

**COUNCIL WORK SESSION**  
Tuesday, July 28, 2015, 4:30 p.m.  
Casper City Hall  
Council Meeting Room

AGENDA

1. P-Card Program
2. Point in Time and the Needs Assessment
3. Concert Promotion
4. Tax Credit Application for Former Star Apartments
5. Sale of Surplus Hogadon Equipment
6. Trail Project Manager Contract
7. Future Agenda Review
8. Around the Table
9. Executive Session: Property Acquisition

***Community Action Partnership of Natrona County  
CY 2014 Annual Report***



## Summary of FY 15 One Cent and General Funds

Community Action Partnership of Natrona County distributed \$341,052.00 to Casper's human service programs. Of the total funds distributed, \$214,277 was City of Casper funds, and \$126,775.00 was provided by Natrona County. The distributions are as follows:

Agency	2015
Arc of Natrona County	\$9,000.00
Big Brothers Big Sisters	\$4,000.00
CASA	\$11,300.00
Central Wyoming Rescue Mission	\$30,400.00
Central Wyoming Senior Center	\$23,400.00
Child Advocacy Project	\$16,800.00
Child Development Center	\$10,500.00
Food Bank of the Rockies	\$20,500.00
Healthcare for the Homeless	\$24,702.00
Life Steps Transitional Housing	\$102,350.00
Meals on Wheels	\$9,700.00
Mercer Family Resource Center	\$18,900.00
Self Help Center	\$29,900.00
Wyoming Senior Citizens	\$8,700.00
Youth Crisis Center	\$12,600.00
Wyoming Dementia Care	\$8,300.00
<b>TOTAL</b>	<b>\$341,052.00</b>

With our current application process, we fund the following service categories: Child Care, Developmental Disabilities, Homeless Support, Family Violence/Sexual Assault, Juvenile Justice and Delinquency, Mental Health, Senior Citizens, and Substance Abuse. The CAPNC Board makes funding decisions based on the Needs Assessment Data we gather every three years. The last assessment was completed in 2014; however, that assessment was not finalized until after this application period. The needs assessment for 2011 was used for this application process. The updated (2014) needs assessment will be used for FY 16 funding requests.

We gather data from human service recipients and providers. In 2014 we received surveys from 109 community partners and 172 individuals who live and/or work in Natrona County. Surveys were distributed at 38 locations. According to survey respondents, the top three needs are in the areas of health, housing and employment:

Health: (41.3%)

- Lack of health insurance

- Lack of dental services
- Lack of low cost medical services

Housing: (40.1%)

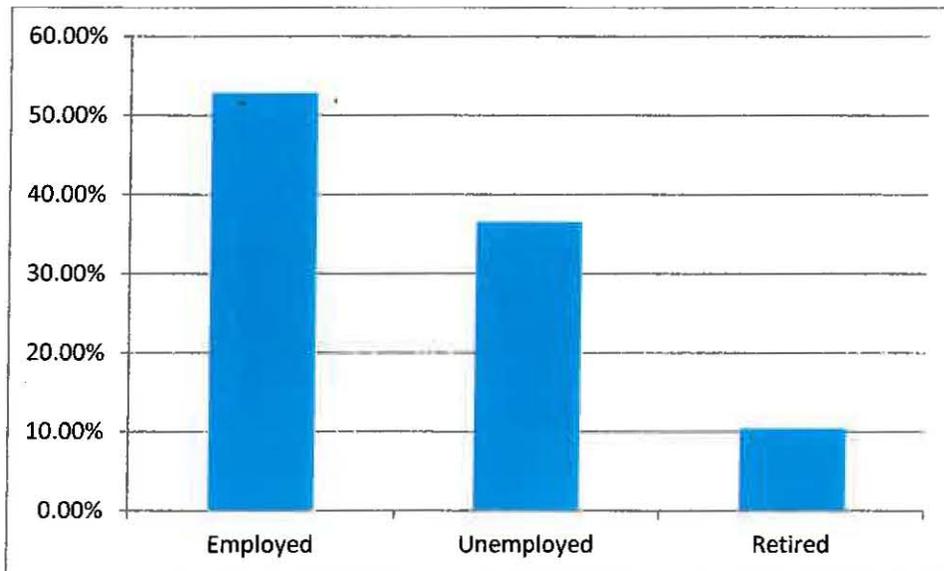
- Lack of affordable housing
- Lack of suitable housing
- Credit issues

Employment: (34.9%)

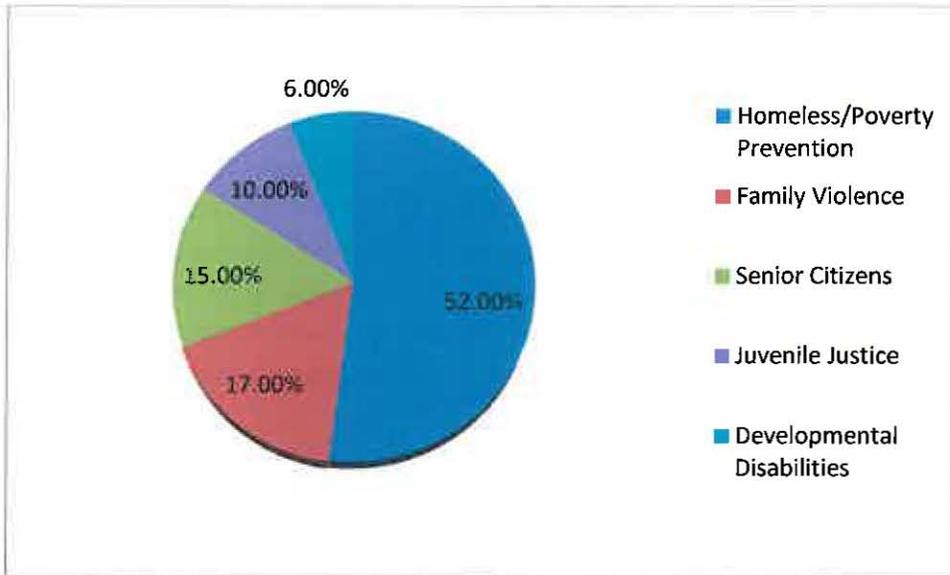
- Lack of employment opportunities
- Lack of reliable transportation
- Physical disability

The other poverty indicators were transportation (30.4%), use of income (25%), nutrition (22.8%), and education (13.1%). A full copy of the Needs Assessment was distributed during the summer of 2014; however, bound copies are available at CAPNC's main office or electronically by request.

Sixty three percent (63%) of respondents were employed either full time, part time or are retired senior citizens (most with only social security as income). Of those employed, 66.8% stated a monthly income of less than \$1,500.



Using this data, the CAPNC Board of Directors distributed the City of Casper/Natrona County funds in the following service categories:



In reporting period July 1, 2014 – December 31, 2014 the agencies receiving funding served a total of 3,772 unique individuals and provided 76,681 direct service hours. The full spreadsheet is in the Appendix. The report for January 1, 2015 – June 30, 2015 will be due to our office July 20, 2015. Final data will be calculated and forwarded to funders in August 2015. In an effort to keep the City of Casper Council members and staff and Natrona County BOCC updated on the use of funds, we will begin gathering and forwarding data quarterly, rather than semi-annually beginning in July 2015.

In December 2013 CAPNC collaborated with Central Wyoming Rescue Mission and United Way to open an overflow emergency shelter on Life Steps Campus. In order to continue serving the most vulnerable during our harsh winter months, we continued this collaboration with Central Wyoming Rescue Mission and operated an overflow emergency shelter again on campus during the months of October 2014 – March 2015. From October – January 2014, the program has provided beds to 45 adult women and 6 children. We again utilized the gymnasium from 8 PM – 7 AM. January – March 2015 numbers will be provided in the One Cent year-end report.

## Summary of FY 14 CAPNC Agency Programming

CAPNC operated three distinct programs: Life Steps Transitional Housing, Healthcare for the Homeless, and Empowerment for Success, a self sufficiency program.

### Life Steps Transitional Housing

During grant year 2014 Life Steps Transitional Housing provided shelter to 46 adults and 56 children, with an average stay of 8 months for each family. Of those families, 49% of them transitioned from our program to unsubsidized, permanent stable housing and 40% of them were able to increase their total income. In addition, 38% of them increased earned income. Our program is able to accomplish these three goals by offering comprehensive case management that focuses on learning to carefully budget monthly income, to make thoughtful purchasing decisions, and to save for future expenses, such as permanent housing deposits and rents.

To better maximize resources in the community, we collaborate with Sensible Nutrition to provide all transitional housing residents with nutrition education. This education includes proper nutrition and purchasing guidance to maximize budgeted food dollars. We also collaborate with the University of Wyoming Occupation Therapy program to enhance the life skills education provided to all residents. And Casper College provides an Empower, Train, Employ program with residents to enhance employment skills.

Because education is a key to ending the cycle of poverty, our program provides an on-site tutor for the children living in transitional housing. She is available two evenings a week to assist students with homework needs. She also works with parents to train them on how to better help their children with homework. This aspect is new this year. We will be evaluating the effectiveness of this program by gathering data from teachers regarding homework completion and subject proficiency.

### Healthcare for the Homeless

During Calendar Year 2014 our medical clinic was able to provide 2,211 medical visits. We saw patients ranging in age from 1 to 74. Fifty-four percent (54%) of our patients were male and 46% were female. Eighty-nine percent (89%) of our patients were below the poverty line with only 4% having Medicaid coverage and 4% having Medicare. The remaining 92% were covered under the sliding scale for payment, translating to a cost of approximately \$5.00 per medical visit for the patient. The medical cost for each patient visit is an average of \$170.00. We receive patients from a variety of referral sources. In 2014 the patients came from the following:

- Emergency Shelter -- 18%
- Transitional Housing -- 27%
- Doubled Up -- 30%
- Street -- 9%
- Other -- 16%

One of the most startling statistics with our patient population is the rate of mental health disorder(s); 67% of our patients suffer from a mental health diagnosis and/or substance abuse diagnosis, often being a significant contributing factor to their homelessness. In order to address the mental health issues that significantly contribute to homelessness and unemployment, the clinic has received funding to provide a psychiatric specialist. This specialist will improve our ability to properly diagnose and treat mental health issues. We have also entered into a Memorandum of Understanding with Central Wyoming Counseling Center to better address substance abuse issues and mental health.

We participate in the patient assistance program to help address the high cost of mental health medications that are often prohibitive in allowing patients to maintain the appropriate prescription regimen to stabilize mental health diagnoses symptoms. This program allows our medical providers to order prescription medications for patients. These are donated by the pharmaceutical companies. Although there are still issues with how to properly medicate patients while waiting for the application to be processed and prescriptions to arrive, this program has greatly improved patients' ability to access appropriate medications.

Twenty-five percent (25%) of our patients suffer from heart disease/hypertension and 10% have diabetes. When homeless, these diseases are significantly more difficult to manage due to diet and exposure. In addition to tracking outcomes for these two medical interventions, we now track outcomes for weight, asthma, colorectal cancer, cervical cancer, and HIV.

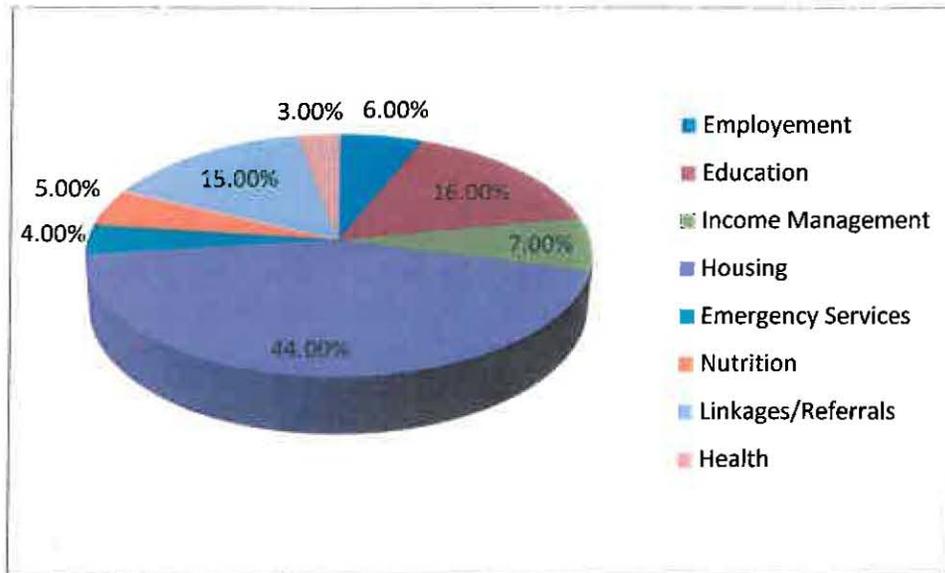
This last year we have partnered with University of Wyoming Family Practice. This arrangement has benefitted both programs. We have access to volunteer physicians on a weekly basis. These physicians bring medical students to the clinic. Our clinic has access to additional medical providers, and the medical students in the program are able to learn about the unique medical needs of a high risk population. This partnership has been so mutually successful; we will continue collaborating in the coming years.

In order to deal with the complicated medical history of homeless patients, we provide comprehensive medical care. In order to accomplish this, we often have to assist the patient with accessing specialty services, as well. We have less than \$20,000 annually to financially assist patients for medical specialists. In response, we have built successful relationships with private medical providers in the community willing to provide this care at no cost or a reduced cost.

With the creation of the Affordable Care Act, our agency hired a Certified Application Counselor to assist individuals with navigating the Healthcare Marketplace, understand policy differences, understand the tax credit for having insurance and the tax penalties for not having insurance, and analyzing options for the best health coverage based on need and budget. We are pleased to report that we worked with 231 individuals last year. The challenge in Wyoming is we still do not have Medicaid expansion. Without the expansion, most of the individuals and families below the poverty line remain uninsured, as the tax credit does not apply and therefore cannot be used to offset the cost of the health insurance policy.

### Employment Opportunities for Success (EOS)

During Grant Year 2014 our self-sufficiency program served 673 individuals with intensive case management services including basic financial education, budgeting practice and goal setting. We meet with clients on a weekly basis to provide individual services and review progress. This program's primary funding is from Community Service Block Grant funds. The use of these funds is broken down as follows:



Some key demographic data on our clients will explain the importance of the services we provide: Only 10% of our clients have any education past a high school diploma or GED. Fifty-two percent (52%) of the families we serve are single parent households, with only 19% having two parent families. Thirty-nine percent (39%) of our clients are employed but are unable to meet their expenses with their current income, leaving 68% of our clients living below the poverty line. Of the total families we served, 66% were homeless when they came into our office and 31% were currently renting but were going to be evicted due to an inability to pay the coming rent. The cost of rent in our community is significant to the number of individuals we serve for housing crises. Based on our most recent data, the vacancy rate has increased; however, there has not been a dramatic decrease in the cost to rent an apartment or home in our community.

The CSBG grant evaluates outcomes in employment and self-sufficiency based on local and national goals of total participants, those expected to achieve an outcome, and those who actually achieve an outcome. Our data was reported as follows:

- 111 families received rent or mortgage assistance with an average of \$626.00 per family
- 57 families received utility assistance with an average of \$166.00 per family

- 96 families received food assistance with an average of \$292.00 per family

In addition to the direct service activities we conduct with our funding, we also support other agencies with operation support. With CSBG funds, we subcontract \$40,000 to Mother Seton House to support their transitional housing activities. They also receive \$6,000 of the Emergency Service Grant (ESG). The majority of the ESG grant is awarded to Central Wyoming Rescue Mission -- \$16,000. We receive TANF funds, as well. We subcontract \$35,000 to CLIMB Wyoming and \$10,000 to Boys and Girls Clubs of Central Wyoming. JABG funds are applied for by CAPNC. Those funds are subcontracted to Mercer Family Resource Center. In 2014 they received \$15,366.

### **Future Planning**

#### **502s Certification**

In 2015 we will begin assisting very low income and low income individuals to qualify for homeownership. This is a program from USDA and provides mortgages to individuals who do not qualify for traditional lenders. Our 502 certified staff member works with individuals and families to assess if homeownership is a viable option for them, determines if they can qualify under the 502 guidelines, and assists with the loan package submission. We are collaborating with Wyoming Housing Network, which will provide the first-time homebuyer education. If the family is not eligible due to credit issues, our 502 specialist will provide credit counseling, which includes a goal focused action plan for improving credit.

#### **Retired Senior Volunteer Program (RSVP)**

The RSVP program was in our community for several years but has not been funded in Natrona County for the last three years. Effective July 1, 2015 we will bring this service back to the community. The program is designed to engage retired individuals in community service. As one of the goals in our CSBG program is engaging low income individuals with their community, we will expand our efforts with the senior population. Research has shown that engaging seniors in their community promotes independence which strengthens housing stability.

#### **Housing First**

For several years we have been working toward moving our housing services from transitional housing to permanent supportive housing. Research has shown that permanent supportive housing is both more effective and more cost efficient than transitional housing. This transition is expected to take place October 2015. CAPNC has been awarded a grant from the State of Wyoming and will be reallocating HUD funds to support a Housing First Permanent Supportive Housing Project. To accomplish this, we will be working closely with the Pathways program along with the State of Wyoming to develop a comprehensive housing first program. We will be gathering data on housing stability, interactions with law enforcement, and interactions with emergency medical/mental health institutions. Our baseline

data will be compared with the data we gather from program residents to determine if the program is as effective in our community as it has been in other communities across the country.

*Additional information is provided in the Appendix*

Appendix A – 2014 Natrona County Low Income Needs Assessment

Appendix B – 6 Year City of Casper and Natrona County Human Service Funding

Appendix C – Gap Analysis of Livable Wage and End of Federal Assistance

Appendix D – 2014 Federal Poverty Guidelines

Appendix E – 2015 Semi-Annual One Cent Report

# APPENDIX

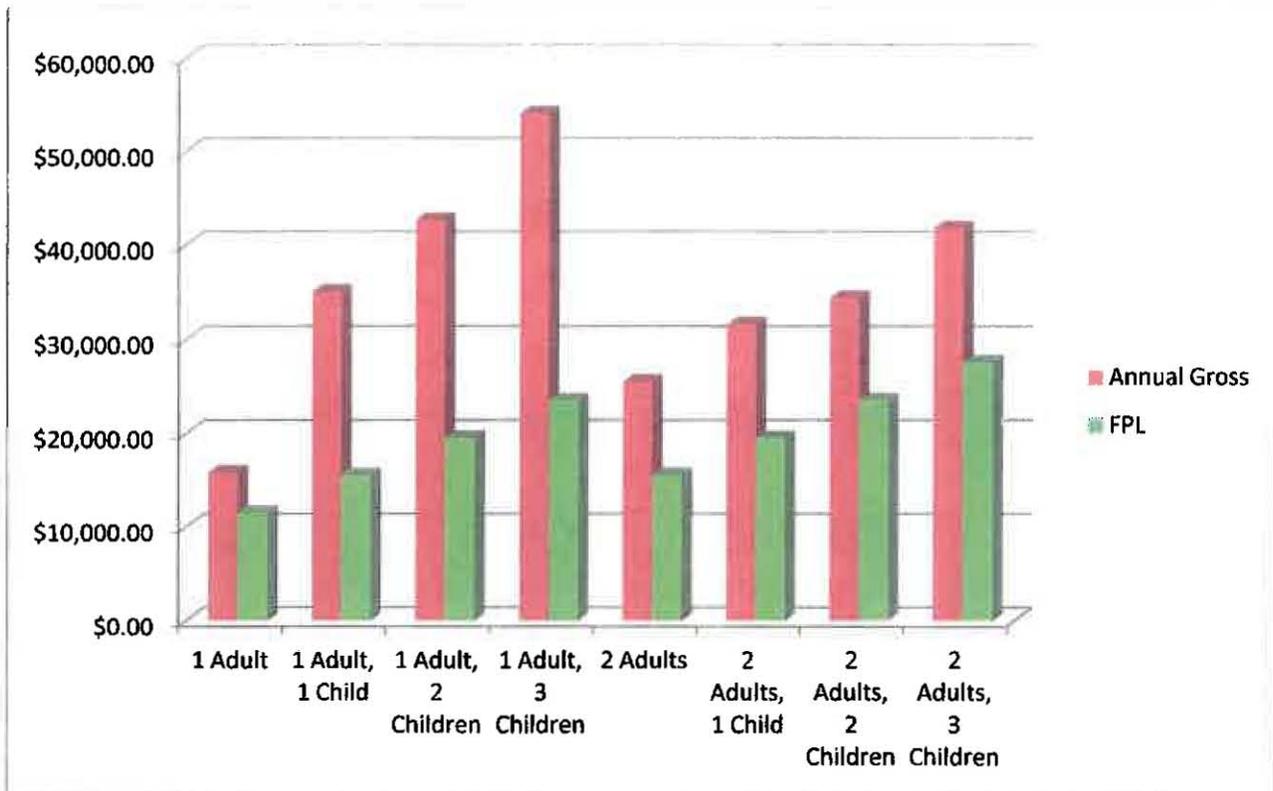
**Human Service Funding  
FY 2010 - FY 2015**

<b>Agency</b>	<b>2010</b>	<b>2011</b>	<b>2012</b>	<b>2013</b>	<b>2014</b>	<b>2015</b>
Arc of Natrona County	\$6,700.00	\$9,852.00	\$9,103.00	\$9,103.00	\$8,600.00	\$9,000.00
Big Brothers Big Sisters				\$5,000.00	\$4,300.00	\$4,000.00
Brain Injury Alliance						\$0.00
CASA	\$9,875.00	\$14,602.00	\$11,691.00	\$12,000.00	\$11,800.00	\$11,300.00
Casper Family Connections				\$5,000.00		\$0.00
Central Wyoming Counseling Center	\$11,250.00	\$8,852.00				
Central Wyoming Rescue Mission	\$12,000.00	\$9,000.00	\$17,239.00	\$8,000.00	\$7,000.00	\$30,400.00
Central Wyoming Senior Center	\$32,500.00	\$29,852.00	\$26,779.00	\$29,730.00	\$26,000.00	\$23,400.00
Child Advocacy Project	\$14,000.00	\$18,931.00	\$11,323.00	\$19,697.00	\$17,500.00	\$16,800.00
Child Development Center	\$15,500.00	\$10,860.00	\$13,597.00	\$13,597.00	\$10,600.00	\$10,500.00
Food Bank of the Rockies					\$20,000.00	\$20,500.00
Good Steward			\$9,050.00			
Healthcare for the Homeless	\$30,000.00	\$25,705.00	\$34,706.00	\$24,029.00	\$23,000.00	\$24,702.00
Life Steps Transitional Housing	\$32,200.00	\$32,200.00	\$102,000.00	\$96,200.00	\$96,200.00	\$102,350.00
Meals on Wheels	\$12,000.00	\$11,852.00	\$11,224.00	\$0.00	\$9,600.00	\$9,700.00
Mercer Family Resource Center	\$18,750.00	\$18,750.00	\$34,584.00	\$25,130.00	\$23,800.00	\$18,900.00
Self Help Center	\$40,054.00	\$35,972.00	\$33,014.00	\$40,000.00	\$35,800.00	\$29,900.00
Wyoming Senior Citizens	\$9,200.00	\$9,852.00	\$8,815.00	\$9,200.00	\$8,500.00	\$8,700.00
Wyoming Dementia Care						\$8,300.00
Youth Crisis Center	\$15,000.00	\$16,673.00	\$13,934.00	\$15,000.00	\$14,000.00	\$12,600.00
Emergency Services (used for inclement weather and apartment closures)				\$25,000.00	\$24,000.00	included with CWRM
<b>TOTAL</b>	<b>\$259,029.00</b>	<b>\$252,953.00</b>	<b>\$337,059.00</b>	<b>\$336,686.00</b>	<b>\$340,700.00</b>	<b>\$341,052.00</b>

NOTE: No application was received from an agency in the month the field is blocked out.

Increase connected to the expansion of transitional housing from 10 units to 22 units.

Applied but no representative attended the hearing process. No funding was approved this year.



