

S T A T E O F M I C H I G A N

BOARD OF COMMISSIONERS OF THE COUNTY OF ALLEGAN

SHERIFF'S DEPARTMENT-APPLY/ACCEPT FY2026 MDOC COMPREHENSIVE COMMUNITY CORRECTIONS GRANT

BE IT RESOLVED that the Allegan County Board of Commissioners hereby approves to apply and accept when awarded the Michigan Department of Corrections, Office of Community Correction Grant for FY2026 (October 1, 2025 through September 30, 2026), to continue programs: Career Readiness, Moral Reconation Therapy, Seeking Safety, the GED Program, the Opiates/Methamphetamine Specific Program and Administration; and

BE IT FURTHER RESOLVED any personnel and/or program services are coterminous with receipt of adequate funds through this grant; and

BE IT FINALLY RESOLVED that the County Administrator is authorized to make the necessary budget adjustments, and any necessary documents to complete this action are authorized to be signed.

Allegan County Grants

Request for Action (RFA) Form - Application

Section I - General Information

Name of Grant	Grant Period / Term
Community Corrections Advisory Board (CCAB) Grant	10/01/2025-09/30/2026
Source of Grant Funding - Agency Name	Federal, State, Local
Michigan Dept of Corrections	State
Submitted by and/or Program Manager	Service Area Requesting
Lt. Charity Cummins	Sheriffs
Brief summary of Grant program	This grant provides funding to communities to assist in goals to decrease prison admissions and increase utilization of community-based sanctions and services for non-violent offenders. There are a variety of programs that are run through the CCAB Grant, in the past we have participated in inmate work crews: D.E.B.T.S. (Detail Enabling Better Transition to Society), the Community Service Work Crew, The GED Program (General Education Development) and the Meth Diversion Program counseling services. No local match is required.

Section II - Application

Request Type	Renewal Grant	Work Order No.	251490
Specific Action Requested	BOC Approval	Request Date	4/15/2025
Request Submission Deadline (Date)	6/1/2025	Approval Date	
Grant request approved by BOC with Budget	Yes		
Signatures Needed	NA, Resolution needed		
Funding Sources	Estimated amounts approved with Grant Renewal list	Application Amount	
Grant Funding	\$ 100,000.00	\$	137,183.73
Required Local Match	\$ -	\$	-
County Funding	\$ -	\$	-
TOTAL	\$ 100,000.00	\$	137,183.73

Part One

Contact Sheet

Name of CCAB: *Allegan County CCAB*

Federal I.D. Number: *38-1914307*

A: General Contact Information:

	CCAB Manager	CCAB Manager's Direct Supervisor	CCAB Chairperson	Agency Serving as Fiduciary of Award & Contact Person
Name:	<i>Charity Cummins</i>	<i>John Paul Damveld</i>	<i>Jonathon Blair</i>	<i>Rob Sarro</i>
Title:	<i>Administrative Lieutenant</i>	<i>Operations Captain</i>	<i>Senior Assistant Prosecutor</i>	<i>County Administrator</i>
Address:	<i>640 River Street</i>	<i>640 River Street</i>	<i>113 Chestnut Street</i>	<i>3282 122nd Avenue</i>
City:	<i>Allegan</i>	<i>Allegan</i>	<i>Allegan</i>	<i>Allegan</i>
State:	<i>Michigan</i>	<i>Michigan</i>	<i>Michigan</i>	<i>Michigan</i>
Phone:	<i>(269) 686-5392</i>	<i>(269) 673-0500 ext. 4208</i>	<i>(269) 673-0280 ext. 3252</i>	<i>(269) 673-0239</i>
Email:	<i>ccummins@allegancounty.org</i>	<i>jdaveld@allegancounty.org</i>	<i>jblair@allegancounty.org</i>	<i>rsarro@allegancounty.org</i>

Type of Community Corrections Board: *County Advisory Board*

Date application was approved by the local CCAB: *04/17/2025*

Participating County

Counties/Cities Participating in the CCAB: *Allegan*

Date application was approved by county board(s) of commissioners and/or city council:

04/24/2025

[[Tentative Date

B: CCAB Membership

Representing:	Name	Email	Vacant
County Sheriff:	<i>Frank Baker</i>	<i>fbaker@allegancounty.org</i>	<i>[[</i>
Chief of Police:	<i>Jay Gibson</i>	<i>jgibson@cityofallegan.org</i>	<i>[[</i>
Circuit Court Judge:	<i>Matt Antkoviak</i>	<i>mantkoviak@allegancounty.org</i>	<i>[[</i>
District Court Judge:	<i>William Bailargeon</i>	<i>wbailargeon@allegancounty.org</i>	<i>[[</i>
Probate Court Judge:	<i>Jolene Clearwater</i>	<i>jclearwater@allegancounty.org</i>	<i>[[</i>
County Commissioner(s): <i>(One Required for each member of County)</i>	<i>Gale Dugan</i>	<i>gdugan@allegancounty.org</i>	<i>[[</i>
Service Area (Up to 3):	<i>Lauren Todaro</i>	<i>ltodaro@onpointallegan.org</i>	<i>[[</i>
County Prosecutor:	<i>Jonathon Blair</i>	<i>jblair@allegancounty.org</i>	<i>[[</i>
Criminal Defense Attorney:	<i>Chad Catalino</i>	<i>ccatalino@allegancounty.org</i>	<i>[[</i>
Business Community:	<i>Zachary Osborne</i>	<i>Zach@rocksideranch.org</i>	<i>[[</i>
Communications Media:	<i>Gari Voss</i>	<i>gari749@gmail.com</i>	<i>[[</i>
Circuit/District Probation:	<i>Lindsey Meyer</i>	<i>meyerL@michigan.gov</i>	<i>[[</i>
City Councilperson (Applies to City or City/County Regional CCABs only - one from each member City/County required):	<i>none</i>	<i>none</i>	<i>[[</i>
Workforce Development:	<i>Emily Gary</i>	<i>egary@westmiworks.org</i>	<i>[[</i>

A: PCR Table FY 2024

	CCAB PCR	State PCR
Overall	11%	18.8%
Group 2	5%	12.8%
Straddle Cell	6%	21.6%
Group 2 Straddle	6%	21.1%
Pretrial Appearance Rate	0%	91.0%
Pretrial Public Safety Rate	0%	96.0%

Does this data exclude those dispositions with prisoner status? **Yes**

B: Recidivism

County	# of Probation Violations - New Sentence to Prison	# of Probation Violations - Technical to Prison

C: COMPAS Criminogenic Needs Profile

Please list the Top 3 needs scales (medium/probable and high/highly probable combined) as identified within the COMPAS Criminogenic Needs and Risk Profile for all probationers provided by OCC. Additionally, identify both the local and proposed OCC strategies that will impact the identified needs scales. OCC funded strategies must be identified by CCIS Code and Local Name of Program as it appears on the program descriptions:

- First: *Substance Abuse*
- Second: *Criminal Personality*
- Third: *Cognitive Behavioral*

List non-OCC funded programs in support of the top three criminogenic needs.

- Swift and Sure*
- Veteran's Court*
- Mental Health Court*
- Anger Management*
- Re-entry Unit Programs*
- Family Victorious*
- Mom's in Prayer*
- A.A.*
- Sobriety Court*
- Inmate Workers-Case Management*
- D.E.B.T.S.Program*
- Parenting Classes*
- RockSide Ranch*

Check the Program codes in support of the top three criminogenic needs. B00: Education, B15: Employment, C01: Cognitive, G18: Outpatient Services

State Board Impact

A: Key Objectives

Does your plan intend to impact sentenced felons? Yes

Please state the objective:

Overall PCR from 11 % in FY 2024, to 10 % in FY 2026.

List OCC Programs in support of Objective:

B00: Education

Local Program Name:

Allegan Achieve

List OCC Programs in support of Objective:

B15: Employment

Local Program Name:

C.R.E.A.T.E.S.

List OCC Programs in support of Objective:

C01: Cognitive

Local Program Name:

Moral Recognition Therapy (MRT)

List OCC Programs in support of Objective:

C01: Cognitive

Local Program Name:

Seeking Safety

List OCC Programs in support of Objective:

G18: Outpatient Services

Local Program Name:

Opioid Methamphetamine Specific Program (OMSP)

List Non-OCC Programs in support of Objective:

Re-entry Unit

Anger Management

Mental Health Court

Veteran's Court

Swift and Sure

Family Vidtorious

A.A.

Were key objectives met the prior year for the sentenced felon population? Yes

If no, please provide reasoning.

