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Introduced by the Council President pursuant to Section 118.804, Ordinance Code:

ORDINANCE 2018-221

AN ORDINANCE CONCERNING CHAPTER 118 (CITY GRANTS), SECTION 118.804 (PRIORITY POPULATIONS OR NEEDS), ORDINANCE CODE, ESTABLISHING THE 2018-2019 PRIORITY POPULATIONS FOR PUBLIC SERVICE GRANT APPROPRIATIONS; PROVIDING AN EFFECTIVE DATE.

WHEREAS, Section 118.804 (Priority Populations or Needs), Ordinance Code, provides for the City Council to establish "Priority Populations", and said section 118.804 states:

"Section 118.804. Priority Populations or Needs.

(a) Annual Recommendations. On or before March 1st of each year, the PSG Council shall assess the needs of the community and recommend to the City Council the Priority Populations or Priority Needs for the upcoming fiscal year and provide recommended changes, if any, to the assignment of points to the evaluation criterion Section 118.807(c). By way of example only, a Priority Population may include elderly, low-income residents or individuals with particular public safety, medical or social needs, or may identify a particular need such as housing for homeless persons. Such Priority Population recommendations shall be sufficiently narrow and specific to address a particular gap in service and shall not be so broad that every applicant is eligible. Subcategories of services within an identified Priority Population are

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discouraged. If the Population is a Priority, the services provided to the Population should be evaluated through the application. If only a specific service is required to meet an identified need, such need should be so listed and prioritized in the recommendation to City Council. The PSG Council's Priority Populations or Priority Needs recommendation shall include:

- (i) the reasons for selecting the Priority Populations or Priority Needs;
- (ii) the recommended percentage of funds appropriated by the City Council to be allocated to each Priority Population or Priority Need; and
- (iii) whether the PSG Council shall award funding to requesting agencies under this Part via a Request for Proposal pursuant to Chapter 126, Ordinance Code or through the grant application process outlined in this Part; and
- (iv) recommended changes, if any, to the assignment of points to the evaluation criterion in Section 118.807(c).

The PSG Council's reasons for selecting Priority Populations Needs may include, but not be limited recommendations, studies and reports from JCCI, the Non-Profit Jessie Ball Dupont, Community Foundation, United Way, Disabled Services Council, the Health Planning Council of Northeast Florida and other organizations regarding the Priority Populations or Needs. Organizations who provide recommendations regarding the Priority Populations or Priority Needs shall not be eligible to apply for Public Service Grants appropriated in the fiscal year in which the recommendations are given.

(b) Annual Establishment. The City Council shall review

the Priority Populations or Priority Needs recommended by the PSG Council and establish the Priority Populations or Priority Needs on or before May 1st of each year. The Public Service Grants recipients awarded under this Part shall provide services to the Priority Populations or Priority Needs. Except for the annual establishment, Priority Populations or Needs may only be revised or amended by a two-thirds vote of the City Council."; and

WHEREAS, the recommendations of the Public Service Grant Council are attached hereto as Exhibit 1; and

WHEREAS, the City Council through this ordinance is hereby establishing the Priority Populations for the 2018-2019 Fiscal Year; now therefore

BE IT ORDAINED by the Council of the City of Jacksonville:

Section 1. Priority Populations Established. Pursuant to Section 118.804, (Priority Populations or Needs), Ordinance Code, the following Priority Populations are hereby established for the 2018-2019 Fiscal Year:

2018-2019 Priority Populations

- 1. Low-income persons and families. The percentage of available funding allocated to this priority population shall be 40%.
- 2. Homeless persons and families. The percentage of available funding allocated to this priority population shall be 35%.
- 3. Adults with physical, mental and behavioral disabilities.

 The percentage of available funding allocated to this priority population shall be 20%.
- 4. Low-income, Elderly and Homebound. The percentage of available funding allocated to this priority population shall be 5%.

Detailed definitions of each of the Priority Populations are

set forth in Exhibit 2. A copy of the letter from the Public Service Grant Council Chair regarding the priority populations is attached hereto as Exhibit 3.

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/s/ Margaret M. Sidman 21

Form Approved:

Section 2.