Living Wage is calculated with the expenses below:

Monthly Expense	1 Adult	1 Adult, 1 Child	1 Adult, 2 Children	1 Adult, 3 Children	2 Adults	2 Adults, 1 Child	2 Adults, 2 Children	2 Adults, 3 Children
Food	\$242.00	\$357.00	\$536.00	\$749.00	\$444.00	\$553.00	\$713.00	\$904.00
Child Care	\$0.00	\$521.00	\$758.00	\$996.00	\$0.00	\$0.00	\$0.00	\$0.00
Medical	\$105.00	\$349.00	\$367.00	\$351.00	\$254.00	\$340.00	\$320.00	\$331.00
Housing	\$479.00	\$662.00	\$662.00	\$963.00	\$524.00	\$662.00	\$662.00	\$963.00
Transportation	\$285.00	\$555.00	\$639.00	\$686.00	\$555.00	\$639.00	\$686.00	\$698.00
Other	\$67.00	\$164.00	\$209.00	\$278.00	\$119.00	\$155.00	\$176.00	\$211.00
<b>TOTAL</b>	<b>\$1,178.00</b>	<b>\$2,608.00</b>	<b>\$3,171.00</b>	<b>\$4,023.00</b>	<b>\$1,896.00</b>	<b>\$2,349.00</b>	<b>\$2,557.00</b>	<b>\$3,107.00</b>

Source: Massachusetts Institute of Technology

**2014 POVERTY GUIDELINES FOR THE 48  
CONTIGUOUS STATES  
AND THE DISTRICT OF COLUMBIA**

<b>Persons in family/household</b>	<b>Poverty guideline</b>
For families/households with more than 8 persons, add \$4,060 for each additional person.	
1	\$11,670
2	15,730
3	19,790
4	23,850
5	27,910
6	31,970
7	36,030
8	40,090

# Point-in-Time Count WY-500 Wyoming Statewide CoC

Inventory Count Date: 1/28/2015

Population: Sheltered and Unsheltered Count

## Persons in Households with at least one Adult and one Child

	Sheltered		Unsheltered	Total
	Emergency	Transitional		
Total Number of Households	16	55	22	93
Total Number of persons (Adults & Children)	44	171	83	298
Number of Persons (under age 18)	25	110	48	183
Number of Persons (18 - 24)	4	7	5	16
Number of Persons (over age 24)	15	54	30	99

Gender (adults and children)	Sheltered		Unsheltered	Total
	Emergency	Transitional		
Female	24	111	47	182
Male	20	60	36	116
Transgender (male to female)	0	0	0	0
Transgender (female to male)	0	0	0	0

Ethnicity (adults and children)	Sheltered		Unsheltered	Total
	Emergency	Transitional		
Non-Hispanic/Non-Latino	22	141	77	240
Hispanic/Latino	22	30	6	58

Point-in-Time Count WY-500 Wyoming Statewide CoC

Race (adults and children)	Sheltered	
	Emergency	Transitional
White	33	146
Black or African-American	1	4
Asian	0	0
American Indian or Alaska Native	2	8
Native Hawaiian or Other Pacific Islander	0	0
Multiple Races	8	13

Unsheltered	Total
47	<b>226</b>
2	<b>7</b>
0	<b>0</b>
30	<b>40</b>
0	<b>0</b>
4	<b>25</b>

Inventory Count Date: 1/28/2015  
 Population: Sheltered and Unsheltered Count

**Persons in Households with only Children**

	Sheltered		Unsheltered	Total
	Emergency	Transitional		
Total Number of Households	2	0	2	4
Total Number of children (under age 18)	2	0	2	4

Gender (adults and children)	Sheltered		Unsheltered	Total
	Emergency	Transitional		
Female	1	0	2	3
Male	1	0	0	1
Transgender (male to female)	0	0	0	0
Transgender (female to male)	0	0	0	0

Ethnicity (adults and children)	Sheltered		Unsheltered	Total
	Emergency	Transitional		
Non-Hispanic/Non-Latino	1	0	2	3
Hispanic/Latino	1	0	0	1

Point-in-Time Count WY-500 Wyoming Statewide CoC

Race (adults and children)	Sheltered	
	Emergency	Transitional
White	2	0
Black or African-American	0	0
Asian	0	0
American Indian or Alaska Native	0	0
Native Hawaiian or Other Pacific Islander	0	0
Multiple Races	0	0

Unsheltered	Total
2	4
0	0
0	0
0	0
0	0
0	0

Inventory Count Date: 1/28/2015  
 Population: Sheltered and Unsheltered Count

**Persons in Households without Children**

	Sheltered			Unsheltered	Total
	Emergency	Transitional	Safe Haven		
Total Number of Households	184	104	0	174	<b>462</b>
Total Number of persons (Adults)	<b>185</b>	<b>105</b>	<b>0</b>	<b>206</b>	<b>496</b>
Number of Persons (18 - 24)	17	8	0	18	<b>43</b>
Number of Persons (over age 24)	168	97	0	188	<b>453</b>

Gender (adults and children)	Sheltered			Unsheltered	Total
	Emergency	Transitional	Safe Haven		
Female	33	25	0	52	<b>110</b>
Male	152	80	0	154	<b>386</b>
Transgender (male to female)	0	0	0	0	<b>0</b>
Transgender (female to male)	0	0	0	0	<b>0</b>

Ethnicity (adults and children)	Sheltered			Unsheltered	Total
	Emergency	Transitional	Safe Haven		
Non-Hispanic/Non-Latino	156	96	0	174	<b>426</b>
Hispanic/Latino	29	9	0	32	<b>70</b>

Point-in-Time Count WY-500 Wyoming Statewide CoC

Race (adults and children)	Sheltered			Unsheltered	Total
	Emergency	Transitional	Safe Haven		
White	155	92	0	151	<b>398</b>
Black or African-American	9	7	0	7	<b>23</b>
Asian	0	0	0	0	<b>0</b>
American Indian or Alaska Native	12	3	0	42	<b>57</b>
Native Hawaiian or Other Pacific Islander	0	0	0	1	<b>1</b>
Multiple Races	9	3	0	5	<b>17</b>

Date of PIT Count: 1/28/2015

Population: Sheltered and Unsheltered Count

### Total Households and Persons

	Sheltered			Unsheltered	Total
	Emergency	Transitional	Safe Haven		
Total Number of Households	202	159	0	198	<b>559</b>
Total Number of Persons	231	276	0	291	<b>798</b>
Number of Children (under age 18)	27	110		50	<b>187</b>
Number of Persons (18 to 24)	21	15	0	23	<b>59</b>
Number of Persons (over age 24)	183	151	0	218	<b>552</b>

### Gender

	Sheltered			Unsheltered	Total
	Emergency	Transitional	Safe Haven		
Female	58	136	0	101	<b>295</b>
Male	173	140	0	190	<b>503</b>
Transgender (male to female)	0	0	0	0	<b>0</b>
Transgender (female to male)	0	0	0	0	<b>0</b>

### Ethnicity

	Sheltered			Unsheltered	Total
	Emergency	Transitional	Safe Haven		
Non-Hispanic/Non-Latino	179	237	0	253	<b>669</b>
Hispanic/Latino	52	39	0	38	<b>129</b>

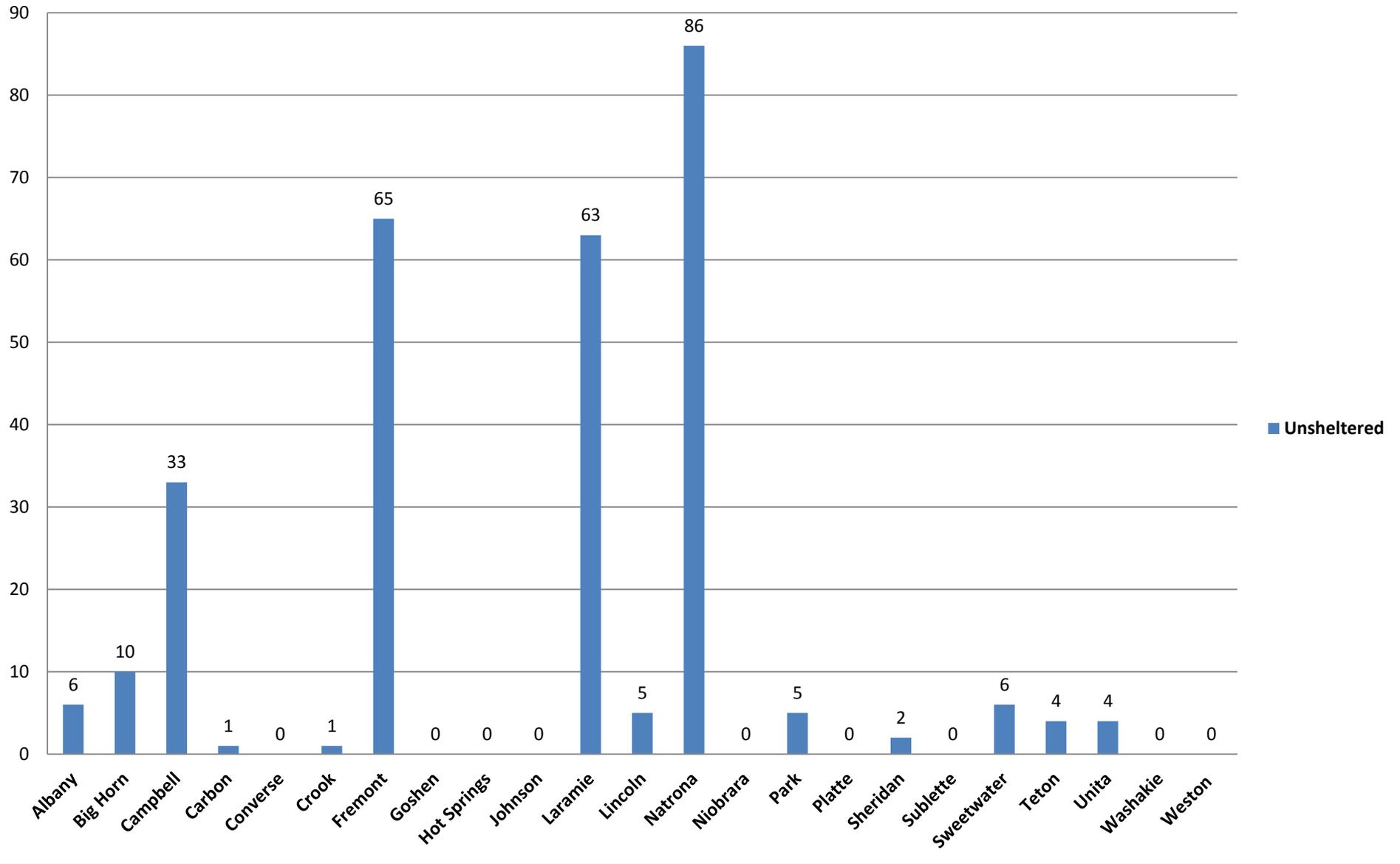
### Race

Sheltered			Unsheltered	Total
Emergency	Transitional	Safe Haven		

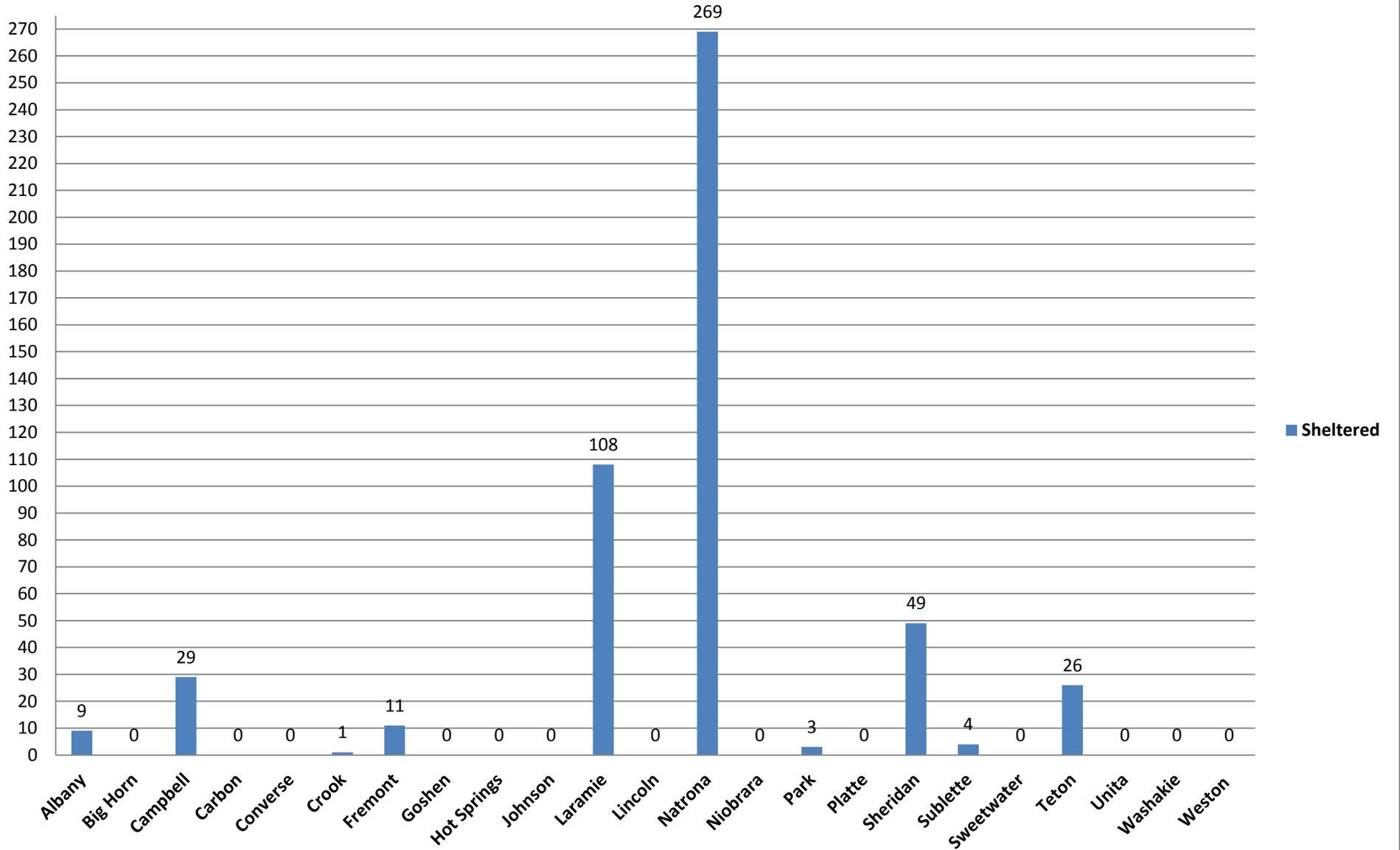
Point In Time Summary for WY-500 - Wyoming Statewide CoC

White	190	238	0	200	<b>628</b>
Black or African-American	10	11	0	9	<b>30</b>
Asian	0	0	0	0	<b>0</b>
American Indian or Alaska Native	14	11	0	72	<b>97</b>
Native Hawaiian or Other Pacific Islander	0	0	0	1	<b>1</b>
Multiple Races	17	16	0	9	<b>42</b>

## 2015 Point-in-Time Unsheltered Count by County



# Total of Sheltered



Community Action Partnership of Natrona County

Community

# Needs Assessment

Prepared by Lola A. Hoffman

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## Acknowledgements

Community Action Partnership of Natrona County gratefully acknowledges the following organizations for assisting in the development of this report:

- Adult Basic Education/GED
- Board of County Commissioners
- Boys and Girls Club of Central Wyoming
- CAPNC-12<sup>th</sup> Street Clinic – Health Care for the Homeless
- CAPNC-Main Office
- CAPNC – Transitional Housing
- CASA of Natrona County
- Casper Veterans Outreach Center
- Central Wyoming Rescue Mission
- Central Wyoming Senior Services
- Circles of Wyoming
- Department of Family Services
- Department of Vocational Rehabilitation
- Department of Workforce Services
- Family Connections
- Experience Works
- Interfaith of Natrona County
- Mercer Family Resource
- Natrona County Drug Court
- Natrona County Early Head Start
- Natrona County Head Start
- Natrona County Public Defender’s Office
- Natrona County WIC Office
- Probation and Parole Office
- Restoration Fellowship Church
- Rocky Mountain Re-Entry Services
- Seton House
- Set Free Church
- St. Mark’s Church
- The Self Help Center
- United Way of Natrona County
- University of Wyoming/Casper College Social Work Students
- Wyoming Department of Corrections
- Wyoming Housing Network Inc.
- Wyoming Recovery
- Wyoming Senior Citizens Inc.
- Youth Crisis Center
- YMCA

This report would not have been possible without help from the many individuals who completed survey questionnaires. We also thank the many agencies who encouraged the people they serve to participate in this project.

## INTRODUCTION

Community Action Agencies have been key players in the war on poverty since their inception in the 1960s. Because they work directly with low-income individuals and families in dealing with the problems of poverty on a daily basis, Community Action Agencies are uniquely qualified to examine the needs of communities and individuals as they strive to eliminate poverty. In most cases, Community Action Agencies provide a wide range of services that address a variety of poverty problems.

Why, then, does poverty continue to affect so many Americans? How can Community Action Partnership of Natrona County (CAPNC) develop and improve strategies to be more effective in helping people move out of poverty? Before answering these questions and deciding upon an approach, CAPNC must determine what NEEDS exist in Natrona County. Before determining a plan of action, CAPNC must develop a deep understanding of the current conditions, likely future trends, and issues of greatest concern within the county.

## EXECUTIVE SUMMARY

In April 2014, Community Action Partnership of Natrona County (CAPNC) enlisted the assistance of staff and local agencies to conduct a needs assessment in Natrona County. The project included surveying clients and community stakeholders, conducting secondary data research and providing a summary report with key findings and recommendations.

### Goal:

Plan and conduct an all-inclusive Community Needs Assessment for CAPNC in 2014 ensuring compliance with the Community Services Block Grant requirements.

### Objectives:

- Provide a broad view of demographic and economic changes, region and county infrastructure, and community-wide changes.
- Focus on providing a localized assessment of needs by reporting county level data.
- Collect *primary* data by gathering external community feedback through surveys with key stakeholders, etc.
- Collect *secondary* data by researching national, state and local data resources.
- Facilitate an analysis process and identifying potential causes of poverty.
- Mobilize CAPNC and community resources in action plans and addressing priority needs.

**Coverage Area:** Natrona County, Wyoming

## CAPNC Agency Overview:

Community Action Partnership of Natrona County (CAPNC) is part of a nationwide network of Community Action Partnership (CAPs), community-based organizations mandated to provide services and to advocate for the interests of the poor. As with other CAPs, Community Action Partnership of Natrona County administers, coordinates and funds programs that act in response to the human service needs of residents of Natrona County. The extent of services provided by the Community Action Partnership includes programs, which aid those with economic disadvantages, those with functional disabilities such as the frail elderly and physically disabled, those with developmental disabilities, those with acute or chronic mental illness, and those who are at risk of or suffering from substance abuse.

The work of Community Action Partnership is accomplished through partnerships with a broad spectrum of community agencies and the administration of State and Federal grants.

**CAPNC Mission:** CAPNC's mission is to collaborate with and strengthen low-income individuals and families in Natrona County to help them achieve economic and social stability, to build community, and to advocate for social and economic justice.

**CAPNC Vision:** CAPNC will strive to eliminate poverty by serving as a leader, resource, and advocate for individuals and families in need.

**CAPNC Programs:** For administrative purposes Community Action Partnership is organized into three divisions. Increasingly, population and service delivery factors require collaborative approaches and draws on the expertise and resources of more than one division and on organizations and resources outside of the agency. These divisions and some of the programs offered include:

### Community Action Partnership

- Family Development and Self Sufficiency Services
- Emergency Services
- Employment and Training Services
- Case Management
- Community Services Block Grant
- Community Development Block Grant

### Life Steps Transitional Housing

- Transitional Housing & Supportive Services to families with children

### 12<sup>th</sup> Street HCH Clinic

- Primary and preventative health care for homeless individuals and families
- Outreach
- Mental Health and Substance abuse services
- Case Management
- Health Education

Community needs assessments can and should be more than just a gathering and analyzing of data; they can also be a basis for **creating change**. A comprehensive community-based needs assessment can help an agency address the community and family needs by providing a snapshot of the community, including their economic well-being, educational status, health, and welfare. A comprehensive assessment can provide important community information regarding the work of other agencies or organizations may be working on to address particular issues, and where gaps in community services lie. It **provides a mechanism to meet and develop partnerships** with other community groups interested in strengthening services to citizens in the area. Finally, a comprehensive community needs assessment can help an agency in its planning process by providing the foundation for strategic and operational planning, assessing the agency's impact on meeting the needs of the community, determining what programs or strategies may have become obsolete, and deciding what strategies may provide new opportunities for the agency and the community.

A multi-level community needs assessment approach was used to provide guidance in the planning process for improving services and programs to **combat poverty** in Natrona County. The comprehensive needs assessment can be used for a variety of situations, including the following:

- Guide board governance in sound decision-making
- Create opportunities for community buy-in to the agency's planning process
- Create opportunities for new alliances and connections with new partners
- Form successful strategies
- Ensure services meet the current needs of the community
- Build credibility
- Provide a foundation for pursuing new/different funding
- Guide staff training and educational planning
- Enhance CAPNC's capacity to respond to change
- Generate authentic input from stakeholders
- Indicate causes as well as conditions of poverty

## Assessing Needs

### Develop a Plan

The first step with any project begins with development of a plan, which maintains focus on the big picture all the while accounting for every detail. A **work plan** comprised of tasks, timelines, responsible persons, and progress updates served to guide the needs assessment process.

### Collect Data

Since CAPNC is an anti-poverty organization, it was important to use the community action areas as the foundation on which to build the needs assessment. They include the following:

To remove obstacles and solve problems that block the achievement of self-sufficiency, the statewide needs assessment explores the eight community action poverty indicators.

1. To benefit from accessible and affordable healthcare.
2. To secure and retain meaningful employment.
3. To utilize available transportation options.
4. To attain an adequate education, with particular attention toward improving literacy skills of the low-income families.
5. To make better use of available income.
6. To obtain and maintain adequate housing and a suitable living environment.
7. To ensure proper nutrition by encouraging healthy eating habits.
8. To obtain emergency assistance to meet immediate and urgent family and individual basic living needs.

The following poverty indicators served as our primary and secondary data collection issue areas.

**Poverty Indicators:**

- Health
- Employment
- Transportation
- Education
- Use of Income
- Housing
- Nutrition
- Emergency Situations

**Supplemental Indicators:**

- Children’s Needs

**Primary and Secondary Data Collection**

After determining the poverty indicators, our focus shifted to the identification of primary data collection sources. Primary sources included gathering quantitative and qualitative feedback through surveys.

**Survey Results**

CAPNC identified survey distribution partners throughout Natrona County. As a result, there were only 20% of the circulated client surveys completed and 20% of the circulated community partners surveys completed. Consequently, there were 279 needs assessment survey respondents, with the largest segment of respondents ages 24-44. The majority were female (73.8%), White (80.8%), with a monthly household income of \$1,666+ (14.0%) listing high school/G.E.D. as the highest level of education completed (29.1%). Survey respondents were asked whether a key area or poverty indicator was an issue for them and/or their family.

The overall ranking of the eight key poverty indicators along with the top three reasons identified for each was as follows:

**1. Health – 41.3%**

The top three reasons identified were:

1. Lack of health insurance
2. Lack of dental services
3. Lack of free or low-cost medical services

**2. Housing – 40.1%**

The top three reasons identified were:

1. Affordability of rent/house payments
2. Lack of affordable/suitable housing
3. Credit Issues

**3. Employment – 34.9%**

The top three reasons identified were:

1. Lack of employment opportunities
2. Lack of reliable transportation
3. Physical Disability

**4. Transportation – 30.4%**

The top three reasons identified were:

1. Price of gas
2. Cost of owning and operating a vehicle
3. Cost of vehicle repair

**5. Use of Income – 25%**

The top three reasons identified were:

1. Lack of knowledge about addressing credit issues
2. Lack of knowledge on how to save/invest money
3. Lack of knowledge about money management, i.e. credit card debt, budgeting, checking accounts, etc.

**6. Nutrition – 22.8%**

The top three reasons identified were:

1. Not enough income to cover food cost
2. Not eligible for food stamps (SNAP)
3. Lack of transportation, i.e. to grocery store, food pantry or other food resources

**7. Education – 13.1%**

The top three reasons identified were:

1. Lack of vocational skills or training
2. Lack of computer access at home
3. Lack of GED/Adult Education Classes

## 8. Emergency Situations\*

The top three reasons identified were:

1. No health insurance
2. Lack of income for prescription drugs
3. Lack of food

\*(NOTE: The format of the Emergency Situations did not allow for a ranking or percentage; rather it asked respondents to *choose the three most important emergency situations that may be problems in the area.*)

## Community Stakeholder Feedback

The second form of primary data collection came from surveying community stakeholder representatives from a variety of social service agencies listed under Acknowledgement and other community members. The purpose of these surveys was to identify how other agencies might be addressing the key poverty indicators.

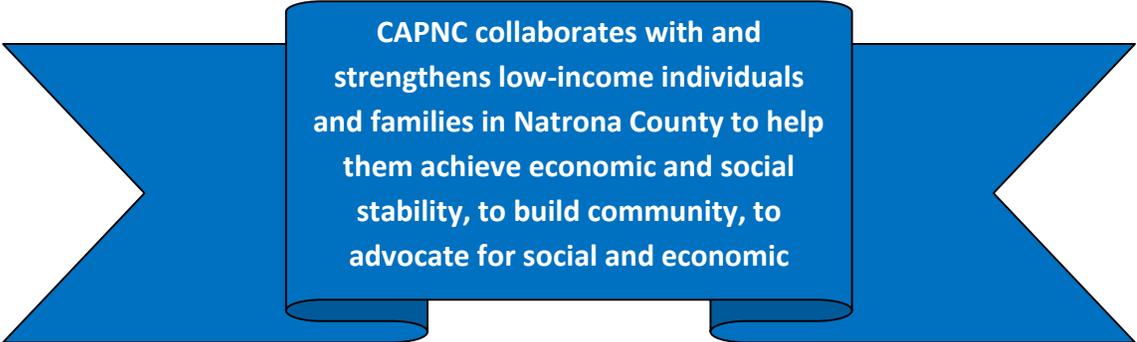
Open-ended questions about each of the key poverty indicators encouraged expression of qualitative feedback. Questions such as, "Is your agency addressing EMPLOYMENT issues in your community and if so, how? The responses in detail are included at the end of each poverty issue as part of the county reports. Overall questions and responses included the following feedback.

## Please describe your involvement with the community

- 30 - Other.....left blank
- 25 - Social Service Provider (not CAPNC)
- 10 - Early Head Start or Head Star personnel
- 9 - Casper Workforce personnel
- 6 - Teacher/Educator
- 4 - CAPNC employee
- 4 - Local Clinic or Hospital personnel
- 3 - Concerned parent
- 3 - Public Defender
- 2 - Continuum of Care Collaborative
- 2 - Local County Health Department personnel
- 2 - Local elected County Commissioner
- 2 - Local physician/nurse
- 2 - Public school board or school official
- 1 - Boys & Girls Club personnel
- 1 - Early Head Start or Head Start Parent
- 1 - Emergency Shelter/Transitional Housing personnel
- 1 - Law Enforcement Personnel
- 1 - Veterans Service Provider

# CAPNC:

## Agency Profile & Services



CAPNC collaborates with and strengthens low-income individuals and families in Natrona County to help them achieve economic and social stability, to build community, to advocate for social and economic

### **CAPNC Mission:**

CAPNC collaborates with and strengthens low-income individuals and families in Natrona County to help them achieve economic and social stability, to build community, to advocate for social and economic justice.

### **CAPNC Vision:**

CAPNC will strive to eliminate poverty by serving as a leader, resource, and advocate for individuals and families in need.

## **Community Action Partnership of Natrona County**

The goal of CAPNC is to assist residents in the development of economic and social self-sufficiency by providing the services listed below:

### **CAPNC – Main Office**

- Family Development and Self Sufficiency Services
- Employment and Training Services
- Emergency Services
- Case Management
- Community Services Block Grant
- Community Development Block Grant
- Grant

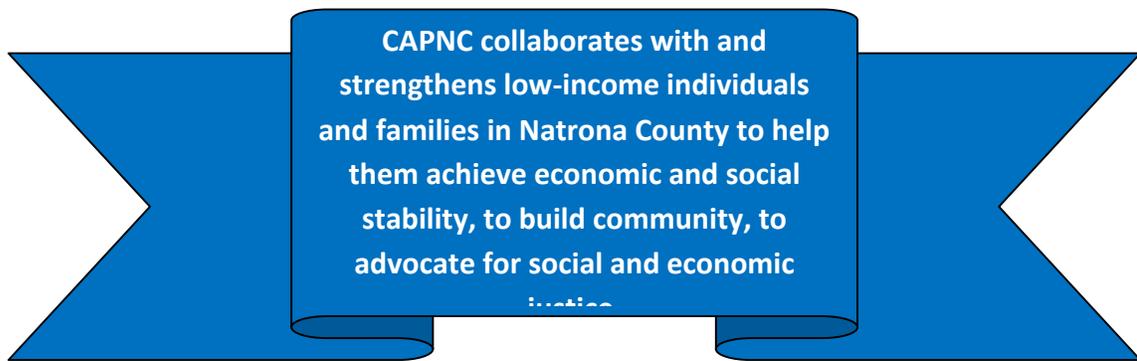
### **Life Steps Transitional Housing**

- Transitional Housing & Supportive Services to families with children

### **12<sup>th</sup> Street HCH Clinic**

- Primary and preventative health care for homeless individuals and families
- Outreach
- Mental Health and Substance abuse services
- Case Management
- Health Education

# COUNTY PROFILE



**NATRONA COUNTY**  
**History & Geography**

Natrona County was created on March 9, 1888 by the legislature of the Wyoming Territory. Natrona County was named for the deposits of Natrona that are found in the area. The county seat is Casper. Natrona County comprises one city, five towns and several Census-designated places.

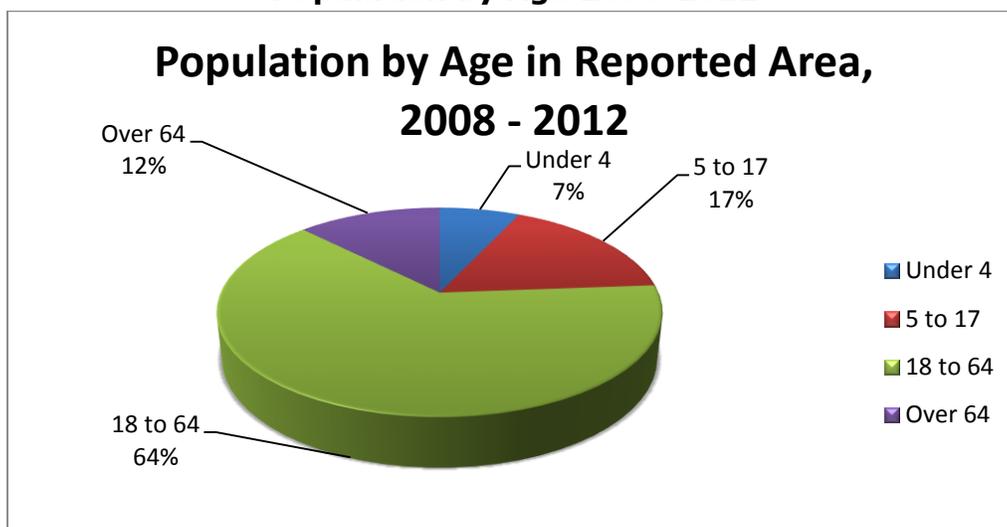
According to the U.S. Census Bureau, the county has a total area of 5,340.35 square miles and the population density was 14 people per square mile.

