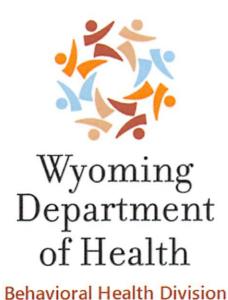
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WYOMING COURT SUPERVISED TREATMENT PROGRAM STATE FISCAL YEAR 2021 GRANT APPLICATION



Behavioral Health Division 6101 Yellowstone Road, Suite 220 Cheyenne, WY 82002

Application Sections

Application Instructions - Page 3

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SFY2021 Wyoming Court Supervised Treatment (CST) Program Application Instructions

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS APPLICATION

These instructions are for SFY 2021 applications. Read carefully so the application is completed accurately. If you have questions, contact Alicia Johnson: 307-777-6885, or email cstprogram@wyo.gov.

The application contains four documents. Please fill out every section completely.

- (I) Instructions
- (II) Application
- (III) Budget Justification Worksheet

This application and materials are not a promise of contract or funding. An application that is not completed will result in no contract being awarded. No contract will be awarded if all deliverables for the current year are not delivered and/or received.

As a Court Supervised Treatment Program applying for State of Wyoming funds, you are required to adhere to requirements in the Court Supervised Treatment Programs Act (Wyo. Stat. § 7-13-1601 through Wyo. Stat. § 7-13-1615), all current State Rules and Regulations (Substance Abuse Rules Chapters 1-8), and any policies and procedures set by the Wyoming Department of Health, Behavioral Health Division.

Special Instructions:

- If you are applying for funding for more than one program, you must complete a separate application for each program.
- <u>Do not put sections onto separate pages.</u> Allow each section to utilize the same page if there is room in order to save space and printing costs. Use only the space provided.
- <u>Budget and Budget Justification Spreadsheet:</u> Fill in all projected dollar amounts by line item. Provide an
 explanation for each on the Justification spreadsheet. We realize that it is early in the year, so you may
 not know your exact budget numbers. Provide your very best estimates and if an award is granted, we
 will collect a finalized budget by June 30, 2020. The total match must meet or exceed twenty-five (25)
 percent.
- <u>Matching funds letters</u> should be grouped together into one scanned document rather than several separate ones.

Application Deadline: February 3, 2020 - 5pm MST

Send all completed application documents via email to cstprogram@wyo.gov. Include the required attachments. There will not be time to collect missing documents/information. Please reach out for assistance, if needed, prior to the deadline in order to submit a complete application.

Save the completed application, budget attachment, and master contact list using the file name: court-name grant app (or budget or contacts) FY19. (e.g. AlbanyCountyCSTProgram grant app FY21).

All applications should be sent electronically via email. If you are experiencing technical difficulties, please contact Alicia. All documents must arrive prior to the 5pm deadline on February 3, 2019.

Section 1. Program Type, Mission, Goals

Off	ficial Program Name: Laramie County DUI Court					
1.	Program Type (Place an X where the box is if uncheckable):					
	☐ Adult Drug Court					
	☐ Juvenile Drug Court					
	□ DUI Court					
	☐ Tribal Healing to Wellness Court					
	☐ Reentry Drug Court					
	□ Veterans Treatment Court					
	Federal District Drug Court					
	Family Dependency Treatment Court					
	☐ Back on TRAC					
	□ Other:					
2.	Use the following space for Program Mission Statement and Goals (see W.S. §7-13-1603(b))					
cor	ssion Statement: The mission of the Laramie County DUI Court is to use a comprehensive ordinated, and pro-active approach in order to reduce the threat impaired drivers place on our mmunity. By utilizing a wide-ranging and dynamic approach, we will effectively reduce the mber of repeat impaired driving offenders on our streets.					
Th	e Laramie County DUI Court Goals Are:					
sup II.	To provide sentencing options to Laramie County Circuit Court to administer certain cases mming from Driving Under the Influence convictions and utilize continuing judicial oversight, pervised probation, and comprehensive treatment. To reduce alcohol related offenses in Laramie County while promoting offender countability and responsibility.					
III.						
	Section 2. Funding Request					
Nu	mber of adult slots requesting state funds to support in FY21: 30					
	mber of juvenile slots requesting state funds to support in FY21:					

Adult Slots X \$9,354.66 =	\$ 280,639.80
Juvenile Slots X \$14,716.84 =	\$ 0.00
Total State Funds Request =	\$ 280,639.80

Section 3. Program Data to Support Request

The CST Program will provide July 1, 2019-December 31, 2019 recidivism, retention, and average number of participant data to the Funding Panel.