Public

Service

Populations. Public Service Grants made by City Council shall be

used to exclusively serve Priority Populations. Where a Priority

Population contains more funding than applied for then the excess

funding for that population may be applied to a Priority Population

that contains less funding than applied for. Where more than one

Priority Population has fewer funds than applied for, then the

excess funding shall be divided among the underfunded populations

on a percentage basis where the total amount underfunded in all

effective upon signature by the Mayor or upon becoming effective

is

underfunded in any one population is the numerator.

Section 3. Effective Date.

Grants

the denominator

to

Serve

and

This Ordinance shall become

Priority

amount

22 Office of General Counsel

underfunded populations

without the Mayor's signature.

Legislation Prepared By: Margaret M. Sidman

GC-#1196668-v1-2018-2019_Priority_Populations.doc



Priority Populations definitions

Definitions for a Homeless Priority Population

Source: Abbreviated from the U.S. Federal Government-United States Code 11302-Title 42-The Public Health and Welfare effective January 7, 2011.

The term "homeless" or "homeless individual or homeless person" includes-

- 1. an individual who lacks a fixed, regular, and adequate nighttime residence; and
- 2. an individual who has a primary nighttime residence that is -
 - A. a supervised publicly or privately operated shelter designed to provide temporary living accommodations (including welfare hotels, congregate shelters, and transitional housing for the mentally ill);
 - B. an institution that provides a temporary residence for individuals intended to be institutionalized; or
 - C. a public or private place not designed for, or ordinarily used as, a regular sleeping accommodation for human beings.
 - D. the term "homeless" or "homeless individual" does not include any individual imprisoned or otherwise detained pursuant to an Act of the Congress or a State law.
- 3. An individual or family living in a supervised publicly or privately operated shelter designated to provide temporary living arrangements (including hotels and motels paid for by Federal, State, or local government programs for low-income individuals or by charitable organizations, congregate shelters, and transitional housing)
- 4. An individual who resided in a shelter or place not meant for human habitation and who is exiting an institution where he or she temporarily resided;
- 5. An individual or family who-
 - A. Will immediately lose their housing, including housing they own, rent, or live in without paying rent, are sharing with others, and rooms in hotels or motels not paid for by Federal, State, or local government programs for low-income individuals or by charitable organizations.
- 6. Unaccompanied youth and homeless families with children and youth defined as homeless under other Federal statutes.
- 7. Domestic Violence and other dangerous or life-threatening conditions or life-threatening conditions-individuals or a family who is fleeing, or is attempting to flee, domestic violence, dating violence, sexual assault, stalking, or other dangerous or life-threatening conditions in the individual's or family's current housing situation, including where the health and safety of children are jeopardized, and who have no other residence and lack the resources or support networks to obtain other permanent housing shall be considered homeless.





HUD Definition of "Homeless Persons and Families" Priority Population

The new definition includes four broad categories of homelessness:

- People who are living in a place not meant for human habitation, in emergency shelter, in transitional housing, or are exiting an institution where they temporarily resided. The only significant change from existing practice is that people will be considered homeless if they are exiting an institution where they resided for up to 90 days (it was previously 30 days), and were homeless immediately prior to entering that institution.
- People who are losing their primary nighttime residence, which may include a motel or hotel or a doubled up situation, within 14 days and lack resources or support networks to remain in housing. HUD had previously allowed people who were being displaced within 7 days to be considered homeless. The proposed regulation also describes specific documentation requirements for this category.
- Families with children or unaccompanied youth who are unstably housed and likely to continue in that state. This is a new category of homelessness, and it applies to families with children or unaccompanied youth who have not had a lease or ownership interest in a housing unit in the last 91 or more days, have had three or more moves in the last 90 days, and who are likely to continue to be unstably housed because of disability or multiple barriers to employment.
- People who are fleeing or attempting to flee domestic violence, have no other residence, and lack the resources or support networks to obtain other permanent housing. This category is similar to the current practice regarding people who are fleeing domestic violence.

Definitions for a "Low-Income Persons and Families" Priority Population
Source: Abbreviated from the U.S. Federal Government Health and Human Services and HUD-United
States Code

- Low income for <u>Uniform Act</u> purposes is income which does not exceed 80 percent of the median family income for the applicable area as determined by the U.S. Department of Housing and Urban Development.
- Low income has often been defined in terms of the <u>US Department of Health and Human Services' poverty line</u>. Common definitions include 125%, 150% and 200% of the poverty line for a family of four. Another common definition for low income is half the median family income for a family of four. The working class is commonly seen as the standard low-income earners in the U.S. economy.