Does your plan intend to impact pretrial defendants? No

Please state the objective:

Appearance Rate % in FY , to % in FY .
from:

Public Safety Rate % in FY , to % in FY .
from:

Local Program Name:

List OCC Programs in support of Objective:

List Non-OCC Programs in support of Objective:

Were key objectives met the prior year for the pretrial population?
If no, please provide reasoning.

Additional Information

Please provide any additional information that supports your requests:

None

Administrative Duties & Expenses Agreement

Per P.A. 511, Administration funds cannot exceed 30% of the award amount. Staff time billed for Administration duties must be for actual hours worked. Contracted provider time billed for Administration duties must comply with your local provider contract. All expenses must be approved by MOCC.

By applying for Administration funding, I acknowledge and accept the MOCC's Administration Duties & Expenses Agreement.

Evidence Based Plan

The County certifies that the Comprehensive Plan submitted to the Office of Community Corrections adheres to the 8 Evidence-based Principles for Effective Interventions: Assess Actuarial Risk/Needs, Enhance Intrinsic Motivation, Target Interventions, Skill Train with Direct Practice, Increase Positive Reinforcement, Engage Ongoing Support in Natural Communities, Measure Relevant Processes/Practices, and Provide Measurement Feedback.

Employability Skills

Employability Skills

CCIS Code: *B15* Local Program Name: *C.R.E.A.T.E.S.* New Initiative: []Yes []No
Provider Name: *Outlook Academy* Program Location: []Jail []Community
For Regional CCABs only, list all member counties that will use this program:

Input

Curriculum

- 1) Curriculum Name: *Career Readiness*
 - 2) Number of required curriculum sessions: *15*
Staff
- certify that staff members are certified and have been trained.

Participants

- 3) Projected Number of new Enrollments: *40*
- 4) What is the target population?

Sentenced Felons

Delayed/Deferred Felons

- 5) **Eligibility criteria:** Enrollees must score moderate to high in Vocational/Educational COMPAS Criminogenic Needs Scale or are unemployed or under-employed.
Funding

Activities

Approved Activities:

- 1) *Group facilitation*
- 2) *Group check-in*
- 3) *Assignment of Homework*
- 4) *Review of homework*
- 5) *Reporting group attendance*

Outputs

- 1) Number of Groups Conducted
- 2) Number of Progress Reports
- 3) Number of Terminations

- a) Successful
- b) Unsuccessful

4) Number of groups attended per participant

- a) ALOS to Complete

I acknowledge that I have read the above information and will comply.

Key Performance Measurement (KPM)

You may choose any of the following or provide another measurable performance indicator.

Of those who successfully completed this program, % will obtain employment.

Of those who successfully completed this program, % will not be convicted of a crime 3, 6, 12 months post completion.

Of those who successfully completed this program, % will increase parenting time.

Of those who successfully completed this program, % will increase their post-test score.

Of those who successfully completed this program, % will maintain sobriety for 3, 6, 12 months.

Other: *85% of enrolled offenders who successfully completed the program will obtain employment within the first 6 months, upon release from jail.*

Logic Model

Click [here](#) to generate logic model

Education

Education

CCIS Code: *B00* Local Program Name: *Allegan Achieve* New Initiative: Yes No
Provider Name: *Zeeland Public Schools* Program Location: Jail Community
For Regional CCABs only, list all member counties that will use this program:

Input

Curriculum

1) Curriculum Name: *Aztec, Caplin, Essential ED, GED Test Prep, Steck-Vaughn*

2) Number of required curriculum sessions: *24*

Staff

certify that staff members are certified and have been trained.

Participants

3) Projected Number of new Enrollments: *40*

4) What is the target population?

Sentenced Felons

Delayed/Deferred Felons

5) **Eligibility criteria:** Enrollees must score moderate to high in Vocational/Educational COMPAS Criminogenic Needs Scale or are in need of a high school diploma/GED.

Funding

Activities

Approved Activities:

- 1) *Group facilitation*
- 2) *Group check-in*
- 3) *Assignment of Homework*
- 4) *Review of homework*
- 5) *Reporting group attendance*

Outputs

- 1) Number of Groups Conducted
- 2) Number of Progress Reports
- 3) Number of Terminations

- a) Successful
- b) Unsuccessful

- 4) Number of groups attended per participant

- a) ALOS to Complete

I acknowledge that I have read the above information and will comply.

Key Performance Measurement (KPM)

You may choose any of the following or provide another measurable performance indicator.

