



COMMUNITY ACTION PLANNING COUNCIL OF JEFFERSON COUNTY, INC.

518 Davidson Street, Watertown, NY 13601 ● Phone: 315-782-4900 Fax: 315-788-8251 ● www.capcjc.org

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SUMMARY OF STRATEGIC PLANNING PROCESS 2011

Summary Report

The Community Action Planning Council engaged in a process of assessing community needs and identifying strategic goals throughout the spring and summer of 2011. The process resulted in the development of a strategic plan that includes updated mission, vision, and organizational core values.

The contents of this report include a summary of the 2011 strategic planning process, highlights of the primary and secondary data collected, and the resulting strategic goals.

Background

In January 2011, the Community Action Planning Council constructed several surveys to gather data and perceptions from various stakeholder groups—specifically, consumers, peer agencies and businesses, CAPC staff and CAPC Board members. To help lead the strategic planning process, the agency retained a consultant—Dr. Richard L. Halpin, a highly-regarded leader in the community who has significant experience in strategic planning and organizational development. Dr. Halpin served as the external facilitator, and Dawn Cole, deputy director for the Community Action Planning Council, served as the internal coordinator.

A critical component of this Strategic Planning process was the creation and deliberations of a Strategic Planning Review Committee. This was subsequently renamed and repurposed as the Strategic Planning Annual Review Committee (SPARC). The SPARC is composed of 10 members, from all program areas, including new and senior staff and members of the Board of Directors, and is intended to be representative of all levels within the organization.

The purposes of the Strategic Planning Annual Review Committee were:

- to provide perspective, input and direction for the strategic planning process;
- to ensure validity of the process and the content;
- and to communicate information about the planning process throughout the organization.

People who were interested in serving on the SPARC were directed to make their interest known to Executive Director Melinda Gault, who then made appointments consistent with the need to have broad agency representation on the committee.

Members of the committee are:

Marie Ambrose, Head Start/Pre-K Director
Richard Beirman, Member of Board of Directors
Sharon Bouchard, Family Center Director
Thomas Bruno, Member of Board of Directors
Nina Hershey, Member of Board of Directors
Peggy Plumley, Housing and Energy Services Office Manager
Sherry Rafferty, Family Center Administrative Assistant
Kristin Sherburne, Head Start Center Coordinator
Kathleen Sprague, Chief Financial Officer
Cathy Stenfeldt, JLCP Provider Services Specialist

The work of the Strategic Plan Annual Review Committee was essential to the outcome of this project.

Process

The process of research and analysis that followed was inclusive of staff, Board of Directors, and community stakeholder groups. Specific activities included the following:

Survey Research:

- Client Survey (Summary attached, Appendix A)
- Agency Survey (Summary attached, Appendix B)
- Staff Survey (Summary attached, Appendix C)
- Board Survey (Summary attached, Appendix D)

Focus Groups:

- Initial meeting with Senior Team – April 26 (Agenda and summary attached, Appendix E)
- Open discussion with Non-Profit Critical Needs Committee – June 22 (Discussion questions and summary attached, Appendix F)
- Open discussion with Community Leaders – July 28 (Discussion questions and summary attached, Appendix G)

Total Staff Meeting Presentations:

- Introduction to the process – April 1
- Exercise to engage staff in process – June 3 (Agenda and summary attached, Appendix H)
- Presentation of plan – October 7

Board of Directors:

- Overview of the process – May 19
- Presentation of plan for board review and approval – September 15

Senior Team:

- Introduction and overview of the planning process – April 26 (Appendix E)
- Presentation of draft strategic plan – September 8

Strategic Plan Review Committee:

- Organizational meeting – May 17 (Agenda attached, Appendix I)
- With Critical Needs group – June 22 (Discussion questions and summary attached, Appendix F)
- Full-day analysis meeting – July 7 (Agenda and meeting summary attached, Appendix J)
- With Community Leader focus group – July 28 (Discussion questions and summary attached, Appendix G)
- Review of draft; reconsideration of mission statement – August 29
- Summary meeting – September 8

Secondary Data

A community needs assessment tool commissioned by the New York State Community Action Association (NYSCAA) provided access to an overview of community conditions in Jefferson County (summary attached, Appendix K). Secondary data was gleaned from a variety of sources, including the U.S. Census Bureau and the American Community Survey. Where applicable, Jefferson County data is compared to statewide averages.

Results

As a result of the reflective and analytical work of the Strategic Plan Annual Review Committee, working in conjunction with the Deputy Director, Dawn Cole, the Executive Director, Melinda Gault and the planning consultant, Richard Halpin, the following Strategic Plan was developed.

The Strategic Plan represents a dynamic plan of work. Under the leadership of the executive director, CAPC's Senior Team will continue to develop appropriate tactical goals, implementation strategies, and outcome measures to carry out the Strategic Plan. The plan will be subject to annual review and updates.



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STRATEGIC PLAN 2011-2014

Our Mission

The Community Action Planning Council assists, supports and empowers people through diverse programs designed to alleviate poverty, promote self-sufficiency and advance community prosperity.

Our Vision

The Community Action Planning Council envisions a prosperous community where all people are valued, supported, empowered and successful. CAPC is a valued resource that tirelessly protects and continuously expands these characteristics, building a community where opportunities are abundant and people help themselves and each other.

Our Values

Helping, supporting, empowering people
Responsiveness to the needs of the community
Respectful, non-judgmental treatment of people

Strategic Goals

During the period 2011 through 2014, the following strategic goals will guide the work of CAPC

- Develop greater diversification of funding sources.
- Develop and implement a comprehensive marketing initiative (telling the story).
- Strengthen agency communications, relationships and morale.
- Provide development and engagement opportunities for the Board of Directors.
- Conduct ongoing assessment of existing programs vs. community needs for possible program realignment (initially evaluate *community transportation* and *affordable housing* needs).

APPENDIX A

CLIENT SURVEY SUMMARY

METHODOLOGY

Offered early February through mid March 2011, the survey was completed by 664 households. The primary target audience was low-income households in Jefferson County. The survey was made available to CAPC clients through the Family Center, Head Start (delivered by family workers), Jefferson-Lewis Childcare Project (through subsidy manager at Jefferson County Department of Social Services) and Weatherization (past clients as well as those on waiting list).

Additionally, the survey was offered to customers of the following organizations:

- Jefferson County Office of the Aging
- Department of Social Services
- Northern NY Cerebral Palsy Association
- Cerebral Palsy Association of North Country
- Watertown Urban Mission
- Transitional Living Services
- Northern Regional Center for Independent Living
- Disabled Persons Action Organization
- Transitional Living Services
- CREDO Community Center
- North Country Children's Clinic
- Jefferson Rehabilitation Center

DEMOGRAPHIC PROFILE and HH CHARACTERISTICS

Demographics – Person Completing Survey

60.5%	375	Female
39.5%	245	Male

The average age of the person completing the survey was 40.3 years.

Race/Ethnicity of Person Completing Survey

91.3%	601	Caucasian
5.5%	36	African American
3.0%	20	Hispanic/Latino
2.6%	17	Native American or Alaskan Native
.9%	6	Asian
.5%	3	Native Hawaiian or Pacific Islander

Highest Level of Education of Person Completing Survey

29.4%	192	High School Graduate
20.1%	131	Less than High School Diploma
15.8%	103	GED or High School Equivalency
15.3%	100	Some College (or still in College)
9.5%	62	Two-Year Degree
3.5%	23	Four-Year Degree
.8%	5	Graduate Degree

Primary Language Spoken in HH

98.6%	652	English
.9%	6	Spanish
.5%	3	French

57.4% or 378 of respondents reside in Watertown. Other most commonly reported home communities are:

- Carthage – 6.4%
- Adams/Adams Center – 3.9%
- Dexter – 3.5%
- Clayton – 2.1%
- Theresa – 2.1%
- Antwerp – 1.8%.

Household Size

22.2%	141	HH of 1
21.7%	138	HH of 2
19.2%	122	HH of 3
14.0%	89	HH of 4
11.2%	71	HH of 5
5.2%	33	HH of 6
6.5%	41	HH greater than 7

22.8% or 148 of those completing the survey report that a member of the HH has served in the military.

8.0% or 52 of those completing the survey report having an aging parent live with them.

HOUSING

Housing status 664 respondents

53.2%	353	Rent Home
32.2%	214	Own Home
8.3%	55	Homeless – Staying with friends/family
4.1%	27	Homeless – Staying in a shelter
2.3%	15	Military Housing

Most commonly reported housing problems 636 respondents

21.2%	123	Cannot find affordable housing to rent
17.9%	105	Cannot afford to make needed repairs to my home
16.5%	91	Bad credit makes it hard to find a place to rent
14.0%	80	Cannot find affordable housing to buy

FOOD/NUTRITION

Food issues 631 respondents

9.8%	63	Have gone hungry/not able to get enough food
25.5%	162	Skipped or cut size of meals because there wasn't enough food
62.3%	406	Have used food assistance programs

Most commonly used food assistance programs 621 respondents

57.3%	356	Food Stamps
43.0%	267	Food Pantries
21.9%	136	School Breakfast/Lunch
20.0%	124	WIC
13.7%	85	Dollar Dinners

HEALTH

59.2% (386 out of 652) of respondents indicated that a member of their household needed but did not receive medical, dental, or mental health care or prescription medications (in the past 12 months). Primary reasons were cost (63%) and lack of insurance (56.4%).

TRANSPORTATION

32.9% (219 out of 665) of respondents indicated that transportation has been a problem within their households (in the past 12 months). Most commonly cited issues relating to transportation: no access to a car (29.3%), unable to afford gas (34.7%), unable to afford car repairs (32.4%) and no drivers license or license suspended (25.1%).

CHILD CARE

Number of hours per week child care is required 75 respondents

25.3%	19	10 hours or less
46.7%	35	10 – 39 hours
28.0%	21	40 hours

16% (37 out of 231) of respondents report having problems getting or keeping adequate child care services (in the past 12 months). Most commonly identified problems associated with getting/keeping adequate child care: couldn't find affordable care (50%), couldn't find care for child with special needs (35%), evening care not available or difficult to find (35%), and weekend care not available or difficult to find (32.5%).

Most commonly reported youth-related challenges 212 responses

27.4%	58	Emotional/behavioral problems
26.4%	56	Learning disability
14.2%	30	Victim of bullying
13.2%	28	Weight or eating habits

INFORMATION/LITERACY

Most commonly reported skills interested in improving 333 responses

46.8%	156	Computer skills
39.0%	130	Financial/budgeting
31.8%	106	Job search skills
27.6%	92	GED or High School Equivalency

COMMUNITY SERVICES

Community services ranked in order of importance to HH 640 respondents

(1 = Not Important, 5 = Very Important. Results tallied based on Rating Averages.)

- 3.34 Affordable dental care
- 3.31 Help w/heating & electric bills
- 3.27 Affordable medical care
- 3.14 Help getting enough food
- 2.99 Help finding affordable housing
- 2.98 Transportation
- 2.19 Mental health services/counseling
- 2.09 Child care
- 2.04 Budget counseling
- 1.98 Help with how to buy and prepare food
- 1.81 Drug/alcohol abuse counseling
- 1.56 Adult day care
- 1.55 Domestic violence shelter/counseling

EMPLOYMENT and INCOME

35.4% (213 out of 602) of respondents report having difficulty finding or keeping a job (in the past 12 months).

Most commonly reported employment issues 246 responses

61.8%	152	Not enough jobs available
33.7%	83	No transportation
28.0%	69	Lack right job skills
26.4%	65	Recent layoff or hours cut
24.0%	59	Criminal record

Most commonly reported household finance issues 314 responses

57.6%	161	Borrowed money from friends/family for bills
54.1%	170	Pressured to pay bills by bill collectors
42.0%	132	Fell behind in paying rent or mortgage
20.4%	64	Pawned or sold valuables to pay bills
15.3%	48	Had utilities (water, heat or electric) shut off

APPENDIX B

AGENCY/COMMUNITY PARTNER SURVEY SUMMARY

METHODOLOGY

The survey was mailed to 72 area businesses - 50 non-profits, 6 government agencies, 6 child care providers, 4 for-profit businesses, 4 school systems, and 2 funding sources. A total of 38 agencies responded.

