

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

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

**Submitted by:**

Placer 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>	<input checked="" type="checkbox"/>
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>	<input checked="" type="checkbox"/>
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>	<input checked="" type="checkbox"/>
4	Application Narrative <ul style="list-style-type: none"> <li>• 2 pages or fewer</li> </ul>	<input checked="" type="checkbox"/>
5	Budget Attachment	<input checked="" type="checkbox"/>
6	Certification of Compliance with BSCC Policies on Debarment, Fraud, Theft and Embezzlement (Appendix D) <ul style="list-style-type: none"> <li>• Signed by the authorized signatory with a digital signature <b>OR</b> a wet signature in blue ink.</li> </ul>	<input checked="" type="checkbox"/>
	<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>	<input type="checkbox"/>

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

X   
Marshall Hopper (May 12, 2021 12:38 PDT)  
 Applicant Authorized Signature (see Applicant Information Form, Part L, next page)

## Part B All County Distribution Applicant Information Form

A. APPLICANT < Name> County		B. TAX IDENTIFICATION NUMBER			
NAME OF APPLICANT Placer County Probation Department		TAX IDENTIFICATION #: 94-6000527			
STREET ADDRESS 2929 Richardson Drive, Suite B		CITY Auburn	STATE CA	ZIP CODE 95603	
MAILING ADDRESS (if different) Same as above		CITY	STATE	ZIP CODE	
<b>C. PROJECT TITLE:</b>		SB823 Secure Youth Treatment Program			
<b>D. PROJECT SUMMARY (100-150 words):</b>					
<p>The Secure Youth Treatment Program is designed to provide local youth ages 14-25 community resources and services to ensure they transition into our community successfully. Youth will have a multidisciplinary team consisting of mental and behavioral health, educators, probation officers, medical and other treatment providers to develop an Individual Rehabilitation Plan. The team will focus on family reunification, reentry services, substance use, CSEC concerns, employment, mental health, sex offender treatment, career and higher education, cognitive behavior programming, mentorships, healthy relationships, poetry and writing, and culturally response programming. The youth will participate in the program for at least 30 days and have reviews with the court to ensure they are provided services inside the facility as well as when they transition back into the community. Once the youth is approved by the court, they will transition with these support services in place and a plan back into our community.</p>					
<b>E. GRANT FUNDS REQUESTED: (See Appendix F: County Juvenile Population Index)</b>					
\$ 82,400					
<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>		Placer County Probation Department			
<b>H. PROJECT DIRECTOR:</b>					
NAME Joseph Netemeyer		TITLE Assistant Chief Probation Officer		TELEPHONE NUMBER 530-889-7916	
STREET ADDRESS 2929 Richardson Drive, Suite B		FAX NUMBER 530-889-7993			
CITY Auburn	STATE CA	ZIP CODE 95603	EMAIL ADDRESS jnetemey@placer.ca.gov		
<b>I. FINANCIAL OFFICER:</b>					
NAME Chris Artim		TITLE Administrative and Fiscal Operations Manager		TELEPHONE NUMBER 530-889-7912	
STREET ADDRESS 2929 Richardson Drive, Suite B		FAX NUMBER 530-889-7993			
CITY Auburn	STATE CA	ZIP CODE 95603	EMAIL ADDRESS <a href="mailto:cartim@placer.ca.gov">cartim@placer.ca.gov</a>		
PAYMENT MAILING ADDRESS (if different) Same as above		CITY	STATE	ZIP CODE	
<b>J. DAY-TO-DAY PROGRAM CONTACT:</b>					
NAME		TITLE		TELEPHONE NUMBER	


Melanie Esque	Program Manager	530-886-4856	
STREET ADDRESS 2929 Richardson Drive, Suite B		FAX NUMBER 530-889-7993	
CITY Auburn	STATE CA	ZIP CODE 95603	EMAIL ADDRESS <a href="mailto:mesque@placer.ca.gov">mesque@placer.ca.gov</a>

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

NAME Laura White	TITLE Account Technician	TELEPHONE NUMBER 530-889-7918	
STREET ADDRESS 2929 Richardson Drive, Suite B		FAX NUMBER 530-889-7993	
CITY Auburn	STATE CA	ZIP CODE 95603	EMAIL ADDRESS <a href="mailto:Lwhite@placer.ca.gov">Lwhite@placer.ca.gov</a>