**Population Facts**

**Population Change 2000-2012**

Geographic Area	Census 2000 Population	ACS 2008-2012 Population	Population Change	% Change
Natrona County, Wyoming	66,533	75,876	9,343	14.0%
Wyoming	493,782	563,626	69,844	14.1%

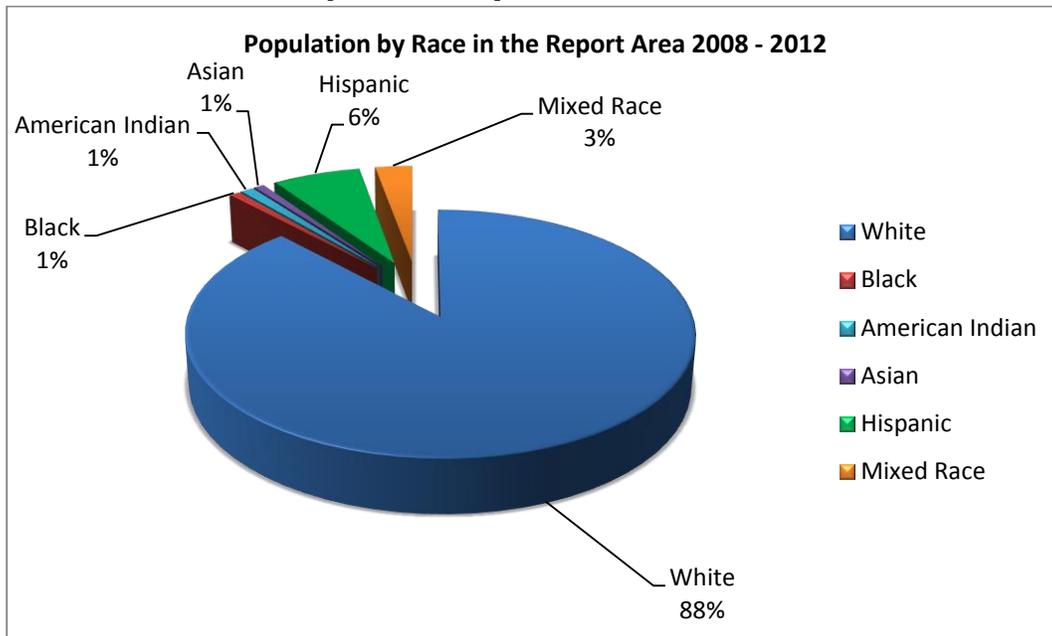
**Population by Age 2008-2012**



**Population by Gender 2008-2012**

Geographic Area	0 to 4		5 to 17		18 to 64		Over 64	
	M	F	M	F	M	F	M	F
Natrona County	2,736	2,633	6,761	6,032	24,697	23,506	4,120	5,391
Wyoming	19,996	19,196	49,472	46,145	184,583	173,039	32,593	37,779
United States	10,291,124	9,846,760	27,554,023	26,287,952	96,618,006	97,869,4085	15,750,910	23,115,765

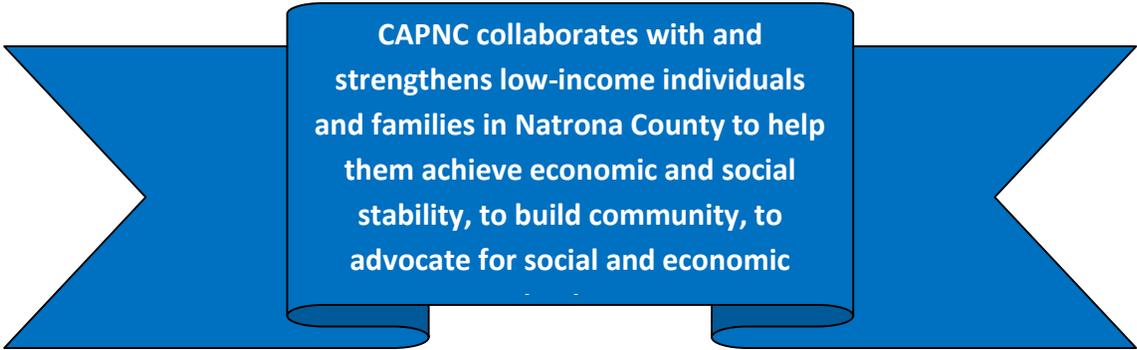
### Population by Race 2008-2012



### Population by Race 2008-2012

Geographic Area	White	Black	American Indian	Asian	Hispanic	Mixed Races
Natrona County	70,831	639	745	579	5,352	2,278
Wyoming	513,021	4,689	12,951	4,392	50,313	15,445
United States	229,298,906	38,825,848	2,529,100	14,859,795	50,545,275	8,296,291

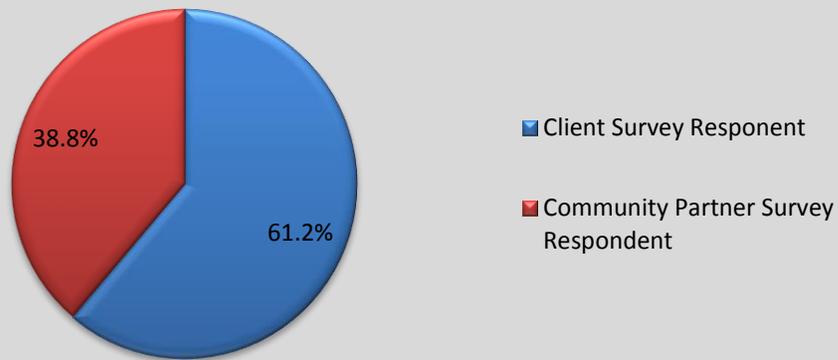
# SURVEY RESPONDENTS PROFILE AND OVERALL RESULTS



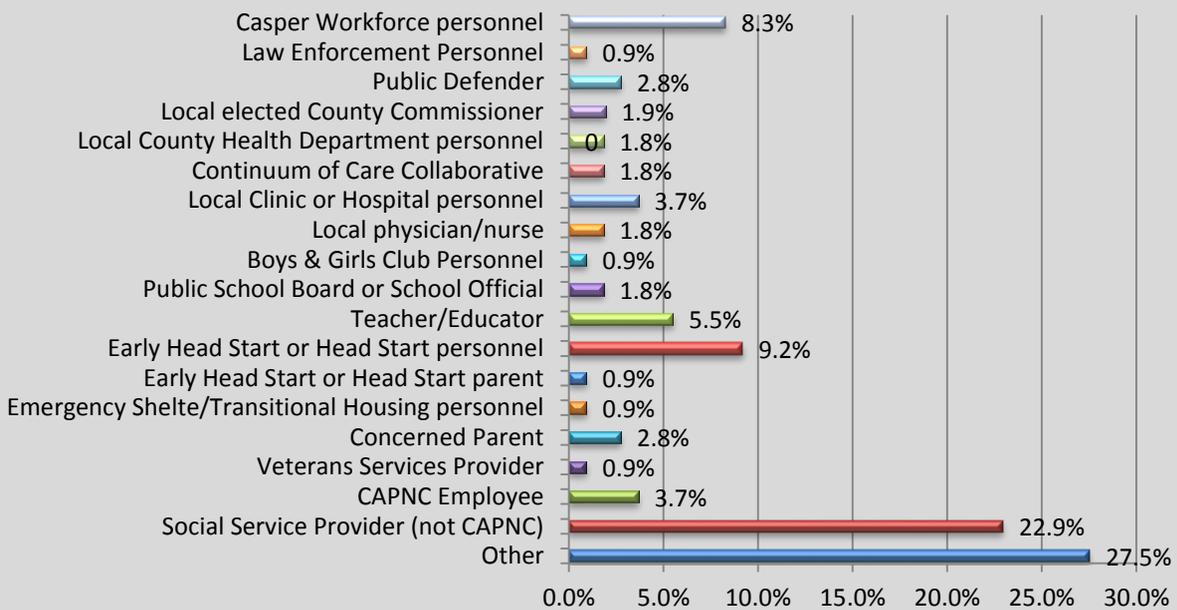
CAPNC collaborates with and strengthens low-income individuals and families in Natrona County to help them achieve economic and social stability, to build community, to advocate for social and economic

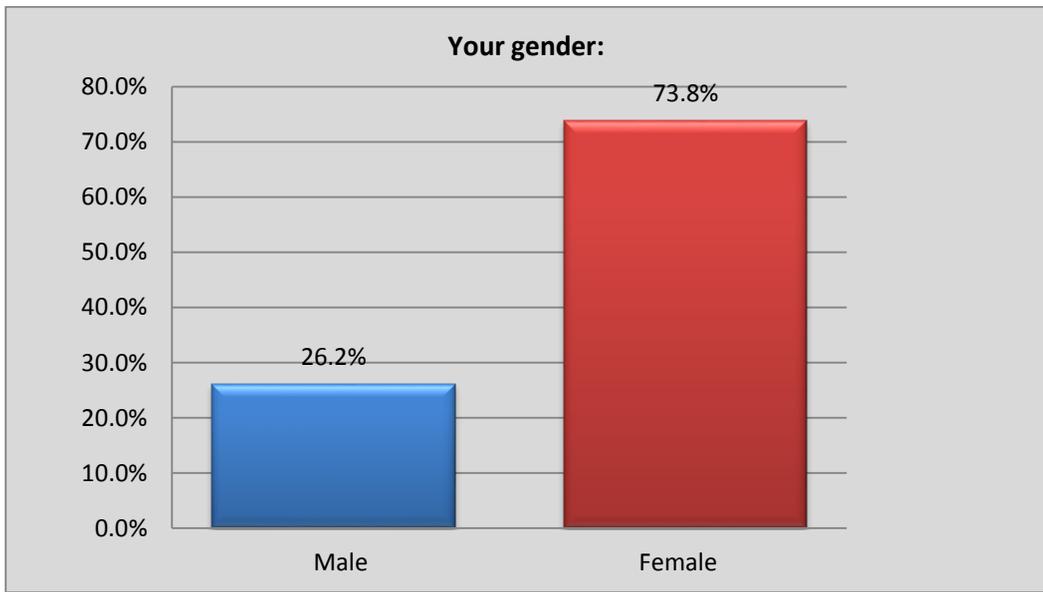
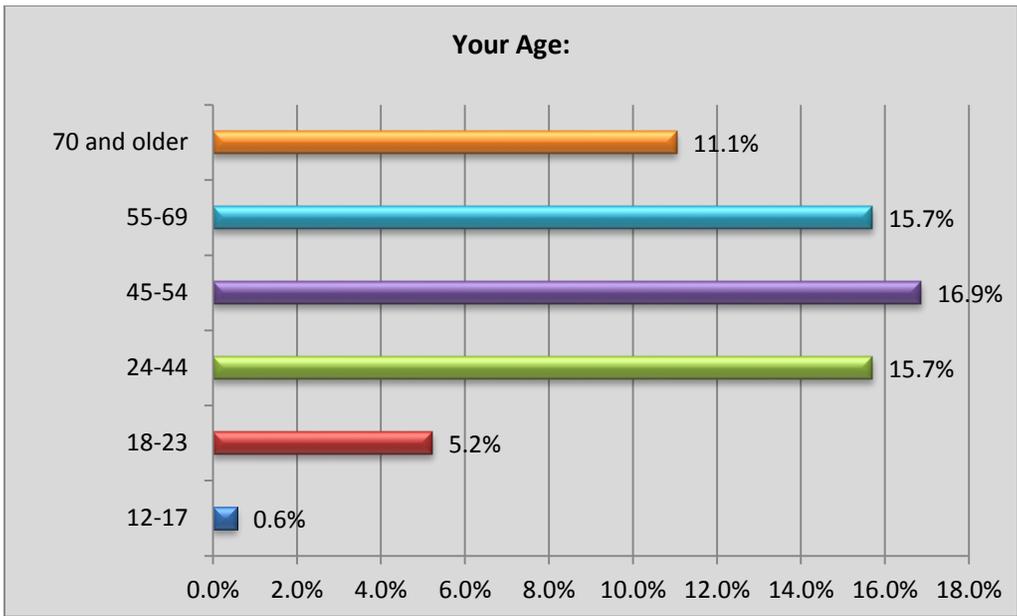
Throughout the survey process, **172** individuals who live and/or work in Natrona County and **109** Community Partners completed the Needs Assessment Survey. Participants included educators, senior citizens, elected officials, employees and board members of various local non-profit organizations, and clients served by non-profit social service agencies. Below is a demographic synopsis of the individuals and partners who took part in the process:

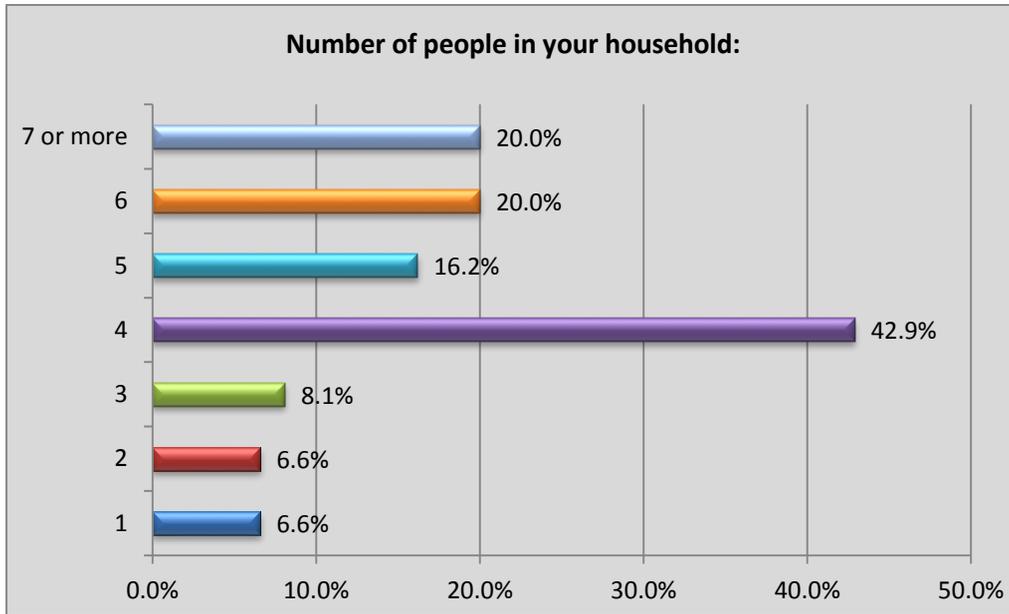
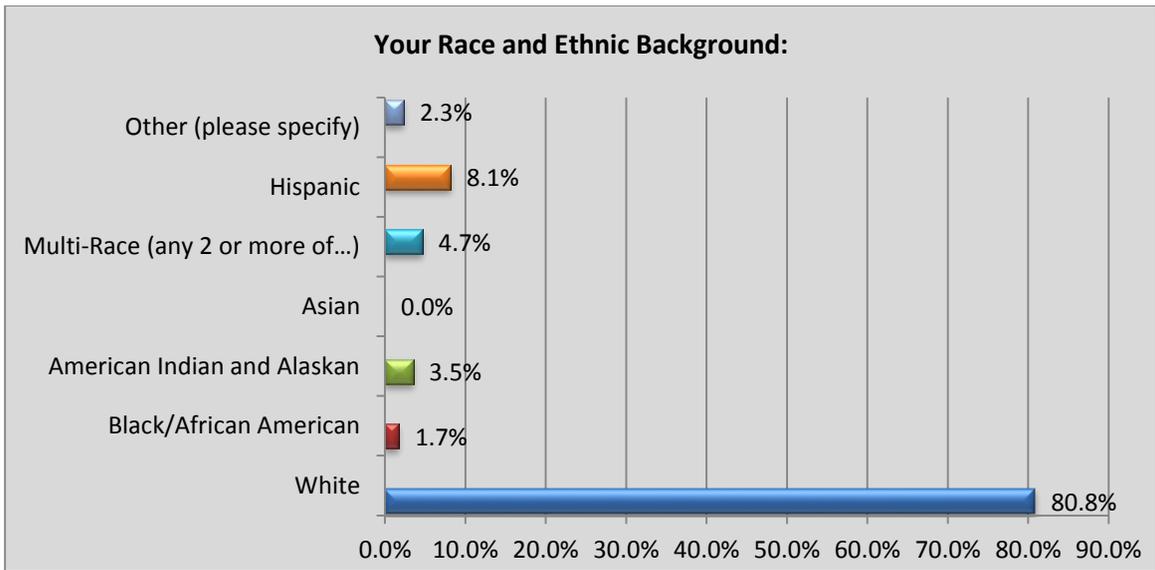
### Survey Respondents who Completed the Distributed Surveys

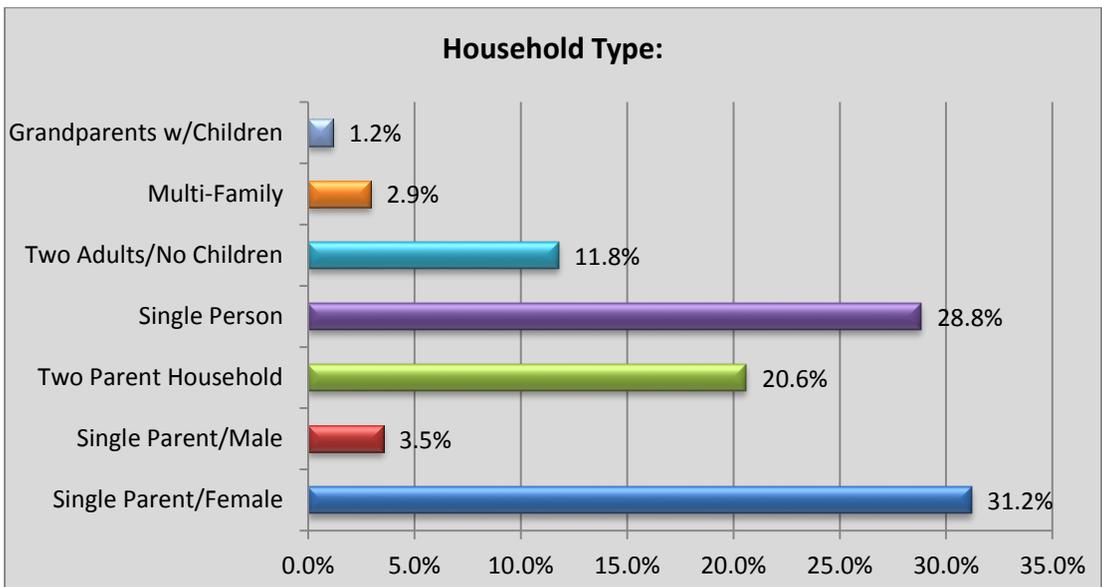
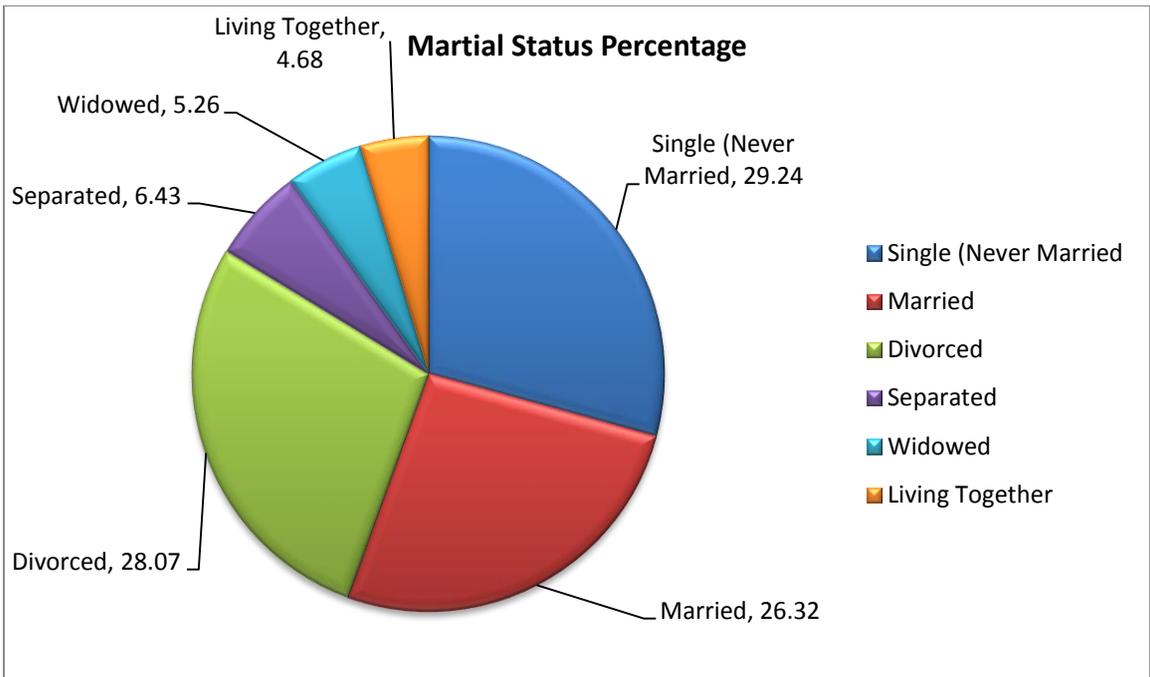


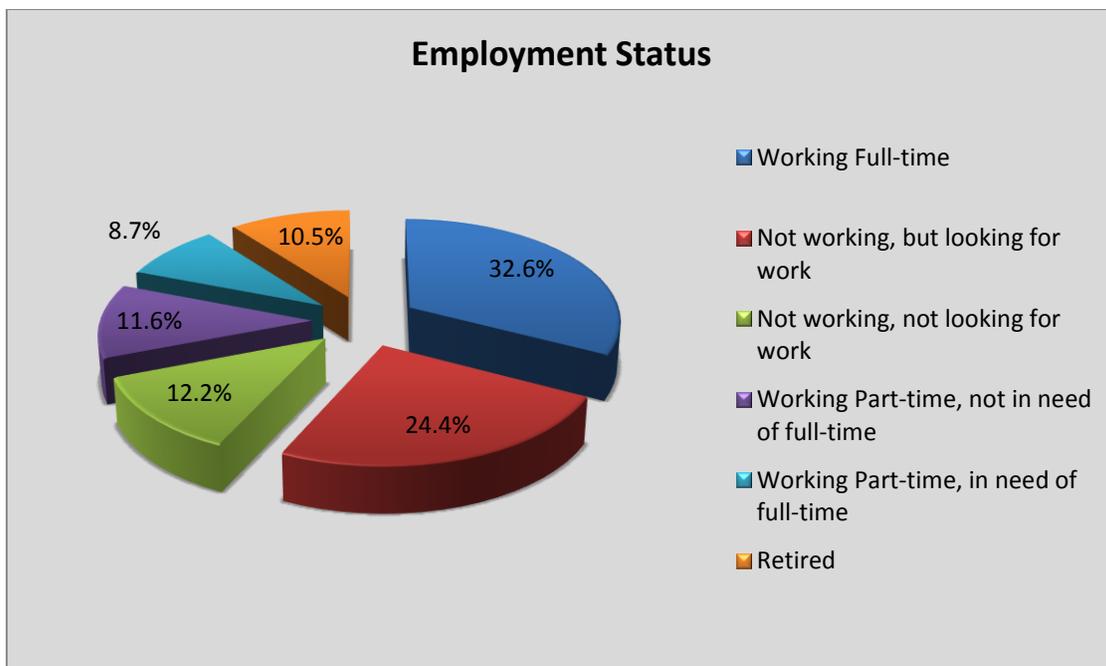
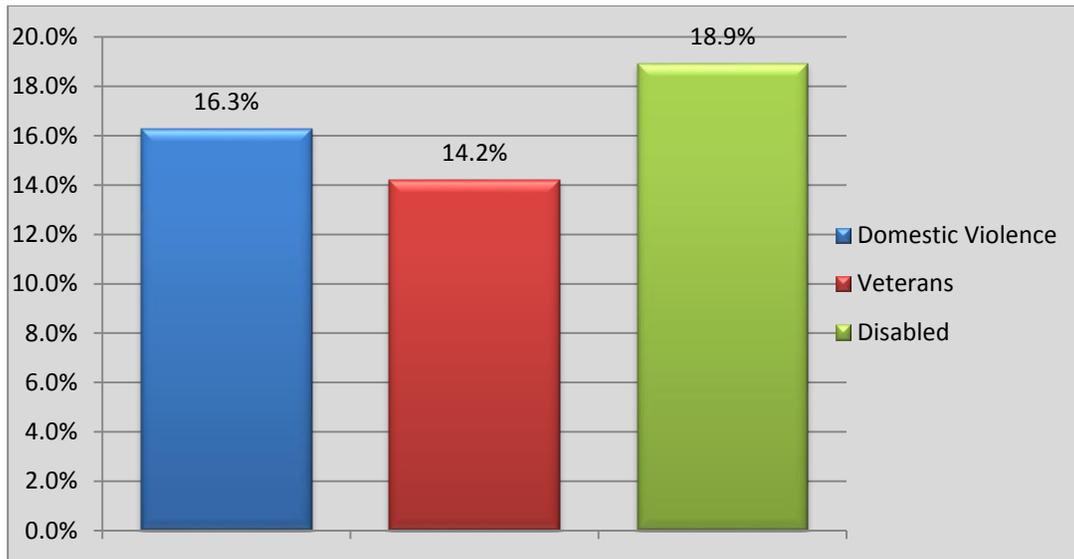
### Community Partners Standing in Community