Relationship to CAPC

36 responses

- 41.7% (15) – Collaborative partner
- 16.7% (6) – Fellow human service agency
- 13.9% (5) – Government connection
- 8.3% (3) – Contract partner (formal legal agreement)
- 8.3% (3) – Associated through business community
- 8.3% (3) – Not affiliated
- 2.8% (1) – Partnership (shared resources)

Has your organization had an active relationship with CAPC in past 12 months

37 responses

- 91.9% (34) – Yes
- 8.1% (3) – No

Rate your experience working with CAPC

36 responses

- 61.1% (22) – Very good
- 27.8% (10) – Good
- 5.6% (2) – Adequate
- 0% – Fair
- 0% – Poor
- 5.6% (2) - NA

Rate your perception of CAPC in the community

37 responses

- 59.5% (22) – Very good
- 29.7% (11) – Good
- 8.1% (3) – Adequate
- 0% – Fair
- 0% – Poor

Positive Aspects of Living in Jefferson County (identify three)

37 responses, total of 103 comments

86.5% (32) of respondents cite the environment and natural beauty, with specific references to proximity to lakes and rivers, outdoor recreation, and seasonal changes.

86.5% (32) of respondents mention the quality of life, with specific references to friendly people, close-knit community, small- town atmosphere, good place to raise a family, and community spirit.

29.7% (11) of respondents reference high quality of school systems.

27% (10) of respondents refer to Fort Drum and its economic impact on the community.

Negative Aspects of Living in Jefferson County (identify three)

37 responses, total of 100 comments

75.7% (28) of respondents cite the economy, with the majority referencing lack of good-paying jobs and high unemployment.

48.6% (18) of respondents cite the weather, in particular the severity and duration of winter.

29.7% (11) of respondents mention the lack of public transportation.

21.6% (8) of respondents refer to the lack of cultural activities and events.

10.8% (4) of respondents mention high crime and drug problems.

In your opinion, what is the leading cause of poverty in Jefferson County (choose one)

38 respondents – some chose more than one, total of 48 responses

63.2% (24) – Lack of employment opportunities

26.3% (10) – Lack of education

18.4% (7) – People not willing to work

10.5% (4) – Cost of living

7.9% (3) – Alcohol/drug abuse

0% – Domestic violence

Assuming jobs are available, what makes it difficult for people to GET jobs (choose one)

36 respondents – some chose more than one, total of 42 responses

52.8% (19) – No training/lack of skills

36.1% (14) – Lack of transportation

19.4% (7) – No child care

5.6% (2) – Mental/behavioral problems

0% – Health problems

0% – Discrimination

What makes it difficult for people to MAINTAIN employment in our community (choose one)

36 respondents – some chose more than one for a total of 46 responses

41.7% (15) – Low wages/benefits

19.4% (7) – Lack of permanent, affordable housing

16.7% (6) – Lack of opportunity for advancement

13.9% (5) – Lack of transportation

11.1% (4) – Child care issues

11.1% (4) – Fear of loss of governmental benefits is income increases

8.3% (3) – Mental/behavioral health problems

2.8% (1) – Alcohol/drug use

2.8% (1) – Health problems

0% – Work hours

0% – Physical disabilities

0% – Discrimination

What services do you feel are lacking or insufficient in Jefferson County (choose three)

38 respondents, total of 116 responses

65.8% (25) – Transportation

65.8% (25) – Mental/behavioral health services

34.2% (13) – Homeless shelter

28.9% (11) – Adult day care

23.7% (9) – Medical services

26.3% (10) – Child care

21.1% (8) – Job skills training

13.2% (5) – Volunteer programs

10.5% (4) – Education improvement

5.3% (2) – Substance abuse services

5.3% (2) – Budgeting workshops

2.6% (1) – Health/nutrition counseling

2.6% (1) – Spousal abuse shelter/counseling

What youth-related services do you feel are lacking or insufficient in Jefferson County (choose three) 37 respondents, total of 102 responses

73% (27) – Mental/behavioral health services

64.9% (24) – Activities for teenagers

35.1% (13) – Recreation

35.1% (13) – After-school programs

32.4% (12) – Child care/day care

27% (10) – Tutoring programs

8.1% (3) – Summer food programs

How well does our community meet the following needs (rate each):

38 respondents

(See attached graph.)

What social problems exist within the community that are not being adequately addressed (up to three) 38 respondents, total of 101 comments

42.1% (16) of respondents refer to issues of poverty and homelessness.

31.6% (12) of respondents reference drug and alcohol abuse.

28.9% (11) of respondents cite lack of transportation.

26.3% (10) of respondents mention lack of mental/behavioral health services.

26.3% (10) of respondents refer to issues regarding youth, including lack of activities and high school drop-out rate.

What is the most challenging issue that low-income households will face in the next three years

38 respondents, total of 38 comments

39.4% (15) of respondents indicate the lack of affordable housing.

31.6% (12) of respondents refer to the economy in general, with emphasis on unemployment and rising costs.

18.4% (7) of respondents express concern over budget cuts and the negative impact on available services.

What are the emerging trends in our community that will impact low and mid income households over the next three years 38 respondents, total of 38 comments

31.6% (12) of respondents refer to a lack of affordable housing, with emphasis of Fort Drum's impact on such.

26.3% (10) of respondents express concern regarding cuts to state and federal budgets and the resulting reduction in services.

26.3% (10) of respondents mention economic conditions, with specific references to unemployment and rising costs.

What do you understand CAPC's mission/purpose to be 37 respondents, total of 37 comments

Overall the responses reflect clear understanding of the CAPC mission and primary target population. The words *assist*, *serve*, and *support* appear in 40.5% (15) of responses. The phrases *self reliance* and *self sufficiency* appear in 21.6% (8) of responses while the words *low-income* and *poor* appear in 32.4% (12) responses.

70.3% (26) of responses contain words closely aligned with the CAPC mission statement.

16.2% (6) of respondents indicate that the agency offers multiple services, making specific references to weatherization, Head Start, child care and food pantry.

13.5% (5) of responses were vague in nature, lacking reference to specific populations or services.

In your opinion, what does CAPC do well in its efforts to assist low-income households 36 respondents, total of 36 comments

72.2% (26) respondents reference specific services, most notably Head Start, food-related services, weatherization and child care. Respondents use phrases such as *food pantry*, *nutrition programs*, *summer food*, and *food stamp enrollment* to describe food-related programming.

13.9% (5) of respondents do not mention specific services but address the manner in which CAPC treats people, using phrases such *dignity and respect*, *provides opportunities*, *understands needs*.

5.6% (2) of respondents indicate positive relationships with other agencies and ability to manage resources.

5.6% (2) of respondents indicate they are unsure, and 2.9% (1) offer a negative assessment of *too much assistance*.

In your opinion, what could CAPC improve upon in its efforts to assist low-income households
21 respondents, total of 21 comments

19% (4) of respondents indicate that there is no room for improvement – *continue doing what you're doing.*

14.3% (3) of respondents suggest that CAPC seek alternate/additional sources of funding.

14.3% (3) of respondents reference increasing public awareness or marketing efforts.

14.3% (3) of respondents emphasize housing and weatherization.

Please list concerns that you feel should be priorities for CAPC over the next three to five years
32 respondents, total of 32 comments

18.8% (6) of respondents reference affordable housing and energy services.

15.6% (5) of respondents reference remaining focused on issues relating to poverty.

15.6% (5) of respondents suggest building partnerships and collaborative programming.

15.6% (5) of respondents reference employment services and job skills training.

9.4% (3) of respondents mention food pantry with emphasis on fresh vegetables and fruits.

9.4% (3) of respondents mention after-school programs and youth activities.

APPENDIX C

CAPC STAFF SURVEY SUMMARY

METHODOLOGY

The survey was made available online during the first two weeks in May 2011 to approximately 140 staff members. Email invitations were sent to staff members who were directed to Survey Monkey to complete the survey. A total of 93 staff members completed the survey.

I have been on staff at CAPC for

93 responses

Less than 1 year	12.9% (12)
1-5 years	41.9% (39)
6-10 years	6.5% (6)
11-15 years	17.2% (16)
16-20 years	11.8% (11)
21+ years	9.7% (9)

Positive Aspects of Living in Jefferson County (identify three)

72 respondents, total of 175 comments

87.5% (63) of respondents refer to quality of life, with specific references to friendly people, community support, and small-town atmosphere.

54.2% (39) of respondents refer to the environment and outdoor recreation, with specific references to the seasons, close proximity to tourist attractions, family activities, and weather.

15.3% (11) of respondents reference Fort Drum and its economic impact on the community.

15.3% (11) of respondents refer to high quality of school systems.

15.3% (11) of respondents mention low crime and safe community.

Negative Aspects of Living in Jefferson County (identify three)

72 respondents, total of 176 comments

69.4% (50) of respondents refer to the economy, with the majority referencing lack of good-paying jobs and high unemployment.

44.4% (32) of respondents reference the weather, in particular long winters, and snow.

23.6% (17) of respondents cite high taxes.

15.3% (11) of respondents refer to lack of affordable housing.

11.1% (8) of respondents refer to lack of public transportation.

11.1% (8) of respondents reference high crime and drug problems.

In your opinion, what is the leading cause of poverty in Jefferson County (choose one)

79 respondents

50.6% (40) – Lack of employment opportunities

26.6% (21) – People not willing to work

11.4% (9) – Lack of education

10.1% (8) – Cost of living

1.3% (1) – Alcohol/drug abuse

0% – Domestic violence

Assuming jobs are available, what makes it difficult for people to GET jobs (choose one)

73 respondents

46.6% (34) – No training/lack of skills

27.4% (20) – Lack of transportation

20.5% (15) – No child care

2.7% (2) – Discrimination

1.4% (1) – Mental/behavioral problems

1.4% (1) – Health problems

What makes it difficult for people to MAINTAIN employment in our community (choose one)

79 respondents

43% (34) – Low wages/benefits

11.4% (9) – Lack of opportunity for advancement

11.4% (9) – Fear of loss of governmental benefits is income increases

11.4% (9) – Child care issues

7.6% (6) – Lack of permanent, affordable housing

5.1% (4) – Lack of transportation

3.8% (3) – Alcohol/drug use

2.5% (2) – Mental/behavioral health problems

2.5% (2) – Work hours

1.3% (1) – Health problems

0% – Physical disabilities

0% – Discrimination

What services do you feel are lacking or insufficient in Jefferson County (choose three)

77 respondents, total of 222 responses

- 46.8% (36) – Transportation
- 40.3% (31) – Education improvement
- 35.1% (27) – Job skills training
- 32.5% (25) – Child care
- 29.9% (23) – Homeless shelter
- 28.6% (22) – Mental/behavioral health services
- 18.2% (14) – Budgeting workshops
- 18.2% (14) – Adult day care
- 11.7% (9) – Health/nutrition counseling
- 7.8% (6) – Volunteer programs
- 7.8% (6) – Medical services
- 7.8% (6) – Spousal abuse shelter/counseling
- 3.9% (3) – Substance abuse services

What youth-related services do you feel are lacking or insufficient in Jefferson County (choose three) *77 respondents, total of 213 responses*

- 70.1% (54) – Activities for teenagers
- 54.5% (42) – Recreation
- 46.8% (36) – After-school programs
- 35.1% (27) – Child care/day care
- 35.1% (27) – Tutoring programs
- 31.2% (24) – Mental/behavioral health services
- 3.9% (3) – Summer food programs

How well does our community meet the following needs (rate each):

81 respondents

(See attached graph.)

What social problems exist within the community that are not being adequately addressed (up to three) *51 respondents, total of 126 comments*

54.9% (28) of respondents reference youth issues – lack of activities, teen pregnancy, and high school drop-out rate.

37.3% (19) of respondents refer to drug and alcohol abuse.

19.6% (10) of respondents reference lack of transportation.

15.7% (8) of respondents refer to parenting skills and parenting education.

13.7% (7) of respondents cite lack of mental health services.

What is the most challenging issue that low-income households will face in the next three years
62 respondents, total of 62 comments

35.5% (22) of respondents refer to the lack of affordable housing.

29% (18) of respondents refer to the economy, with emphasis on rising costs.

16.1% (10) of respondents express concern over budget cuts and the negative impact on available services.

9.7% (6) of respondents reference lack of job opportunities.