OPTIONAL: Use the following space to share any important information/circumstances regarding monthly average participant numbers, retention, and recidivism rates:

The funding panel should be aware that the new CMS system that all of the Wyoming Treatment Court programs does not allow for me to pull data for the categories listed above.

Section 4. Funding Sources, Practices, Fiscal Agent

Program Funding and Fees

- 1. Is the program currently receiving federal funds (for FY21)? ☐ Yes ☑ No
 - a. If yes, list the name of grant and amount received:

Although we are not currently receiving funds, the DUI Court may apply for funding from the Wyoming Department of Transportation, Office of Highway Safety to fund some members of the DUI Court Team to go to national training. Although WyDOT manages the grants, the funds originate from the National Highway Traffic Safety Administration. I am not sure if that qualifies as federal funding as far as this question is concerned.

2. Will the program apply for other federal funds in FY21? ⊠Yes □No

Please see my above answer.

- 3. Does the program intend to request funding to aid in CARF accreditation? ☐ Yes ☒ No If the program's treatment provider receives other funds from the Division, the program is not eligible to receive CARF funding.
- 4. If the program will receive other supplemental funds (gifts, contributions, donations, or grants) outside of the state grant and city/county match funds, list the funding source(s) and dollar amount(s) here:

The DUI Court program does not anticipate receiving any additional funds for the upcoming fiscal year under the category.

5. How much will program participants pay in CST Program fees (designate if per phase, per year, per month, other)?

All program participants are required to pay \$50 per month after their first 30 days in the program and the fee will continue regardless of phase until the month of their graduation.

6. What other expenses will participants be responsible for throughout the program (SCRAM bracelets, drug testing, other)?

Participants may be required to pay for SCRAM monitoring or urinalysis testing if they have had multiple relapses. Any participant that has been determined to be in need of residential treatment will be required to make payment to the residential treatment program they attend.

7. If participants are required to pay CST-related expenses directly to any organization holding a contract or MOU with the program (treatment providers, drug testing services, etc.) how are those payments tracked and reported back to the program?

SCRAM payments are paid directly to the program and are receipted noting the payments for SCRAM as opposed to regular program participation fees and all costs are tracked through an Excel spreadsheet maintained by the Court Coordinator. Fees collected for specialized drug testing charged to the participants by Pathfinder or the Drug Testing Center are recorded and tracked by the provider and available upon request.

8. Is the program's fiscal/fiduciary agent on the program's governing body or board?

□ Yes ⋈ No

If the fiscal/fiduciary agent is not on the governing body or board, email a signed copy of the resolution appointing the fiscal/fiduciary agent to cstprogram@wyo.gov for record keeping purposes.

9. Upon application submission, please submit the letters from the agency or agencies that committed in-kind contributions and local match funds for the upcoming year of FY21. These documents should be scanned and submitted as one document.

Section 5. Projected Budget and Justification (Attachment A)

Fill out the Budget and Budget Justification Attachment A and submit with this application. (The Budget tab and Budget Justification tab are both on same document.) Match funds must be at least 25% of your state funds request. Federal grants and any other state funds <u>cannot</u> be counted in your match funds.

Section 6. Magistrates

1. Pursuant to W.S. 7-13-1606(d), "The application shall identify participating judges and contain a plan for the participation of judges. The plan shall be consistent with rules adopted by the department and the Supreme Court." Use the following space to provide the plan for the participation of all judges/magistrates in the program:

Magistrate Eang Man will serve as the participating judge in the Court Supervised Treatment Program known as Laramie County DUI Court pursuant to Wyo. Stat. §§7-13-1601 - 7-13-1615 and pursuant to the Wyoming Supreme Court Rules governing judicial participation in Court Supervised Treatment Programs.