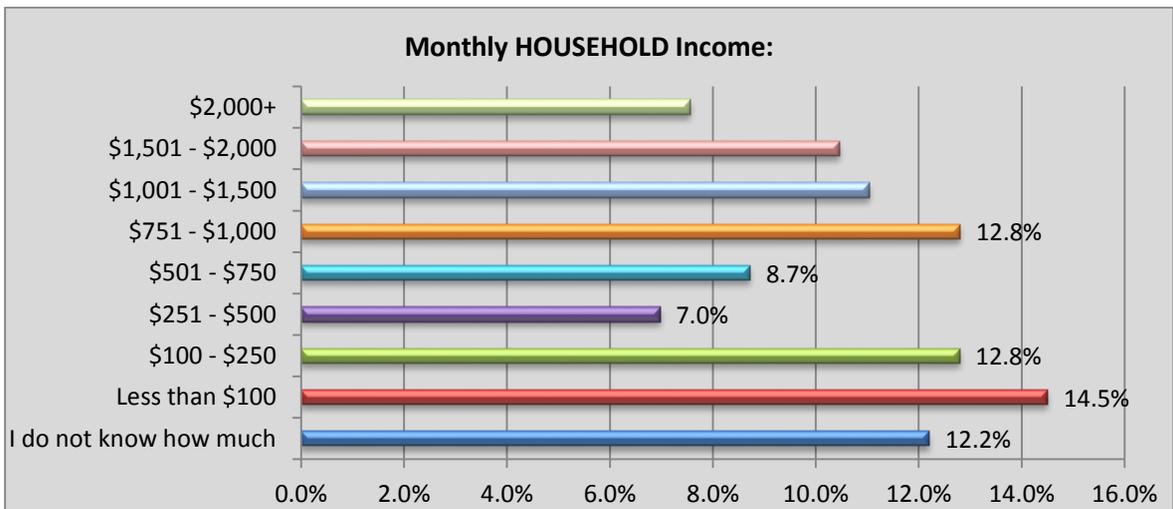
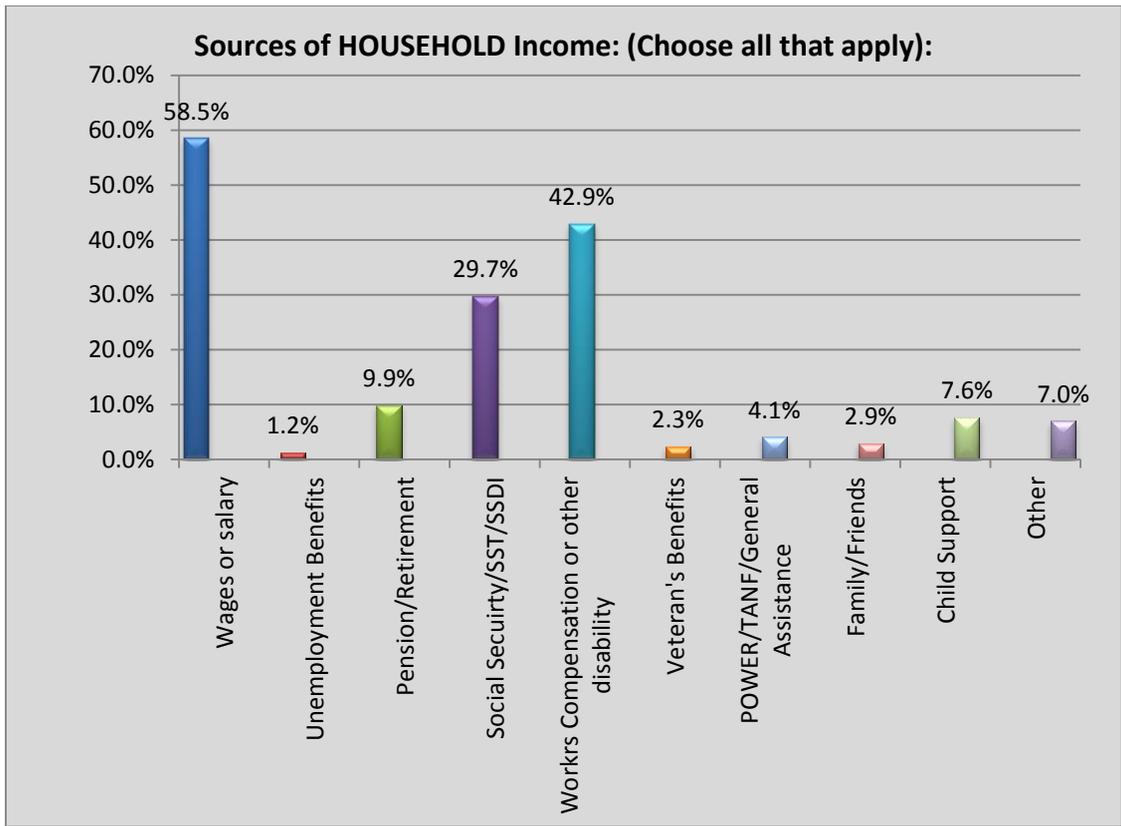


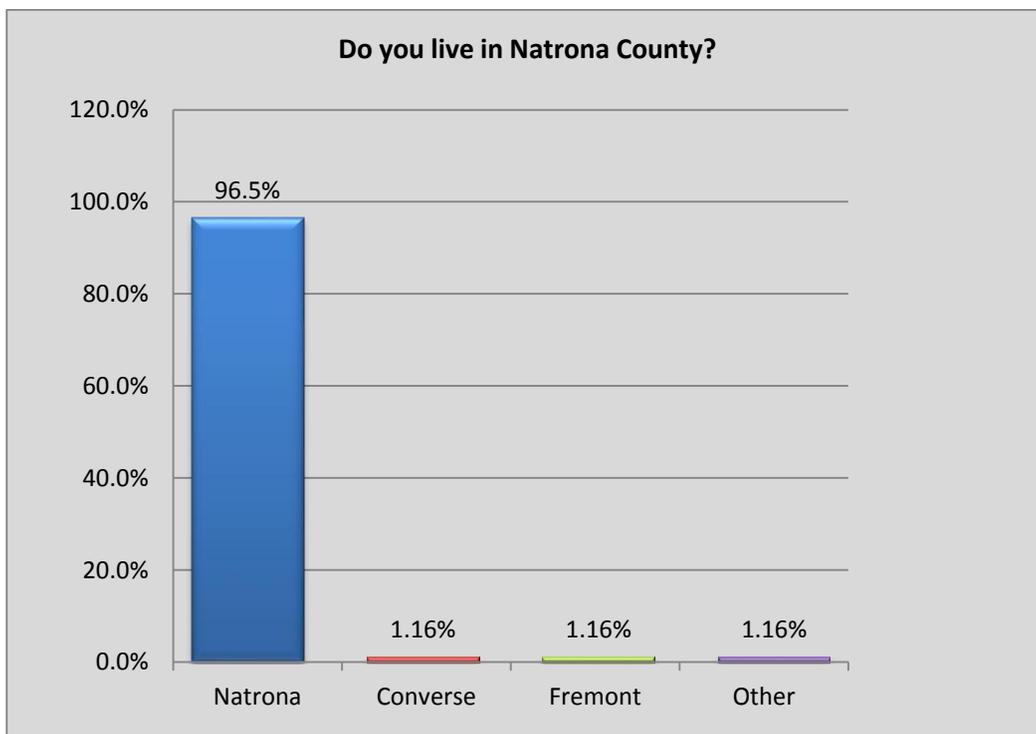
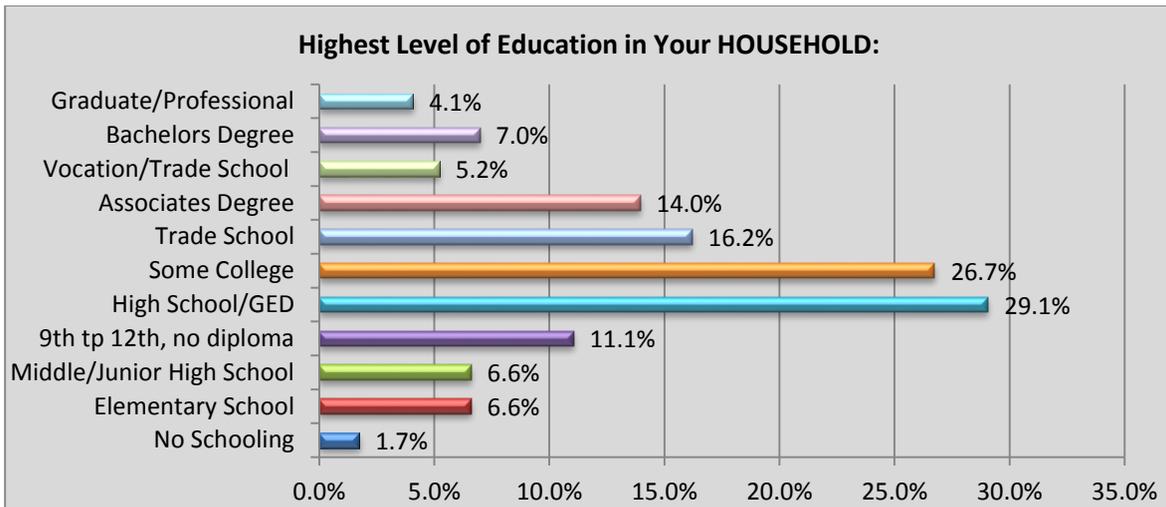












Zip Codes: (Multiple responses are noted next to each zip code.)		
<ul style="list-style-type: none"> <li>• 82601 (92)</li> <li>• 82609 (30)</li> <li>• 82604 (27)</li> </ul>	<ul style="list-style-type: none"> <li>• 82602 (7)</li> <li>• 82636 (6)</li> <li>• 82644 (3)</li> </ul>	<ul style="list-style-type: none"> <li>• 82620 (1)</li> <li>• 82646 (1)</li> <li>• Other (5)</li> </ul>

## OVERALL SURVEY RESULTS

The top three needs identified by the survey respondents were as follows:

**1. Health – 41.3%**

The top three reasons identified were:

1. Lack of health insurance
2. Lack of dental services
3. Lack of free or low-cost medical services

**2. Housing – 40.1%**

The top three reasons identified were:

1. Affordability of rent/house payments
2. Lack of affordable/suitable housing
3. Credit Issues

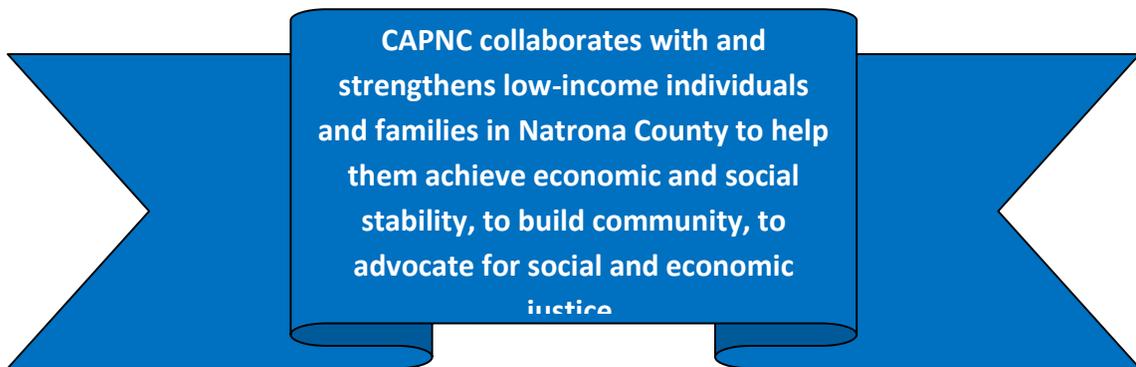
**3. Employment – 34.9%**

The top three reasons identified were:

1. Lack of employment opportunities
2. Lack of reliable transportation
3. Physical Disability

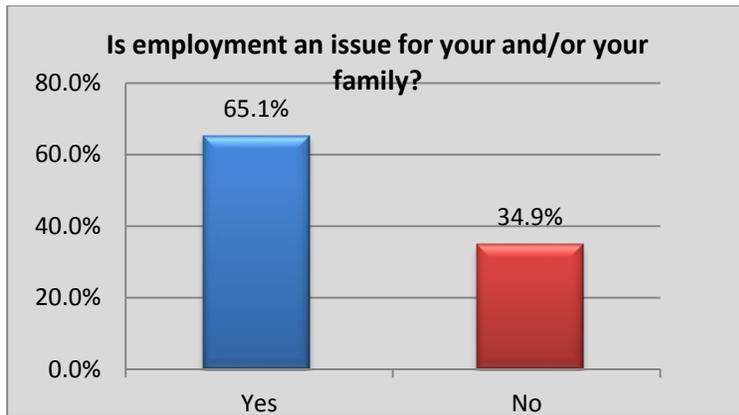


# POVERTY INDICATOR: EMPLOYMENT

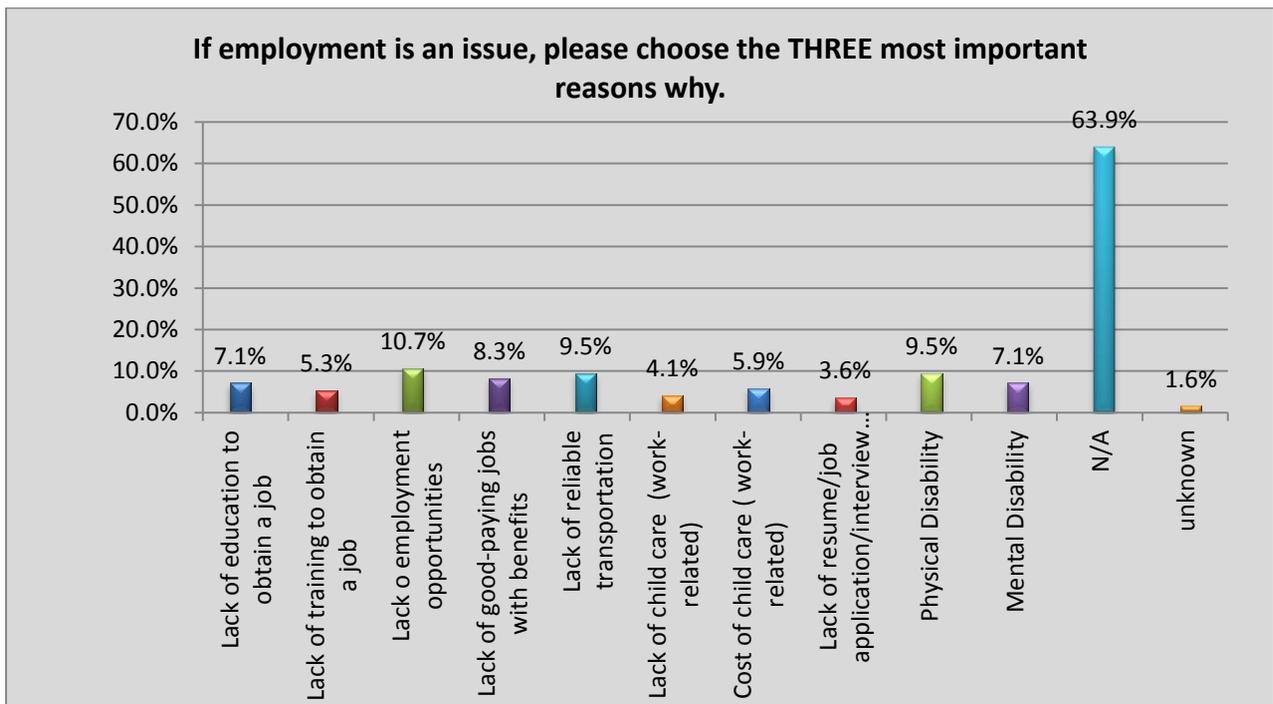


## EMPLOYMENT Primary Data: Survey Results

The Needs Assessment Survey asked the basic question, *is **employment** an issue for you and/or your family*. Of the 172 individuals who answered the question, **65.1%** of respondents felt that employment was in fact an issue. In order to gain an understanding of the root causes of employment issues in the community, the Needs Assessment Survey provided the opportunity for respondents to identify **WHY** employment was an issue.



- The top three reasons identified were:**
1. Lack of employment opportunities
  2. Lack of reliable transportation
  3. Physical Disability



**National Poverty Guidelines for Year 2012:**

Persons in Family or Household	Monthly Eligibility Limits at 100% of FPL (\$)	Annual Limit At 100% Of FPL (\$)	Monthly Eligibility Limits at 125% of FPL (\$)	Annual Limit At 125% Of FPL (\$)
1	\$ 931	\$11,170	\$1,164	\$13,963
2	1,261	15,130	1,578	18,913
3	1,591	19,090	1,989	23,863
4	1,921	23,050	2,401	28,813
5	2,251	27,010	2,814	33,763
6	2,581	30,970	3,226	38,713
7	2,911	34,930	3,639	43,663
8	3,241	38,890	4,351	48,613
For each additional, add	330	3,960	413	4,950

\*United States Department of Health and Human Services, 2014



## National Poverty Guidelines for Year 2014:

Persons in Family or Household	Monthly Eligibility Limits at 100% of FPL (\$)	Annual Limit At 100% Of FPL (\$)	Monthly Eligibility Limits at 125% of FPL (\$)	Annual Limit At 125% Of FPL (\$)
1	\$ 973	\$11,670	\$1,216	\$14,588
2	1,311	15,730	1,639	19,663
3	1,649	19,790	2,061	24,738
4	1,988	23,850	2,484	29,813
5	2,326	27,910	2,907	34,888
6	2,664	31,970	3,330	39,963
7	3,003	36,030	3,753	45,038
8	3,341	40,090	4,176	50,113
For each additional, add	338	4,060	423	5,075

\*United States Department of Health and Human Services, 2014

## Poverty Rate

According to the 2008-2012 U.S. Census, the poverty rate in Natrona County is 9.3%. This is slightly lower than the state average of 11%.

### Poverty 2012

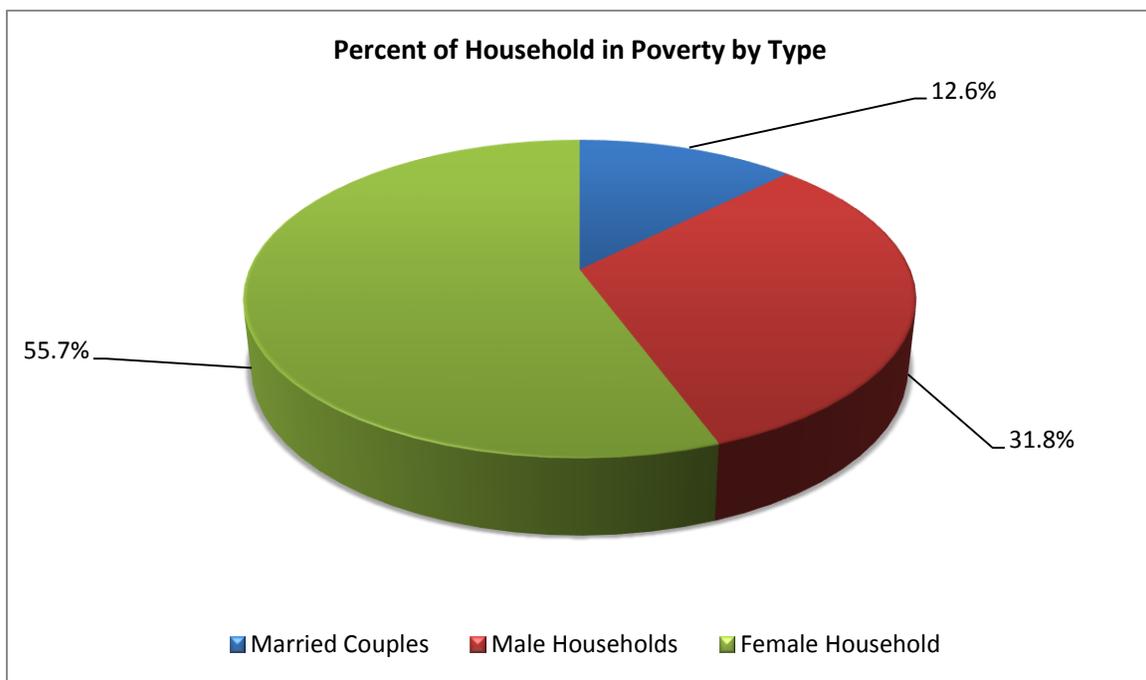
Geographic Area	All ages		Age 0-17	
	Number of Persons	Poverty Rate	Number of Persons	Poverty Rate
Natrona County	6,888	9.3%	2,092	11.8%
Wyoming	60,636	11%	19,470	14.7%
United States	44,852,527	14.9	15,118,844	20.8%

### Poverty Rate Change 2008-2012

Geographic Area	Persons in Poverty, 2000	Poverty Rate, 2000	Persons in Poverty, 2012	Poverty Rate, 2012	Change in Poverty Rates, 2000 - 2012
Natrona County	7,695	11.8%	6,888	9.3%	-2.5
Wyoming	54,777	11.4%	60,636	11%	-0.4
United States	33,899,812	12.4%	44,852,527	14.9%	2.5

### Households in Poverty 2008-2012

Geographic Area	Total Households, 2008-2012	Households in Poverty, 2008-2012	% Households in Poverty, 2008-2012
Natrona County	20,295	1,279	6.3%
Wyoming	145,992	10,511	7.2%
United States	76,595,548	8,348,914	10.9%



### Childhood (0-17) Poverty Rate 2000 – 2012

Geographic Area	Children in Poverty, 2000	Poverty Rate, 2000	Children in Poverty, 2012	Poverty Rate, 2012	Change in Poverty Rate, 2000 - 2012
Natrona County	2,843	16.8	2,741	15.2	-1.6
Wyoming	18,215	14.5	22,474	16.9	2.4
United States	11,746,858	16.6	16,396,863	22.6%	4.2

### Seniors in Poverty 2008 – 2012

Geographic Area	Seniors	Seniors in Poverty	Senior Poverty Rate
Natrona County	9,519	729	7.7
Wyoming	72,922	3,527	4.8
United States	41,839,828	3,968,879	9.5

### **Median Household Income**

The following chart shows the national, state and county level median household income. Natrona County is above the national average of \$51,017.

2013 Median Household Income	
Area	Amount
<b>United States</b>	<b>51,017</b>
<b>Wyoming</b>	<b>54,901</b>
Natrona County	54,402

\*U.S. Census Bureau, 2013

### **Unemployment Rates**

The unemployment rate is the number in the civilian labor force divided by the number of unemployed. The Bureau of Labor Statistics defines unemployment as people who do not have a job, have actively looked for work in the past four weeks, and are currently available for work. It also includes people who were temporarily laid off and are waiting to be called back to that job. It doesn't count the jobless who:

- Didn't look for a job in the past four weeks.
- Are so discouraged that they have stopped looking for a job.

The unemployment rate is important as a gauge of joblessness. For this reason, it is also a gauge of the economy's growth rate. However, the unemployment rate is a lagging indicator. This means it measures the *effect* of a recession and so occurs after one has already started.

Employers are reluctant to lay people off when the economy turns bad, and even more reluctant to hire them when the economy improves. For any reason, the unemployment rate can only confirm what the other indicators are showing. For example, if the other indicators show a quickening economy and the unemployment rate is declining, then we know businesses are confident enough to start hiring

again. Since it is a lagging indicator, unemployment can worsen even after the economy starts to improve.

Unemployment Rates			
Area	April 2013	April 2014	Net Change
<b>United States</b>	7.5	6.3	<b>-1.2%</b>
<b>Wyoming</b>	4.7	3.7	<b>-1%</b>
Natrona County	4.1	3.2	<b>-0.9%</b>

\*United States Department of Labor, 2014

According to the U.S. Department of Labor, unemployment for this five year period fell from 7.2 percent to 3.2 percent in Natrona County.



\*United States Department of Labor, 2014

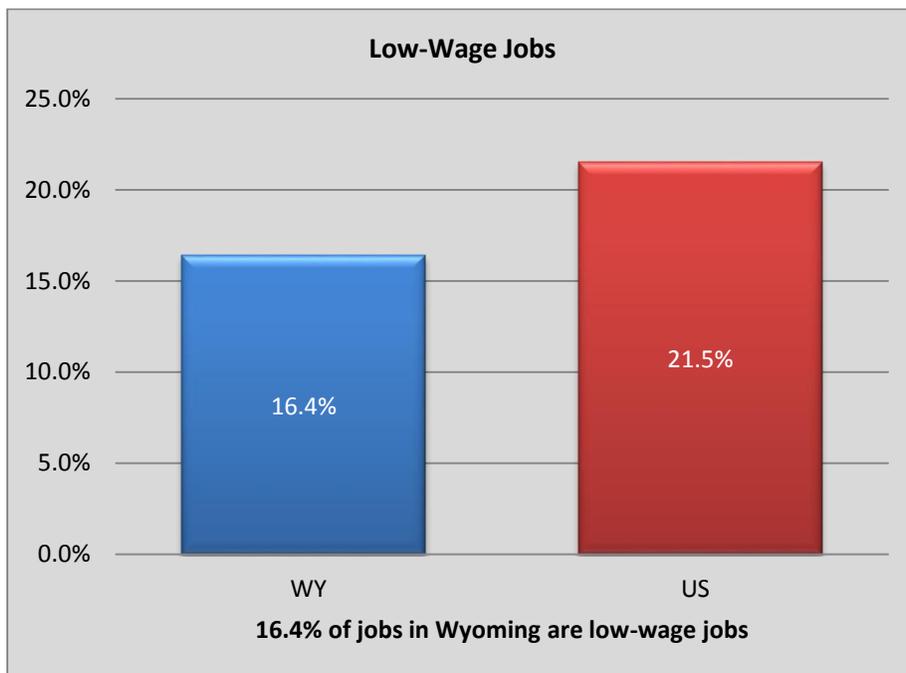
## Employers

In many communities across America, local officials and leaders wrestle with the role of providing enough local jobs and income to maintain the economic viability of their communities. National and international events and trends can have a major impact on the rate and type of income and the employment growth communities can achieve. But communities take an active role in attracting and retaining jobs, in

addition to having a skilled and educated workforce, have an advantage over those communities and allow external events to exclusively dictate the pace of local economic growth.



According to the CFED's 2013, Assets and Opportunities Scorecard, 16.4% of jobs in Wyoming are considered low-wage jobs. This is defined as the percentage of jobs in occupations with median annual pay below 100% poverty threshold for a family of four (\$22,314), 2010. (CFED, Assets & Opportunities Scorecard, 2013)



\*2013 CFED scorecard, cfed.org

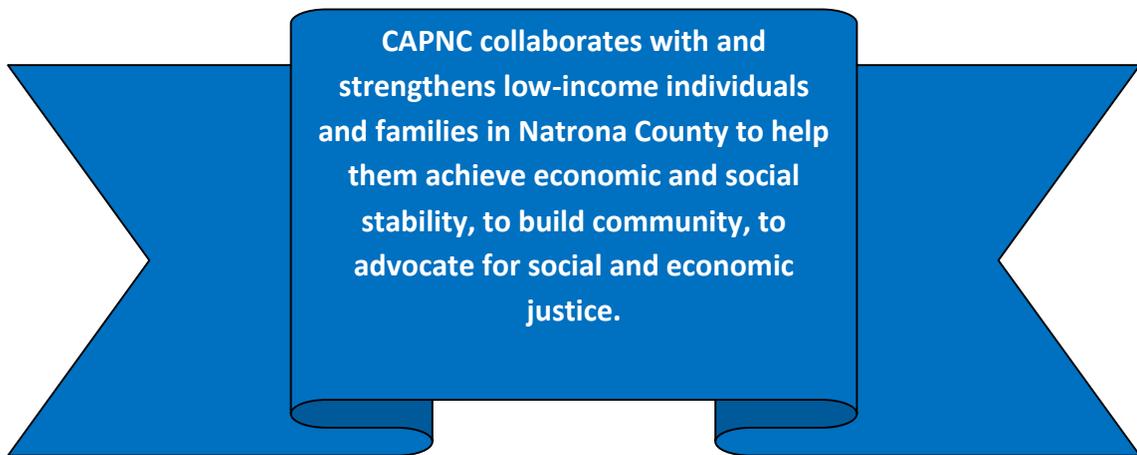
According to Workforce Wyoming in 2013, the following are the top two industries providing employment in **Natrona County**:

1. Wood product manufacturing industry – 34.9%
2. Petroleum and coal products manufacturing – 9.1%

According to the Wyoming Employment and Wage Report, the top 10 employers in Natrona County are:

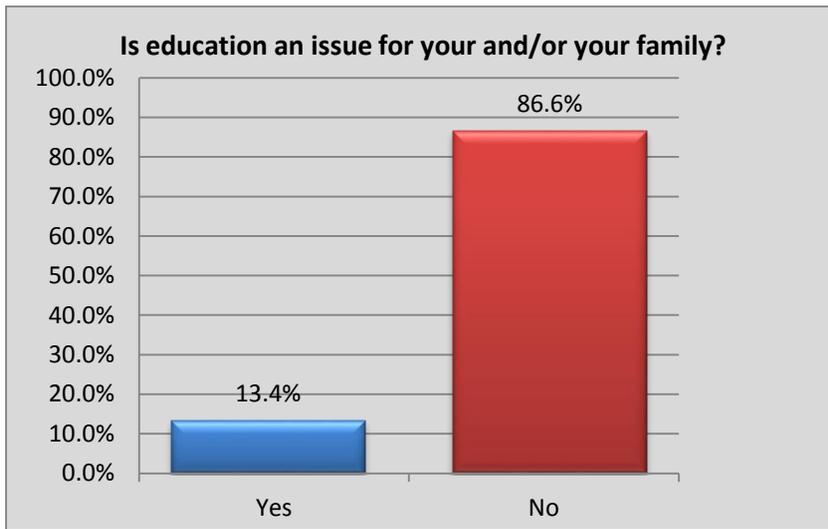
- |  |                                      |
|--|--------------------------------------|
| 1. Natrona County School District                | 6. Halliburton Sperry Drilling       |
| 2. Wyoming Medical Center                        | 7. Unit Drilling Company             |
| 3. Halliburton                                   | 8. Wal-Mart Super Center, CY Ave     |
| 4. Wal-Mart Super Center, 2 <sup>nd</sup> Street | 9. Wyoming Machinery Company         |
| 5. Codale Electric Supply                        | 10. Community Health Center- Wyoming |

# POVERTY INDICATOR: EDUCATION

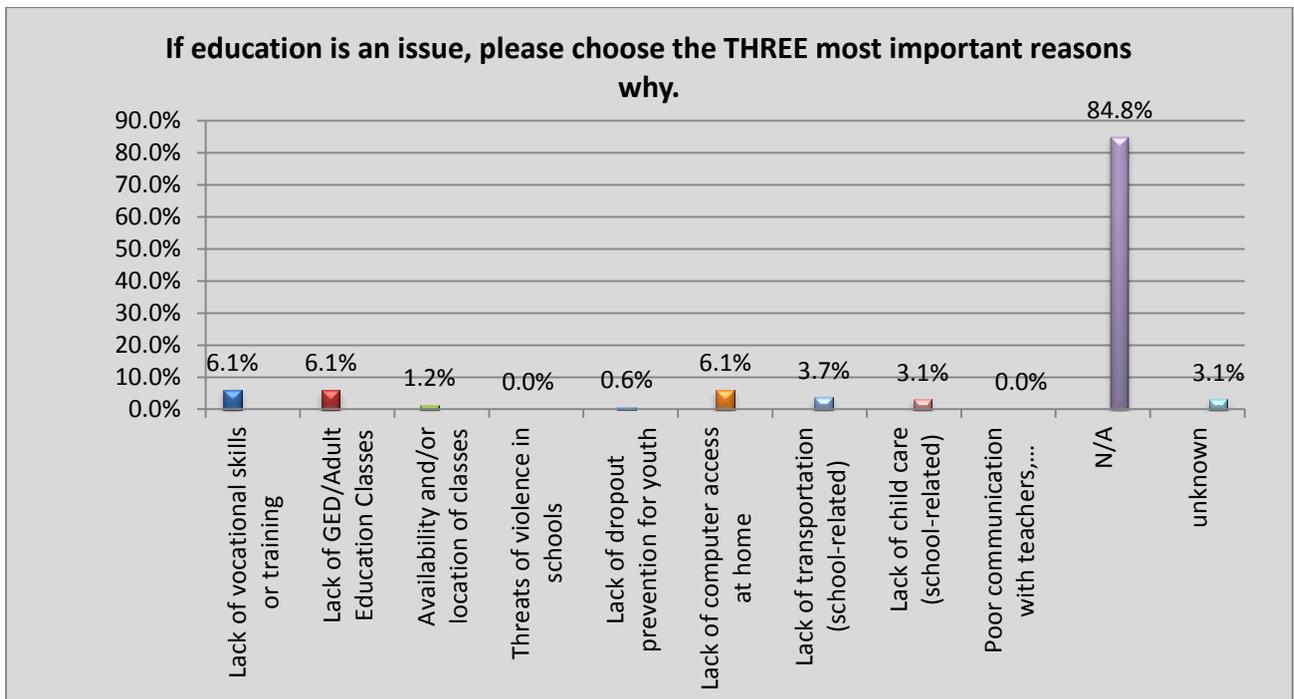


## EDUCATION Primary Data: Survey Results

The Needs Assessment Survey asked the basic question, *is **education** an issue for you and/or your family*. Of the 172 individuals who answered the question, **13.4%** of respondents felt that education was an issue. In order to gain an understanding of the root causes of the education issues in the community, the Needs Assessment Survey provided the opportunity for respondents to identify **WHY** they felt education was an issue.