**L. AUTHORIZED SIGNATURE**

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

NAME OF AUTHORIZED OFFICER Marshall Hopper	TITLE Chief Probation Officer	TELEPHONE NUMBER 530-889-7915	EMAIL ADDRESS <a href="mailto:mhopper@placer.ca.gov">mhopper@placer.ca.gov</a>
STREET ADDRESS 2929 Richardson Drive, Suite B	CITY Auburn	STATE CA	ZIP CODE 95603
EMAIL ADDRESS			
APPLICANT'S SIGNATURE (Signed by the authorized signatory with a digital signature <u>OR</u> a wet signature in blue ink.)  X  <small>Marshall Hopper (May 12, 2021 12:38 PDT)</small>			DATE  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 (YPPG) 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.)

## **Placer County Probation Section 1: Project Need**

### **Project Need 1.1**

Placer County Probation has a need to service our secure youth as discussed in SB823 due to the following characteristics of that population. Since 2018, our department has served 16 youth (1 female/15 males) eligible for DJJ realignment with an average disposition age of 17. Two of these youth were committed to DJJ and 14 youth were served locally after disposition. All 16 youth were adjudicated on at least one Welfare and Institutions Code Section 707(b) felony offense, including 3 youth for robbery, 1 youth for murder, 3 youth for assault with a firearm, 3 youth for assault with a deadly weapon, 1 youth for assault with great bodily injury, 1 youth for force with possible GBI, 1 youth for rape, 2 youth for witness intimidation, and 1 youth for lewd act with a minor by force or fear. Of those youth, 4 had previously sustained charges involving vandalism, petty theft, and vehicle theft and 7 youth had prior law enforcement contact, but no sustained charges prior to the eligible 707b W&I offenses.

The Placer County Juvenile Detention Facility (JDF) will provide a Secure Youth Treatment Program (SYTP) for these youth previously eligible for DJJ. This program will be the highest level of secure care we will offer in our county. The program will be structured to service youth between ages 14-25 and be gender appropriate with culturally relevant programming and a focus on trauma informed care approaches. These youth who have been adjudicated for a 707(b) offense and have been found unsuitable for a less restrictive program by the Court will participate in this program.

SYTP is designed to provide youth local community resources and tools to ensure they can remain closer to their families and communities while allowing for a smooth transition back into their homes and community successfully. Youth will work with a multidisciplinary team of mental and behavioral health, educators, probation officers, medical and other treatment providers to develop an Individual Rehabilitation Plan to ensure they are provided services inside the facility as well as when they transition out of the facility. The focus of the plan will ensure the youth receive age-appropriate treatment recommended by their multidisciplinary team of local continuum of care providers. The team will focus on family reunification, reentry services, substance use, CSEC concerns, employment, mental health, sex offender treatment, career and higher education, cognitive behavior programming, mentorships, healthy relationships, poetry and writing, and culturally response programming.

The use of evidence-based programs and promising practices will be used to improve outcomes of youth and public safety. These programs include mental health treatment, sex offender treatment, behavioral/ trauma service, healthy adolescent, family engagement, and re-entry back into our community. These programs will assist in reducing racial and ethnic disparities. The service providers will be utilizing community-based responses and interventions based on the needs and goals of the youth to reduce the time of confinement. These programs will reduce the need to transfer youth into the adult criminal system.

Once a youth has completed the SYTP there are several options the Court can chose as a least restrictive option: youth can be placed in a step-down program within the JDF, be released and continue with field supervision and/or be terminated from probation.

### **Project Need 1.2**

The program will be able to service up to 15 youth at any given time. The amount of time each youth will be in the program will be based on the baseline term ordered by the Court. The proposed length of stay will be determined by the court and the multidisciplinary team based on the rehabilitation goals and needs of the youth. Each youth will have a review hearing every six months to evaluate their progress in relation to their Individual Rehabilitation Plan and transition date ordered by the court.

## **Section 2: Project Description**

### **Project Description 2.1**

We will utilize our JDF to house our secure track youth in SYTP. Our facility will house the youth in one of our pre-existing housing units with modifications while also creating a career center and higher education in another one of our units to allow for future growth and development for our secure youth.