Specifically, as the participating magistrate, Magistrate Man shall respect the separation of judicial rules as set out Wyoming Supreme Court Rules. As the participating magistrate, Magistrate Man will be a member of the Laramie County DUI Court team. As a member of the DUI Court team, Magistrate Man shall not perform any judicial duties, or perform any other legal services, in a criminal or civil case from which a current or former participant was, or is a party to, or in any subsequent criminal or civil case that arises directly from the participant's conduct in the treatment program.

2. To aid the Supreme Court in compiling data to build their projected CST magistrate budgets, what is the average number of hours per week that a magistrate is utilized in the program?

4 hours per week.

Section 7. Risks/Needs Assessment Practices

1. What participant risks/needs screening and assessment processes does the program currently use? Explain the process and list all tools used.

This past year Laramie County received a federal Bureau of Justice Assistance (BJA) grant to fund certain projects for the Laramie County Veterans Treatment Court program. One of the projects that was funded was the purchase of the COMPAS program. I was able to negotiate with the developers of the COMPAS to allow the DUI Court program to use the COMPAS at screening, which is planned to take place before sentencing. This would put the program in compliance with what is consider a best practice strategy for Adult Drug Court programs.

Additionally, the DUI Court Case Manager, Fernando Muzquiz and DUI Court Coordinator, are trained in using the Computerized Assessment and Referral System (CARS) which is a mental health screen specifically designed to be used on Impaired Drivers. The DUI Court P&P Agent, shall also administer the Impaired Drivers' Assessment (IDA).

	Program Name.	Program Contact:	[Laramie Co	ounty DUI Court	program K	Curt A. Zu	nker
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2.	What is the job title of the individual(s) conducting the screening of participants?
	Kurt Zunker, DUI Court Coordinator Fernando Muzquiz, DUI Court Case Manager Ema Lovric, DUI Court P&P Agent
3.	Use the following space to explain if the program opts to serve individuals with risk/need levels different than the best practice population and summarize this policy including if and how the groups are separated.
	The DUI Court program does not accept any individual that does not score out as being a high-risk high-need offender.
	Section 8. Substance Use Treatment Services, Practices, Certifications
1.	Will the program hire in-house treatment providers? ☐Yes 🛛 No
2.	Will the program contract for treatment? ⊠Yes □No If yes, provide the name of the provider here:
	Cheyenne Community Drug Abuse Treatment Council (D/B/A "Pathfinder") 620 West 19 th Street Cheyenne, WY 82001 (307) 635-0256 www.pathfinderwy.org
3.	What is the expiration date of the in-house program or contracted treatment provider's STATE CERTIFICATION?
4.	December 31, 2021
5.	What is the expiration date of the treatment provider's NATIONAL ACCREDITATION?
	October 31, 2022
6.	What location(s) are participants seen for services?
	620 West 19th Street Cheyenne, WY 82001

Section 9. Mental Health Services, Practices, Certifications

7.	Does t	he program have a contract (or MOU) for mental health services? Yes No
	a.	Does the program refer participants to local Community Mental Health Center(s)? ⊠Yes □ No
	b.	Use the following space to provide the name or names of the mental health treatment providers used by the program. If you intend to use state funds to pay for mental health services, providers must be CARF accredited.
		We do make referrals to Peak Wellness for mental health services and men's residential treatment services as necessary.
8.		the mental health provider keep the program team fully informed of all matters nt to the treatment and program progress of all participants? $oxtimes$ Yes $oxtimes$ No
	How is	s this information communicated?
tro	eatment	I Court Case Manager is primarily responsible for communicating with all outside entities to check on their progress of program participants that are not receiving services contracted provider.
_		

Section 10. Training Summary

List every <u>program team member</u> and every <u>treatment provider</u>, the training hours they have acquired in the last fiscal year (July 1, 2019 - June 30, 2020), and the title of the training. If applicable, provide an explanation on why total required hours were not obtained and the plan for completion of the hours in the next contract year. Add rows as needed. If the training was not from an organization listed in Rule or Guideline and was not preapproved, it will not be counted for completed hours.