LOW AND MODERATE INCOME (REVISED SECTION 8 INCOME LIMITS) EFFECTIVE March 2017

MEDIAN FAMILY INCOME - (MFI) \$64,400

	EXTREMELY LOW	VERY LOW	MODERATE (80% OF MEDIAN)
FAMILY SIZE	(30% OF MEDIAN)	(50% OF MEDIAN)	
1	\$13,550	\$22,550	\$36,050
2	\$16,240	\$25,800	\$41,200
3	\$20,420	\$29,000	\$46,350
4	\$24,600	\$32,200	\$51,500
5	\$28,780	\$34,800	\$55,650
6	\$32,960	\$37,400	\$59,750
7	\$37,140	\$39,950	\$63,900
8	\$41,320	\$42,550	\$68,000



Definition for an "Adult with Physical, Mental and Behavioral/Physical Disabilities" Priority Population Source: Abbreviated from the Americans with Disability Act (2008) Title 42 Chapter 126

As used in this chapter:

- (1) Disability-The term "disability" means, with respect to an individual
 - (A) a physical or mental impairment that substantially limits one or more major life activities of such individual;
 - (B) a record of such an impairment; or
 - (C) being regarded as having such an impairment (as described in paragraph (3)).

(2) Major Life Activities

- (A) In general for purposes of paragraph (1), major life activities include, but are not limited to, caring for oneself, performing manual tasks, seeing, hearing, eating, sleeping, walking, standing, lifting, bending, speaking, breathing, learning, reading, concentrating, thinking, communicating, and working.
- (B) Major bodily functions for purposes of paragraph (1), a major life activity also includes the operation of a major bodily function, including but not limited to, functions of the immune system, normal cell growth, digestive, bowel, bladder, neurological, brain, respiratory, circulatory, endocrine, and reproductive functions.
- (3) Regarded as having such an impairment for purposes of paragraph (1)(C):
 - (A) An individual meets the requirement of "being regarded as having such an impairment" if the individual establishes that he or she has been subjected to an action prohibited under this chapter because of an actual or perceived physical or mental impairment whether or not the impairment limits or is perceived to limit a major life activity.
 - (B) Paragraph (1)(C) shall not apply to impairments that are transitory and minor. A transitory impairment is an impairment with an actual or expected duration of 6 months or less.

Low-Income Elderly Homebound shall be as follows:

Elderly - 60 years or older-Older American Act rev2006

Homebound – Individuals who are not able to leave the home without assistance.

Low-income – (Source: U.S. Federal Government-United State Code)-see above

• Low Income for Uniform Act purposes is Income which does not exceed 80 percent of the median family Income for the applicable area as determined by the U.S. Department of Housing and Urban Development.

Public Service Grant Council



February 28, 2018

Public Service Grant Council

Roshanda Jackson Chair

Lara Diettrich Vice-Chair

Dr. Stephen Baker Member

Bob Baldwin Member

Darren Gardner Member

Tameiko Grant Member

Sherry Jackson Member

Jackie Perry Member

Beth Mixson Member

Dr. Marcie Turner Member

Chris Warren Member The Honorable Anna Brosche President, Jacksonville City Council 117 West Duval Street, Suite 420 Jacksonville, FL 32202

RE: FY 2018-2019 Public Service Grant Council's Priority Population Recommendations

Council President Brosche:

On behalf of the Public Service Grant Council I would like to present the following annual priority populations' update.

After meeting, and receiving feedback from the public and many long-standing nonprofit organizations, The Public Service Grant Council unanimously voted to maintain the current Priority Population Legislation 2017-233 (Low-Income Persons & Families (40%), Homeless Persons & Families (35%), Adults with Physical, Mental, & Behavioral Disabilities (20%), Low-Income Homebound Seniors (5%)). Additionally, The Public Service Grant Council unanimously voted to maintain the current application process along with its point assignment process.

On behalf of The Public Service Grant Council, I respectfully request your sponsorship of the FY 2018-2019 Priority Populations.

In accordance to Chapter 118, City Council has to establish the FY 2018-2019 priority populations no later than May 1, 2018. Should you need me for anything, please do not hesitate to call me anytime at (904) 200-1403.