We will need to modify a housing unit to include a temporary wall so when needed we can separate the secure youth based on their offense severity and treatment needs. This will allow for us to ensure we have the safety and protection of all youth based on their different ages, gender and special needs. Modifications needed for this unit will include adding a telephone line, internet, moving a ventilation duct and fire sprinkler, carpet, paint, adding a workstation and supplies to retro fit the unit for Title 15 programming and compliance.

We will also turn one of our vacant units into a career and higher learning education center. It currently has a library, and we will be adding 4 computer terminals, tables, chairs, and furniture to enhance this space. We will need to add a permanent internet connection and hard wiring to this unit to allow for the additional technology. We will also paint and add carpet for a more unique and updated feel to this space.

### **Project Description 2.2**

We will need to make these modifications to ensure Title 15 compliance of safety and security for our youth and staff. In our modified unit, the secure youth will need access to a phone, staff will need a computer to access a workstation and the unit will need to be up to code. In our career center, youth will need access to additional technology to allow for their pursuit in a career and higher learning. By making these adjustments in the facility this will allow for a safer environment, ability to use behavior modifications as needed in a safe location, create a higher learning environment with amenities necessary to have outside providers and virtual webinars, and a space to allow for youth to participate in college courses.

<b>Applicant:</b>	<b>Placer County final anticipated 10/15/2021</b>		
<b>LINE ITEMS</b>	<b>SB 823 BUDGET</b>		
	<b>STATE REIMBURSED</b>	<b>CASH CONTRIBUTION</b>	<b>TOTAL</b>
1. Construction	\$ 45,000.00		\$ 45,000.00
2. Architectural	\$ 7,400.00		\$ 7,400.00
3. Fixed Furnishings/Equipment	\$ 10,000.00		\$ 10,000.00
4. Moveable Furnishings/Equipment	\$ 15,000.00		\$ 15,000.00
5. Construction Management	\$ -		\$ -
6. Transportation/Equipment			\$ -
7. Training Materials/Supplies	\$ 5,000.00		\$ 5,000.00
8. Programing Materials/Supplies	\$ -		\$ -
9. Other One-Time Personnel Costs (planning, development, and project management) (Not to Exceed 25% of total budget)			\$ -
10. Other			\$ -
<b>Total Project Costs</b>	<b>\$ 82,400.00</b>	<b>\$ -</b>	<b>\$ 82,400.00</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: Construction costs include retrofitting a partition into our detention facility max unit that can be extended when/as needed for sight and sound separation, as well as painting the program wing to be conducive to the therapeutic intent. This will provide a partition wall to divide an existing unit where no partition/wall exists today. This is a placeholder pending official
2. Architectural	Describe the county's current stage in the architectural process: b) County Facility Services are working to engage County staff in preliminary design work to base an official estimate for the above described construction work. Define the budgeted amount for architectural design: This is a placeholder pending official estimates to facilitate deferred award.
3. Fixed Furnishings/Equipment	Describe the items to be purchased and installed for the project: This will include mounts for computers, as well as labor costs for installation. This also includes carpet replacement to be appropriate to the therapeutic intent. This is a placeholder pending official estimates for a deferred award.
4. Moveable Furnishings/Equipment	Describe the items to be purchased and where they are to be placed for the project: As described in the narrative, this includes sofa, chairs and other needed furnishings. This is a placeholder pending official estimates for a deferred award.
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: Computers and associated peripherals for use in trainings. This is a placeholder pending official estimates for a deferred award.



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:
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.

<b>AUTHORIZED SIGNATURE</b>			
(This document must be signed by the person who is authorized to sign the Grant Agreement.)			
NAME OF AUTHORIZED OFFICER Marshall Hopper	TITLE Chief Probation Officer	TELEPHONE NUMBER 530-889-7915	
STREET ADDRESS 2929 Richardson Drive, Suite B	CITY Auburn	STATE CA	ZIP CODE 95603
EMAIL ADDRESS mhopper@placer.ca.gov			
AUTHORIZED OFFICER SIGNATURE ((Blue Ink Only or E-signature))  X Marshall Hopper [May 12, 2021 12:38 PDT]			DATE May 12, 2021