Of those who successfully completed this program, % will obtain employment.

Of those who successfully completed this program, % will not be convicted of a crime 3, 6, 12 months post completion.

Of those who successfully completed this program, % will increase parenting time.

Of those who successfully completed this program, % will increase their post-test score.

Of those who successfully completed this program, % will maintain sobriety for 3, 6, 12 months.

Other:

85% of participants will receive their GED or High School Diploma within 6 months of successfully completing the program.

Logic Model

Click [here](#) to generate logic model

Outpatient Group Treatment

Outpatient Group Treatment

CCIS Code: *G18* Local Program Name: *Opioid Methamphetamine Specific Program (OMSP)* New Initiative: Yes No
 Provider Name: *TriCap* Program Location: Jail Community
 For Regional CCABs only, list all member counties that will use this program:

Input

Curriculum

- 1) Curriculum Name: *"Living in Balance"; "What you Need to Know Methamphetamine"; "What you Need to Know Opioids"*
- 2) Number of required curriculum sessions: *336*
- 3) What is the max number of individual sessions when deemed clinically appropriate? *16*

Staff

Credentials of Provider:

Relevant MCBAP Certification, Licensed or Limited License Social Worker, Licensed or Limited License Counselor, Licensed or Limited License Psychologist

Participants

- 4) Projected Number of new Enrollments: *10*
- 5) What is the target population?

- Sentenced Felons Delayed/Deferred Felons Pretrial Defendants
- 6) Eligibility Criteria: Enrollees must have a completed clinical assessment that identifies need for the service.

Funding

Activities

Approved Activities:

- 1) *Group facilitation*
- 2) *Group check-in*
- 3) *Assignment of Homework*
- 4) *Review of homework*
- 5) *Reporting group attendance*

Assessment Completion

- 5) What assessment is used?

Biopsychosocial

SUD Assessment

Outputs

- 1) Number of Groups Conducted
- 2) Number of Progress Reports
- 3) Number of Terminations

- a) Successful
- b) Unsuccessful

- 4) Number of groups attended per participant

- a) ALOS to Complete

I acknowledge that I have read the above information and will comply.

Key Performance Measurement (KPM)

You may choose any of the following or provide another measurable performance indicator.

Of those who successfully completed this program, % will obtain employment.

Of those who successfully completed this program, % will not be convicted of a crime 3, 6, 12 months post completion.

Of those who successfully completed this program, % will increase parenting time.

Of those who successfully completed this program, % will increase their post-test score.

Of those who successfully completed this program, % will maintain sobriety for 3, 6, 12 months.

Other: *70% of defendants placed in the treatment program will demonstrate knowledge gained using pre and post test scores.*

Logic Model

Click [here](#) to generate logic model

Cognitive Group

Cognitive Group

CCIS Code: *C01* Local Program Name: *Moral Recognition Therapy (MRT)* New Initiative: Yes No
 Provider Name: *MaryTheresa Spohn, Michael Holland* Program Location: Jail Community
 For Regional CCABs only, list all member counties that will use this program:

Input

Curriculum

1) Curriculum Name: *Moral Recognition Therapy "How to Escape Your Prison"*

2) Total number of sessions to complete the curriculum: *8*

Staff

certify that staff members are certified and have been trained.

Participants

3) Projected Number of new Enrollments: *4*

4) What is the target population?

Sentenced Felons

Delayed/Deferred Felons

5) Eligibility criteria: Enrollees must score probable to highly probable in at least *1* of the following: (Choose all that apply)

a) COMPAS Criminogenic Needs Scales: *Substance*

Abuse, Cognitive Behavioral, Criminal

Personality, Residential Instability, Family

Criminality, Criminal Opportunity, Criminal Association

b) Gender Responsive Scales:

c) Felony Probation Violator, regardless of COMPAS Score

Funding

Activities

Approved Activities:

1) *Group facilitation*

2) *Group check-in*

3) *Assignment of Homework*

4) *Review of homework*

5) *Reporting group attendance*

Outputs

- 1) Number of Groups Conducted
- 2) Number of Progress Reports
- 3) Number of Terminations

a) Successful

b) Unsuccessful

- 4) Number of groups attended per participant

a) ALOS to Complete

I acknowledge that I have read the above information and will comply.

Key Performance Measurement (KPM)

You may choose any of the following or provide another measurable performance indicator.