Member Position	Member Name	Title of Training	Hours Received	Member Start Date
Participating	Eang	Different NADCP Webinars	6	12/1/19
Judge	Man	https://www.ndci.org/resources/training/e-learning/		
Prosecuting	Baend	Different NADCP Webinars	6	10/1/19
Attorney Buss		https://www.ndci.org/resources/training/e-learning/		
Defense Attorney	3,		20	1/1/06

or Guardian ad	Serelson	National Harbor, Maryland		
litem				
Monitoring	Ema	Different NADCP Webinars	6	11/1/19
Officer/Probation	Lovric	https://www.ndci.org/resources/training/e-		
Officer		learning/		
Treatment Avis		19th Annual All Rise NADCP conference	20	1/1/18
Provider Garcia		National Harbor, Maryland		
Representative				
Program	Kurt	19th Annual All Rise NADCP conference	20	1/1/06
Coordinator Zunker Nat		National Harbor, Maryland		
Case Manager Fernando 19th Annual All Rise NADCP conference		20	1/1/06	
	Muzquiz	National Harbor, Maryland		

Section 11. Recidivism, Retention, Sobriety

Court Supervised Treatment Programs contribute to the goals of reducing crime/reducing recidivism, retaining individuals for the full duration of the program, and increasing durations of sobriety prior to graduating a program. Goals for each of the three target areas are set in annual contracts and in site visit reports, and the goals are based on the functionality of existing programs and averages reported in national or regional studies.

1. What method(s) does your program utilize to track recidivism?

The program tracks recidivism in two manners. The Court Coordinator tracks all arrest data on program participants and/or graduates on matters that are brought before the Laramie County Circuit Court and Cheyenne Municipal Court. The other mechanism for tracking recidivism is the Coordinator completes a yearly recidivism study using the WyCJIS system.

2. What does your program do to retain participants in the program?

The program has narrowed the grounds for termination. The DUI Court Team will work with struggling participants and only terminate participants from the program for absconding, treatment failure (unsuccessful discharge from residential treatment), or committing a new criminal offense. Out of these termination categories, absconding the program is still the leading cause for termination. Unfortunately, I can only provide anecdotal evidence of our retention rate for the current year because of the limitations of the new CMS. That being said, our termination for absconding rate is well below the 50% previously reported on last year's grant.

Section 12. Community Outreach

Discuss community outreach activities completed by the program in FY20 to date:

Kurt Zunker and Fernando Muzquiz have both served on subcommittees for the Governor's Impaired Driving Council and both do several community presentations each year.

Section 13. Master Contact List

Legal Name of CST Program (name used for the IRS):	Laramie County DUI Court
Organization Governing the	Laramie County
Contract:	
Mailing Address	Physical Address for FedEx of Contract
309 W. 20 th Street #2300	309 W. 20 th Street # 2300
Cheyenne, WY 82001	Cheyenne, WY 82001

CST Program Coordinator Information: Provide contact information for the Program Coordinator.

Name	Title	Mailing	Telephone	E-mail	Specific
		Address			requests
Kurt	Director	309 W. 20 th	(307) 633-	kzunker@laramiecounty.com	Time with the
Zunker		Street	4530		funding panel.
		#2300			
		Cheyenne,			
		WY 82001			

Contracting Agency and Contract Signatory Information: Provide information for the individual who will sign the state contract and the individual who will attest their signature, if applicable. Add rows as needed.

Name	Title	Mailing	Telephone	E-mail
		Address		
Linda Health	Chairman,	310 West 19 th	(307) 633-4260	Iheath@laramiecounty.com
	Laramie County	Street		
	Commissioners	Cheyenne, WY		
		82001		
Debra Lee	Laramie County	309 W. 20 th	(307) 633-4268	dlee@laramiecountyclerk.com
	Clerk	Street		
		Cheyenne, WY		
		82001		

The Attorney General and Wyoming Department of Health Director would like to limit the number of contracts with two signature pages. If you are required legally to provide an original signature to a department or attorney, list below:

Name	Purpose
Debra Lee, Laramie County Clerk	County policy requires an originally signed contract be retained by the Clerk's office for auditing purposes.

☐ No, I do not need an Original Signature; an email copy will be fine.

Fiscal or Fiduciary Agent Information: Provide information for the individual for the fiduciary agent for this program. Add rows as needed.

Name	Title	Mailing Address	Telephone	E-mail
Sandra Laramie		310 W. 19 th	(307) 633-4201	snewland@laramiecounty.com
Newland County Grants		Street, Suite 140		
Manager		Cheyenne, WY		
		82001		

Governing Body: Provide information for the representatives of the governing body for this program. Add rows as needed.

