-net services.

**2.2.** There are no adequate sites available to serve youth currently. PCIRC operates Ohana House Emergency & Transitional Shelter, and this project compliments and expands those services. Ohana House has been in operation for over six years and is dedicated to the successful transition of all youth to achieve their goals. PCIRC is a non-profit organization in operation in Plumas County for 38 years, serving the homeless, transitioning adult offenders, families, seniors, youth and Veterans.

**Section 3: Budget**

- 3.1. Provide a complete and detailed budget information in each section of the Budget Attachment (link below) that includes:**
- **language supporting each expense.**
  - **expenses that are allowable within the definitions or parameters of the RFA.**
  - **expenses that are appropriate for the described program or project.**

Proposed budget attached.

<b>Applicant:</b>		<b>Plumas County Probation Department Final Budget Anticipated 7/15/21</b>	
<b>LINE ITEMS</b>	<b>SB 823 BUDGET</b>		
	<b>STATE REIMBURSED</b>	<b>CASH CONTRIBUTION</b>	<b>TOTAL</b>
1. Construction	\$ 41,314.00		\$ 41,314.00
2. Architectural			\$ -
3. Fixed Furnishings/Equipment			\$ -
4. Moveable Furnishings/Equipment			\$ -
5. Construction Management			\$ -
6. Transportation/Equipment			\$ -
7. Training Materials/Supplies			\$ -
8. Programing Materials/Supplies			\$ -
9. Other One-Time Personnel Costs (planning, development, and project management) (Not to Exceed 25% of total budget)	\$ 5,772.00		\$ 5,772.00
10. Other			\$ -
<b>Total Project Costs</b>	<b>\$ 47,086.00</b>	<b>\$ -</b>	<b>\$ 47,086.00</b>
<b>Percentage of Total</b>	<b>100%</b>	<b>0%</b>	<b>100%</b>

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

<b>LINE ITEMS</b>	<b>COMMENTS</b>
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1. Construction	Describe any construction costs associated with the project - To support the construction of the Dragonfly Café & Education, Career Readiness & Job Training Center to provide a youth component of services.
2. Architectural	Describe the county's current stage in the architectural process: b) Define the budgeted amount for architectural design:
3. Fixed Furnishings/Equipment	Describe the items to be purchased and installed for the project:
4. Moveable Furnishings/Equipment	Describe the items to be purchased and where they are to be placed for the project:
5. Construction Management	Describe which portions/phases of the construction management services the county intends to claim as a) State Reimbursed b) Cash Contribution
6. Transportation Equipment	Describe the equipment to be purchased and the expected use:
7. Training Materials/Supplies	Describe the training materials and supplies to be purchased:

8. Programing Materials/Supplies	Describe the programming materials and supplies to be purchased:
9. Other One-Time Personnel Costs (planning, development, and project management) (Not to Exceed 25% of total budget)	Describe any one-time personnel costs associated with the project - To support the planning, development, project management of site. And, to provide staff training in evidence-based youth programming such as Power Source (PS) & Forward Thinking Journaling.
10. Other	Describe any other cash contribution costs associated with the project:

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

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

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

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

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


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

I/We are not currently debarred by any federal, state, or local entity from applying for or receiving federal, state, or local grant funds.

I/We have not been convicted of any crime involving theft, fraud, or embezzlement of federal, state, or local grant funds within the last three years. We will notify the BSCC should such debarment or conviction occur during the term of the Grant contract.

I/We will hold subgrantees and subcontractors to these same requirements.

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

AUTHORIZED SIGNATURE			
(This document must be signed by the person who is authorized to sign the Grant Agreement.)			
NAME OF AUTHORIZED OFFICER Keevin Allred	TITLE Chief Probation Officer	TELEPHONE NUMBER 530-283-6200	
STREET ADDRESS 270 County Hospital Road, Ste 128	CITY Quincy	STATE CA	ZIP CODE 95971
EMAIL ADDRESS keevanallred@countyofplumas.com			
AUTHORIZED OFFICER SIGNATURE ((Blue Ink Only or E-signature)) 			DATE May 12, 2021
X			