What are the emerging trends in our community that will impact low and mid income households over the next three years
52 respondents, total of 123 comments

94.2% (49) of respondents refer to economic conditions, with specific references to lack of jobs and rising costs.

48.1% (25) of respondents reference lack of affordable housing, emphasizing Fort Drum's impact on such.

23.1% (12) of respondents refer to budget cuts and the impact to available services.

What do you understand CAPC's mission/purpose to be
62 respondents, total of 62 comments

Overall the responses reflect clear understanding of the CAPC mission. Almost all responses contain words that are closely aligned with the mission statement.

25.8% (16) of responses contain the exact wording of the mission statement.

The words *help*, *assist*, *serve*, and *support* appear in all but 4 responses. The phrases *self-reliance* and *self-sufficiency* appear in 38.7% (24) of responses. The phrase *low-income* appears 3 times, while the word *poor* does not appear in any of the responses.

In your opinion, what does CAPC do well in its efforts to assist low-income households
58 respondents, total of 58 comments

46.6% (27) respondents reference specific services, most notably Head Start, food pantry, and weatherization.

36.2% (21) of respondents do not reference specific services but clearly indicate that multiple services are available. The phrase *one-stop* is used multiple times.

13.8% (8) of respondents address the manner in which CAPC treats people, using phrases such *non-judgmental, we listen, use our hearts, and treat everyone with respect.*

3.5% (2) of respondents refer to positive relationships with other agencies and ability to make referrals.

In your opinion, what could CAPC improve upon in its efforts to assist low-income households
42 respondents, total of 42 comments

35.7% (15) of respondents suggest increasing services and providing education, training and counseling for customers. The over-riding theme is more development toward self-reliance.

19% (8) of respondents suggest increased marketing and public relations.

9.5% (4) of respondents reference helping customers with transportation.

9.5% (4) of respondents suggest seeking alternative funding sources.

7.1% (3) of respondents indicate that additional Head Start classrooms are needed.

Please list concerns that you feel should be priorities for CAPC over the next three to five years
42 respondents, total of 104 comments

76.2% (32) of respondents refer to concentrating on current specific services and identifying additional services. Transportation and housing are mentioned most frequently as areas of potential growth.

42.9% (18) of respondents refer to employee issues – more competitive pay, high rate of staff turnover, cross-training, breaking down silos, increased accountability, and compliance.

35.7% (15) of respondents reference the need for increased marketing/communications.

33.3% (14) of respondents refer to identifying additional funding sources and seeking more grants.

14.3% (6) of respondents refer to evaluation of existing programs – survey families to identify specific needs, help customers toward a greater degree of self-sufficiency.

11.9% (5) of respondents reference building community partnerships and more collaboration.

7.1% (3) of respondents suggest curtailing agency spending.

APPENDIX D

CAPC BOARD of DIRECTORS SURVEY SUMMARY

METHODOLOGY

Surveys, accompanied by personalized letters, were made available to the members of the board of directors during the April 28 meeting. The following day, surveys were mailed to those not present at the meeting. An email reminder was sent on May 12 (to the 17 board members who use email). Board members were encouraged to complete their survey during the May 19 meeting. Of the 24 members of the board, 11 participated, summarized as follows.

I have been part of CAPC for

Less than 1 year	0
1-5 years	5
6-10 years	2
11-15 years	2
16-20 years	1
21+ years	1

Positive Aspects of Living in Jefferson County (identify three)

1. Quality of life – specific references were made to community spirit, friendly people, pace of life, rural and safe (16 comments)
2. Environment and natural beauty (5 comments)

Negative Aspects of Living in Jefferson County (identify three)

1. Weather and long winters (8)
2. Lack of public transportation (3)
3. Lack of employment opportunities (2)

In your opinion, what is the leading cause of poverty in Jefferson County (choose one)

1. Lack of employment opportunities (8)
2. Cost of living (4)

Assuming jobs are available, what makes it difficult for people to GET jobs (choose one)

1. No child care (4)
2. Lack of transportation (4)
3. No training/lack of skills (4)

What makes it difficult for people to MAINTAIN employment in our community (choose one)

1. Low wages/benefits (4) – tied with – Child care issues (4)
2. Lack of transportation (3)

What services do you feel are lacking or insufficient in Jefferson County (choose three)

1. Transportation (8)
2. Child care (6)
3. Job skills/training (5)

What youth-related services do you feel are lacking or insufficient in Jefferson County (choose three)

1. Activities for teenagers (9)
2. Child care/day care (6)
3. Tutoring programs (5)

How well does our community meet the following needs (rate each):

Separate graph lists each category. Top three:

1. Food pantries
2. Substance abuse counseling
3. Medical services – tied with – Volunteer programs

What social problems exist within the community that are not being adequately addressed (up to three)

1. Affordable housing – tied with – Drug/alcohol abuse (4 each)
2. Domestic violence – tied with – Mental/behavioral health issues (2 each)

What is the most challenging issue that low-income households will face in the next three years

1. Lack of employment opportunities (4)
2. Affordable housing – tied with – Rising utility costs (2 each)

What are the emerging trends in our community that will impact low and mid income households over the next three years

1. Lacking of funding for social services programming (4)
2. Escalating costs – tied with – Affordable housing (2 each)

What do you understand CAPC's mission/purpose to be

The comments reflected a general understanding of CAPC's mission. Five responses mirrored the mission statement, two others referred to multiple services.

In your opinion, what does CAPC do well in its efforts to assist low-income households

Specific programs were included in 7 comments, with the food pantry mentioned most frequently.

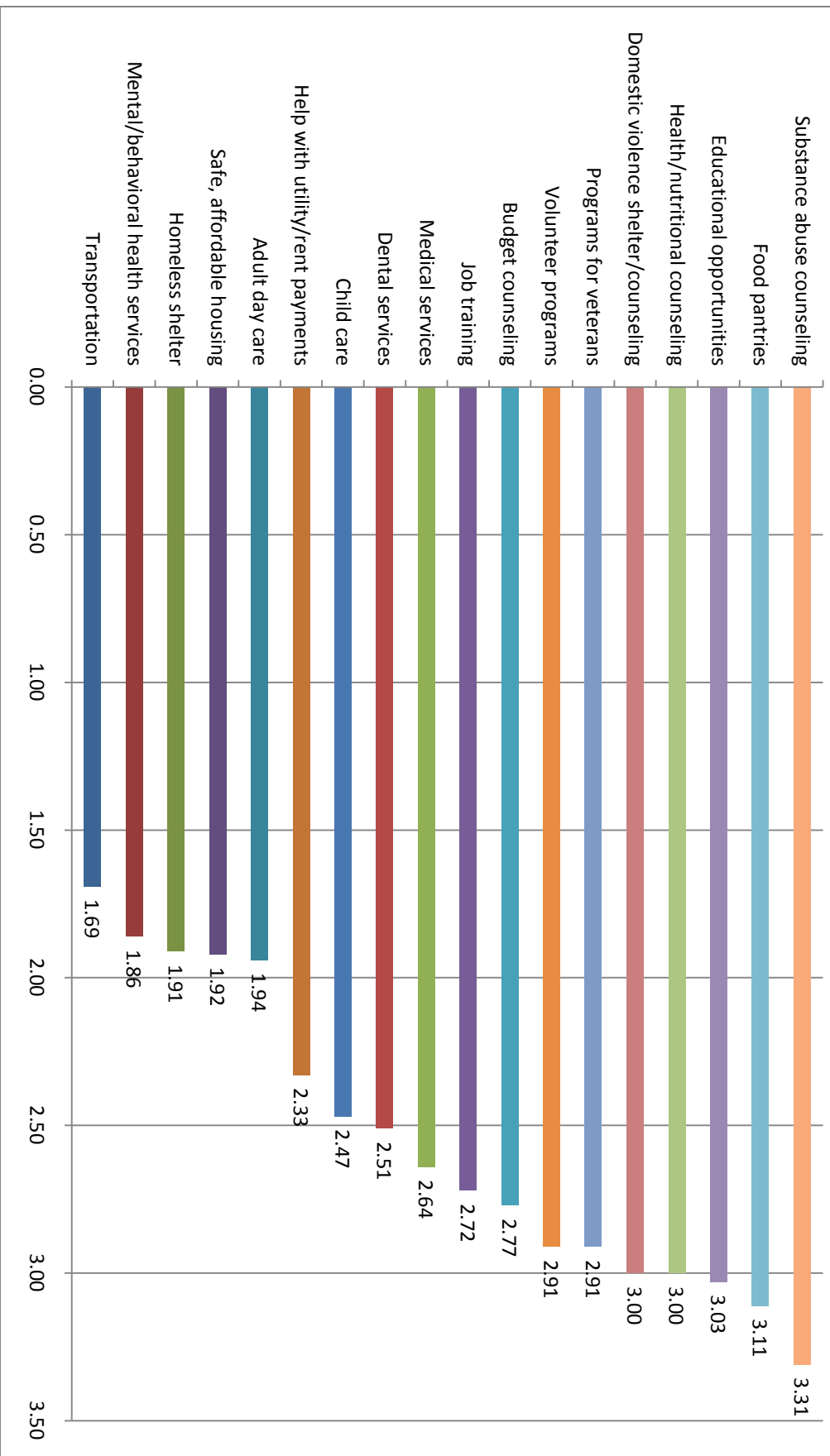
In your opinion, what could CAPC improve upon in its efforts to assist low-income households

No clear theme is detected in the comments made by 9 respondents. Two mentioned child care services and two referred to budget counseling.

Please list concerns that you feel should be priorities for CAPC over the next three to five years

Fundraising and securing additional funding sources were the most popular responses – 6 comments.

How well does our community meet the following needs: *Community Partner Responses*



Scale:

Unsatisfactory = 1

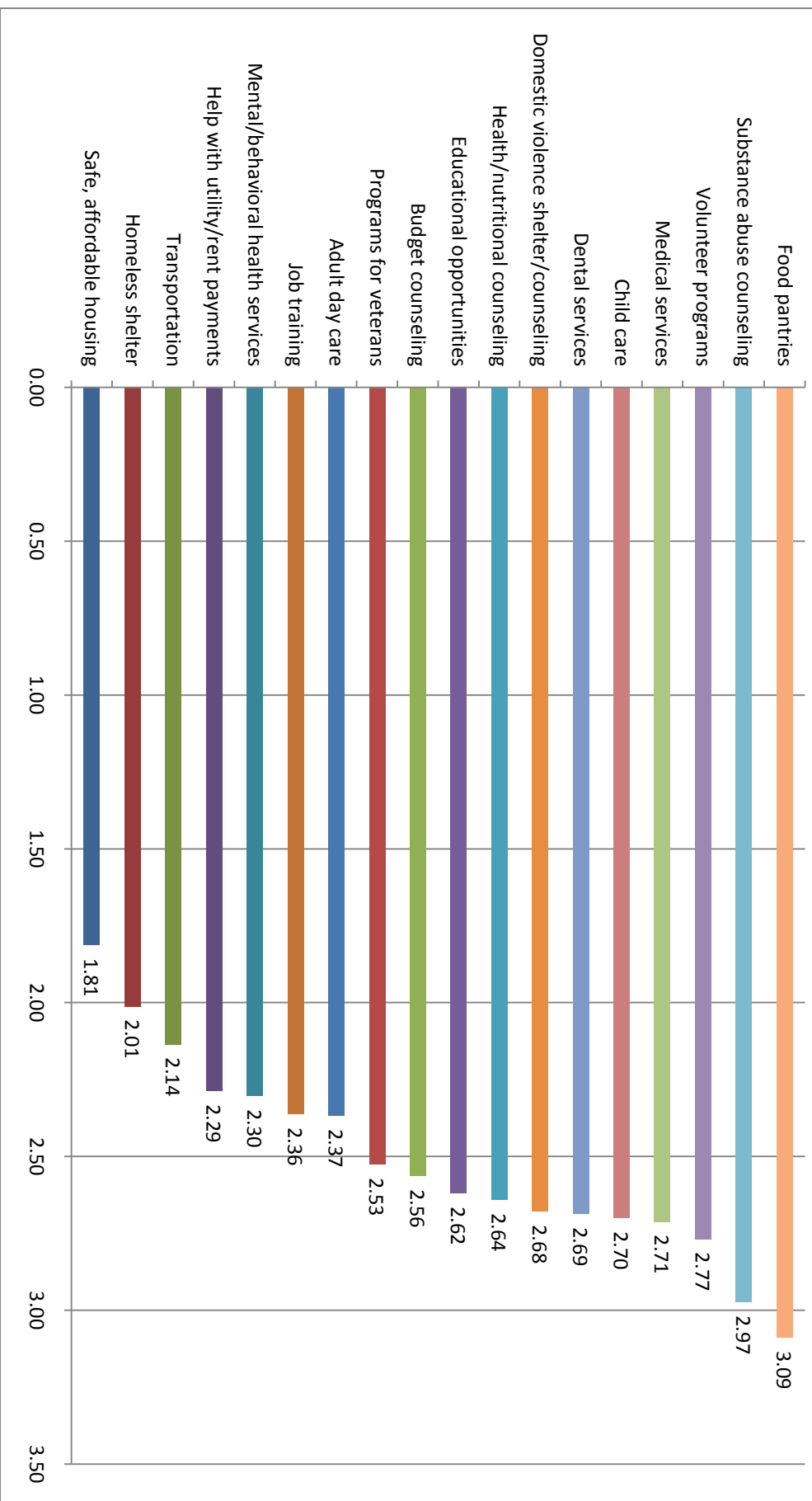
Marginal = 2

Adequate = 3

Better than Average = 4

Exceptional = 5

How well does our community meet the following needs: Staff Responses



Scale:

Unsatisfactory = 1

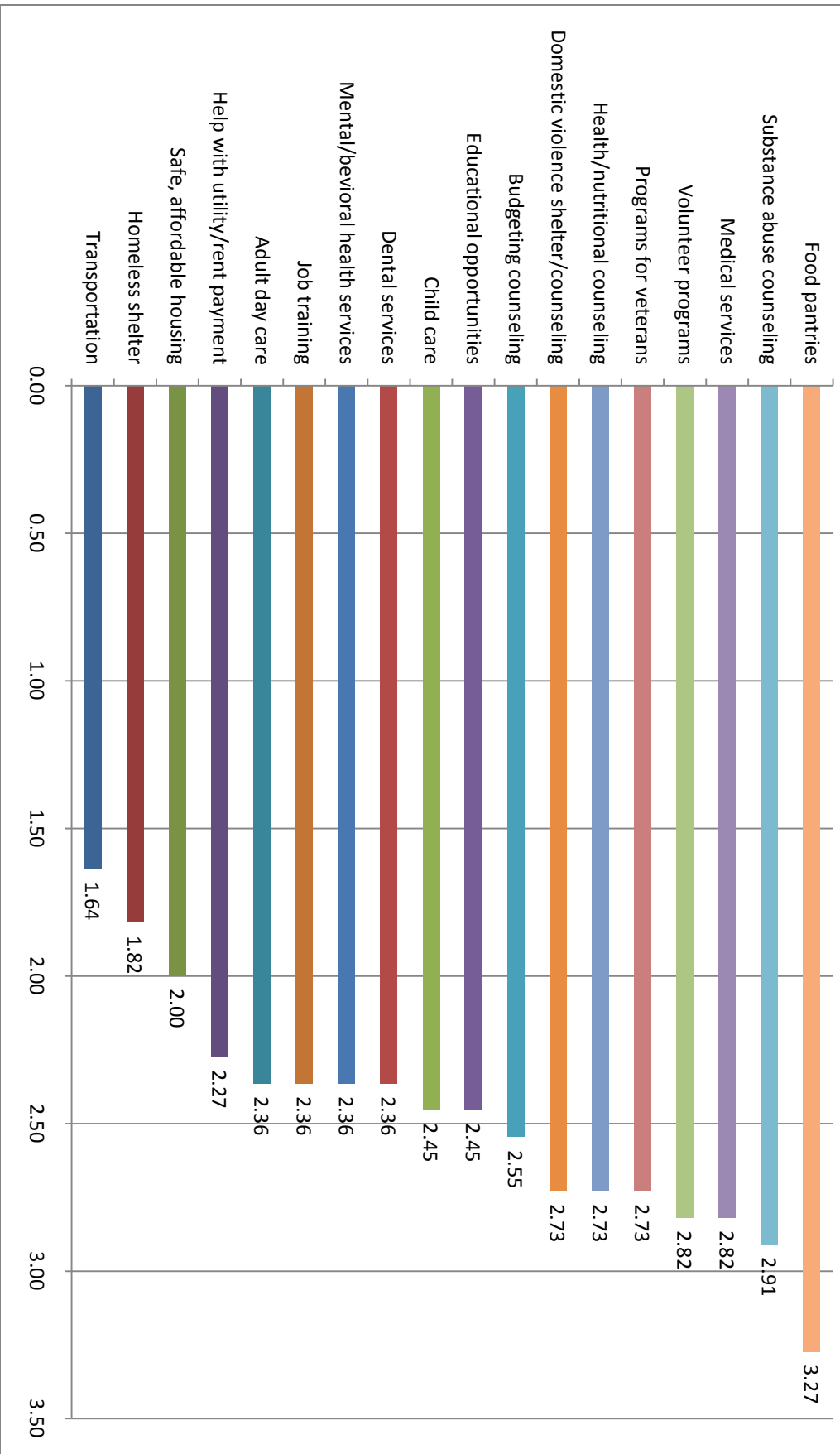
Marginal = 2

Adequate = 3

Better than Average = 4

Exceptional = 5

How well does our community meet the following needs: *Board Member Responses*



Scale:

Unsatisfactory = 1

Marginal = 2

Adequate = 3

Better than Average = 4

Exceptional = 5

APPENDIX E

MEETING OF SENIOR TEAM AGENDA

April 26, 2011

1. Review Time Frame for Planning Process
2. Discussion of Planning and the Role of Leadership
3. Review of Perceptions, and Emotions, regarding Planning
4. Worksheet: Review of past year, from the leadership perspective
5. Formation of a Planning Steering Committee
6. Other questions and discussion

APPENDIX E

MEETING OF SENIOR TEAM SUMMARY

Initial Meeting with Senior Team (4/26/11):
Essential Summary

Item	Comments
Accomplishments	<p>Weatherization accomplishments (x6) Administering large sums of ARRA funding successfully. Formation of the Marketing Committee. Meeting community needs with less staff. Adjusting to demands of funders. Better community connections. Weatherization AHEAD of schedule w clean audit. Employment for 50+ people in weatherization. Successfully adjusting to ARRA requirements. Increased capacity in weatherization. We are involved with programs that help people live better lives; have been a human services leader. Weatherization success Recognition of Food Bank</p>
Issues facing:	<p>Funding cuts (x8) ...and “therefore loss of staff” Changes in traditional sources of funding. Better collaborations. Inability to retain good personnel due to low wages. Getting community to know what we do!! Increased competition for funding. Changing sources of revenue. Inability to retain staff as a result of \$ issues. Other agencies taking over program we have. Funding, perception of community value.</p>
Organizational characteristics we need to hold on to:	<p>Caring attitude toward customers. The history—long tradition of service to people. Knowing community, serving holistically without becoming judgmental. Really being involved in the community—not just words. Great staff. Moving people toward self-reliance. Not to become “institutionalized.” Really helping people. Variety of skills of our staff. Commitment to community.</p>
Org characteristics to get rid of:	<p>Gossip (x3) Communication issues Old politics Silos Tendency to do small, non-productive projects Us vs. them feelings That change is a bad thing</p>

APPENDIX F

NON-PROFIT CRITICAL NEEDS FOCUS GROUP DISCUSSION QUESTIONS

June 22, 2011, 9:30 – 11:00 AM

Goals:

- *To identify unmet needs in the community*
- *To explore organizational roles in meeting community needs*
- *To identify possible areas of collaboration*
- *To begin to build a shared vision (what does success look like?)*

What needs are adequately met in our community?

What are the unmet needs in the community? (Which populations are under-served?)

What are the roles of various organizations in meeting these needs/serving these populations?

What is the role of Community Action Planning Council in meeting these needs?

What opportunities exist for collaboration?

What obstacles prevent collaboration?

What does the community look like if we succeed in meeting the needs?

APPENDIX F

NON-PROFIT CRITICAL NEEDS FOCUS GROUP – DISCUSSION SUMMARY

June 22, 2011, 9:30 – 11:00 AM

METHODOLOGY

CAPC staff members facilitate the Jefferson County Critical Needs Committee, comprised of members of the non-profit and faith-based communities. The committee meets quarterly at CAPC and reports back to the North Country Council of Social Agencies. The group discusses needs within the community and seeks opportunities for collaboration in serving low-income households.

The Critical Needs Committee was invited to participate in an open forum led by Dr. Richard Halpin. CAPC staff extended an invitation to members of the committee; the United Way followed up with an invitation to all non-profit organizations. Invitees were asked to come together to discuss community needs and to explore ideas for collaborations and partnerships.

Community members present:

- Melissa Beagle, Children’s Home of Jefferson County
- Suzann Cornell, Mental Health Association of Jefferson County
- Audra Ferguson, Aids Community Resources
- Louise Haraczka, Office for the Aging
- Tracy Hart, Transitional Living Services
- Jennifer Hodge, The Children’s Clinic
- Evelyn Hopping, Salvation Army
- Wanda Holtz, Aids Community Resources
- Anne Lyman, Watertown Urban Mission
- Donna MacPherson, Jefferson Rehabilitation Center
- Penny McKenna, Catholic Charities
- Lynn Morgan, Thousand Islands Area Habitat for Humanity
- Chris Paige, Alcohol and Substance Abuse Council
- Michelle Parks LaBrake, Watertown Housing Authority
- Jim Scordo, CREDO Community Center
- Pedro Torres, Church of God – Soldiers of Jesus Christ
- Mark Waterhouse, Transitional Living Services
- Linda Welsh, Volunteer Transportation Center

Dr. Halpin welcomed the group and introduced the members of SPARC in attendance – Head Start/Pre-K Director Marie Ambrose and Family Center Director Sharon Bouchard, as well as Deputy Director Dawn Cole and Emergency Services Manager Tammy Kitto who chairs the Critical Needs Committee.

COMMUNITY NEEDS THAT ARE BEING ADEQUATELY MET

The group discussed needs that are being adequately met in the community and ultimately rated them as follows:

1. Basic needs – food, clothing
2. Education availability
3. Recreational opportunities

This information was then compared against the results of the CAPC survey of agencies/community partners (Appendix B).

1. Substance abuse
2. Food pantries
3. Educational opportunities

UNMET NEEDS IN THE COMMUNITY

The group then identified and ranked the unmet needs in the community as follows:

1. Safe, affordable housing
2. Transportation
3. Jobs
4. Mental/behavioral health services

According to other recent surveys, unmet needs are identified as:

United Way Focus Groups

1. Employment issues
2. Housing issues
3. Public transportation

Survey of JLI Class of 2011

1. Lack of jobs
2. Lack of public transportation
3. Housing (infrastructure)

Center for Community Studies 2010

1. Cost of energy
2. Availability of good jobs
3. Depressed state of economy
4. Tax burden

CAPC Survey

1. Transportation
2. Mental/behavioral health services
3. Homeless shelter
4. Safe, affordable housing

Q: Which organizations that address housing needs?

CAPC's Weatherization Program, Neighbors of Watertown, Watertown Housing Authority, Habitat for Humanity, Department of Social Services, Mental Health Association, Transitional Living Services, Housing & Urban Development

The group agreed that no one agency is taking a lead role in addressing housing issues. Collaborations are largely relationship-based and not systematic. Ideas discussed:

- Single Point of Access/Single Point of Entry (SPOA/SPOE) addresses mental health aspects.

- DSS should demand equal representation with Fort Drum for affordable housing.
- Development Authority of the North Country – key player in housing issues.

Q: Which organizations address transportation needs?

Volunteer Transportation Center, Wheels to Work, Department of Social Services, Watertown City Bus, and Jefferson Rehabilitation Center (often comes to mind but not their core business)

The group discussed whether transportation is a human services issue and suggested ideas:

- Organized car pooling.
- Fort Drum Regional Liaison Organization and Development Authority of the North Country currently working on transportation report.
- Funding to support Urban Mission’s Wheels to Work program that is winding down – in need of financial support – money and vehicles.

Q: Which organizations address the issues of jobs?