- The top three reasons identified were:**
1. Lack of vocational skills or training
  2. Lack of computer access at home
  3. Lack of GED/Adult Education Classes



Post-secondary education in Natrona County is available at: Casper College and University of Wyoming-Casper.

	Natrona County	Wyoming	United States
On-Time High School Graduation (% of freshmen who graduate in four years)	71.32	80.3	78.2
Associates and Higher	33	34.8	36.3

\*(Natrona County Opportunity Index, 2014)

### **Educational Attainment**

<b>Wyoming Educational Attainment</b>	
Population 25 years and over	371,096
Less than 9 <sup>th</sup> grade	8,535 (2.3%)
9 <sup>th</sup> to 12 <sup>th</sup> grade, no diploma	20,781 (5.6%)
High school graduate (includes equivalency)	113,184 (30.5%)
Some college, no degree	101,309 (27.3%)
Associate's degree	37,110 (10.0%)
Bachelor's degree	60,118 (16.2%)
Graduate or professional degree	30,059 (8.1%)

\*U.S. Census Bureau American Community Survey 2008-2012

<b>Natrona County Educational Attainment</b>	
<b>Population 25 years and over</b>	<b>50,354</b>
Less than 9 <sup>th</sup> grade	957 (1.9%)
9 <sup>th</sup> to 12 <sup>th</sup> grade, no diploma	3,021 (6.0%)
High school graduate (includes equivalency)	14,854 (29.5%)
Some college, no degree	14,804 (29.4%)
Associate's degree	5,589 (11.1%)
Bachelor's degree	7,352 (14.6%)
Graduate or professional degree	3,726 (7.4%)

\*U.S. Census Bureau American Community Survey 2008-2012

## Special Education – Students with Disabilities (Ages 3 – 21)

<b>Natrona County                      Students with Disabilities (Ages 3-21)                      Percent of Total Student Enrollment                      2013-2014 School Year</b>		
Autism	107	.84%
Behavior Disorders	55	.43%
Visual Impairments	9	.07%
Hearing Impaired	16	.13%
Deaf-Blindness	*	*
Mental Impairments - CD	93	.73%
Orthopedic Impairments	6	.05%
Other Health Impairments	237	1.85%
Preschool Special Needs	74	.58%
Specific Learning Disabilities	674	5.27%
Speech/Language Impairments	459	3.59%
Traumatic Brain Injury	13	.10%
Multiple Disabilities	13	.10%
<b>TOTAL</b>	<b>1756</b>	<b>13.74%</b>

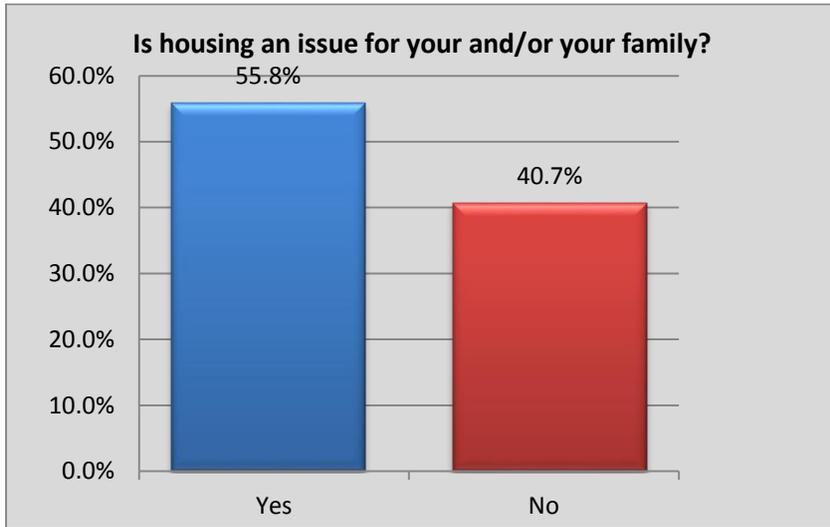
*\*Natrona County School District, 2014*

# POVERTY INDICATOR: HOUSING

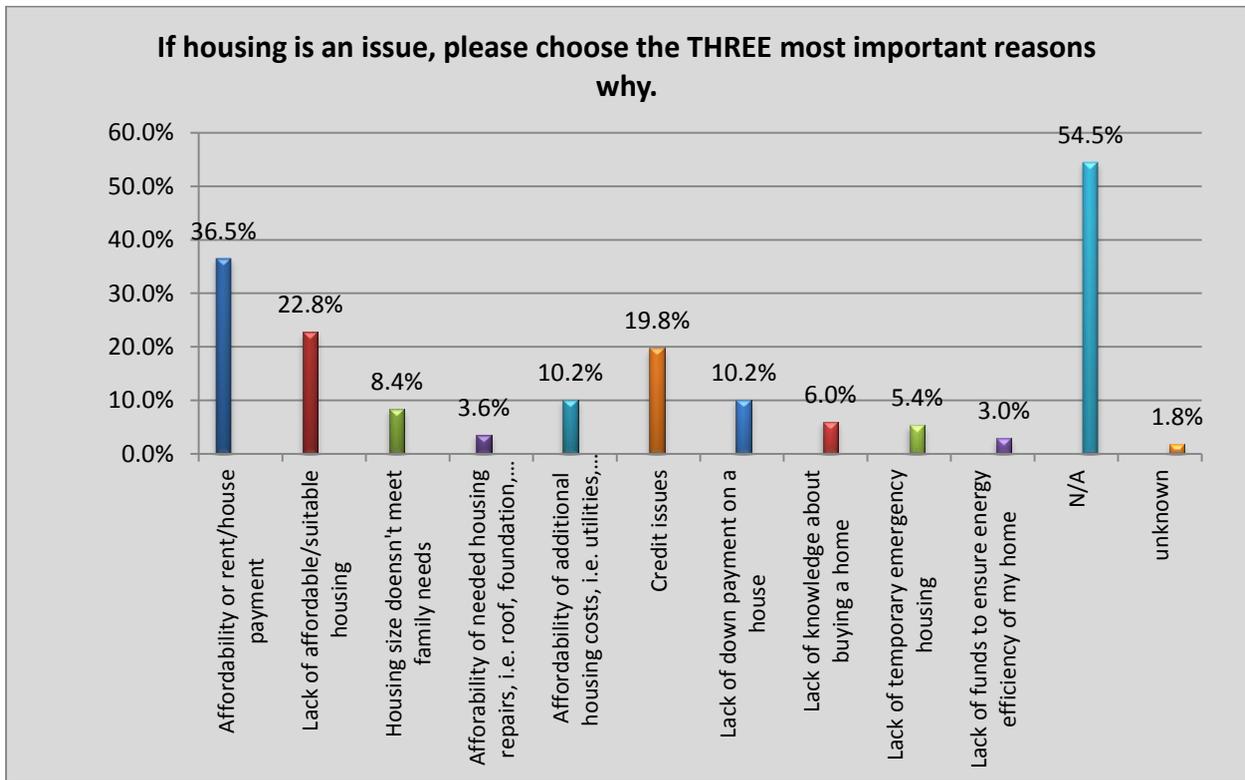
CAPNC collaborates with and strengthens low-income individuals and families in Natrona County to help them achieve economic and social stability, to build community, to advocate for social and economic justice.

## HOUSING Primary Data: Survey Results

The Needs Assessment Survey asked the basic question, *is **housing** an issue for you and/or your family*. Of the 172 individuals who answered the question, **55.8%** felt that housing was in fact an issue. In order to gain an understanding of the root causes of housing issues in the community, the Needs Assessment Survey provided the opportunity for respondents to identify WHY housing was an issue.



- The top three reasons identified were:**
1. Affordability or rent/house payment
  2. Lack of affordable/suitable housing
  3. Credit Issues



Natrona County Housing Data	
Total Housing Units	33,952
Occupied Housing Units	30,406
Vacant Housing Units	3,546
Owner Occupied	21,285
Renter Occupied	9,121
Median Value	\$179,100
Median Rent Asked	\$782

\*Data Source: Census 2008-2012 ACS Survey

### Housing Units without Plumbing, 2000 and 2008 - 2012

Geographic Area	Occupied Housing Units, 2000	Housing Units without Plumbing, 2000	Percent without Plumbing, 2000	Occupied Housing Units, 2008-2012	Housing Units without Plumbing, 2008-2012	Percent without Plumbing, 2008-2012
Natrona County	26,819	156	0.6	30,406	134	0.4
Wyoming	193,608	1,011	0.5	221,479	1,353	0.6
United States	105,480,101	692,986	0.7	115,226,802	628,104	0.5

\*Data Source: Census 2008-2012 ACS Survey

### Rentals

About 30% of all Wyoming households – or 66,600 households – are renters. Federal rental assistance programs enable more than 6,600 low-income households in Wyoming to rent modest housing at an affordable cost. About 62% of these households are headed by people who are elderly or have disabilities; approximately 30% are families with children. (Center on Budget & Policy Priorities, 2013)

Federal programs reach only a small share of the low-income Wyoming households that pay unaffordable rental housing costs and are therefore at increased risk of homelessness and other types of housing instability:

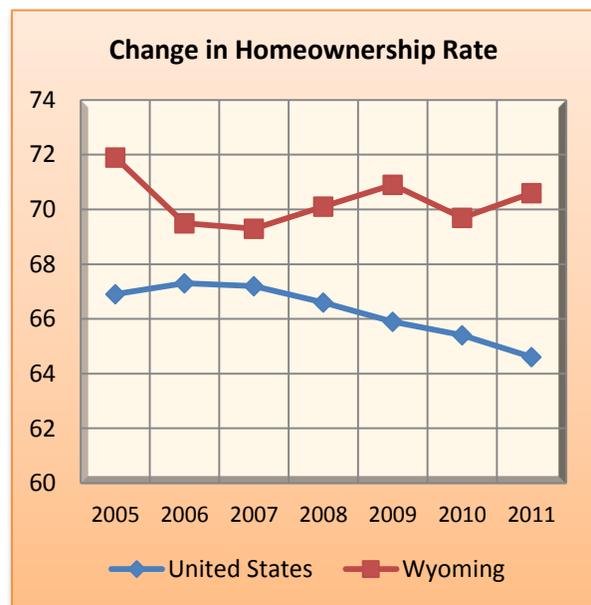
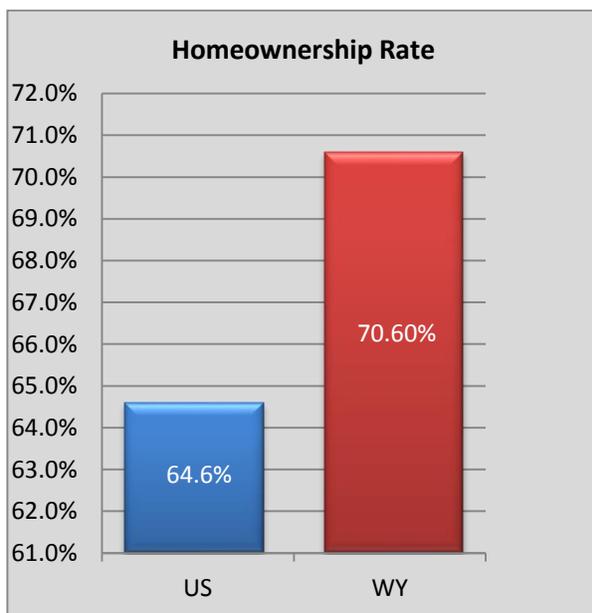
- In Wyoming, 10,500 low-income renter households pay more than half their monthly cash income for housing costs. On average, these households have incomes of \$1,060 and pay housing costs of \$880, leaving only \$180 to pay for other necessities. About 31% of these cost-burdened renters are elderly or people with disabilities, while 21% are families with children.
- When housing costs consume more than half of household income, low-income families are at greater risk of becoming homeless. Point-in-time surveys suggest that at least 1,000 people are homeless in Wyoming. (Center on Budget & Policy Priorities, 2013)

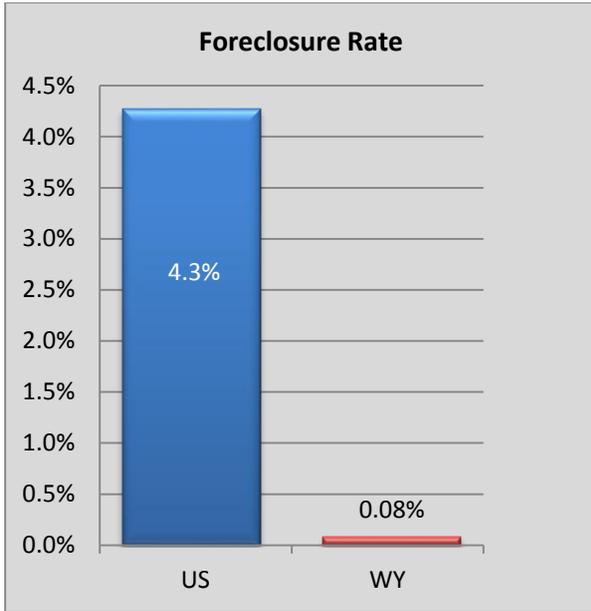
The following chart contains the Fair Market Rents for Natrona County, Wyoming. Fair Market Rents (FMRs) are estimates of rental housing costs in local housing markets that the U.S. Department of Housing and Urban Development (HUD) prepares using rent survey data to serve as the basis for determining the maximum subsidy levels in the Housing Choice Voucher program. In general, FMRs are set at the 40th percentile rent i.e., the dollar amount which allows voucher-holders access to 40 percent of standard quality rental units. Adjustments are made to exclude public housing units, newly built units and substandard units (U.S. Department of Housing and Urban Development, 2014).

Natrona County	FAIR MARKET RENT (\$/month)				
	0 BR	1 BR	2 BR	3 BR	4 BR
2013	\$533	\$610	\$807	\$1,189	\$1,413
2014	\$503	\$576	\$762	\$1,123	\$1,334

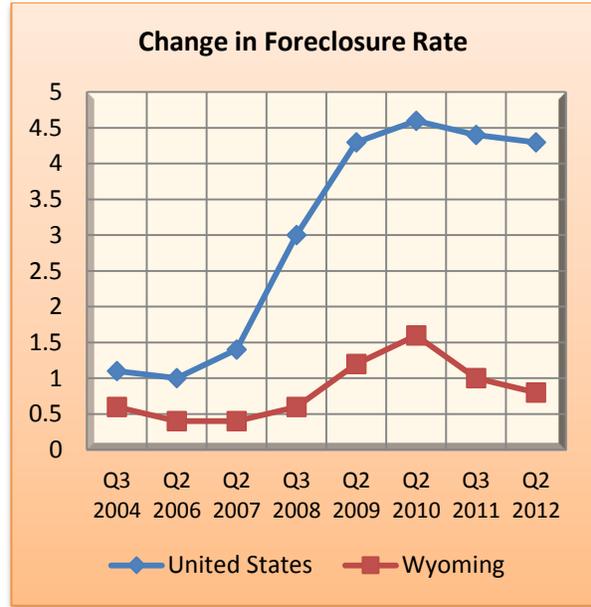
\*Data Source: 2014 U.S. Department of Housing and Urban Development Fair Market Rent

According to the 2013 Assets & Opportunities Scorecard, 70.6% of Wyoming households are homeowners.

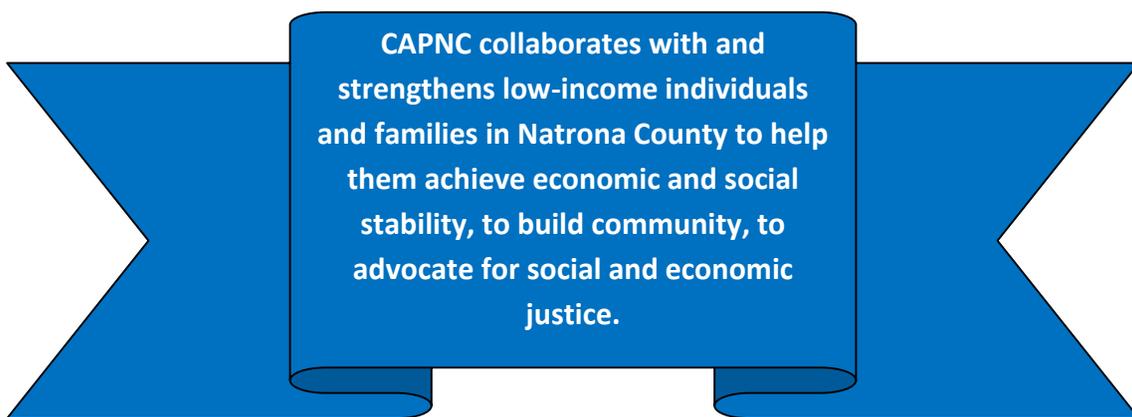




Data Source: 2013 Assets & Opportunities Scorecard

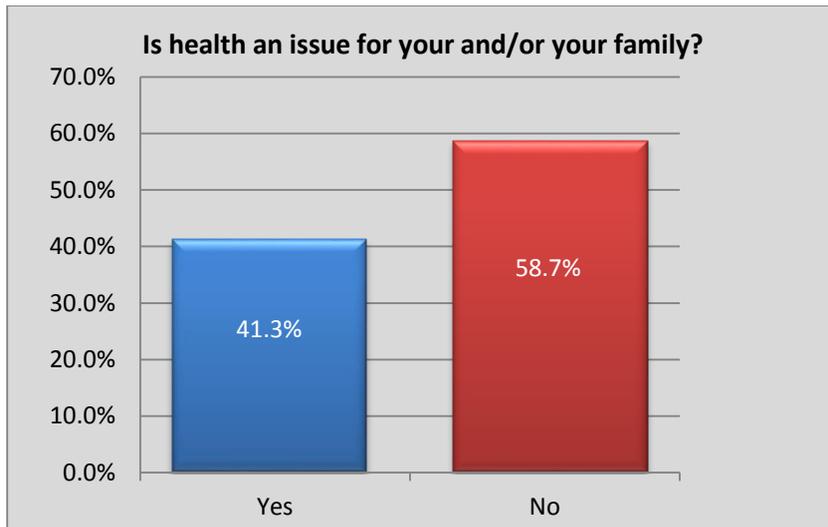


# POVERTY INDICATOR: HEALTH

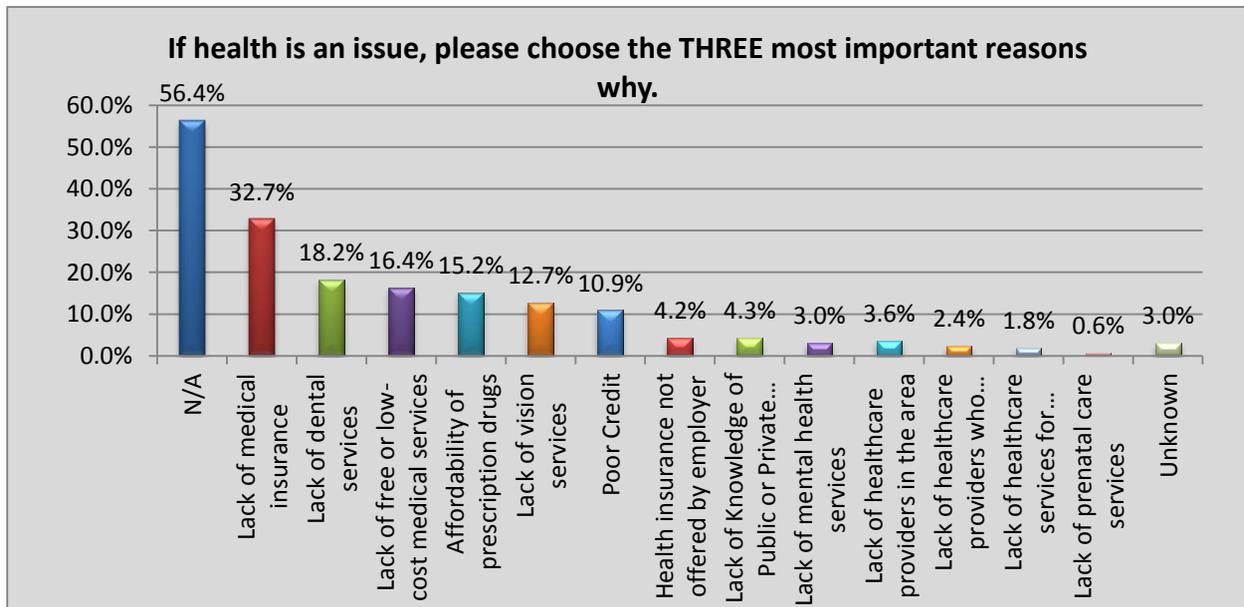


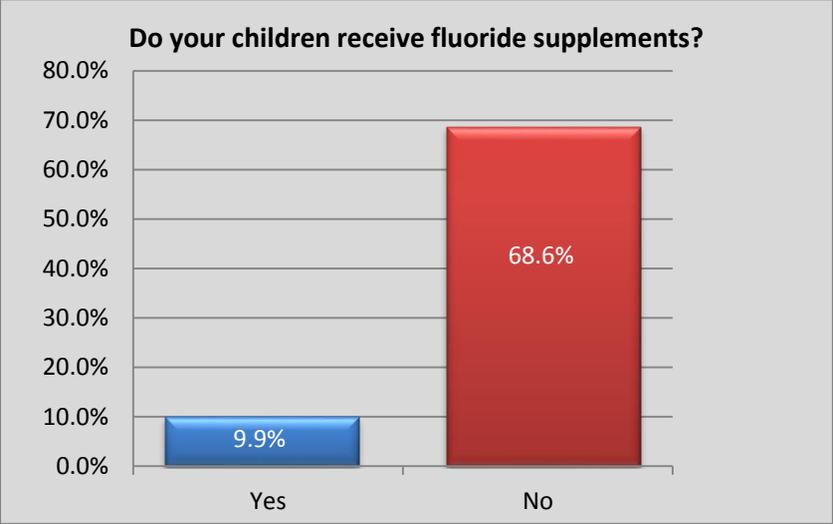
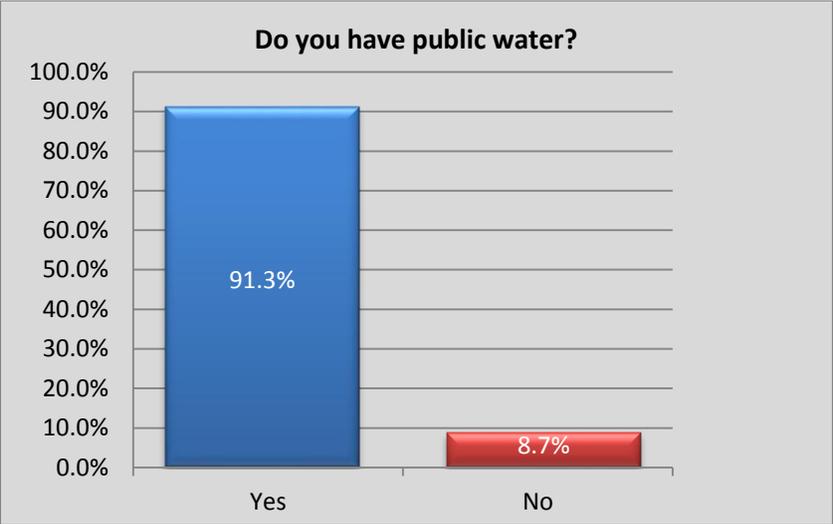
## HOUSING Primary Data: Survey Results

The Needs Assessment Survey asked the basic question, *is **health** an issue for you and/or your family.* Of the 172 individuals who answered the question, **41.3%** felt health was in fact an issue. In order to gain an understanding of the root causes of health issues in the community, the Needs Assessment Survey provided the opportunity for respondents to identify WHY health was an issue.



- The top three reasons identified were:**
1. Lack of medical insurance
  2. Lack of dental services
  3. Lack of free or low-cost medical services





The chart below focuses on **health behaviors, clinical care,** and the **physical environment.** It also quantifies two categories of health outcomes to demonstrate how healthy the county is: how long people live (mortality) and how healthy people feel (morbidity). Below are the results for Natrona County and the state of Wyoming.

