

**AGENCY PROFILE, JUSTIFICATION FOR FUNDING REQUEST AND  
MANAGERIAL ABILITY**

(If necessary, use additional paper, insert sheets and number additional pages as appropriate. See Application Instructions, page 2, "General Instructions")

**1. Agency Profile**

*NOTE: In addressing questions, attach documentation as appropriate. Refer to Quantitative Scoring Criteria and Project Rating Form page 5, for specific areas to be scored and examples of documentation.*

1a. Briefly describe your agency's purpose and programs. Documentation supporting your description must be attached as an appendix (e.g., agency brochure).

Community Bridges is a California public benefit non-profit corporation, tax-exempt under IRS code 501(c)(3). Established in 1974, Community Bridges, (previously Food & Nutrition Services, Inc.), provides essential services to seniors, children, disabled and low-income residents of Santa Cruz County. This agency has grown to include a wide array of different programs that serve such crucial needs as childcare, nutritional counseling, food, accessible transportation and more.

These needs are served through the following programs:

- **Lift Line** - Demand responsive paratransportation
- **Child and Adult Care Food Program** - Nutrition education and support
- **Child Development Division** - Affordable childcare centers
- **La Manzana Community Resources** - Community resources
- **Live Oak Family Resource Center** - Community resources
- **Meals on Wheels (MOW)** - Meals delivered to homebound seniors and social dining centers
- **Watsonville Law Center** - Legal services to low-income residents
- **Women, Infants & Children (WIC)** - Nutritional support for low-income families

Lift Line, the program for which this application is requesting funding, is a major paratransportation program for Community Bridges. Lift Line is designated as the Consolidated Transportation Service Agency (CTSA) for Santa Cruz County. Community Bridges has operated paratransportation under this designation since 1982, integrating publicly and privately funded paratransportation services for Santa Cruz County community agencies, organizations and individuals of the community.

Lift Line operates a fleet of 34 vehicles that provide integrated paratransportation for elderly and disabled individuals under the following services:

**ParaCruz** - Santa Cruz Metropolitan Transit District's Americans with Disabilities Act mandated paratransit service.

**Senior Nutrition Meal Site Transportation** - MOW operated social dining centers

**Cabrillo Stroke Center Transportation** - A rehabilitation center for stroke victims

**Elderday Adult Day Health Care Center Transportation** - *Day health care for elderly and Alzheimer's participants*

**Transportation Development Act Funded Medical Transportation** - *Medical purpose trips*

**Lift Line Taxi Scrip Program** - *Reduced rate program to allow 24-hour accessible taxi service*

**MSSP Taxi Scrip** - *Scrip for County multipurpose senior services program participants*

**Outside Contract Services** - *Incidental paratransportation*

**Red Cross out of County Services** - *Coordination with Red Cross for medical out-of-county*

**Specialized Transportation Services** - *Provides non-emergency same day medical paratransportation*

These programs are described in more detail in Part III. - 9 3a. To every extent possible, Lift Line, as the CTSA, integrates these services to provide the most time and cost efficient paratransportation.

Community Bridges offers a diverse and wide variety of programs to the Santa Cruz County community that create a network of social services with an integrated referral system, providing disadvantaged residents with a complete community resource.

**The description of the following Lift Line services is provided in the following appendix:**

**#1 Community Bridges Brochure**, for additional information regarding Community Bridges programs

**#2 Lift Line Brochure**, for additional information regarding Lift Line services

**#3 ParaCruz Brochure**, for additional information regarding Lift Line

- 1b. Briefly describe the client group currently served by your agency (e.g., elderly, developmentally disabled, etc.). Documentation supporting your description must be attached as an appendix (e.g., agency statistics, demographics).

As the CTSA, Lift Line is the county's provider of paratransportation for elderly and disabled clients. Elderly is defined as being at least 60 years old, per the Federal Older Americans Act. Each program has eligibility requirements due to senior age or disability, with the exception of the Outside Contract program. The Outside Contract program does not have eligibility requirements by policy. However, the Outside Contract service is generally geared toward providing accessible services, while the county's taxi providers would handle non-accessible transportation needs of the public.

**Please see Appendix:**

**#4 Lift Line/CTSA Programs**, for a full listing of detailed Lift Line services.

**#5 CTSA Units of Service Report**, for units of service performed through each service

1c. Total number of clients currently served by your agency's transportation program (**do not duplicate**):

Number of elderly	125
Number of disabled	2,603
Number of wheelchair users	<u>1,600</u>
<b>Total number of clients</b>	<b>4,328</b>

1d. Racial and national origin breakdown of persons served by your program

% Hispanic	34%	% Asian-Pacific Americans	3%
% Black Americans	1%	% Asian-Indian Americans	N/A
% Native Americans	2%	% White	59%
		% Other	1%

Ethnicity breakdowns are projections of a sample group. Universal ethnicity statistics are not collected.

**2. Justification for Funding Request (Continued)**

2d. Describe the daily schedule for the proposed equipment. Include miles driven, hours of operation and which days the equipment will be in service.

Not Applicable

~~Questions 2e through 2g apply to requests for other equipment -- communication equipment, computer equipment (hardware and software) and any other miscellaneous equipment.~~

2e. If the request includes or is for **other equipment** -- communication equipment, computer equipment (hardware and software) and any other miscellaneous equipment -- describe the type of equipment you are interested in purchasing. For *computer equipment*, specifically identify the components and provide cost estimates for each item. If you are making a request for a new computer based on the "inadequacy" of your old equipment, please include a detailed description of the make of computer to be replaced, stating why it is unable to use specific software (include documentation) that would make your operations, scheduling and routing more efficient.

Mobile Data Computers (MDC's) are being requested in order to equip 15 vehicles. These will provide scheduled information to the driver without the need for paper manifests. They will provide an effective means of communication for both the dispatcher and driver. In fact, they are of substantial importance in terms of trip data and statistical record keeping.

**Equipment Description and Cost Projections**

**Communication Equipment**

1. 15 Mobile Data Computer Devices	\$ 33,375.00
2. Dash Mount	975.00
3. Installation Cable Kit	1,179.75
4. Antenna	2,010.00
5. License	2,450.00
6. Delivery Charges	<u>202.00</u>
<b>Equipment Request Grant Total</b>	<b>\$ 40,191.75</b>

**Please see appendix:  
#6 Mentor Engineering Quote**