The Workplace, Vocational and Educational Services for Individuals with Disabilities, Career Connections, Department of Social Services, NYS Department of Labor – Unemployment Office, Jefferson County Industrial Development Agency, Small Business Development Center at JCC

Q: Which organizations address mental/behavioral health issues?

Children’s Home of Jefferson County, Veteran’s Center, CREDO Community Center, Jefferson Rehabilitation Center, Samaritan Medical Center, Mental Health Association, private practitioners

Q: What ideas do you have for CAPC as they continue to develop a new strategic plan?

- Work with the military on community solutions. CAPC should provide a link between the non-profit and Fort Drum communities.
- Strategic planning – continue to seek ways for organizations to work together focusing on top needs.
- Use social media to build strong relationships and collaborations within human services field.
- Based on United Way model, promote events for other organizations and participate. i.e.) Upcoming networking opportunity – Family Fun Day at Thompson Park, July 9.

General consensus was that follow up is in order to continue exploring options for collaborations. It was suggested that the group consider breaking up into small committees, distribute email lists and share data summaries.

There was significant interest in a compilation of organizations and the services they offer (modeled after a publication that was once produced by the North Country Council of Social Agencies).

APPENDIX G

COMMUNITY LEADERS FOCUS GROUP DISCUSSION QUESTIONS

July 28, 2011, 8:00 – 9:30 AM

Goals:

- *To gain perspective on the perceptions that are held of the Community Action Planning Council among community leaders.*
- *To help guide development of the next strategic plan for the Community Action Planning Council.*

1. According to data from United Way, the Center for Community Studies, Jefferson Leadership Institute, CAPC surveys and the CAPC non-profit focus group of June 22, the most significant unmet human needs/ community issues in our community are....
 - United Way: Employment issues, housing issues, public transportation.
 - JLI class of 2011: Lack of jobs, lack of public transportation, lack of housing and infrastructure.
 - Center for Community Studies (2010)—cost of energy, availability of good jobs, depressed economy, tax burden.
 - CAPC Survey of community organizations—Transportation, Mental/behavioral health issues, homeless, safe affordable housing.
 - Non-profit discussion group 6/22—safe, affordable housing, transportation, jobs, mental/behavioral health services.

To what extent do you agree with this list, and what might be missing?

2. What do you perceive to be two or three strengths of CAPC at the present time?
3. What do you perceive to be two or three weaknesses of CAPC at the present time?
4. What are one or two specific actions that CAPC could take to strengthen their effectiveness in our community?
5. Why would agencies be inclined to collaborate with CAPC, and why might agencies avoid collaboration with CAPC?
6. As CAPC develops its next strategic plan, what is one characteristic or attribute that they should be sure to “hold on to?”
7. If you could wave a wand and change one thing about CAPC, what would that one thing be?

APPENDIX G

COMMUNITY LEADER FOCUS GROUP – DISCUSSION SUMMARY

July 28, 2011, 8:00 – 9:30 AM

METHODOLOGY

Community leaders were invited to attend a breakfast and open discussion about the needs in the community and how local organizations – including CAPC – address those needs. The discussion was held at the Children’s Home of Jefferson County with Dr. Richard Halpin facilitating. Members of the Strategic Planning Annual Review Committee were encouraged to attend as non-participating listeners.

Community members present:

- Erika Flint, Watertown Urban Mission
- Jeffrey Graham, Watertown City Mayor
- Jayn Graves, United Way of Northern NY
- Aileen Martin, The Children’s Clinic
- Michelle Parks LaBrake, Watertown Housing Authority
- Dani Reed, Fort Drum Soldier and Family Assistance Program
- Michael Robare, Watertown Housing Authority
- Sherry Wilson, Jefferson Rehabilitation Center
- James Wright, Development Authority of the North Country

Dr. Halpin welcomed the group and introduced the members of SPARC in attendance, explaining that their collective role was to observe. He also introduced Deputy Director Dawn Cole who agreed to record the meeting highlights. SPARC members present:

- Marie Ambrose, Head Start/Pre-K Director
- Sharon Bouchard, Family Center Director
- Cathy Stenfeldt, JLCP Provider Services Specialist
- Nina Hershey, Member of Board of Directors
- Sherry Rafferty, Family Center Administrative Assistant

DISCUSSION Q&A

Dr. Halpin shared highlights of several sources of data pertaining to community issues:

- United Way Focus Groups: employment, housing and public transportation
- JLI Class of 2011: lack of jobs, public transportation and housing/infrastructure

- Center for Community Studies 2010: cost of energy, availability of good jobs, depressed economy, tax burden
- CAPC Survey of Community Agencies 2011: transportation, mental/behavioral health, homelessness, safe affordable housing
- Non-Profit Discussion Group June 2011: affordable housing, transportation, jobs, mental/behavioral health services

Q: To what extent do you agree with this list and what might be missing?

United Way concurred with the data, having conducted a total of 18 community focus groups as part of their organizational strategic planning.

There was general agreement that the community lacks a clear economic development vision. It was also suggested that there are not enough educational opportunities that lead to gainful employment.

The group discussed the unique aspects of Northern New York as factors that contribute to community issues. The area is largely rural with Watertown as the primary population center, and the rapid growth of Fort Drum has caused an increase in housing costs. Regional priorities are different for other parts of the state, such as Central New York and Western New York – both of which are driven by large population centers.

Q: The mission of CAPC is “to assist and support people toward self-reliance.” How can CAPC address these issues in connection with their mission?

Discussion revolved around CAPC’s role as advocate – serving as the voice of the low-income population. It was suggested that CAPC continue to network with other agencies, strengthening connections within human services agencies and providing linkages to the Fort Drum community.

Q: Do you perceive any sensitivity about military families seeking help?

The group generally felt it wasn’t an issue. It was stated that there may be some distinction between the views of “big Army” and the Fort Drum Garrison. On the local level, the Garrison is thought to be very supportive of soldiers and their needs. It was also pointed out that WIC operates three clinics on post, an initiative that has the full support of Fort Drum leadership.

There was some discussion about the need for continued development of childcare programs, to help people get to work. It was pointed out that childcare might have been on the list of community issue five years ago, but that CAPC and other agencies had made great progress in enhancing local childcare.

The United Way suggested that the community wants to invest in programs for the “working poor” – those who are just getting out of poverty and are in danger of slipping back. CAPC Head Start and childcare programs are shining examples of the hand up, not hand out philosophy.

There was discussion about the challenges of people continuing to work when their low-wage jobs offer less support than the government benefits they would be entitled to if they weren’t working. The Children’s Clinic estimates that 94% of their customers are “working poor”.

Q: If CAPC had a role to play in public transportation, what might it be?

There was some question as to the exact nature of the transportation issue – people not having cars or living too far from services? The Development Authority of the North Country explained that a Transportation Study was being conducted by the Fort Drum Regional Liaison Organization. It was suggested that CAPC may not be able to afford to offer direct transportation services, but that as a senior non-profit organization there is an obligation on the part of CAPC to consider the issue and examine what might be done to address transportation needs.

Watertown Urban Mission addresses transportation issues by ensuring that they are accessible to clients. The United Way encourages non-profits to consider flexibility in remaining open during weekend and evening hours as part of accessibility.

The correlation between transportation and housing was pointed out – cheaper housing is available primarily outside the city which contributes to transportation barriers.

The Children’s Clinic suggested that there might be opportunity for CAPC staff members to travel with WIC vans to meet with people who reside in rural areas.

It was suggested that non-profits consider sharing services, such as bookkeeping, to achieve greater efficiency.

Q: What do you perceive to be the strengths of CAPC at the present time?

Childcare services and Head Start were mentioned, as well as longevity in the community, client participation, volunteer income tax services, and image.

Q: What do you perceive to be the weaknesses of CAPC at the present time?

The group discussed that the agency would benefit from increased marketing, recognizing a distinction between other agencies (who have considerable familiarity with CAPC) and the community at large (where there is some confusion about what CAPC does).

The group also cited funding as a weakness, recognizing that funding is strictly geared toward very specific programming and allows little in the way of flexibility. There seems to be a perception that the Watertown Urban Mission is primarily “community funded” while CAPC’s primary funding source is the public sector (tax dollars).

The question was asked as to whether CAPC expands programming beyond Davidson Street – is CAPC reaching out wide enough? Are there opportunities to co-locate with the Urban Mission?

Q: What are specific actions that CAPC could take to strengthen their effectiveness in the community?

It was suggested that CAPC continue to build on the success of early childhood education – Head Start. Is there an opportunity to remain connected to students after Head Start?

Another idea that was shared was greater utilization of the client experience – using a peer-focused approach to help people out of poverty.

Q: Why would agencies be inclined to collaborate with CAPC, and why might they be reluctant to collaborate?

The group discussed the need for further collaborations, based on limited resources. Avoiding duplication and confusion among clients was also cited as a priority. The group agreed that agencies generally refer clients to one another routinely. In spite of perceived competition among social agencies, it was recognized that CAPC is willing to reach out to peers and brainstorm collaborative opportunities.

CAPC has a strong position as a “senior statesman” in the non-profit environment; as such, CAPC should consider working with smaller, younger organizations in a mentoring capacity. Is it possible to centralize any services? Can CAPC package and sell services to smaller organizations – grant writing assistance, bookkeeping?

It was recognized that CAPC is inclined to partner with other agencies; the Summer Food Service Program was cited as an example. According to the Watertown Housing Authority, the program is well received in their housing sites where they estimate 400 – 500 children of low-income “working poor” families reside.

Social media was suggested as an area for agency collaboration.

Deterrents to collaboration include loss of identity and loss of funding. There is a tendency to avoid competition out of fear.

Q: As CAPC develops its next strategic plan, what is one characteristic or attribute they should hold on to?

CAPC should continue its openness to collaborations, as well as its willingness to change – to modify to meet community needs.

Q: If you could wave a magic wand and change one thing about CAPC, what would that one thing be?

Funding, funding, funding!

APPENDIX H

TOTAL STAFF MEETING AGENDA

June 3, 2011

1. Welcome, Overview of the morning
2. Oh Oh!! We've got a problem here....!!!! Solving it together
3. Presentation of a Strategic Planning Model
4. Where do we come from? Our History...
5. What do we believe?? Our Core Values...
6. Who Cares? Our Stakeholders
7. Next Steps

Aside from money, I think that one or two big issues that CAPC is likely to face in the next year or two are...

..

Richard L. Halpin, facilitator

APPENDIX H

SUMMARY OF CORE VALUES AS DEFINED BY CAPC STAFF

(during the June 3 meeting of total staff)

METHODOLOGY

Strategic planning was the focus of the CAPC staff meeting held on June 3, 2011. In total, 111 people were in attendance – 109 employees and 2 members of the board of directors. Working in groups, participants were asked to identify up to five core values of CAPC, indicating one as most important. After the discussion, 104 completed worksheets were collected and are summarized as follow:

Core Value #1

64 participants (61.5%) identified helping people; the words empowerment, self-reliance, and education were used most frequently.

11 participants (10.6%) referred to responding to the needs of the community, serving the community, and community involvement.

10 participants (9.6%) referenced the manner in customers are treated, using words like respect and non-judgmental.

Of the worksheets collected, 328 additional core values were identified and are summarized as follows:

Other Core Values

92 (28%) comments related directly to helping, supporting, empowering, and educating people. Self-reliance was a reoccurring theme throughout the majority of comments.

51 (15.5%) comments referenced the manner in which customers are treated, with the word respect used most frequently.

43 (13%) comments referred to providing resources or mention specific programs.

36 (11%) comments pertained to community involvement and community support.

30 (9%) comments were specific to families – supporting families, family development, and educating family were overriding themes.

23 (7%) comments related to internal teamwork and collaborations among program areas while another 8 (2.4%) comments pertained to collaborations with other agencies.

Participants were asked to describe one thing they would change or value they would instill by completing the sentence which began “If you could ...” Of the completed worksheets collected, 77 participants responded to this question; answers are summarized as follows:

“If you could ...”

21 (27%) comments related to collaboration between programs, internal communications, and greater respect and understanding of each other’s responsibilities.

16 (20.8%) comments pertained to family development, with an overwhelming theme of “making parents more accountable.”

11 (14%) comments referenced acknowledgement and appreciation of staff, with a common theme of increasing pay.