	Natrona County	Wyoming	Rank (out of 23 counties)
<b>Health Outcomes</b>			<b>15</b>
<b>Mortality</b>			<b>14</b>
Premature Death	716+	7,532	
<b>Morbidity</b>			
Poor or fair health	14%	13%	
Poor physical health days	3.3	3.2	
Poor mental health days	3.6	3.2	
Low birth weight	8.0%	8.6%	
<b>Health Factors</b>			<b>18</b>
<b>Health Behaviors</b>			<b>22</b>
Adult smoking	26%	20%	
Adult obesity	27%	26%	
Physical inactivity	24%	23%	
Excessive drinking	18%	17%	
Sexually transmitted infections			
Teen birth rate	532	368	
<b>Clinical Care</b>	49%	43%	
Uninsured			<b>5</b>
Primary Care Physicians**	16%	17%	
Dentist**	1,340:1	1,476:1	
Preventable hospital stays	1,456:1	1,774:1	
Diabetic screening	57	55	
Mammography screening	75%	75%	
	59%	57%	

\*Data Source: County Health Rankings & Roadmaps, 2014

## Behavioral Health Profile

The Wyoming **Behavioral Risk Factor Surveillance System (BRFSS)** assembles data from randomly selected non-institutionalized adults age 18 and older, through monthly telephone surveys with collaboration and support of the federal Centers for Disease Control and Prevention (CDC). The following data has been developed based upon the most current and available data on substance use and its related consequences (Wyoming BRFSS Data, 2006-2008).

Behavioral Risk Factors 2006-2008		
Indicator	Natrona County	Rank in Wyoming
Cigarette smoking	25.6%	21.8
Smokeless tobacco use	6.8%	8.2%
Binge drinking	17%	17%

\*Data Source: Wyoming Behavioral Risk Factors Surveillance System and Substance Abuse and Mental Health Services Administration (SAMHSA).

Drug Use in the Past Year among Persons 12 Years or Older, 2006-2008		
	Natrona County	Wyoming
Marijuana	12.02%	10.47%
Cocaine	2.41%	2.12%
Nonmedical Use of Pain Relievers	5.01%	4.43%

\*Data Source: Substance Abuse and Mental Health Services Administration (SAMHSA).

## Statistics on Children and Teens - Healthcare and Related Issues

The following Wyoming children and teen statistics were obtained from the latest KIDS COUNT Data Book.

Percent low birth-weight babies			
County	2007	2011	% Change (+Better, -Worse)
Wyoming	9.1%	8.0%	-1.1
Natrona County	7.8%	6.9%	-0.9

\*Data Source: KIDS Count Data Center

Infant Mortality Rate (per 1,000 live births)			
County	2007	2011	% Change (+Better, -Worse)
Wyoming	7.3%	6.7%	-0.6
Natrona County	3.6%	7.1%	+3.5

\*Data Source: KIDS Count Data Center

Child Death Rate (ages 1-14 per 100,000 children)			
County	2007	2011	% Change (+Better, -Worse)
<b>Wyoming</b>	<b>23%</b>	<b>24%</b>	<b>+1</b>
Natrona County	21%	22%	+1

\*Data Source: KIDS Count Data Center

Teen Injury Death Rate			
County	2007	2011	% Change (+Better, -Worse)
<b>Wyoming</b>	<b>76%</b>	<b>76%</b>	<b>+0</b>
Natrona County	53%	58%	+5

\*Data Source: KIDS Count Data Center

### Public Health

The County Health Departments in each county provides a variety of services including community education, family planning, breast & cervical cancer services and many more. The following chart summarizes the services offered by the Natrona County Public Health Department.

Services Provided	Natrona County
Breast & Cervical Cancer Services	X
Community Education	X
Community Health Services	X
Environmental	X
Epidemiology	X
Family Planning	X
HIV/Aids	X
Hypertension	X
Immunization	X
Provider Education	X
Sexually Transmitted Diseases	X
Tuberculosis	X
Other	X

\*Data Source: Casper-Natrona County Public Health Department

### Uninsured Persons, 2012

<b>Geographic Area</b>	<b>Insurance Population (2012 Estimate)</b>	<b>Number Insured</b>	<b>Number Uninsured</b>	<b>Percent Uninsured</b>
Natrona County	77,539	64,987	12,552	16.2
Wyoming	567,082	479,998	87,084	15.4
United States	308,896,460	263,281,913	45,614,547	14.8

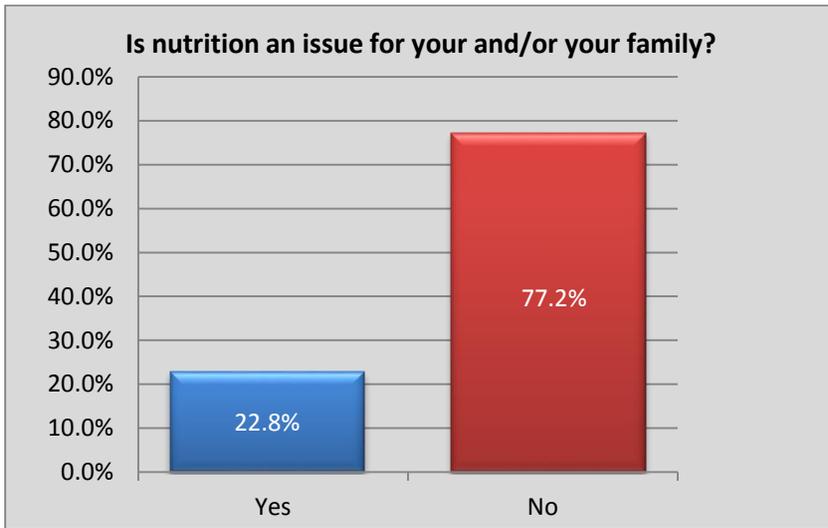
\*Data Source: Census 2008-2012 ACS Survey

# POVERTY INDICATOR: NUTRITION

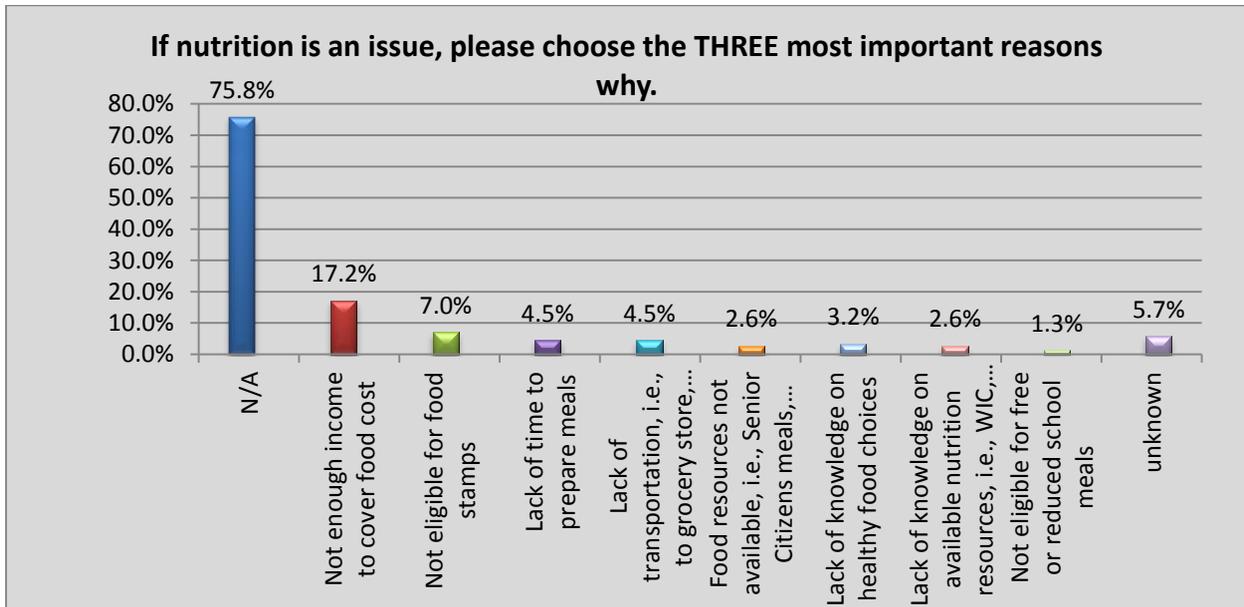
CAPNC collaborates with and strengthens low-income individuals and families in Natrona County to help them achieve economic and social stability, to build community, to advocate for social and economic justice.

## Primary Data: Survey Results

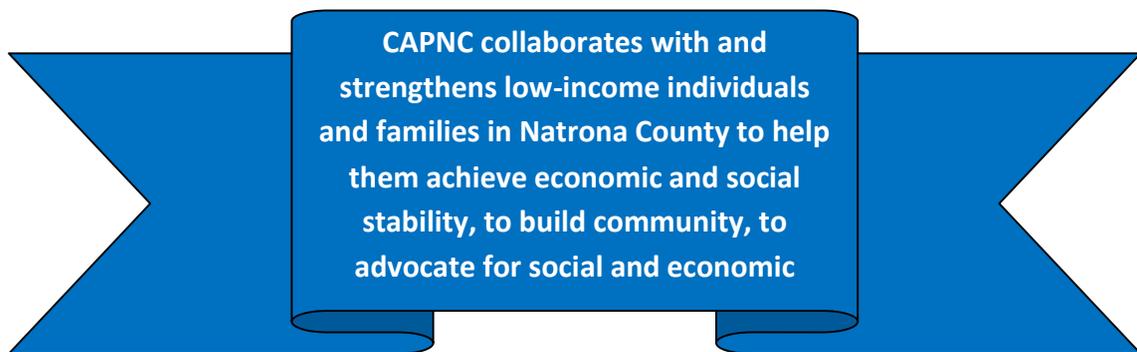
The Needs Assessment Survey asked the basic question, *is **nutrition** an issue for you and/or your family*. Of the 172 individuals who answered the question, **22.8%** felt that nutrition was in fact an issue. In order to gain an understanding of the root causes of nutrition issues in the community, the Needs Assessment Survey provided the opportunity for respondents to identify WHY nutrition was an issue.



- The top three reasons identified were:**
1. Not enough income to cover food cost
  2. Not eligible for food stamps (SNAP)
  3. Lack of transportation, i.e., to grocery store, food pantry or other food resources

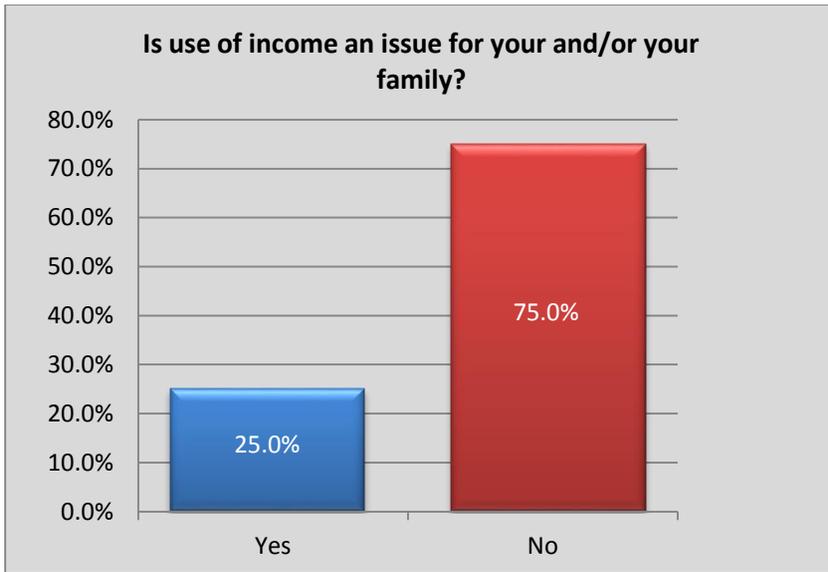


# POVERTY INDICATOR: USE OF INCOME

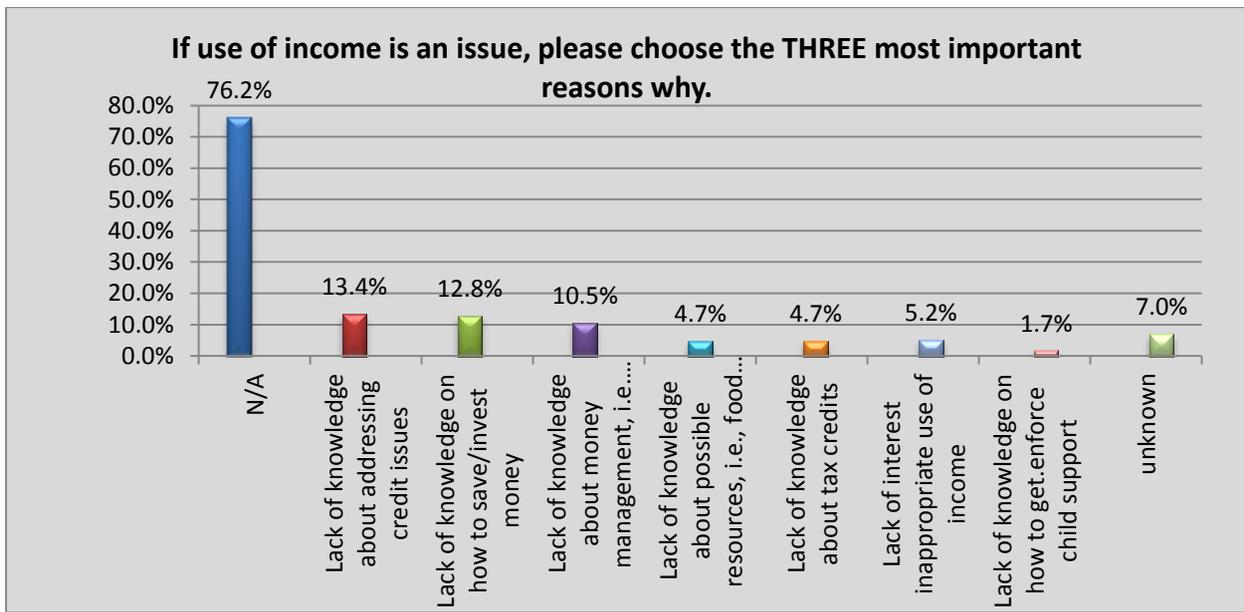


## Primary Data: Survey Results

The Needs Assessment Survey asked the basic question, *is use of income an issue for you and/or your family*. Of the 172 individuals who answered the question, **25%** felt that use of income was in fact an issue. In order to gain an understanding of the root causes of use of income issues in the community, the Needs Assessment Survey provided the opportunity for respondents to identify WHY use of income was an issue.

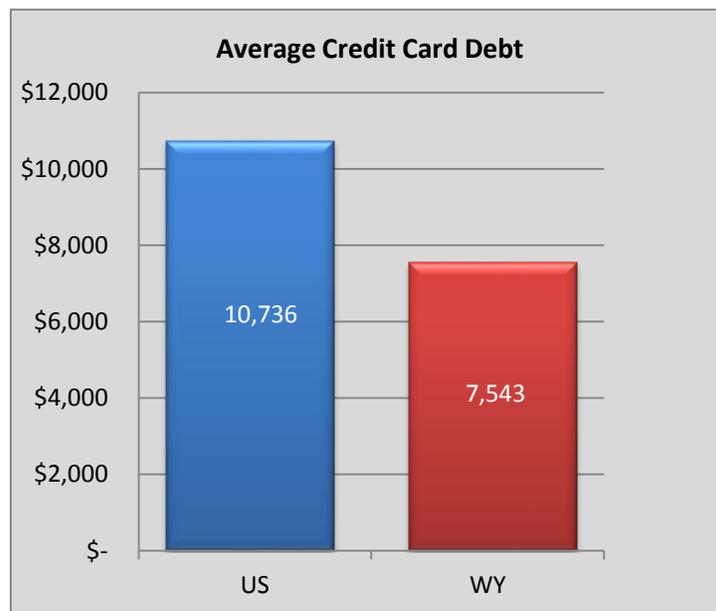


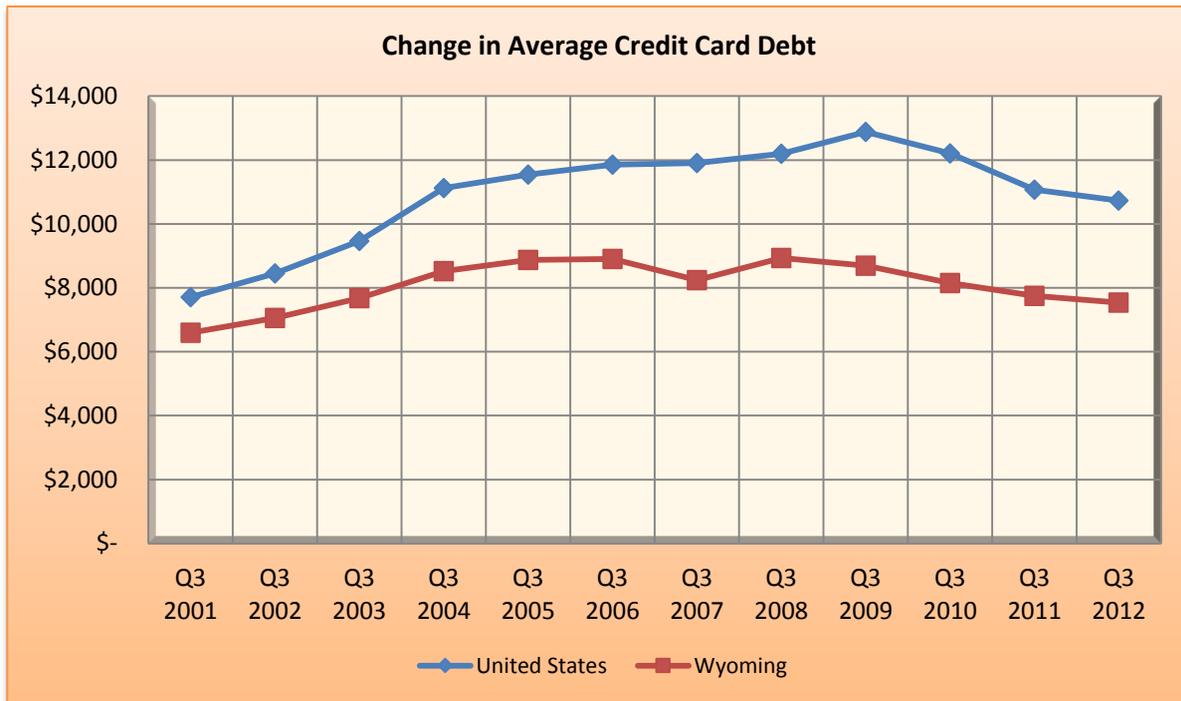
- The top three reasons identified were:**
1. Lack of knowledge about addressing credit issues
  2. Lack of knowledge on how to save/invest money
  3. Lack of knowledge about money management, i.e., credit card, debt, budgeting, checking accounts, etc.



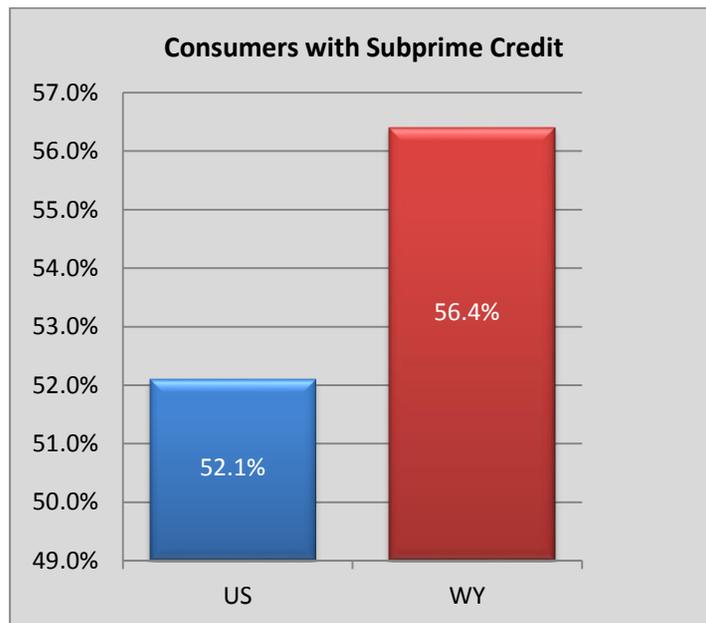
Natrona County	Number	Percentage
<b>Total Households</b>	<b>30,406</b>	
With Social Security	8,112	26.7%
Mean Social Security Income (dollars)	17,133	
With Retirement Income	4,291	14.1%
Mean Retirement Income (dollars)	19,690	
With Supplemental Security Income	1,025	3.4%
Mean Supplemental Security Income (dollars)	8,412	
With Food Stamp/SNAP benefits in the past 12 months	1,676	5.5%

\*Data Source: Census 2008-2012 ACS Survey

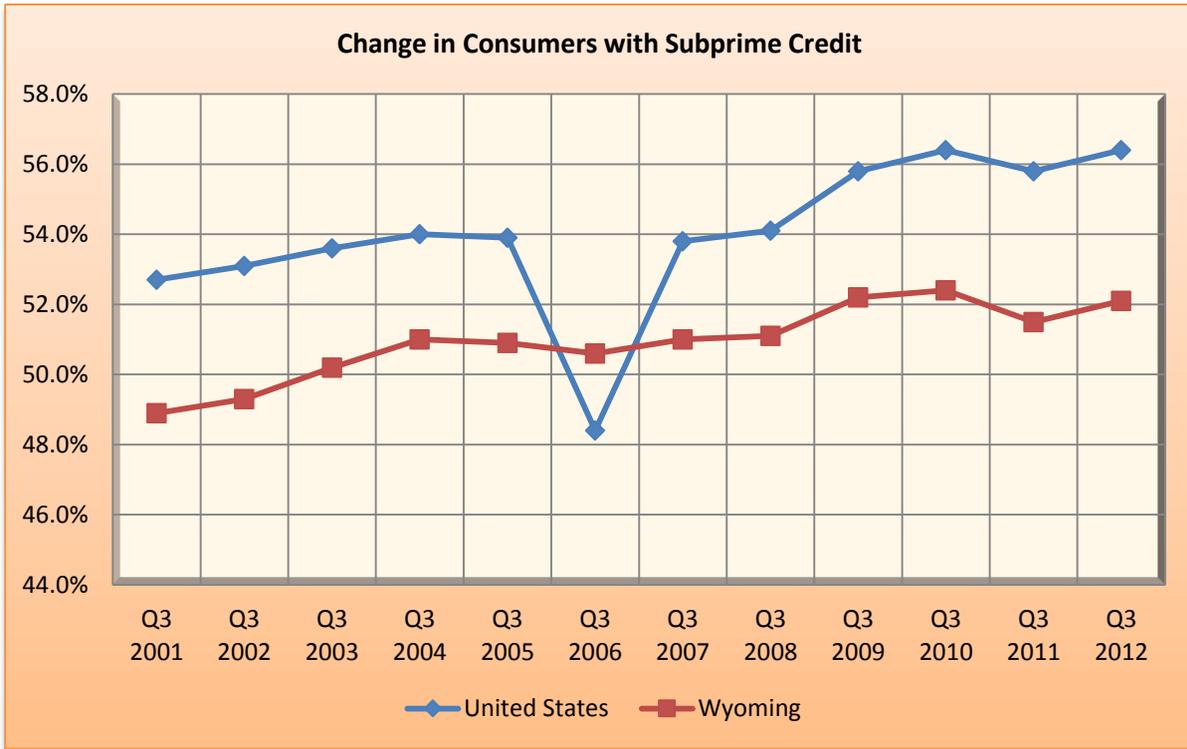




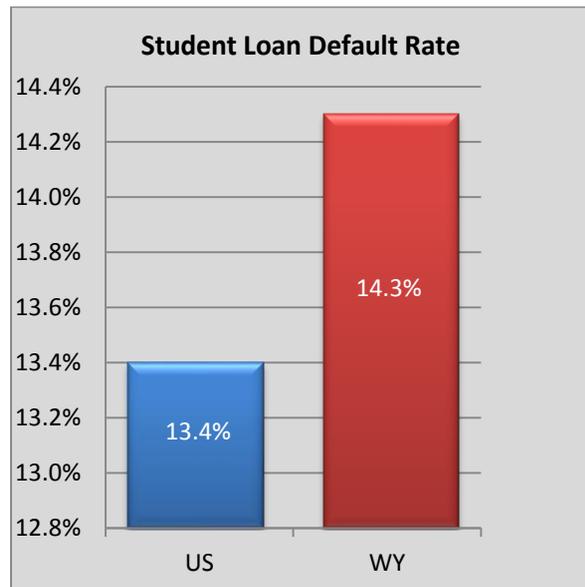
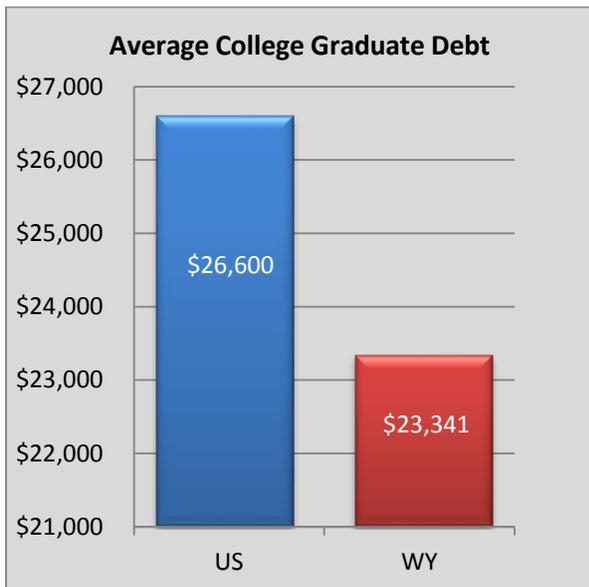
\* Data Source: 2013 Assets & Opportunities Scorecard



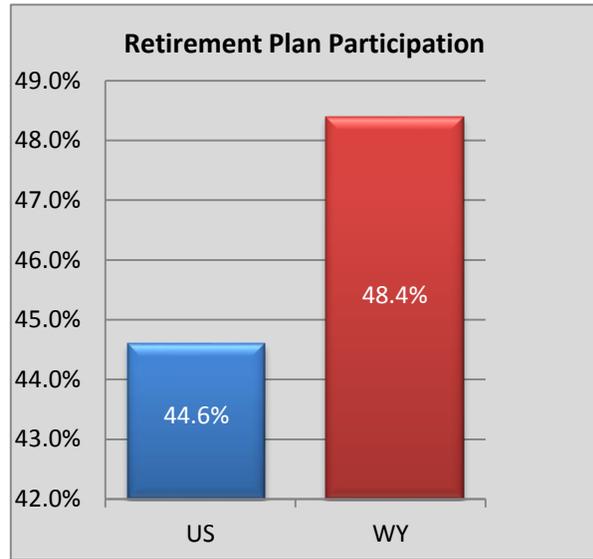
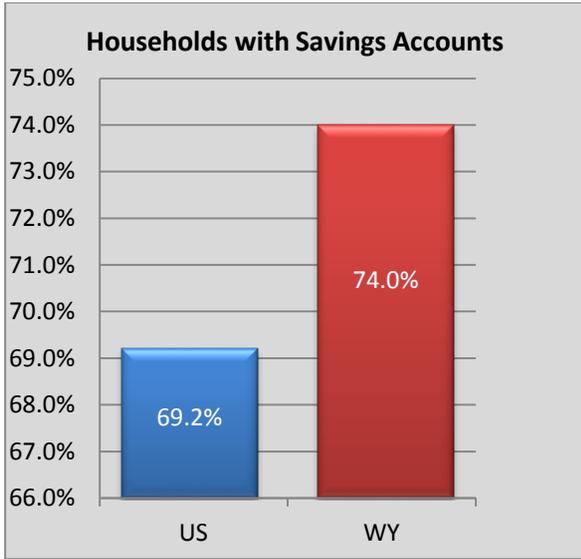
\* Data Source: 2013 Assets & Opportunities Scorecard