Respectfully Submitted,

Roshanda Jackson, Chair Public Service Grant Council

Cc: Sandra Stockwell, Office of General Counsel

Peggy Sidman, Office of General Counsel

Enclosures: Draft FY 2018-2019 Priority Populations Ordinance

CITY OF JACKSONVILLE

PUBLIC SERVICE GRANT (PSG) COUNCIL MEETING MINUTES all Building, 214 N. Hogan, 8TH Floor, Room 82

Ed Ball Building, 214 N. Hogan, 8TH Floor, Room 825 February 14, 2018– 2:00 PM PSG Chair: Roshanda Jackson

Vice-Chair: Lara Diettrich

	Committee Me	eting Att	endance	
X	X Roshanda Jackson-Chair		Tameka Holly	
X	Lara Diettrich-Vice Chair	X	Sherry Jackson	
	Dr. Stephen Baker	Х	Jackie Perry	
X	Bob Baldwin-via phone	X	Beth Mixson	
X	Chris Warren	Х	Tameiko Grant	
X	Dr. Marcie Turner			
Х	Darren Gardner			

Quorum Present: Yes

Staff: John Snyder, & Damian Cook, Grants & Compliance

Sandra Stockwell, OGC

Katrin MacDonald, ECA Joyce Morgan, City Council Member

- Welcome & Introduction of PSG Council Members Ms. Jackson
 Ms. Roshanda Jackson called the meeting to order at 2:04 PM. The meeting began with introduction from members and staff.
- II. Approval of PSG Council Meeting Minutes Ms. Jackson
 Ms. Roshanda Jackson asked for approval of the minutes from the January
 10th meeting. Mr. Bob Baldwin motioned to approve the minutes. Dr. Turner
 seconded the motion and the motion passed unanimously.
- III. Discussion from Joint Sub-Committee Meeting Dr. Turner

 Ms. Roshanda Jackson then asked Dr. Turner to go over the Joint Sub-Committee meeting held on January 31st. Dr. Turner discussed the meeting and thanked Ms. Lockhart with calling the Non-Profits together to gather their insight into Priority Populations and Needs in the community. Dr. Turner indicated that after hearing from the non-profit sector the committee felt it best to keep the Priority Populations the same. Mr. Baldwin reiterated the point adding the sector was more concerned about other areas including funding levels and felt that was a greater issue.

Mr. Cook then read for the record the recommendations.

- I. Priority Populations & Percentages
 - a. Homeless Persons and Families-35%
 - b. Adults with Physical, Mental, or Behavioral Disabilities-20%

CITY OF JACKSONVILLE

Dr. Turner motioned for approval of Priority Population Sub-Committee recommendations regarding allocation of percentages. Ms. Tamelko Grant seconded the motion.

Percentages

- a. Homeless Persons and Families-35%
- b. Adults with Physical, Mental, or Behavioral Disabilities-20%
- c. Low Income Persons and Families-40%
- d. Low Income Elderly Homebound-5%

Ms. Roshanda Jackson opened the floor for public comment on this issue (no comments). The motioned passed 11-0.

Dr. Turner motioned for approval of Priority Population Sub-Committee recommendations regarding the evaluation criteria. Mr. Baldwin seconded the motion.

Evaluation Criteria

- a. Quality of the program (maximum 20 points);
- b. Strength of staff and board (maximum five points):
- c. Requesting agency's ability to administratively points for each criterion: manage the program and budget (maximum ten points);
- d. Need for the program within the Priority Population/Need (maximum 15 points);
- e. Impact of the program (maximum 15 points) on the Priority Population/Need;
- f. Accuracy and appropriateness of the program budget (maximum 15 points);
- g. Ability of the requesting agency to perform the program (maximum 15 points); and
- h. Ability of the proposed measures to evaluate the effectiveness of the program (maximum 5 points).

Ms. Roshanda Jackson opened the floor for public comment on this issue (no comments). The motioned passed 11-0.

There was discussion about having the rules committee evaluate this requirement instead of the Priority Population Sub-Committee. Several sub-committee members felt this was more of a Rules Sub-Committee function than a Priority Population Sub-Committee function. Mr. Baldwin motioned to charge the Rules Sub-Committee each year with making this recommendation. Dr. Turner seconded the motion. Ms. Roshanda Jackson stated that she is opposed to this motion because no other committee has a "formal charge". The motioned passed 10-1 (Ms. Jackson).