4 (5.2%) comments related to increasing the diversity of the workforce.

4 (5.2%) comments referenced making income criteria more flexible for customers.

APPENDIX I

STRATEGIC PLAN REVIEW COMMITTEE AGENDA

May 17, 2011

1. Welcome; review of agenda
2. Strategic Plan Review Committee purpose
3. Goal of the Strategic Planning Process (baseline understandings)
4. A Strategic Planning Model
5. Review of Planning Timeline
6. Review of last Strategic Plan
7. First review of survey data (3 surveys)
8. First observations and conclusions of the survey information
9. Preliminary identification of CAPC's *strategic issues*
10. Questions and Suggestions
11. Adjourn

The Strategic Planning Review Committee will be a small group representative of the entire organization. It will be comprised of about 10 members, from all program areas, with some newer and some more senior staff, plus Board Members, and will be representative of all levels within the organization.

The **purposes** of the Strategic Planning Review Committee are:

- to provide perspective, input and direction for the strategic planning process;
- to ensure validity of the process and the content;
- and to communicate information about the planning process throughout the organization.

Currently scheduled meetings of the SPRC are May 17, late June, early July (three hours), and early August. Other meetings may be added if necessary.

APPENDIX J

STRATEGIC PLAN REVIEW COMMITTEE RETREAT AGENDA

July 7, 2011, 10:00 AM – 4:00 PM

1. Welcome and review of agenda
2. Challenge: Balancing data and personal perceptions
3. Review of information we have collected
 - a. Initial Meeting with Senior Team
 - b. Customer survey
 - c. Staff survey
 - d. Agency partner survey
 - e. Board survey
 - f. Results of Total Staff Meeting
 - g. Non-profit critical needs focus group discussion
 - h. Community leader focus group discussions (*projections*)
4. Organizational Strengths, Weaknesses, Opportunities and Threats
5. Review of Planning Model

Lunch

6. Review of Stakeholders
7. Review of the Values
8. *Mission vs. Vision*
9. Review of the Mission
10. Review of the Vision
11. Preliminary Identification of CAPC's Strategic Issues
12. Conclude and Adjourn

Richard L. Halpin, facilitator

APPENDIX J

SUMMARY OF RESULTS FROM STRATEGIC PLAN REVIEW COMMITTEE JULY 7 RETREAT

Review of information we have collected

Committee members reviewed summary compilations of all the data collected for this project so far, working in groups of three. Data sources were:

- Initial Meeting with Senior Team
- Customer survey
- Staff survey
- Agency partner survey
- Board survey
- Results of Total Staff Meeting
- Non-profit critical needs focus group discussion
(A community leader focus group discussion will be held later)

Asked to tease out key themes for all of these data (“data observations”), results were as follows:

Community focused themes:

- Lack of transportation
- Affordable housing; maintenance of housing
- Lack of employment opportunities
- Need for non-traditional daycare
- Linkages with FT. Drum (existing not known, need to be expanded)
- Mental/ Behavioral health

Agency focused themes:

- Need for marketing of CAPC
- Lack of funding
- Community agency partnerships (need to be more abundant, more linked in)
- Need for Board education and development (resume “Spotlights”)

Results of SWOT Analysis

The Committee was asked to identify the strengths, weaknesses, opportunities and threats for CAPC as it exists right now. Results were:

STRENGTHS:

- Staff
- Programs
- Agency Reach (touch many lives)

WEAKNESSES:

Marketing (external)
Internal awareness across program areas
Board engagement
Sometimes risk averse (not visionary)

OPPORTUNITIES:

Promote, enhance community partnerships
New programming
Enhanced grant seeking and fundraising

THREATS:

Budget cuts from all sources
Competition and loss of key partner support
Increased need for services and client expectations

Stakeholder Identification

Stakeholders are people or groups who have a “stake” in our organization—it matters to them whether we succeed or fail. Successful organizations need to recognize who their key stakeholders are and to strive to meet their expectations. Key stakeholders were initially identified at an all-staff meeting; the list was refined as follows:

- Funders
- Staff
- Families/children
- Community agency partners/ service providers
- Board of Directors
- Child care providers

CAPC Values

Organizational values may be thought of as very strong beliefs that are embedded in the culture of an organization. Organizational values were initially identified at an all staff meeting, and were refined as follows by the Committee:

Existing values

1. Helping, supporting, empowering people (an individual person-centered value)
2. Responsive to the needs of the community (a community-focused value)
3. Respectful, non-judgmental treatment of people (a behavioral-focused value)

Values we would like to infuse into the culture of CAPC

1. A more positive work environment (with emphasis on professional growth and development, and job empowerment).
2. More affirmation within the workplace (with acknowledgement and appreciation of effort and outcomes).

Review of the Mission

The Committee engaged in a review of the CAPC mission statement. The current mission statement is:

To assist and support people toward self-reliance.

Committee members assessed the current mission statement against seven criteria of good mission statements. These criteria are that every mission statement should address...

1. Why we exist?
2. What we do?
3. What is unique or distinctive about our organization?
4. Who are our principal clients and /or user groups?
5. What are our principal services?
6. How we deliver our services?
7. What are the core values of the organization?

The consensus was that the current statement does address items 1, 2, and perhaps 7, but does not directly address the other criteria. After extensive discussion, the committee decided to recommend the current mission statement be retained for the next strategic plan. Key reasons for this decision were that the current mission statement is widely known and embraced by the staff, that it really does capture the work that CAPC does, and that it is short and “impactful.”

The Vision Statement

While the mission statement describes what an organization does, a good vision statement articulates an organization’s aspirations; its dream of what might be. A vision statement describes that broad direction in which an organization wants to move; it is that point on the horizon, however unattainable, toward which the organization wants to move.

The current vision statement is:

A community based organization of dedicated, caring and resourceful professionals who understand the basic needs of our customers and the evolving causes of poverty, are responsible managers of the public resources, and are capable of providing community leadership, partnerships, linkages, and services in order to improve the quality of life.

While the consensus of the members of the Committee was that the mission statement was fine, the consensus was that the vision statement does not capture the aspirations and the inspiration of CAPC.

The members of the Committee identified “themes” that need to be included in a vision statement for the organization. These are:

- Dedicated, caring, resourceful
- Aspire to end poverty and promote prosperity for all
- Quality care and effective early learning
- A community with no hunger
- A community where everyone has healthy lifestyles
- CAPC as a continually supportive group

A small group, consisting of <names> was charged with crafting and drafting a proposed new vision statement that will weave the above-mentioned themes into a powerful, inspirational statement.

Strategic Issues

The culminating activity of the day was the identification of themes that seem to be critical and recurrent throughout this process.

Based on the review of data, personal experience and all of the planning discussions so far, committee members identified the key strategic themes or issues that CAPC is likely to face for the next three years.

Results were as follows, listed in priority order:

1. Address the lack of funding issue (internal) *(13 weighted votes)*
2. Need for marketing, for telling the story (internal) *(19)*
3. Strengthen Agency communications, relationships and morale (internal) *(31)*
4. Address the community transportation issue (program) *(34)*
5. Address the affordable housing issue (program) *(38)*

Other strategic issues identified were a) strengthening Board involvement and development, b) strengthening existing collaborations, c) becoming more of a liaison between the community and the military, d) financial independence, and e) ensuring that the new Strategic Plan is useable and useful.

Appendix K

Comprehensive Community Needs Assessment Data

Assembled courtesy of New York State Community Action Agency

Introduction and Overview

This Community Needs Assessment (CNA) presents an overview of the current community conditions for Jefferson County area (see map below).



This report includes information derived from standard local, state, or national sources on:

Population Profile

- Population Change
- Age and Gender Demographics
- Race Demographics
- Households
- Families
- Poverty
- Poverty Rate (ACS)
- Households in Poverty by Family Type, 2005 - 2009
- Household Poverty Rate by Family Type, 2005 - 2009
- Poverty Rate Change
- Child (0-17) Poverty Rate Change
- Child (0-17) Poverty Rate (ACS)
- Child (0-4) Poverty Rate Change
- Child (0-4) Poverty Rate (ACS)
- Child (5-17) Poverty Rate Change
- Child (5-17) Poverty Rate (ACS)
- Seniors in Poverty (ACS)
- Veterans, Age and Gender Demographics

Employment

- Current Unemployment
- Four Year Unemployment Rate
- Motor Vehicle Registrations
- Wages
- Living Wage
- Method of Transportation to Work
- Travel Time to Work

Education

- School Enrollment
- High School Dropouts
- High School Graduates
- Educational Attainment

Housing

- Housing Units
- Fair Market Rent

Income

- Income Levels
- Household Income
- Temporary Assistance for Needy Families (TANF)
- Supplemental Security Income
- Safety Net and Family Assistance

Nutrition

- Free and Reduced Lunch Program
- Supplemental Nutrition Assistance Program (SNAP) (formerly Food Stamp Program)

Health Care

- Persons Receiving Medicare
- Persons Receiving Medicaid
- Child Health Plus
- Uninsured Population
- HIV/AIDS
- Deaths
- Physicians
- Dentists
- Nurses
- Mental Health Professionals
- Therapists
- Special Health Professionals

Population Profile

Population Profile: Population Change

Population change within Jefferson County from 2000-2010 is shown in Table 1. During the 10-year period, U.S. Census population counts for the report area grew by 4.02%, increasing from 111,738 persons in 2000 to 116,229 persons in 2010.

Table 1. Population Change 2000 - 2010

County	Census 2000 Population	Census 2010 Population	Population Change	% Change
Jefferson	111,738	116,229	4,491	4.02
Statewide	18,976,811	19,378,102	401,291	2.11

Source: [U.S. Census Bureau, Population Division, Census 2010. Release Date: February 2011](#)

Population Profile: Age and Gender Demographics

Population by gender within Jefferson County is shown in Table 2. According to U.S. Census population estimates for the report area, the female population comprised 49.08% of the report area, while the male population represented 50.92%.

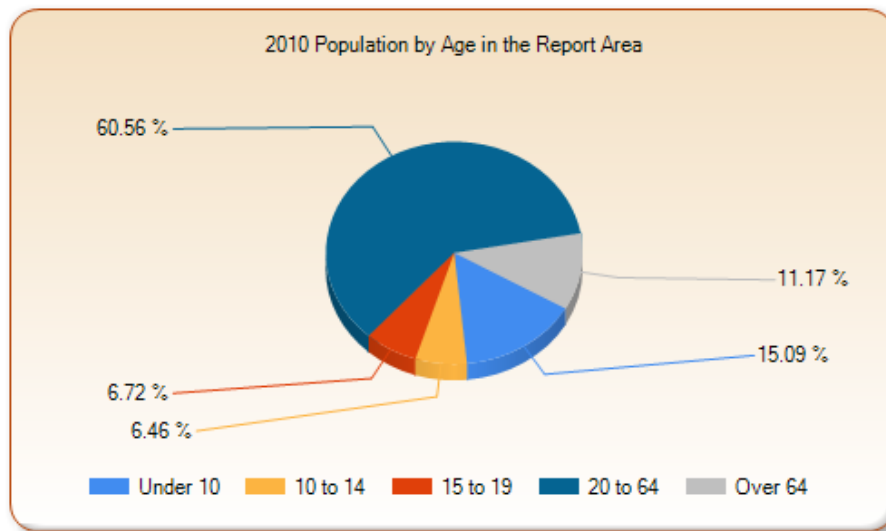


Table 2. 2010 Population By Gender

County	0 to 4		5 to 9		10 to 14		15 to 19		20 to 64		Over 64	
	M	F	M	F	M	F	M	F	M	F	M	F
Jefferson	4,933	4,702	3,932	3,972	3,813	3,695	4,132	3,675	36,772	33,622	5,603	7,378
Statewide	590,879	564,943	594,362	569,593	619,243	592,213	699,548	666,730	5,788,580	6,074,068	1,084,535	1,533,408

Source: [U.S. Census Bureau, 2010 Census of Population and Housing, Summary File 1, Released: August 2011.](#)

Population Profile: Race Demographics

Population by race and gender within Jefferson County is shown in Table 3. According to U.S. Census population estimates for the report area, white population comprised 89.95% of the report area, black population represented 5.13%, and other races combined were 2.1%. Persons identifying themselves as mixed race made up 2.82% of the population.