Of those who successfully completed this program, % will obtain employment.

Of those who successfully completed this program, % will not be convicted of a crime 3, 6, 12 months post completion.

Of those who successfully completed this program, % will increase parenting time.

Of those who successfully completed this program, % will increase their post-test score.

Of those who successfully completed this program, % will maintain sobriety for 3, 6, 12 months.

Other: *85% of participants who successfully complete the program will not receive a new conviction in Allegan County within 12 months.*

Logic Model

Click [here](#) to generate logic model

Cognitive Group

Cognitive Group

CCIS Code: *C01* Local Program Name: *Seeking Safety* New Initiative: Yes No
 Provider Name: *MaryTheresa Spohn* Program Location: Jail Community
 For Regional CCABs only, list all member counties that will use this program:

Input

Curriculum

- 1) Curriculum Name: *Seeking Safety by Lisa Najavits*
 2) Total number of sessions to complete the curriculum: *12*

Staff

certify that staff members are certified and have been trained.

Participants

- 3) Projected Number of new Enrollments: *4*
 4) What is the target population?

Sentenced Felons

Delayed/Deferred Felons

- 5) Eligibility criteria: Enrollees must score probable to highly probable in at least *1* of the following: (Choose all that apply)
- | | |
|--|---|
| a) COMPAS Criminogenic Needs Scales: <i>Substance Abuse, Cognitive Behavioral, Criminal Personality, Residential Instability, Family Criminality, Criminal Opportunity, Criminal Association</i> | b) Gender Responsive Scales: <i>Experiences of Abuse as Adult, Experiences of Abuse as a Child, Relationship Dysfunction, Parental Stress</i> |
| c) <input checked="" type="checkbox"/> Felony Probation Violator, regardless of COMPAS Score | |
- Funding

Activities

Approved Activities:

- 1) *Group facilitation*
- 2) *Group check-in*
- 3) *Assignment of Homework*
- 4) *Review of homework*
- 5) *Reporting group attendance*

Outputs

- 1) Number of Groups Conducted
- 2) Number of Progress Reports
- 3) Number of Terminations

- a) Successful
- b) Unsuccessful

- 4) Number of groups attended per participant

- a) ALOS to Complete

I acknowledge that I have read the above information and will comply.

Key Performance Measurement (KPM)

You may choose any of the following or provide another measurable performance indicator.

Of those who successfully completed this program, % will obtain employment.

Of those who successfully completed this program, % will not be convicted of a crime 3, 6, 12 months post completion.

Of those who successfully completed this program, % will increase parenting time.

Of those who successfully completed this program, % will increase their post-test score.

Of those who successfully completed this program, % will maintain sobriety for 3, 6, 12 months.

Other: *85% of participants who successfully complete the program will not receive a Probation Violation within 12 months.*

Logic Model

Click [here](#) to generate logic model

Program Cost Descriptions

Program Cost Descriptions

CCAB Name

Allegan County CCAB
Position

Title	Name	Hourly or Hourly Salaried? Wage	Salary	% of salary charged to grant	Fringe Total	% of fringe charged to grant	Total hours charged to grant	Total
CCAB Manager	Charity Cummins	Hourly \$44.64	\$	%	\$38,178.64	100.0%	416	\$56,748.88
MRT Facilitator	MaryTheresa Spohn	Hourly \$37.80		%	\$31,169.84	100.0%	270	\$41,375.84
MRT Facilitator	Michael Holland	Hourly \$29.19		%	\$13,615.64	100.0%	104	\$16,651.40

Total Position

\$114,776.12

Position Description

Program Code	% of Time	Total CPS	Local/Other	Fee Revenue
Administration Program Code	20.0%	\$22,955.22	\$0.00	\$0.00
C01 Program Code	13.0%	\$14,920.90	\$0.00	\$0.00
C01 Program Code	5.0%	\$5,738.81	\$0.00	\$0.00
C01 Program Code	5.0%	\$5,738.81	\$0.00	\$0.00
Totals	43.0%	\$49,353.74	\$0.00	\$0.00

Contractual Services
Contract

Name of Provider	Services Provided	Terms of Reimbursement
Zeeland Public Schools	Allegan Achieve	Invoiced monthly for services, at a group rate of \$83 per group.