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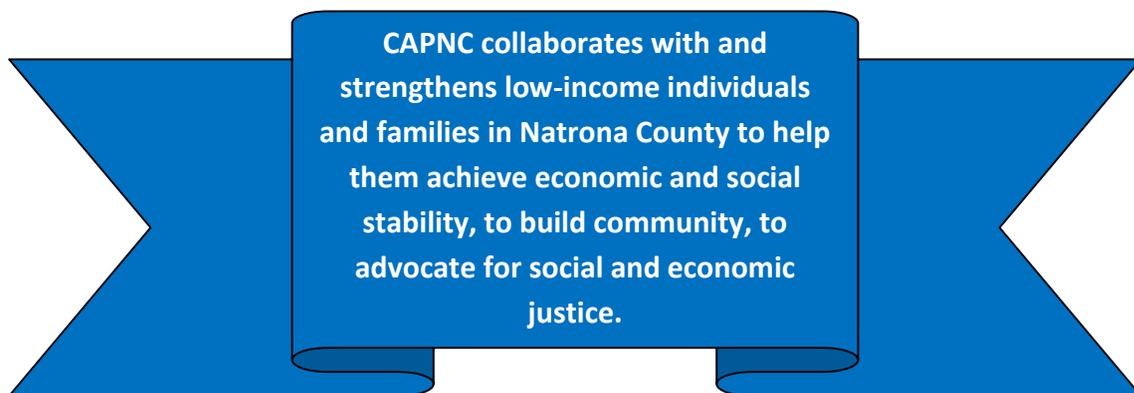


\* Data Source: 2013 Assets & Opportunities Scorecard



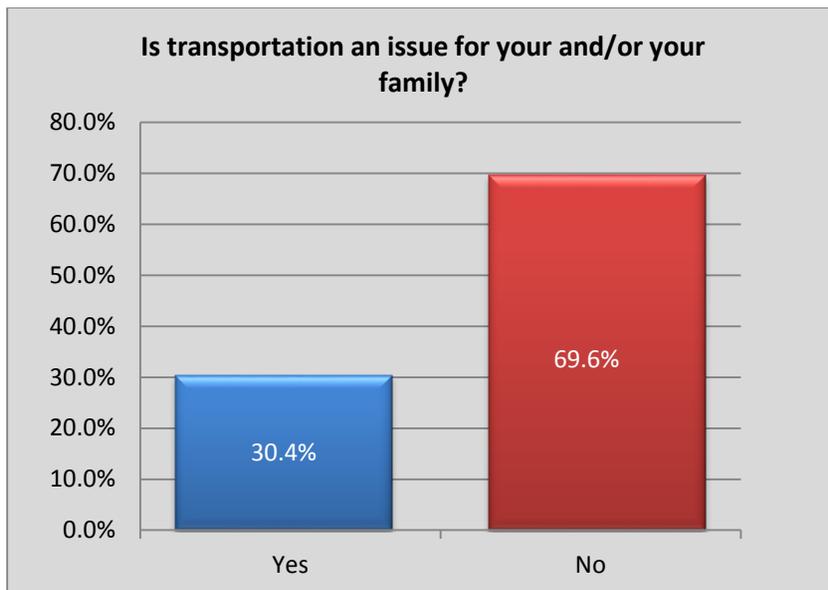
\* Data Source: 2013 Assets & Opportunities Scorecard

# POVERTY INDICATOR: TRANSPORTATION

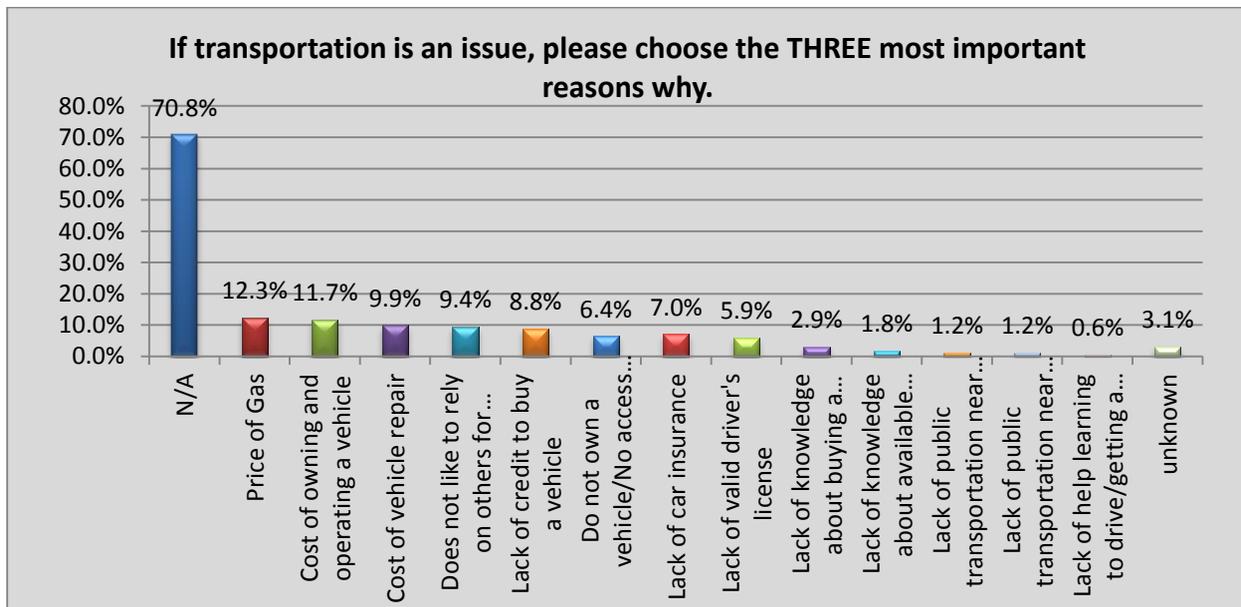


## Primary Data: Survey Results

The Needs Assessment Survey asked the basic question, *is **transportation** an issue for you and/or your family*. Of the 172 individuals who answered the question, **30.4%** felt that transportation was in fact an issue. In order to gain an understanding of the root causes of use of transportation issues in the community, the Needs Assessment Survey provided the opportunity for respondents to identify WHY transportation was an issue.



- The top three reasons identified were:**
1. Price of gas
  2. Cost of owning and operating a vehicle
  3. Cost of vehicle repair



Commuting to Work – Natrona County	Total Number	Percentage
<b>Workers 16 years and over</b>	<b>39,155</b>	
Car, truck, or van – drove alone	31,695	80.9%
Car, truck, or van – carpooled	4,771	12.2%
Public transportation (excluding taxicab)	271	.07%
Walked	640	1.6%
Other means	642	1.6%
Worked at home	1,136	2.9%
Mean travel time to work (minutes)	18.0	

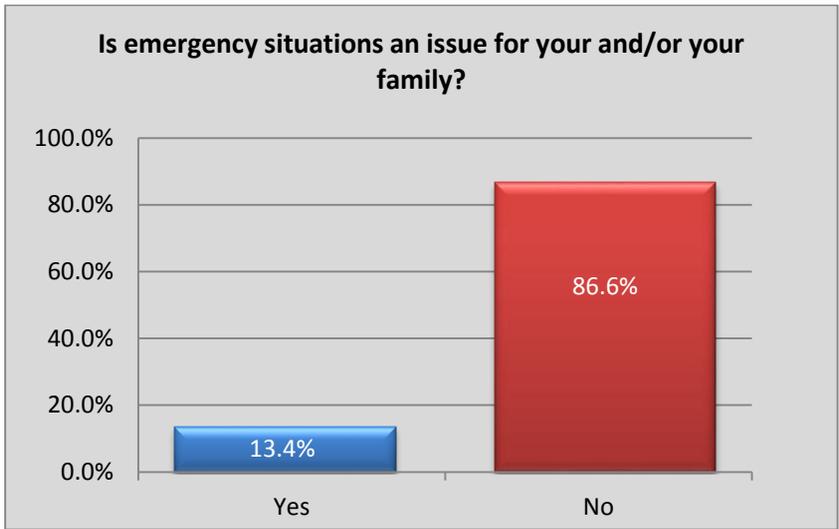
\*Data Source: Census 2008-2012 ACS Survey

# POVERTY INDICATOR: EMERGENCY SITUATIONS

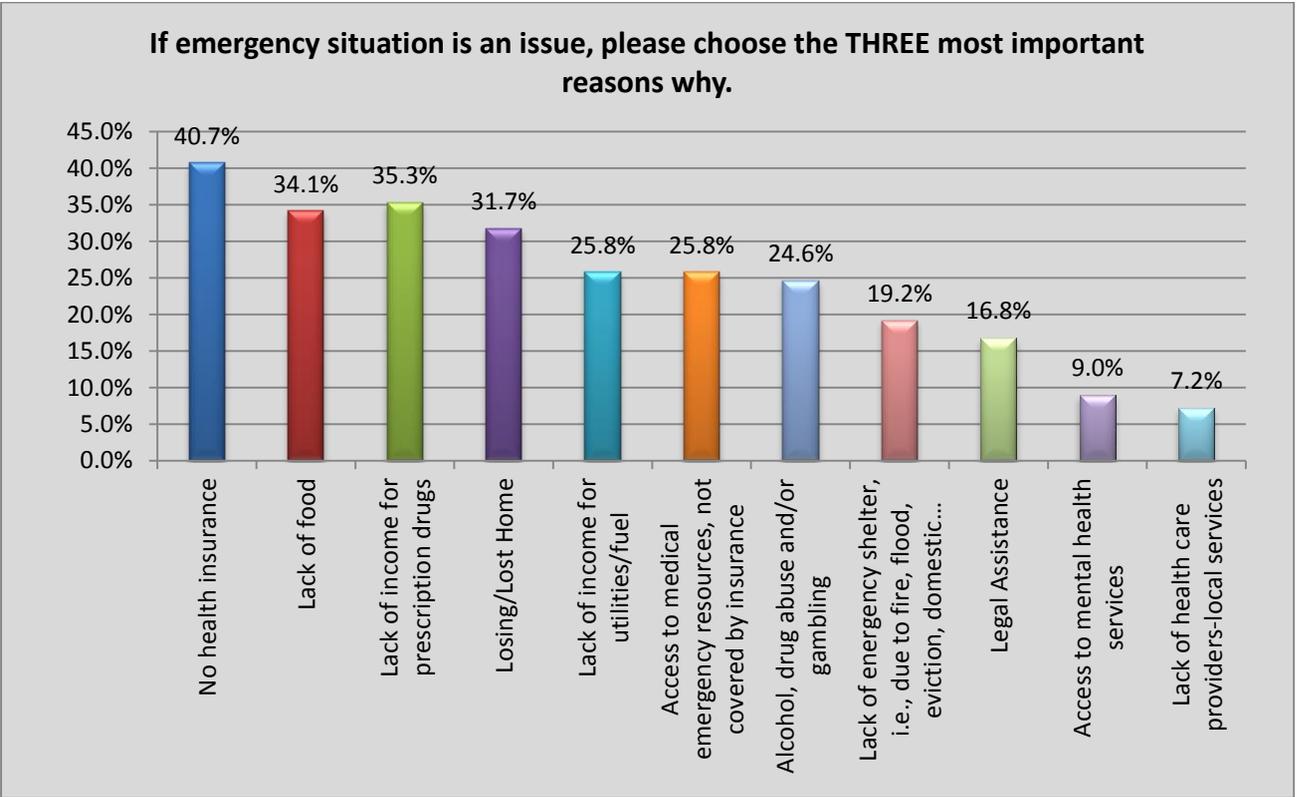
CAPNC collaborates with and strengthens low-income individuals and families in Natrona County to help them achieve economic and social stability, to build community, to advocate for social and economic justice.

## Primary Data: Survey Results

The Needs Assessment Survey asked respondents to *choose the 3 most important **emergency situations** that seem to be particular problems in this area.* 172 individuals answered the question and selected the following as the top three problems.



- The top three reasons identified were:**
1. No health insurance
  2. Lack of income for prescription drugs
  3. Lack of food



City of Casper Police Department reports the following crime statistics in the following in their 2012 Annual Report and 2013 Annual Report:

Type of Call	Casper, Wyoming	
	2012	2013
Calls for Service	54,818	53,836
Arrests	5,413	5,513
Adult Drug Arrests	408	505
Juvenile Drug Arrests	152	126
DUI	506	407
Moving Violations	7,282	8,940
Accidents Reports	2,086	1,932
Traffic Citations	15,503	13,567

\*City of Casper Police Department, 2014

The following information was obtained from the Wyoming Association of Sheriffs and Chiefs of Police – Alcohol and Crime in Wyoming 2010-2012.

#### DUI Arrests, 2010-2012

	2010	2011	2012
Natrona DUI arrests	798	803	752
Natrona rate per 10,000	30.2	26.8	24.1
Wyoming DUI arrests	5,862	5,199	7,761
Wyoming rate per 10,000	35.8	32.1	32.9

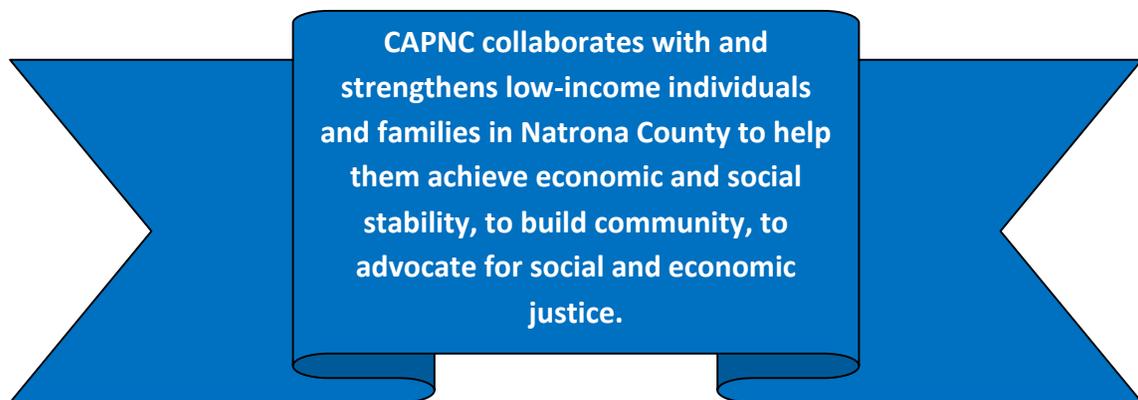
#### Alcohol-Related Fatal Vehicle Crashes

	2008	2009	2010	2011	2012
Natrona	8.14%	5.32%	2.65%	5.24%	5.09%
Wyoming	41%	36%	34%	28%	33%

\*Data Source: Fatality Analysis Reporting System

Note: Data reflects persons killed in motor vehicle crashes where driver blood alcohol content (BAC) was 0.01% or higher.

# POVERTY INDICATOR: CHILDREN'S NEEDS

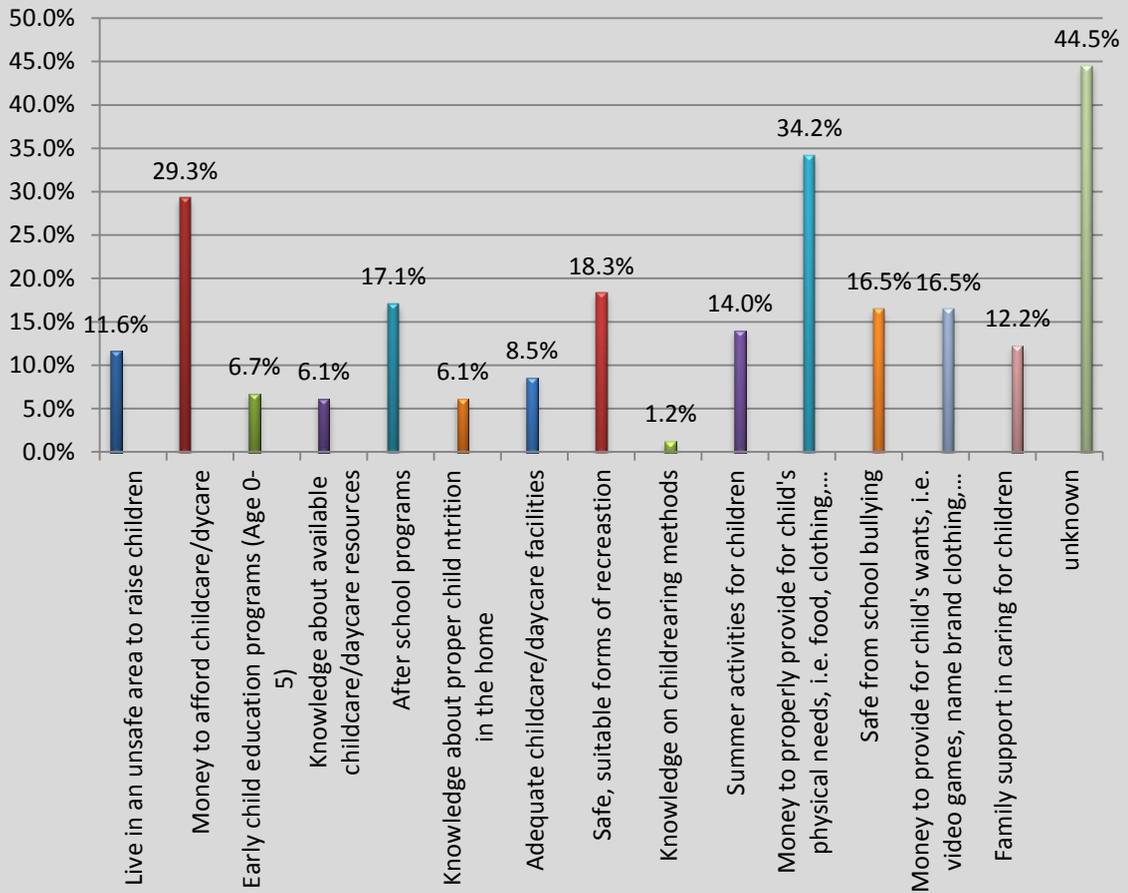


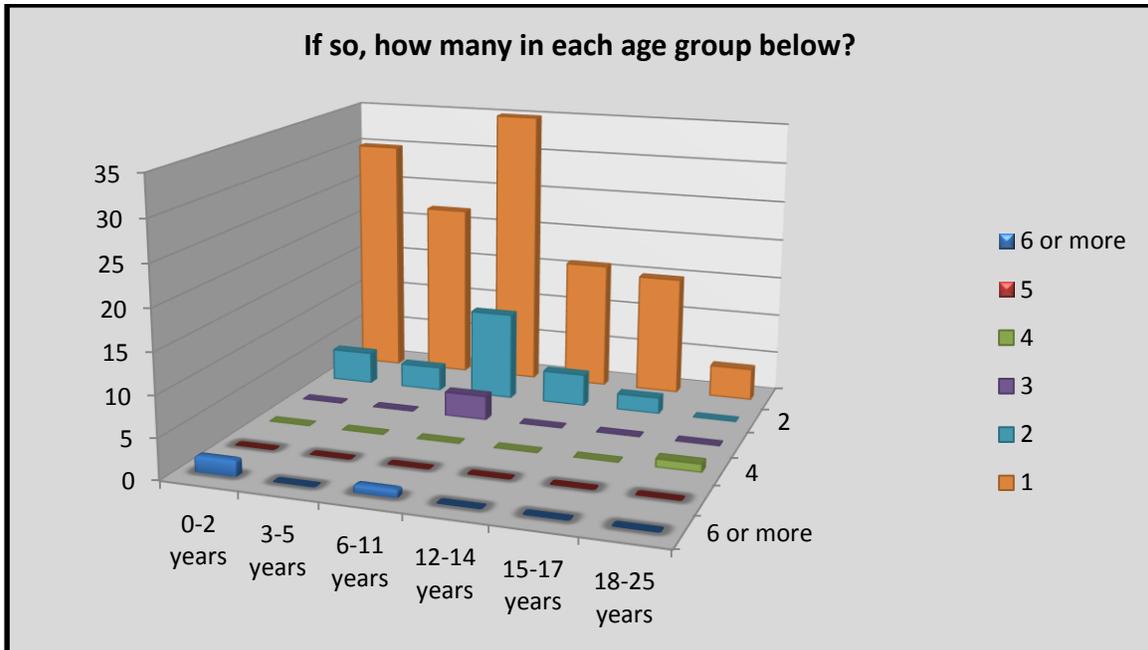
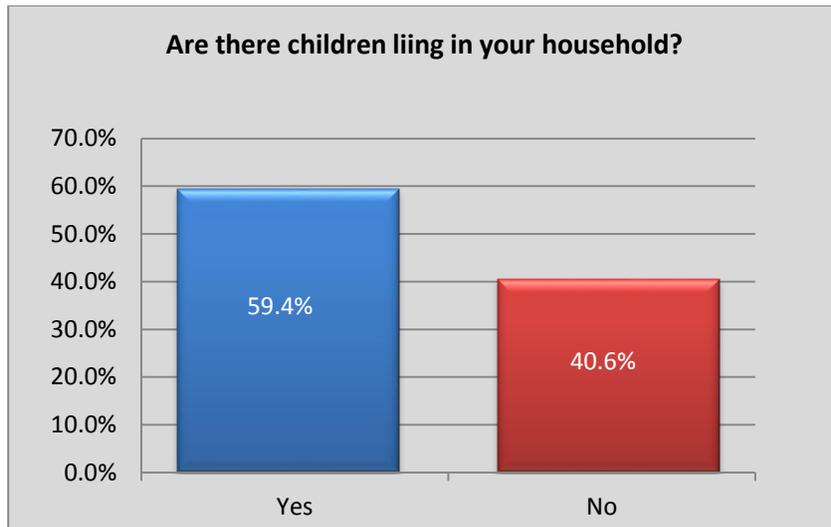
## Primary Data: Survey Results

### The top three unmet children's needs identified were:

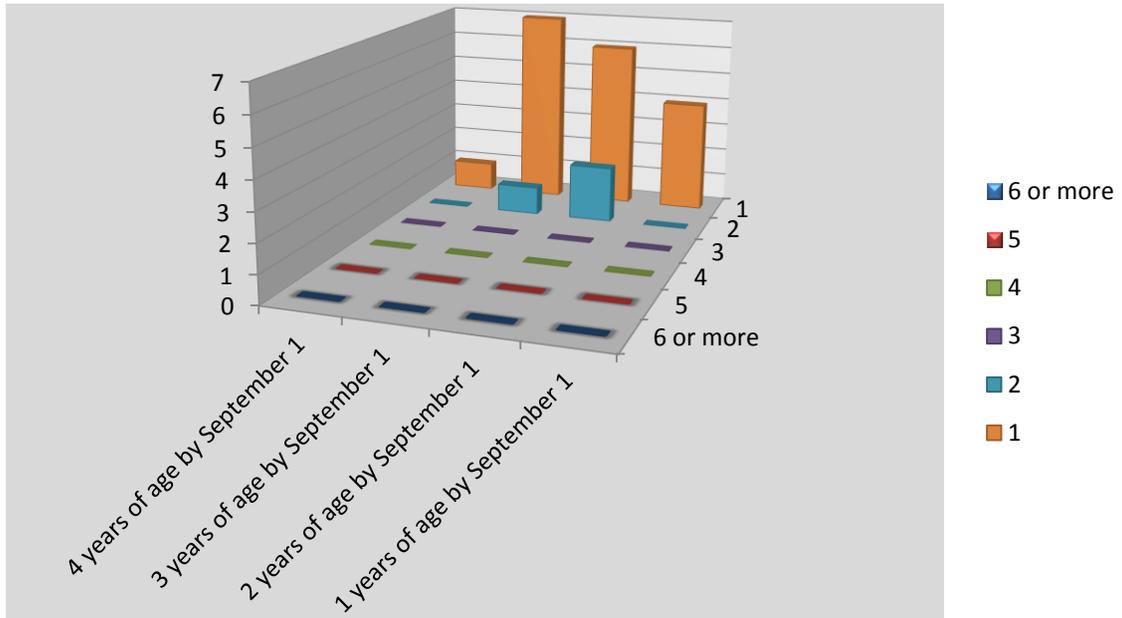
1. Money to properly provide for child's physical needs, i.e. food, clothing, shelter
2. Money to afford childcare/daycare
3. Safe, suitable forms of recreation

**Choose the THREE most important unmet children's needs in your community.**

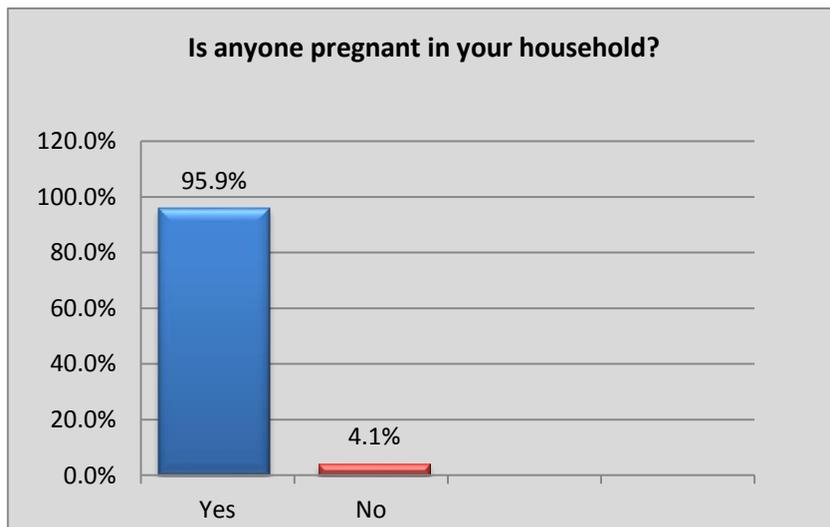




**List the number of children currently in your household who will be:**

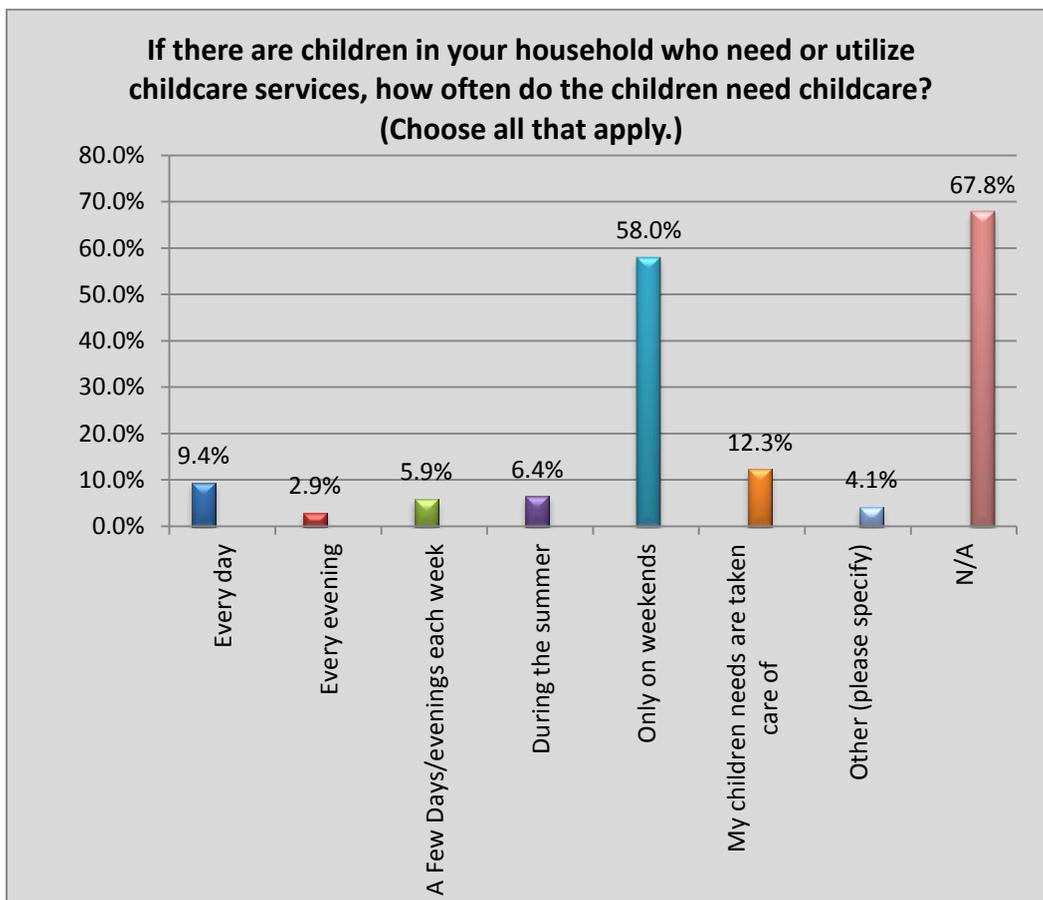
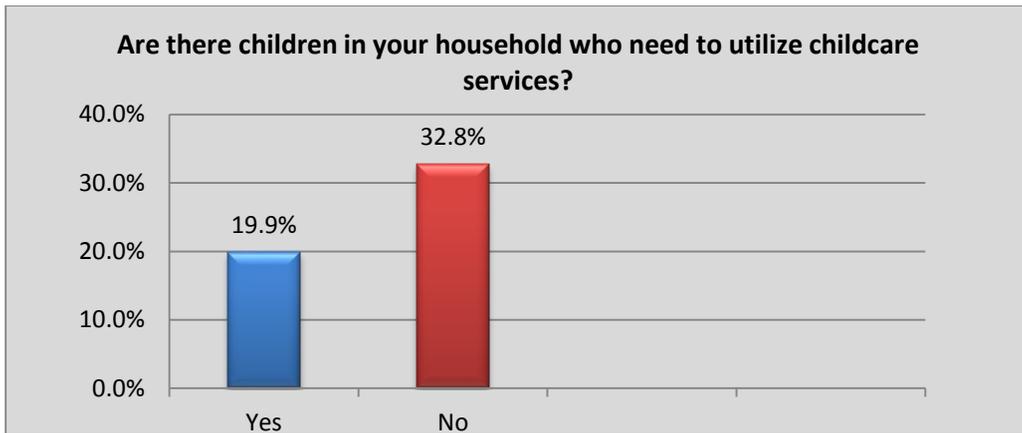