General Governing Body Information							
	Governing Body Members						
Name	Title	Telephone	E-mail				
Linda Heath	Chairman	(307) 633-4260	lheath@laramiecounty.com				
Troy Thompson	Commissioner	(307) 633-4260	tthompson@laramiecounty.com				
Buck Holmes	Commissioner	(307) 633-4260	bholmes@laramiecounty.com				
Amber Ash	Commissioner	(307) 633-4260	aash@laramiecounty.com				
Gunnar Malm	Commissioner	(307) 633-4260	gmalm@laramiecounty.com				

Program Team Member Contact Information (as required by W.S. 7-13-1609(a)): Provide the name and contact information for all Program Team Members. If their title is not what is described, add the title after their name. There must be someone for each position listed unless otherwise specified. If the program does not have all required team members, provide a plan for recruiting any missing members. Do not alter the member column titles. Add rows as needed.

Member	Name & Title	Mailing Address	Telephone	E-mail	% Weekly Staffings attended SFY 20
Participating	Magistrate		(307) 633-	eang.man@gm	100%
Judge *	Eang Man		4298	ail.com	
Substitute Judge *					
(who sits in for					
Participating					
Judge, not					
mandatory)					
Prosecuting	Baend Buss	310 W.19 th Street	(307) 633-	baend@da.co.l	95%
Attorney		Cheyenne, WY 82001	4360	aramie.wy.us	
Defense Attorney	Carol	1623 Central Ave	(307) 635-	carolserelson@	80%
or Guardian ad	Serelson	Cheyenne, WY	4365	gmail.com	
litem		82001			
Monitoring	Ema Lorvic	1934 Wyott Drive	(307) 777-	ema.lovric@wy	
Officer/Probation		Cheyenne, WY	5931	o.gov	
Officer		82001			
Treatment	Avis Garcia	620 West 19th	(307) 635-	avis@pathfinde	100%
Provider		Street	0256	rwy.org	
Representative		Cheyenne, WY			
		82001			
Program	Kurt Zunker	309 W.20 th Street	(307) 633-	kzunker@laram	100%
Coordinator		Cheyenne, WY 82001	4530	<u>iecounty.com</u>	
Case Manager	Fernando	309 W.20 th Street	(307) 633-	fmuzquiz@lara	100%
	Muzquiz	Cheyenne, WY 82001	4588	miecounty.com	

^{*}Can be only a District Court Judge, Circuit Court Judge or Magistrate, Municipal Court Judge or Tribal Court Judge (W.S. 7-13-1602(vii)).

Treatment Provider(s) Organization Information: Add rows as needed.

Name	Title	Mailing Address	Telephone	E-mail
Avis Garcia	Executive Director	620 West 19th Street Cheyenne, WY 82001	(307) 635-0256	avis@pathfinderwy.org

Ancillary and Community Services Information: List all ancillary and community service provider information including information on employment providers, subcontractors, and contractors. Add rows as needed.

Name of Provider(s) or Contractors	Address/Telephone	Duration of current contract (start/end dates)	Description of services provided
Wyoming Workforce Services	1510 E. Pershing Cheyenne, WY 82002 777-7341	Referred as Needed	Employment Assistance
Recover Wyoming	512 E. Lincolnway Cheyenne, WY 82001 (307) 421-7261	Referred as Needed	Recovery Support
Community Action	200 W. 17th Street Cheyenne, WY 82001	Referred as Needed	Housing Assistance
Needs INC	900 Central Ave Cheyenne, WY 82001 632-4132	Referred as Needed	Clothing and Food Assistance
Goodwill	3001 Nationway Cheyenne, WY 82001 632-6455	Referred as Needed	Clothing Assistance

Mental health provider contact information: Add rows as needed.

Name of	Address	Duration of	Total \$	Certification	National
Treatment		current	Amount of	Expiration Date	Accreditation
Provider(s) or		contract	Contract	if Applicable	Expiration
Contractors		(start/end		100 0000	Date if
		dates)			Applicable
N/A					

Section 14. Assurances

Review all assurances and make sure the required attachments (Attachment A and match fund letters) are provided with this application. Type initials in the boxes below.