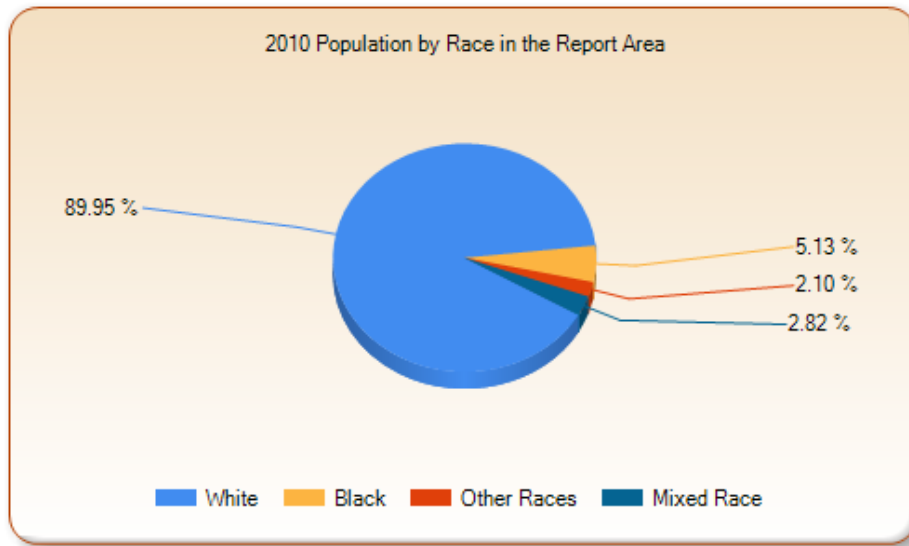


Table 3. 2010 Population By Race

County	White		Black		American Indian		Asian		Native Hawaiian		Mixed Race	
	M	F	M	F	M	F	M	F	M	F	M	F
Jefferson	51,800	51,247	3,618	2,258	306	280	651	867	149	149	1,650	1,586
Statewide	6,213,029	6,527,945	1,420,964	1,652,836	53,330	53,576	682,709	737,535	4,418	4,348	282,065	303,784

Source: [U.S. Census Bureau, 2010 Census of Population and Housing, Summary File 1, Released: August 2011.](#)

Population Profile: Households

The change in number of households Jefferson County from 2000 to 2010 is shown in Table 4. According to the U.S. Census Bureau estimates, total households for the report area increased by 3,383, or 8.44% as compared to a statewide increase of 3.70%.

Table 4. Change in Number of Households, 2000-2010

County	Total Households, 2000	Total Households, 2010	Change in Households, 2000 - 2010	Percent Change in Households, 2000 - 2010
Jefferson	40,068	43,451	3,383	8.44
Statewide	7,056,860	7,317,755	260,895	3.70

Source: [U.S. Census Bureau, 2000 Census of Population and Housing, Summary File 1, 2000](#); [U.S. Census Bureau, 2010 Census of Population and Housing, Summary File 1, Released: August 2011.](#)

Population Profile: Families

The U.S. Census Bureau estimated there were 31,033 families in Jefferson County in 2009. Married couple families comprised 75.18% of the total number. Families headed by men without wives comprised 6.15% of the total, while women without husbands headed 18.67% of families.

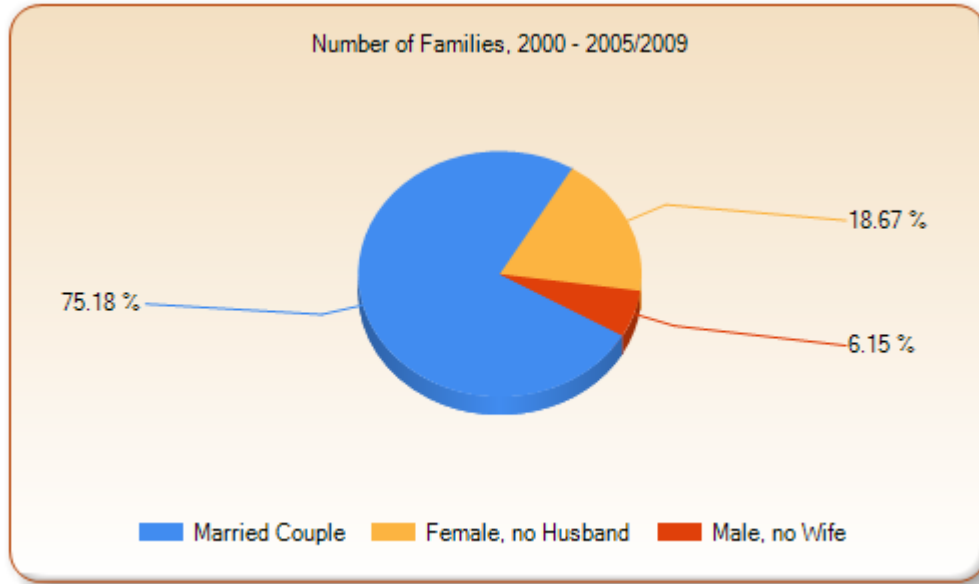


Table 5. Number of Families

County	Number of Families			
	Total	Married Couple	Female, no Husband	Male, no Wife
Jefferson	31,033	23,331	5,794	1,908
Statewide	4,600,572	3,230,765	1,030,091	339,716

Source: [U.S. Census Bureau, American Community Survey, 2009 Data Release, December 2010.](#)
 The 2009 American Community Survey 5-year data is a 5-year average of data collected from 2005 through 2009.

Population Profile: Poverty

2009 poverty estimates show a total of 18,305 persons living below the poverty rate in Jefferson County. The report area poverty rate of 16.5% is above the New York average of 14.2% during 2009.

Table 6. 2009 Poverty Information

County	All Ages		Age 0-17		Age 5-17	
	Number of Persons	Poverty Rate	Number of Persons	Poverty Rate	Number of Persons	Poverty Rate
Jefferson	18,305	16.5	7,012	24.7	4,438	22.6
Statewide	2,708,119	14.2	878,114	20.2	590,889	18.8

Source: [U.S. Census Bureau, Small Area Income and Poverty Estimates \(SAIPE\), 2009.](#)

Population Profile: Poverty Rate (ACS)

Table 7 shows the total population estimates for all persons in poverty for Jefferson County. According to the American Community Survey 5-year averages, an average of 14.6% of all persons lived in a state of poverty during the 2009 calendar year versus a statewide average of 13.8%.

Table 7. Poverty Rate (ACS)

County	Poverty Rate for All Persons		
	Total Population	In Poverty	Poverty Rate
Jefferson	113,653	16,626	14.6
Statewide	18,892,660	2,615,897	13.8

Source: [U.S. Census Bureau, American Community Survey, 2009 Data Release, December 2010.](#)

The 2009 American Community Survey 5-year data is a 5-year average of data collected from 2005 through 2009.

Population Profile: Households in Poverty by Family Type, 2005 - 2009

Table 9 shows the number of households in poverty by type in Jefferson County. In 2009, it is estimated that there were a total of 3,642 households living in poverty within the county.

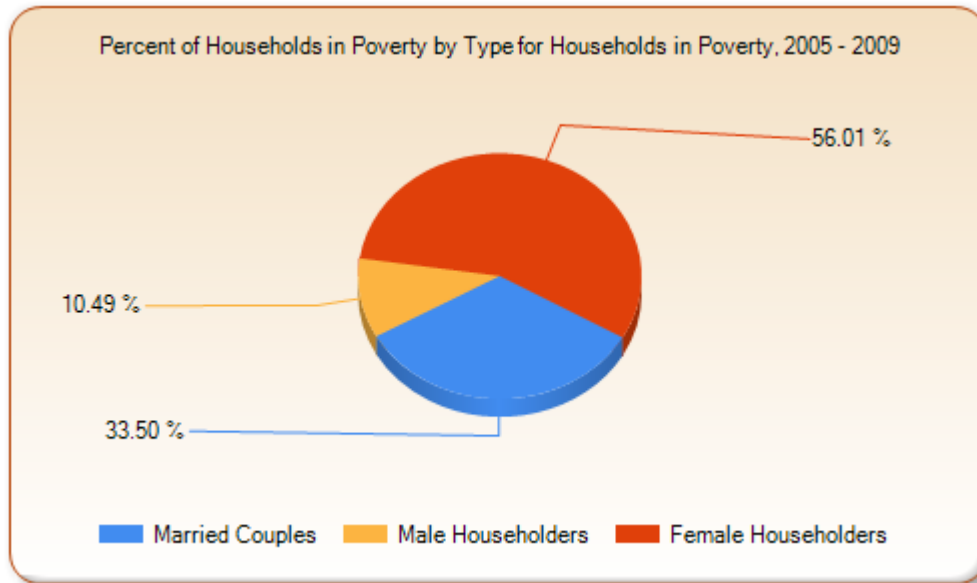


Table 9. Households in Poverty by Family Type, 2005 - 2009

County	Total Households, 2005/2009	Households in Poverty			
		Overall	Married Couples	Male Householder	Female Householder
Jefferson	31,033	3,642	1,220	382	2,040
Statewide	4,600,572	481,927	163,785	43,957	274,185
Nationwide	75,082,470	7,405,282	2,681,691	712,816	4,010,775

Source: [U.S. Census Bureau, American Community Survey, 2009 Data Release, December 2010.](#)

The 2009 American Community Survey 5-year data is a 5-year average of data collected from 2005 through 2009.

Population Profile: Household Poverty Rate by Family Type, 2005 - 2009

Table 10 shows percentage of households in poverty by household type in Jefferson County. In 2009, it is estimated that 11.74% of all households were living in poverty within the report area, compared to a statewide average of 10.48% and a national average of 9.86%.

Table 10. Household Poverty Rate by Family Type, 2005 - 2009

County	Overall	Married Couples	Male Householder	Female Householder
Jefferson	11.74	5.23	20.02	35.21
Statewide	10.48	5.07	12.94	26.62
Nationwide	9.86	4.79	13.94	28.66

Source: Note: The poverty rate for Household type is based on the total number of households for that household type. [U.S. Census Bureau, American Community Survey, 2009 Data Release, December 2010.](#)

Population Profile: Poverty Rate Change

Poverty rate change in Jefferson County from 2000 to 2009 is shown in Table 11. According to the U.S. Census, the poverty rate for Jefferson County increased by 3.4%, compared to a statewide increase of 1.0%.

Table 11. Change in Poverty Rate, 2000 - 2009

County	Persons in Poverty, 2000	Poverty Rate, 2000	Persons in Poverty, 2009	Poverty Rate, 2009	Change in Poverty Rate, 2000 - 2009
Jefferson	13,456	13.1	18,305	16.5	3.4
Statewide	2,466,704	13.0	2,708,116	14.0	1.0

Source: [U.S. Census Bureau, Small Area Income and Poverty Estimates \(SAIPE\), 2009.](#)

Population Profile: Child (0-17) Poverty Rate Change

The poverty rate change for all children Jefferson County from 2000 to 2009 is shown in Table 12. According to the U.S. Census, the poverty rate increased by 6.3%, compared to a statewide increase of 1.0%.

Table 12. Change in Childhood (0-17) Poverty Rate, 2000 - 2009

County	Children in Poverty, 2000	Poverty Rate, 2000	Children in Poverty, 2009	Poverty Rate, 2009	Change in Poverty Rate, 2000 - 2009
Jefferson	5,196	18.4	7,012	24.7	6.3
Statewide	873,085	19.0	878,112	20.0	1.0

Source: [U.S. Census Bureau, Small Area Income and Poverty Estimates \(SAIPE\), 2009.](#)

Population Profile: Child (0-17) Poverty Rate (ACS)

Table 13 shows the total population estimates for children and children in poverty for Jefferson County. According to the American Community Survey 5-year averages, an average of 21.76% of children lived in a state of poverty during the 2009 calendar year. The poverty rate for children living in Jefferson County is greater than the statewide average of 19.6% and the nationwide average of 18.6%.

Table 13. American Community Survey, Child (0-17) Poverty Rate

County	Children, Ages 0 - 17 years		
	Total Population	In Poverty	Poverty Rate
Jefferson	28,323	6,163	21.8
Statewide	4,422,136	864,629	19.6
Nationwide	72,964,530	13,557,800	18.6

Source: [U.S. Census Bureau, American Community Survey, 2009 Data Release, December 2010.](#)

The 2009 American Community Survey 5-year data is a 5-year average of data collected from 2005 through 2009.