- c. Low Income Persons and Families-40%
- d. Low Income Elderly Homebound-5%
- II. Evaluation Criteria
 - a. Quality of the program (maximum 20 points);
 - b. Strength of staff and board (maximum five points);
 - c. Requesting agency's ability to administratively points for each criterion: manage the program and budget (maximum ten points);
 - d. Need for the program within the Priority Population/Need (maximum 15 points);
 - e. Impact of the program (maximum 15 points) on the Priority Population/Need;
 - f. Accuracy and appropriateness of the program budget (maximum 15 points);
 - g. Ability of the requesting agency to perform the program (maximum 15 points); and
 - h. Ability of the proposed measures to evaluate the effectiveness of the program (maximum 5 points).

Mr. Cook then indicated that the sub-committee recommends that the full PSG Council make a determination regarding using the current application process or a RFP.

- IV. Discuss Section 188.804 required Recommendations to City Council
 - 1. Populations-Priority Population Sub-Committee recommended same as FY 18
 - 2. Allocation %-Priority Population Sub-Committee recommended same as FY 18
 - 3. Evaluation Criteria-Priority Population Sub-Committee recommended same as FY 18
 - 4. Application or Request For Proposal-Priority Population Sub-Committee recommended to pass to full PSG Council

Following staff recommendations, Ms. Roshanda Jackson choose to take up each item individually, have public comment separately, and then vote.

Dr. Turner motioned for approval of Priority Population Sub-Committee recommendations regarding Priority Populations. Mr. Gardner seconded the motion.

Priority Populations

- a. Homeless Persons and Families
- b. Adults with Physical, Mental, or Behavioral Disabilities
- c. Low Income Persons and Families
- d. Low Income Elderly Homebound

Mr. Warren voiced his concern regarding not combining Low Income Elderly Homebound in with Low Income Persons and Families. Ms. Roshanda Jackson opened the floor for public comment on this issue (no comments). The motioned passed 10-1 (Mr. Warren).

Ms. Roshanda Jackson opened the floor for discussion regarding the use of an application or RFP. Seeing no issues with the application process, Ms. Roshanda Jackson called for a motion. Dr. Turner motioned for using the application process. Ms. Diettrich seconded the motion. The motion passed 10-0 (Mr. Baldwin left meeting).

- V. Public Comments- See above
- VI. Vote on Section 188.804 required Recommendations to City Council Mr. Cook See above

VII. Budget Sub-Committee - Mr. Cook

Mr. Cook discussed the need for this committee to add additional members and to have a recommendation by the March 14th PSG Council meeting. Ms. Tameka Holly stated that she could no longer be chair and had to resign from the PSG Council.

There was discussion regarding the number of members in various sub-committees and the committee roster was revised (see attached).

Mr. Gardner was elected as new chair and indicated that he could meet the following Wednesday or the Wednesday after that. Ms. Roshanda Jackson asked Mr. Snyder to send out calendar invites to members.

VIII. Rules Sub-Committee - Lara Diettrich

Ms. Diettrich indicated that Rules Sub-Committee has nothing to report.

IX. Open Discussion.

There was discussion regarding meetings with agencies and staff indicated that members should let staff know when they are meeting with agencies to avoid Sunshine Law violations. Staff also indicated that if the meeting was a noticed agency public event or fundraiser then there is no need to notify staff. Ms. Stockwell supported this adding that at these events members should still try to avoid the appearance of activity that could be misinterpreted.

- X. Public Comments-No comments from Public
- XI. Next Meeting Date March 14, 2018
- XII. Adjourn at 3:15 PM.

 Recorder: John Snyder

 Completed 02/16/2018

 An audio recording is available upon request



PSG Council Committee Assignments

Rules Sub-Committee				
Ms. Lara Diettrich-Chair				
Mr. Darren Gardner				
Ms. Beth Mixson				
Ms. Sherry Jackson				
Dr. Stephen Baker				

Priority Population Sub-Committee				
Dr. Marcie Turner-Chair				
Mr. Bob Baldwin				
Dr. Stephen Baker				
Ms. Jackie Perry				
Ms. Tameiko Grant				
Mr. Chris Warren				

Budget Sub-Committee				
Mr. Darren Gardner-Chair				
Dr. Marcie Turner				
Ms. Jackie Perry				
Ms. Tameiko Grant				
Ms. Beth Mixson				