- 1. This application was reviewed and approved by the Program Team and the representative from the Governing Body: YES
- 2. All attachments (application, matching funds letters, Attachment A, Contracts or MOUs) were reviewed and approved by the Program Team and the representative from the Governing Body: YES
- 3. Indicate here if the program would like a 10 minute phone call with the funding panel on MONDAY, March 2nd, 2020, between 9:00am and 1:00pm and who will be present for the call. Specific times will be determined after all applications are submitted. This is optional and allows you an opportunity to highlight progress in your program or circumstances influencing your funding request. YES

Section 15. List of Required Attachments

- 1. Letters from the agency or agencies that committed in-kind contributions and local match funds for the application year of FY21
- 2. Attachment A, Budget and Budget Justification

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Domit Daymont To.	Jaramio Coimere I	tilo III						
Nemit Payment 10:	200 W 20th Street	Tipo cont		T Estad Tag	mail: krimker@la			
ST Program Address:	Charleng MV 8	3004		Cet Program	nan. Kzunker (2)			
CST Program City, State, Zip: CST Program Contact:	Kurt Zunker	7007		CST Program C	CST Program Contact Fax: (307)			
								Total Match &
Funding Sources & Amounts	Requested State Funds	Local Funds	In-Kind	City & County Funds	Federal Funds	Program Participant Fees	Other State Funds/Salaries	Other Funds Available to the CST Program
ADMINISTRATIVE		REQUIRED MA	IRED MATCH DOLLARS					
Salaries and Wages						00 04	00 00	6
(Not including Treatment/Supervision) Employee Benefits	\$100,147.00	\$0.00	\$0.00			\$0.00	\$0.00	\$0.00
(Not including Treatment/Supervision)	\$32,169.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
(Please Specify)	\$0.00						\$0.00	\$0.0
Internet Service	\$0.00		\$0.00	\$0.00				\$0.00
Telephone/Cell Phone	\$1,100.00							\$0.0
Utilities	\$0.00	\$0.00			\$0.00	20.00	\$0.00	\$0.0
Vehicle Expenses/Maintenance	\$450.00		\$0.00	\$0.00				\$0.00
Committee Hardware	80.00							80.0
Computer Software and/or Supplies	\$250.00							\$0.0
Photocopier	\$0.00	STORY STORY	0.00					\$0.0
Postage	\$0.00							\$0.0
Advertising	\$0.00			\$0.00				\$0.0
Equipment Maintenance	\$0.00							\$0.0
Equipment Rental/Purchase	\$0.00							.0.0 20.0
Office Space	\$0.00		\$0.00	\$0.00	\$0.00		00.00	90.08
Constituction Costs	80.00							20.00
Casa Management System	80.00							\$0.00
Audit Costs	\$0.00				\$0.00			\$0.0
Professional Services Contract								
(Please Specity)	00.000,21\$	\$0.00	\$0.000.00	\$0.00	\$0.00	20.08	\$0.00	\$0.00
RAVEL (TRAINING		No. of Concession, Name of Street, or other Persons of Str	The State of the	The second	Carton Street	SERVICE OF THE PROPERTY OF THE PARTY OF THE		APPROXIMATION OF
Travel In-State	00 00E\$		80 00					
Travel Out-of-State	\$0.00			\$0.00				
Training Fees	\$0.00	\$0.00			\$0.00		\$0.00	\$0.00
Miscellaneous Meeting Expenses	\$0.00		\$0.00	00.0\$				
Client Transportation	\$0.00					\$0.00		
Community Training	\$0.00							
TREATMENT/SUPERVISION						00 003 00		000 114
Substance Abuse Treatment	\$129,873.80	\$0.00	\$10,000.00	\$28,500.00	\$0.00	\$6,500.00	20.00	\$45,000.00
Substance Abuse Treatment Salaries and Wages (if applicable)	\$0.00	\$0.00	\$0.00	00:0\$	\$0.00	80.00	\$0.00	\$0.00
Substance Abuse Treatment Employee Repetits (if applicable)	80.00	20 00	\$0.00	00 08	80.00	80.00	\$0.00	\$0.00
Mental Health and/or Other Counseling								
Services	\$0.00							
Educational Program	\$0.00	\$0.00						\$0.00
Daio Testino and Testino Supplies	\$3 100 00				\$0.00	\$0.00		
Monitorino (Flactronic)	20.00							
Graduation and Incentives	\$1,000.00							
Family Activities	\$0.00	\$0.00	A Allerton					
National Accreditation	\$0.00		\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Other Program Materials	\$0.00	\$0.00						
MISCELLANEOUS EXPENSES								
A Ought of He Dollare	00.08					\$0.00		
B. State Approved \$7500 for CARF	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00		\$0.00	\$0.00
C. State UA Funding	\$0.00							
					Company of the last of the las	The second second		