**Is anyone pregnant in your household?**



**If yes, what is the due date?**

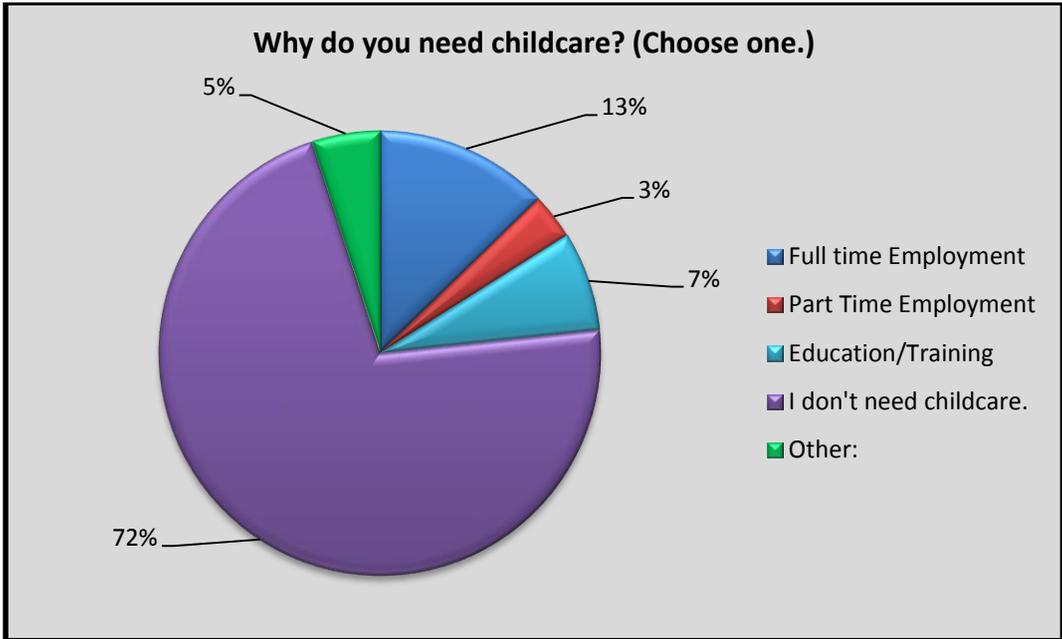
- March 2014 (1)
- June 2014 (2)
- July 2014 (1)
- August 2014 (2)
- October 2011 (1)
- January 26, 2014



**Other, please specify:**

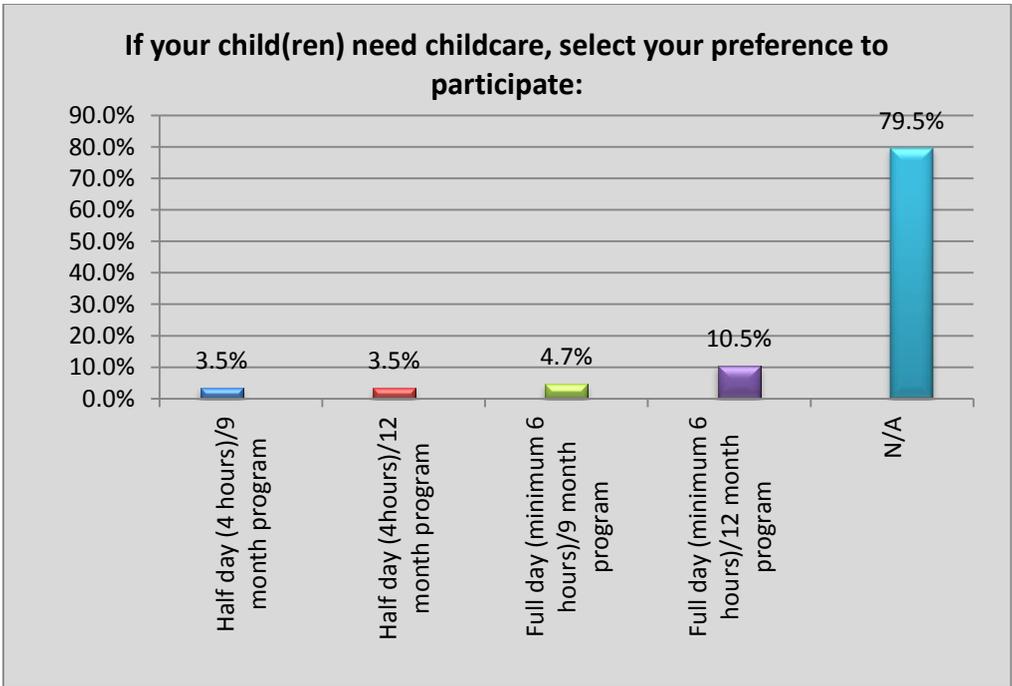
- No children in household (2 responses)
- After school (1responses)
- Sometimes (1 responses)
- Live with grandparents (1responses)
- I don't need childcare – (2 responses)

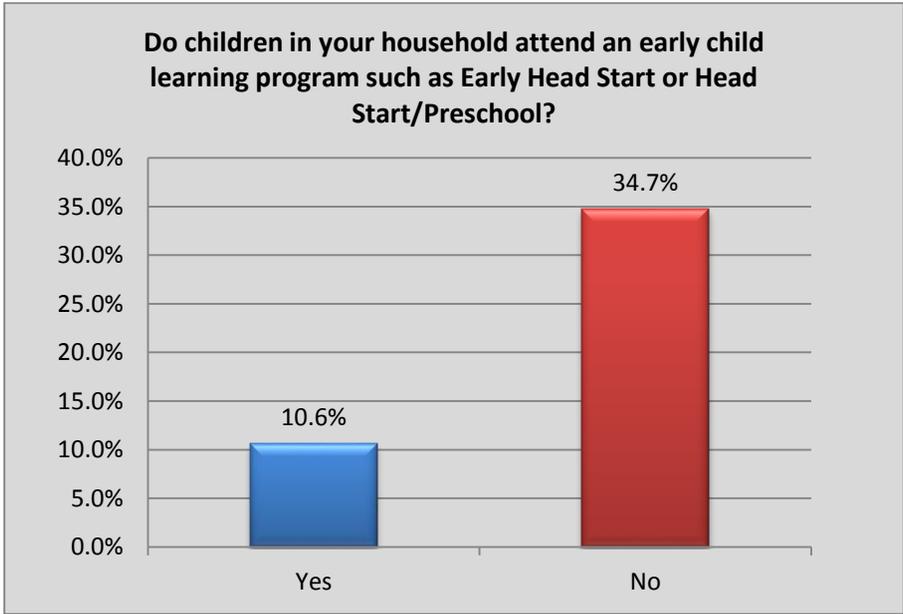
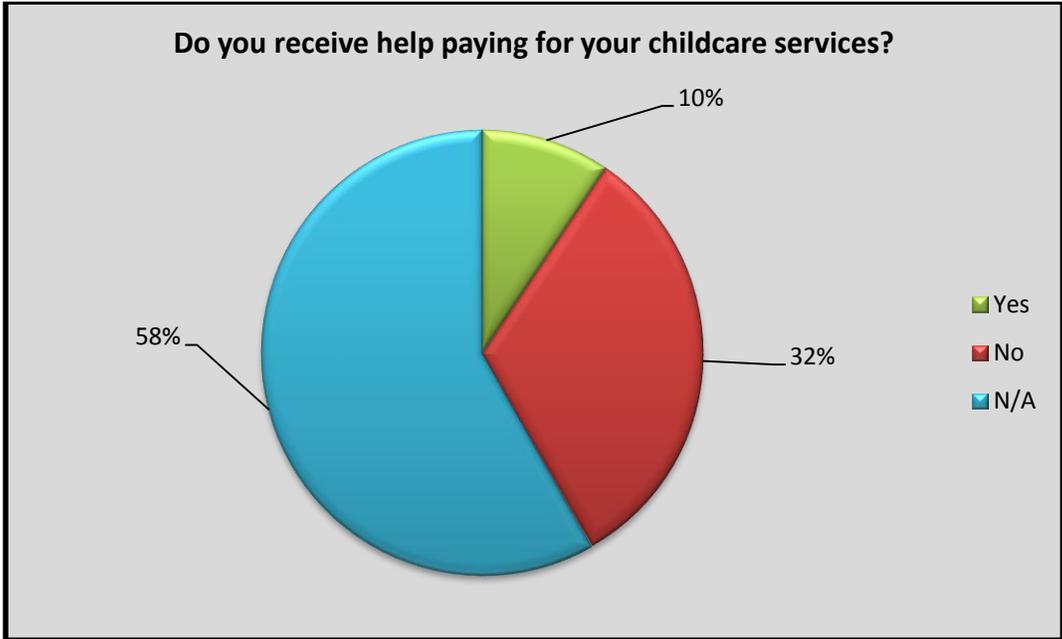




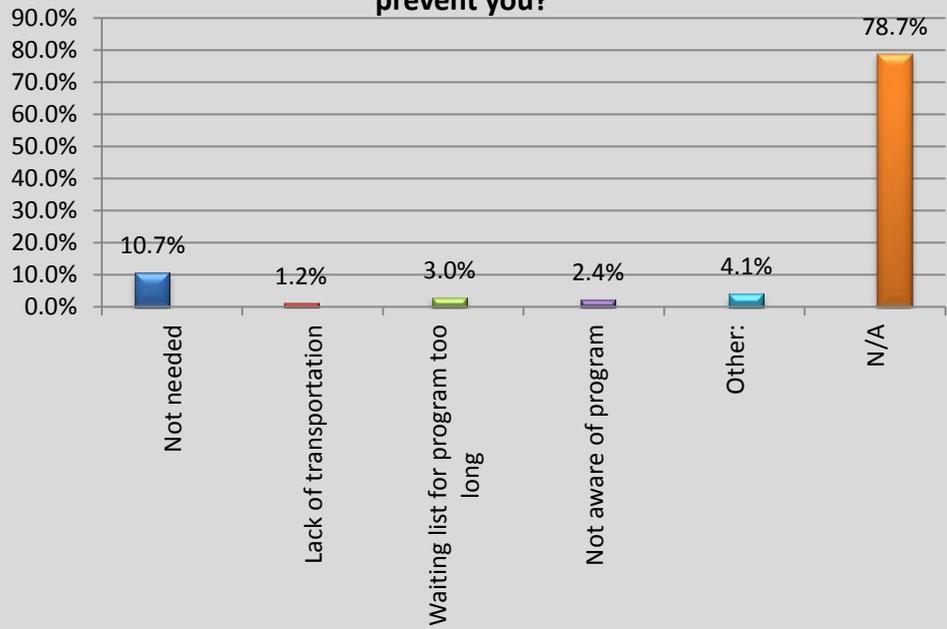
**Other, please specify:**

- Stay at home mom (1 responses)
- N/A - (6 responses)
- To find a job - (1 responses)
- No comment (1 responses)
- Have no children (1 responses)
- My childcare needs are taken care of. (1 responses)





**If your children do not attend an early child learning program such as Early Head Start or Head Start/Preschool, what might prevent you?**



# ANALYZE DATA

CAPNC collaborates with and strengthens low-income individuals and families in Natrona County to help them achieve economic and social stability, to build community, to advocate for social and economic justice

## Analyze Data

Using a paired comparison technique of the primary and secondary data of each key poverty issue in Natrona County, the data analysis presented information and prioritized the issues that are in **most** need in the community.

The top issues are as follows:

### Natrona County:

1. Health
2. Housing
3. Employment
4. Transportation

After the issues were identified, a **Plan of Action** may include identification of the **Greatest Challenge, Barriers** and **Goals** for the priority issues for Natrona County was developed.

<b>NATRONA COUNTY ACTION PLAN</b>	
<b>Issue #1: Health</b>	
<b>Greatest Challenge:</b> Lack of health insurance	
<b>Barriers:</b> <ul style="list-style-type: none"><li>• Lack of health insurance</li><li>• Lack of dental services</li><li>• Lack of free or low-cost medical services</li></ul>	
<b>What's our goal? Strategies can be taken to make a positive impact on this issues.</b> <ol style="list-style-type: none"><li>a. Enroll eligible individuals/families into private market place under the Affordable Care Act.</li><li>b. Refer eligible individuals/families to Medicaid.</li><li>c. Provide educational opportunities to promote awareness of the options currently available in the community and becoming available in the near future.</li></ol>	
<b>Issue #2: Housing</b>	
<b>Greatest Challenge:</b> Lack of affordable housing	

**Barriers:**

- Lack of affordable/suitable housing
- Extremely high rent costs
- Credit Issues

**What's our goal? Strategies can be taken to make a positive impact on these issues.**

- a. Provide education seminars to the public on money management issues including credit repair, budgeting and wants vs. needs.
- b. Establish or participate in a focus group with local landlords, agencies, and government officials and clients to discuss housing concerns and opportunities to improve current housing issues.

**Issue #3: Employment****Greatest Challenge:** Lack of good paying job opportunities, Need to increase minimum wage**Barriers:**

- Lack of employment opportunities
- Lack of basic skills and training
- Lack of reliable transportation/Lack of public transportation routes
- Child Care Assistance (although some provided by DFS)
- Physical Disability

**What's our goal? Strategies can be taken to make a positive impact on these issues.**

- a. Promote information about available jobs and resources to current clients.
- b. Initiate training for basic employment skills and educate individuals on the locations of GED and vocational training.
- c. Establish or participate in a focus group with local landlords, agencies, and government officials and clients to discuss public transportation concerns and action plans.
- d. Promote and referral clients with physical disabilities to specific agencies appropriate to clients' needs.

**Issue #4: Transportation****Greatest Challenge:** Lack of financial management skills to own/maintain a vehicle. Awareness and availability of existing transportation options.

**Barriers:**

- Price of gas
- Cost of owning and operating a vehicle
- Cost of vehicle repair

**What's our goal? Strategies can be taken to make a positive impact on these issues.**

- a. Provide education seminars to the public on money management issues including credit repair, budgeting and wants vs. needs.
- b. Increase awareness about available public transportation by sharing success stories and testimonials from current clients that use the transportation.
- c. Establish or participate in a focus group with local agencies, government officials and clients to discuss public transportation concerns and opportunities to improve current housing issues.



DATE: July 21, 2015

MEMO TO: City Manager, John Patterson

FROM: Leisure Services Director, Doug Follick *DF*  
Casper Events Center Manager, Bud Dovala

SUBJECT: Casper Event Center Promotions Line Item

When the Casper Events Center (CEC) opened in 1982 management of the facility was given funding to pursue in-house promotions of concerts and shows. The budgeted funding allowed the CEC to purchase shows that would otherwise not come to the CEC due to the monetary risk involved. Over the years through continuous “status quo” budgeting that funding has virtually disappeared in order to help curb the budget’s bottom line.

The four prevalent concert/show promotion options that have historically been used by CEC management include;

1. A standard rental of the facility. No risk involved for the City with this option.
2. Rental of facility with options of sharing some revenue sources with the promoter. No risk involved for the City with this option.
3. Co-Promote allows the CEC and the promoter to work together on all expenses and revenue sources. The risk involved in this option is the CEC and the promoter share all risk but also share all revenue after expenses.
4. CEC promoting/purchasing shows on our own. This option is the least attractive but it also allows us the option to attract more “A” level artists and shows to come to Casper.

Many aspects of the concert/show industry have evolved over the past 33 years since the CEC opened. More and more venues are negotiating portions of their revenue streams (concessions, convenience fees, etc) to entice promoters. Also, the number of venues in the USA has more than tripled allowing promoters more options as to where they bring their act. Casper and the immediate area population base are very low for a 9,200 seat arena, which creates an image of low revenue prospects (a tough sell to promoters).

Having a “promotion” budget would give CEC management the ability to aggressively purchase shows. Historically the CEC has purchased shows that provide positive net results more frequently than shows that do not. Yielding that same performance would assure a continuous “promotion” fund.

<b>Box Office:</b> (307) 577-3030 (800) 442-2256	<b>Box Office Hours:</b> Monday-Friday 11:30 am-5:00 pm	<b>Marketing:</b> (307) 235-8456	<b>Administration &amp; Catering</b> (307) 235-8441	<b>Physical Address:</b> # One Events Dr. Casper, WY 82601	<b>Mailing Address:</b> PO Box 128 Casper, WY 82602
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July 8, 2015

MEMO TO: John C. Patterson

FROM: Doug Follick, Leisure Services Director  
Alan Kieper, Special Facilities Manager

SUBJECT: Sale of Surplus Equipment

Recommendation:

That Council, by resolution, declare certain City-owned property as surplus, and authorize the sale of the same to the highest bidder.

Summary:

The Hogadon Ski Area has four lift systems: the Yellow Chair, the Red Chair, the Poma Lift, and the Magic Carpet. The Yellow Chair Lift is the main chair lift for the ski area, services all of the ski area, and has been upgraded in the past several years. The Magic Carpet is the newest lift and is used mainly for beginning skiers/boarders. The Red Chair Lift is a secondary chair lift, serves only a portion of the ski area, and has only operated a handful of times in the past several years. The Poma Lift was difficult to use for new/beginning skiers/boarders, was replaced by the Magic Carpet, and has not operated for the past two years.

The Red Chair Lift is currently not functional because it was necessary to take the main drive gearbox out for one of the upgraders to the Yellow Chair Lift. Historically the Red Chair Lift has seen minimal use due to the limited access of terrain for customers, and the inability to recruit and maintain sufficient seasonal operational personnel. The Red Chair Lift would require over \$200,000 in upgrade to again be operational. Currently there is no projected future use for the Red Chair Lift in the Hogadon Master Plan, rather the emphasis to upgrade (or replace) the Yellow Chair Lift.

The removal of the RED Chair Lift and all of the associated structures would increase the skiable terrain, and remove several associated safety hazards (towers, lift shacks, etc.).

The Red Chair Lift could be valued at greater than \$500. Wyoming State Statute 15-1-112 provides that a City may transfer or sell property to other public agencies, or the public at large, upon such terms as the City Council determines. Therefore, staff recommends the removal, sale, and ownership transfer of the Hogadon Red Chair Lift.

A resolution is prepared for Council's consideration.

RESOLUTION NO. \_\_\_\_\_

A RESOLUTION DECLARING THE HOGADON RED  
CHAIR LIFT AS SURPLUS AND AUTHORIZING SALE  
OF THE SAME TO THE HIGHEST BIDDER.

WHEREAS, the City of Casper owns certain surplus property, valued at greater than Five Hundred Dollars (\$500); and,

WHEREAS, Wyoming State Statute 15-1-112 provides that a City may transfer or sell surplus property to other public agencies, or the public at large, as provided therein; and,

WHEREAS, the City of Casper desires to sell said property through the surplus property sale process.

NOW, THEREFORE, BE IT RESOLVED BY THE GOVERNING BODY OF THE CITY OF CASPER, WYOMING: That the following-described property is hereby declared surplus property and shall be disposed of through the sealed bid process, to the qualified highest bidder, as provided in Wyoming Statute 15-1-112:

All components and structures of the Hogadon Ski Area Red Chair Lift

BE IT FURTHER RESOLVED: That the responsibility of the highest bidder shall be determined and approved by the Casper City Council.

PASSED, APPROVED AND ADOPTED this \_\_\_\_ day of \_\_\_\_\_, 2015.

APPROVE AS TO FORM:

\_\_\_\_\_  
ATTEST:

CITY OF CASPER, WYOMING  
A Municipal Corporation

\_\_\_\_\_  
V.H. McDonald  
City Clerk

\_\_\_\_\_  
Charlie Powell  
Mayor

June 24, 2015

MEMO TO: His Honor, the Mayor, and Members of the City Council

FROM: John C. Patterson, City Manager 

SUBJECT: Contract for Trails Manager

Recommendation:

That Council, by resolution, approve a contract with Civil Engineering Professionals, Inc., (CEPI), for trails coordination services.

Synopsis:

The City funded and received a comprehensive trails master plan and now needs to implement it.

Background:

With the help of many citizens, the Casper Area Trails, Path, and Bikeway Plan was crafted. It is a significant work that details all current and proposed trails, paths, and bikeways. Frankly, it is overwhelming in scope. There are so many fronts to attack, so many issues to tackle. The City needs someone to be responsible for the effort to implement the plan. Currently we don't have that expertise or bandwidth in house and it would be expensive to hire an employee to do this work. A professional services agreement with a competent firm would be far cheaper and could produce better results. Jared Fehringer, ASLA, an employee of CEPI, is known for his passion for trails and for his design and organization skills. CEPI has provided an exciting scope of services that would get us moving forward with the master plan implementation for less than \$30,000.



July 13, 2015

John Patterson, City Manager  
City of Casper Manager's Office  
200 North David Street  
Casper, Wyoming 82601

Mr. Patterson:

It was a pleasure to meet with you to discuss the recently completed Casper Area Trails, Path and Bikeway Plan. We are very excited about the opportunity to work closely with you and the city to provide trails coordination services to help evaluate, prioritize and expedite the design and construction of trails and pathways in and around the City of Casper. We have prepared this letter to present our proposed approach to providing this work.

CEPI's mission statement is simply ***"Do the right thing!"*** This mission statement embodies our approach to providing the highest quality professional services to a small group of clients located in central Wyoming. High quality technical services, coupled with long term commitments and local knowledge have contributed toward a trend of success for our clients and CEPI. When we approach a project we endeavor to find the best solution to the problem or project. We do not focus on profit margins or how to create the biggest project; we simply endeavor to do the right thing. We believe that if we look for the broadest and best solutions to meet our client's needs we will create long term solutions and long term relationships. The CEPI project team for the trails coordination provides a blend of seasoned facilitation and leadership with youth, energy and vision.

There is an adage that the most efficient way to meet a goal or objective is to "plan your work and work the plan." The Casper Area Trails, Path and Bikeway Plan is an excellent starting point. The timing is perfect to refine and detail this plan and put it into operation to systematically and efficiently evaluate, design and construct the trails network in and around Casper. Below we have detailed the tasks we believe are necessary to refine the plan and place it into operation.

- ***REFINE AND PRIORITIZE (estimated 80hrs)*** - The culmination of the Casper Area Trails, Path and Bikeway Plan is a very detailed drawing identifying all of the current and proposed trails, paths and bikeways within the City of Casper. This document is very useful, but we need to take it to the next step. The first task will be to prioritize the proposed improvements and add potential rural pathways around Casper into the plan (e.g. Casper Mountain). This task will also include delineating the proposed pathways into categories based upon the complexity and cost of construction. Projects that only require striping changes to streets should be prioritized; projects requiring land acquisition and detailed design should be ranked

based upon cost, need and connectivity. Proposed and potential trails would be ranked using a series of defensible metrics to rank the importance of each project. The trails plan must be a living document that is updated and maintained to track the improvements made, continuously reviewed to assure completeness and utilized to prioritize, fund and construct a comprehensive trails system.

- **EXTENSION OF CITY STAFF (estimated 30hrs)** - "When eating an elephant take one bite at a time."<sup>1</sup> Planning and constructing the trails system must be prioritized into "bite-size" pieces. Our plan for prioritizing the pathways in and around the City of Casper is to facilitate a series of work groups, first with city staff to determine the direction and implementation of this committee. For this meeting or series of meetings, we would not bill the City until it is determined what the focus and scope of the committee will be. Secondly, we would arrange meetings with a citizen advisory group. Then during a series of three work sessions with city staff we will delineate the potential trails into categories based upon complexity, location and type (i.e. on street, off street, striping only, etc.). During the final meeting we will work to generate a top ten list of trails and pathways within the city and outside of the city which promote connectivity and access. Our approach is to serve as an extension of the city staff and not as a consultant presenting the results of our work. Teamwork and consensus is essential for the success of the plan.
  
- **CITIZEN ADVISORY GROUP (estimated 30hrs)** - Following the prioritization process with city staff we will facilitate a series of two meetings with a citizen advisory group. We will present the priorities and modifications to the plan and solicit input from the group. Site visits to each area on the top ten list would be made in order for group members to visualize the improvements. After input from the first meeting we would modify the plan accordingly and meet a second time to gain informed consensus with the plan.
  
- **TOP TEN LIST (estimated 60hrs)** - Following the completion of the plan and the top ten list we would define potential funding sources for all of the proposed projects. We would then prioritize and schedule the design and construction of the trails projects to coincide with the available funding. This plan and funding schedule would be presented to the citizen advisory group and the Casper City Council.
  
- **EDUCATION (estimated 100hrs)** - Following acceptance and support for the plan, the key for success is education of trail users and the general public. We propose a system of trail identification and signage to inform users of connectivity and use. Development of a cell phone application for mapping and identification would be a priority. The trail signage could be equipped with a QR-code for the application to direct trail users around the system. We also believe that education at local schools would improve trail knowledge and use. The trails education system is critical for

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<sup>1</sup> Creighton Abrams



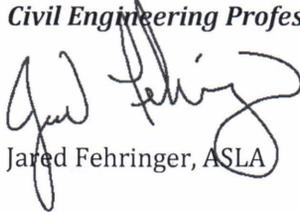
the implementation of the plan and should focus on safety, driver education and respect for all trail users.

- **FEE** - Our current fee schedule has rates of \$95 per hour for a Landscape Architect. We propose to reduce this rate to \$85 per hour and we will bill the City on an hourly basis for the work on the trails plan with an agreement not to exceed \$30,000. CEPI has a tradition of providing professional services for non-profit entities at reduced rates. We recognize the importance of this project for the city we work and live in and do not wish to profit from making our community better and safer.

We are extremely excited to be a part of this process. We have a history of designing and constructing trails in the Casper area that spans two decades. We are Casper people who understand the community and the needs of the trail system. With the addition of Jared Fehringer to our staff three years ago we have broadened our expertise to include landscape architecture. We are confident we can help put the trails plan into action working as an extension of the city staff.

Please feel free to contact us if you have any questions or if we can meet with you or other city staff to present our approach to the trails system implementation plan.

Sincerely,  
**Civil Engineering Professionals, Inc.**



Jared Fehringer, ASLA