Founding Sources & Cost Allocation

Program Code	CPS	Local/Other	Fee Revenue	Total
B00	\$23,830.00	\$0.00	\$0.00	\$23,830.00

Totals \$0.00 \$0.00 \$0.00 \$0.00

Contract

Services Provided

Name of Provider

Outlook Academy

Career Readiness Material, Career Coaching, (0* Net Program), college applications, financial aid applications, Work Keys

Terms of Reimbursement

Invoiced monthly for services, at a group rate of \$83 per group, and yearly cost of Essential ED software.

Founding Sources & Cost Allocation

Program Code	CPS	Local/Other	Fee Revenue	Total
B15	\$17,200.00	\$0.00	\$0.00	\$17,200.00
Totals	\$17,200.00	\$0.00	\$0.00	\$17,200.00

All Contract Totals

Total CPS Local/Other Fee Revenue Total

Equipment

Program Code	CPS	Local/Other	Fee Revenue	Total	Description
Totals					

Supplies

Program Code	CPS	Local/Other	Fee Revenue	Total	Description
Totals					

Travel

Program Code	CPS	Local/Other	Fee Revenue	Total	Description
Totals					

Training

Program Code	CPS	Local/Other	Fee Revenue	Total	Description
Totals					

Board Expenses

Program Code	CPS	Local/Other	Fee Revenue	Total	Description
Totals					

Totals

Other
Program Code CPS **Local/Other** **Fee Revenue** **Total** **Description**

Totals

Contract

Services Provided

Name of Provider

Residential treatment for Opiod/Methamphetamine substance use, Cognitive treatment, anger management treatment and daily excercise

Terms of Reimbursement

Inovice monthly for services to include \$125 for assessments , \$35 for each group and \$35 for each individual session.

TriCap

Founding Sources & Cost Allocation

Program Code	CPS	Local/Other	Fee Revenue	Total
G18	\$40,000.00	\$0.00	\$0.00	\$40,000.00
Totals	\$40,000.00	\$0.00	\$0.00	\$40,000.00

Total CPS

Local/Other

Fee Revenue

Total

All Contract Totals

Equipment
Program Code CPS **Local/Other** **Fee Revenue** **Total** **Description**

Totals

Supplies
Program Code CPS **Local/Other** **Fee Revenue** **Total** **Description**

Totals

Travel
Program Code CPS **Local/Other** **Fee Revenue** **Total** **Description**

Totals

Training
Program Code CPS **Local/Other** **Fee Revenue** **Total** **Description**

Totals	\$23,830.00	\$0.00	\$0.00	\$23,830.00
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	Total CPS	Local/Other	Fee Revenue	Total
All Contract Totals	\$81,030.00	\$0.00	\$0.00	\$243,090.00

Equipment

Program Code	CPS	Local/Other	Fee Revenue	Total	Description
B00	\$2,800.00	\$0.00	\$0.00	\$2,800.00	4 Desktops
Program Code	CPS	Local/Other	Fee Revenue	Total	Description
B15	\$500.00	\$0.00	\$0.00	\$500.00	4 Chrome Books
Totals	\$3,300.00	\$0.00	\$0.00	\$3,300.00	

Supplies

Program Code	CPS	Local/Other	Fee Revenue	Total	Description
C01	\$3,000.00	\$0.00	\$0.00	\$3,000.00	MRT Books
Totals	\$3,000.00	\$0.00	\$0.00	\$3,000.00	

Travel

Program Code	CPS	Local/Other	Fee Revenue	Total	Description
	\$	\$	\$	\$0.00	
Totals	\$0.00	\$0.00	\$0.00	\$0.00	

Training

Program Code	CPS	Local/Other	Fee Revenue	Total	Description
	\$	\$	\$	\$0.00	
Totals	\$0.00	\$0.00	\$0.00	\$0.00	

Board Expenses

Program Code	CPS	Local/Other	Fee Revenue	Total	Description
Administration	\$500.00	\$0.00	\$0.00	\$500.00	Lunch for CCAB meetings
Totals	\$500.00	\$0.00	\$0.00	\$500.00	