Please only type in peach colored boxes.

Do not include federal funds or other state funds as match in the Budget or

Budget Justification tabs.

"DO NOT INCLUDE ANY INFORMATION ON MAGISTRATE FUNDING IN THE BUDGET OR BUDGET JUSTIFICATION TABS."

State and federal funds may not be used as match against this grant, they should be marked in the OTHER or FEDERAL FUNDS columns. LOCAL and IN-KIND FUNDS will be used to calculate match. Justify the budget in the Budget Justification tab.

CST Program Budget Justification -- FY2021

Date Last Updated: Please set out what portion is state funds, match funds, and other funds; including federal grants. Justify what the budget will cover. Please explain the amount within each item as state funds, match funds, or any other funds. With applications due early this year, all budgets are estimates until finalized in June. Laramie County DUI Court 309 W.20th Street

309 W.20th Street	or contract of the	THE RESIDENCE OF THE PARTY OF T
STATE OF THE PARTY	A DESCRIPTION OF THE PERSON NAMED IN	Kind of the second of the seco
Cost Description	Total Amount	Please only type in peach colored boxes.
ADMINISTRATIVE		2 20 10
Salaries and Wages	\$100,147.00	
1	1	Salaires for Kurt Zunker, DUI Court Director, Fernado Muzquiz, DUI Court Case Manager, and Cameo Kieffer, Administrative Assistant equals a total of \$100,147.00, of which \$68,040.57 in which DOH funds will be used. Benefits includehHealth insurance, dental insurance.
Employee Benefits	\$32,169.00	life insurance, retirement, social security, medicare, and workers comp equals \$32,169 of which \$DOH funds will be used.
Professional Services Fees		
(Please Specify)	\$0.00	NA
Internet Service	50.00	N/A
Telephone/Cell Phone	\$1,100.00	The DUI Court will have two landline phones and one cell phone for a total of \$1,100, DOH funds will pay for phones.
Utilities	\$0.00	NA .
Vehicle Expenses/Maintenance	\$450.00	The DUI Court has a County vehicle that has a budget for fuel and maintenance for a total of \$450 of which DOH funds will be used
Office Supplies	\$250.00	\$250 in DOH funds will be used for office supplies.
Computer Hardware	10.00	
Computer Software and/or Supplies	\$250.00	Printer cartridges will be ourchased using \$250 in DOH funds will be used.
Photocopier	\$0.00	N/A
Postage	\$0.00	N/A
Advertising	30.00	N/A
Equipment Maintenance	10.00	
Equipment Rental/Purchase	\$0.00	NA
Office Space	50.00	NA .
Construction Costs	\$11.00	NA .
Grant Writing	30 00	NA
Case Management System	30.00	N/A
Audit Costs	\$0.00	NA
Professional Services Contract (Please Specify)	\$44,000,00	The DUI Court uses the SCRAM bracelet on all DUI Court participants for a total of \$12,000.00 of which DOH funds will be used. Carol Sereison will provide \$32,000 in uncompensated services to the DUI Court program as the Defense Bar representative.
Program Evaluation	\$0.00	NA
Total Administrative	\$178,366.00	With the second
TRAVEL/TRAINING		
Travel In-State	\$300.00	In State travel expenditures will use \$300 in DOH funds for in-State travel.
Travel Out-of-State	30.00	NA
Training Fees	50.00	NA .
Miscellaneous Meeting Expenses	80.00	NA .
Client Transportation	30.00	NA .
Community Training	80.00	N/A
Total Travel/Training	\$300.00	
TREATMENT/SUERVISION	200000000000000000000000000000000000000	
Substance Abuse Treatment	\$174,873.80	Substance Abuse treatment services are contracted to Pathfinder. Total funds used will be \$164.873.80 of which \$129.872.80 in DOH funds, \$22,800.00 in County funds, and \$5,900 in participant less will be used. Pathfinder also estimates they will provide \$10,000.00 in uncompensated treatment to the DUC Court.
Salaries and Wages (if applicable)	EO.03	
Employee Benefits (if applicable)	50.00	NA .
Mental Health and/or Other Counseling		
Services	50.00	N/A
Educational Program	SO 00	N/A
Educational Materials	30.00	N/A
Drug Testing and Testing Supplies	\$3,100.00	Meterials necessary to conduct drug testing of program participants.
Monitoring (Electronic)	\$0.00	N/A
Graduation and Incentives	\$1,000.00	Incentives for program participants.
Family Activities	50.00	NA
National Accreditation	30.00	N/A
Other Program Materials	SO 01	NA
Total Treatment/Supervision	\$178,973.80	
MISCELLANEOUS		
A. Quality of Life Dollars	\$0.00	N/A
B. State Approved \$7500 for CARF	\$0.00	NA .
C. State UA Funding	10.00	N/A
Total Miscellaneous	9/64	
TOTALS	\$357,639.80	
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- 3. Under Cell Size, do one of the following:
- To automatically adjust the row height, click AutoFit Row Height.
- To specify a row height, click Row Height, and then type the row height that you want in the Row height hos.

Laramie County Grants Department



Sandra Newland-Grants Manager 310 W. 19th Street, Suite 140 Cheyenne, WY 82001 307-633-4201

December 20, 2019

To Whom It May Concern,

The office of Laramie County Grants supports the Laramie County DUI Court Program and the FY21 grant application. To ensure the program's success, the grants office provides in-kind contributions to the Laramie County DUI Court Program.

The Laramie County Grants Office provides technical grant support in reimbursement requests, reporting, compliance, record keeping, audit preparation and fiscal management of the program. The Grants Office spends an average of 1.50 hours per month working on these items at a rate of \$42.78 per hour (salary + benefits), times twelve months for an estimated total of \$770.04 per fiscal year on the DUI Court Program.

As the Grants Manager for Laramie County, I will act as the fiduciary agent for the DUI Court Program to ensure compliance and continued success.

If you have any questions or concerns, please feel free to contact me at 307-633-4201.

Sincerely,

Sandra Newland

Laramie County Grants Manager

KESOLO HON NO.	RESOLUTION	NO
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A RESOLUTION AUTHORIZING THE SUBMISSION OF A GRANT APPLICATION TO THE WYOMING DEPARTMENT OF HEALTH FOR THE FY-2021 WYOMING COURT SUPERVISED TREATMENT PROGRAM ON BEHALF OF THE GOVERNING BODY OF LARAMIE COUNTY, WYOMING TO REQUEST FUNDING FOR THE LARAMIE COUNTY DUI COURT PROGRAM IN THE AMOUNT OF \$280,639.80.

THE GOVERNING BODY OF LARAMIE COUNTY, WYOMING RESOLVES;

To submit a grant application to the Wyoming Department of Health for FY-2021 Wyoming Court Supervised Treatment Program Grant in the amount of \$280,639.80 to fund operations and programs of the Laramie County Drug Court; and

To commit \$28,500 in matching funds to be included in the Laramie County's FY-2021 budget; and

To Appoint Sandra Newland, or her successor in the position of the Laramie County Grants Manager, as the fiduciary agent and grant contact for Laramie County to execute and submit applications, financial reports and certifications which may be necessary for this application and grant; and

To authorize Kurt Zunker, or his successor in the position of the Director of the Drug Court and DUI Court Programs of Laramie County, as the representative of the governing body, and to implement programs funded by this grant and to make programmatic and performance reports relating to this grant on behalf of the Laramie County Board of Commissioners.

PASSED, APPROVED AND ADOPTED THIS ______ DAY OF JANUARY, 2020.

By: Linda Heath, Chairman	Date:	
ATTEST:		
Debra Lee, Laramie County Clerk	Date:	_,
Received and Approved as to Form only By:		
Gladys Ayokosok, Deputy County Attorney	Date: 16/2020	