Other

Program Code	CPS	Local/Other	Fee Revenue	Total	Description
	\$	\$	\$	\$0.00	

Proposal

Proposal

CCAB Name

Allegan County CCAB

Program	Program Code	Originally Requested	Funding Request	
Group-Based Programs				
Education	B00	\$	\$26,630.00	
Employment	B15	\$	\$17,700.00	
Cognitive	C01	\$	\$29,398.51	
Domestic Violence	C05	\$	\$0.00	
Sex Offender	C06	\$	\$0.00	
Outpatient Services	G18	\$	\$40,000.00	
Sub-Total		\$0.00	\$113,728.51	
Supervision Programs				
Pretrial Supervision	F23	\$	\$0.00	
Sub-Total		\$0.00	\$0.00	
Assessment Services				
Actuarial Assessment	I22	\$	\$0.00	
Pretrial Assessment	F22	\$	\$0.00	
Sub-Total		\$0.00	\$0.00	
Case Management	I24	\$	\$0.00	
Susbtance Abuse Testing	G17	\$	\$0.00	
Other	Z00	\$	\$0.00	
5 Day Housing	Z02	\$	\$0.00	
Program Total		\$0.00	\$113,728.51	
Administration				
Salary & Wages		\$	\$22,955.22	
Contractual Services		\$	\$0.00	
Equipment		\$	\$0.00	
Supplies		\$	\$0.00	
Travel		\$	\$0.00	
Training		\$	\$0.00	
Board Expenses		\$	\$500.00	
Other		\$	\$0.00	
Administration Total		\$0.00	\$23,455.22	
Total Funding Request		\$0.00	\$137,183.73	
	Reserved Funding	Approved Funding	Applied Admin %	Approved Admin %
	\$	\$	17.10	17.10

Personnel Costs

	<u>Hourly Wages</u>	<u>Hours Charged to Grant</u>	<u>Total Fringe</u>	<u>Total</u>
Cummins, Charity	\$ 44.64	416	\$ 38,178.64	\$ 56,748.88
Spohn, MaryTheresa	\$ 37.80	270	\$ 31,169.84	\$ 41,375.84
Holland, Michael	\$ 29.19	104	\$ 13,615.64	\$ 16,651.40
				\$ 114,776.12

Administration Duties	20% of Total Personnel	\$ 22,955.22
Program - Seeking Safety	13% of Total Personnel	\$ 14,920.90
Program - MRT (M. Spohn)	5% of Total Personnel	\$ 5,738.81
Program - MRT (M. Holland)	5% of Total Personnel	\$ 5,738.81
		\$ 49,353.74

Contractual Services

<u>Program</u>	<u>Program Code</u>	<u>Provider</u>	<u>Program Cost</u>	<u>Supplies</u>	<u>Totals</u>
Allegan Achieve	B00	Zeeland Public School	\$ 23,830.00	\$ 2,800.00	\$ 26,630.00
CREATES	B15	Outlook Academy	\$ 17,200.00	\$ 500.00	\$ 17,700.00
Opioid Meth Specific Program	G18	TriCap	\$ 40,000.00	\$ -	\$ 40,000.00
Moral Reconciliation Therapy (MRT)	C01	M. Spohn, M. Holland	\$ 11,477.61	\$ 3,000.00	\$ 14,477.61
Seeking Safety	C01	M. Spohn, M. Holland	\$ 14,920.90	\$ -	\$ 14,920.90
Administration	-	C. Cummins	\$ 22,955.22	\$ 500.00	\$ 23,455.22
					\$ 137,183.73

Programs offered

OMSP-

- Addresses Opioid and Meth Addictions.
- Located in an unlocked residential treatment program.
- Duration of program is between 150 to 200 days.
- Completely funded under the OCC grant.
- Transportation is provided.

MRT-

- Is a cognitive therapy group teaching: Commitment to change, trust, honesty, and goal settings.
- Offered via zoom or in person.
- In person is funded by the grant.
- Zoom is self-pay at \$10 per group.
- 8-10 weeks to complete.

SEEKING SAFETY-

- A Women's Trauma Group that addresses the correlation between PTSD and Substance Use. Skills taught are: Self-talk; Stop and Think; Red and Green Flags; Rational vs. Irrational, Creating Safety plans.
- Offered in person or via zoom.
- In person is funded by the grant.
- Zoom is self-pay at \$10 per group.
- 12- weeks to successfully complete.

C.R.E.A.T.E.S-

- This is a Career Readiness program teaching:
 - Resume building
 - Work Keys
 - Interview Skills
 - Financial Aid applications
 - College applications
 - College courses.
- Program only for incarcerated individuals.

Allegan Achieve-

- Our GED program that teaches:
 - mathematical reasoning
 - reasoning through language arts,
 - social studies and science.
- Program only for incarcerated individuals.