Population Profile: Child (0-4) Poverty Rate Change

The poverty rate change for children under five years of age Jefferson County from 2000 to 2009 is shown in Table 14. According to the U.S. Census, the poverty rate increased by 9.8%, compared to a statewide increase of 2.0%.

Table 14. Poverty Rate Change for Children under Five, 2000 - 2009

County	Children 0-4 in Poverty, 2000	Poverty Rate, 2000	Children 0-4 in Poverty, 2009	Poverty Rate, 2009	Change in Poverty Rate, 2000 - 2009
Jefferson	1,618	19.6	2,574	29.4	9.8
Statewide	267,704	21.0	287,223	23.0	2.0

Source: [U.S. Census Bureau, Small Area Income and Poverty Estimates \(SAIPE\), 2009.](#)

Population Profile: Child (0-4) Poverty Rate (ACS)

Table 15 shows the total population estimates for children under five years of age and children under five years of age in poverty for Jefferson County. According to the American Community Survey 5-year averages, an average of 25.48% of children under five years of age lived in a state of poverty during the 2009 calendar year. The poverty rate for children under five years of age in Jefferson County is greater than the statewide average of 21.5%.

Table 15. Child (0-4) Poverty Rate

County	Children, Ages 0 - 4 years		
	Total Population	In Poverty	Poverty Rate
Jefferson	8,027	2,045	25.5
Nationwide	20,537,730	4,418,482	21.5

Source: [U.S. Census Bureau, American Community Survey, 2009 Data Release, December 2010.](#)

The 2009 American Community Survey 5-year data is a 5-year average of data collected from 2005 through 2009.

Population Profile: Child (5-17) Poverty Rate Change

The poverty rate change for children ages five to seventeen in Jefferson County from 2000 to 2009 is shown in Table 16. According to the U.S. Census, the poverty rate increased by 4.7%, compared to a statewide increase of 0.0%.

Table 16. Poverty Rate Change for Children Ages Five to Seventeen, 2000 - 2009

County	Children 5-17 in Poverty, 2000	Poverty Rate, 2000	Children 5-17 in Poverty, 2009	Poverty Rate, 2009	Change in Poverty Rate, 2000 - 2009
Jefferson	3,578	17.9	4,438	22.6	4.7
Statewide	605,381	18.0	590,889	18.0	0.0

Source: [U.S. Census Bureau, Small Area Income and Poverty Estimates \(SAIPE\), 2009.](#)

Population Profile: Child (5-17) Poverty Rate (ACS)

Table 17 shows the total population estimates for children aged five to seventeen and children aged five to seventeen in poverty for Jefferson County. According to the American Community Survey 5-year averages, an average of 20.29% of children aged five to seventeen lived in a state of poverty during the 2009 calendar year. The poverty rate for children aged five to seventeen living in Jefferson County is greater than the statewide average of 18.8%.

Table 17. Child (5-17) Poverty Rate

County	Children, Ages 5 - 17 years		
	Total Population	In Poverty	Poverty Rate
Jefferson	20,296	4,118	20.3
Statewide	3,221,449	606,579	18.8

Source: [U.S. Census Bureau, American Community Survey, 2009 Data Release, December 2010.](#)

The 2009 American Community Survey 5-year data is a 5-year average of data collected from 2005 through 2009.

Population Profile: Seniors in Poverty (ACS)

Poverty rates for seniors from the American Community Survey as average values for the 2005 to 2009 period are shown in Table 18. The poverty rate among seniors in Jefferson County is slightly lower than the statewide average of 11.8% but higher than the nationwide average of 9.7%.

Table 18. Seniors in Poverty, 2005/2009

County	Total Population 65 and over	Seniors in Poverty, 2005/2009	Senior Poverty Rate, 2005/2009
Jefferson	13,130	1,444	11.0
Statewide	2,462,250	290,743	11.8
Nationwide	36,818,360	3,574,499	9.7

Source: [U.S. Census Bureau, American Community Survey, 2009 Data Release, December 2010.](#)
 The 2009 American Community Survey 5-year data is a 5-year average of data collected from 2005 through 2009.

Population Profile: Veterans, Age and Gender Demographics

Table 19 shows the number of veterans living in Jefferson County. 13.9% of the adult population in the report area are veterans, which is less than the statewide average of 7.1 percent.

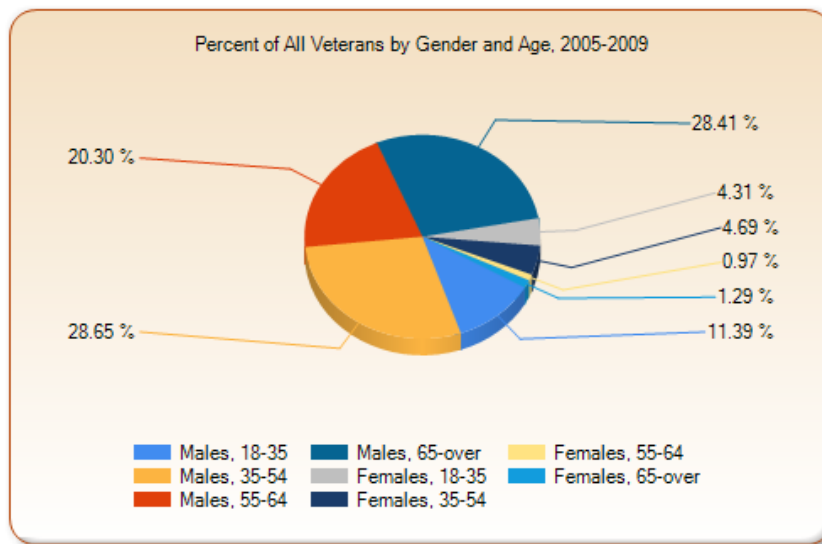


Table 19. Age and Gender Demographics of Veterans

County	Veterans			Percent of Population over 18 by Gender		
	Total	Males	Females	Total	Males	Females
Jefferson	11,354	10,077	1,277	13.9	25.9	3.0
Statewide	1,064,754	1,010,084	54,670	7.1	14.2	0.7
Nationwide	22,894,580	21,324,620	1,569,958	10.1	19.5	1.3

Source: [U.S. Census Bureau, American Community Survey, 2009 Data Release, December 2010.](#)
 The 2009 American Community Survey 5-year data is a 5-year average of data collected from 2005 through 2009.

Employment

Employment: Current Unemployment

Labor force, employment, and unemployment data for Jefferson County is provided in Table 24. Overall, the report area experienced an average 8.2% unemployment rate in August 2011 compared to a statewide rate of 7.7%.

Table 24. August 2011 Employment/Unemployment Information

County	Labor Force	Employment	Unemployment	Unemployment Rate
Jefferson	51,153	46,941	4,212	8.2
Statewide	9,629,521	8,885,089	744,432	7.7

Source: [U.S. Department of Labor, Bureau of Labor Statistics, Local Area Unemployment Statistics, September 27, 2011.](#)

Employment: Four Year Unemployment Rate

Unemployment change within the Jefferson County from August 2008 to August 2011 is shown in the chart below. According to the U.S. Department of Labor, unemployment for this four year period grew from 5.8% to 8.2%, compared to a statewide increase from 5.5% to 7.7%.

Table 27. Four Year Unemployment Rate, August 2008 - August 2011

County	August 2008	August 2009	August 2010	August 2011
Jefferson	5.8	7.8	8.3	8.2
Statewide	5.5	8.6	8.3	7.7

Source: [U.S. Department of Labor, Bureau of Labor Statistics, Local Area Unemployment Statistics, September 27, 2011.](#)

Employment: Motor Vehicle Registrations

Table 34 shows the number of registrations by vehicle type for Jefferson County.

Table 34. Motor Vehicle Registrations, 2007

County	All Registered Vehicles	Passenger Vehicles	Commercial Vehicles	Motorcycles	Mopeds
Jefferson	85,177	60,820	14,510	3,262	166
Statewide	10,534,558	8,875,866	868,048	305,977	10,823

Source: [2009 New York State Statistical Yearbook, Motor Vehicle Registrations in Force by Type of Vehicle, 2007, Rockefeller Institute, University at Albany, State University of New York.](#)

Employment: Wages

Average weekly wages for Jefferson County during the period January - March 2011 are provided in Table 35. Jefferson County has an average weekly wage of \$688 versus a statewide average weekly wage of \$1,368.

Table 35. Weekly Wages, First Quarter 2011

County	Total Employees	Average Weekly Wage (\$)	Federal Employees	Average Federal Government Weekly Wage (\$)	State/Local Employees	Average State/Local Government Weekly Wage (\$)	Private Employees	Average Private Weekly Wage (\$)
Jefferson	40,575	688	3,699	905	8,292	779	28,584	633
Statewide	8,294,766	1,368	121,719	1,257	1,310,165	997	6,862,882	1,441

Source: [U.S. Department of Labor, Bureau of Labor Statistics, Quarterly Census of Employment and Wages.](#)

Employment: Living Wage

The living wage shown is the hourly rate that an individual must earn to support their family, if they are the sole provider and are working full-time (2,080 hours per year). The Minimum Hourly Wage for New York is \$7.25.

Table 36. County Hourly Living Wage, 2008

County	One Adult	One Adult, One Child	Two Adults	Two Adults, One Child	Two Adults, Two Children
Jefferson	7.93	14.92	12.02	19.03	24.61
Statewide	10.37	18.83	15.15	23.61	30.21

Source: [Poverty in America, Living Wage Calculator, 2008. \(© 2011 Dr. Amy K. Glasmeier and The Pennsylvania State University\)](#)

Employment: Method of Transportation to Work

Table 37 shows the method of transportation workers used to travel to work in Jefferson County. Of the 55,849 workers in the report area, 91.08%, or 50,870 workers used private automobiles to travel to work. Of these, 78.03% drove to work alone while 13.05% carpoled. 0.95% of all workers reported that they used some form of public transportation, while 5.08% (or 2,838 workers) used some other means including walking, bicycles, and taxicabs to travel to work.

Table 37. Method of Transportation to Work, 2005 to 2009

County	Workers 16 and Up	Method of Transportation to Work (Percent)						
		Drive Alone	Carpool	Public Transportation	Bicycle	Walk	Taxi/Other	Work at Home
Jefferson	55,849	78.0	13.1	0.9	0.3	3.7	1.1	2.9
Statewide	9,156,656	52.9	7.4	28.1	0.4	6.1	1.4	3.7
Nationwide	139,586,046	76.0	10.5	4.9	0.5	2.9	1.2	4.0

Source: [U.S. Census Bureau, American Community Survey, 2009 Data Release, December 2010.](#)

The 2009 American Community Survey 5-year data is a 5-year average of data collected from 2005 through 2009.

Employment: Travel Time to Work

Travel times for workers who travel (do not work at home) to work is shown in Table 38 for Jefferson County. The median commute time for the report area of 29 minutes is shorter than the statewide median commute time of 37 minutes.

Table 38. Travel Time to Work, 2005 to 2009

County	Workers 16 and Up	Travel Time to Work in minutes (Percent of Workers)						Median Commute Time (mins)
		Less than 10	10 to 20	20 to 40	40 to 60	60 to 90	More than 90	
Jefferson	54,237	21.9	34.3	32.4	6.8	2.8	1.7	23
Statewide	8,821,564	10.8	23.0	33.3	14.9	12.2	5.8	37
Nationwide	133,985,571	14.3	29.9	36.7	11.1	5.6	2.5	29

Source: [U.S. Census Bureau, American Community Survey, 2009 Data Release, December 2010.](#)

The 2009 American Community Survey 5-year data is a 5-year average of data collected from 2005 through 2009.

Education

Education: School Enrollment

Table 39 shows public and non-public school enrollment in Jefferson County for fall 2007.

Table 39. Public and non-Public School enrollment

County	School Enrollment, Fall 2007		Total
	Public	Private	
Jefferson	18,244	940	19,184
Statewide	2,700,760	448,716	3,149,476

Source: Based on the public and private school enrollment for the school years 1998-2007 published in the [2009 New York State Statistical Yearbook](#).

Education: High School Dropouts

Table 40 shows the High School Dropout rate in Jefferson County for the school years 1999-2000 through 2006-2007.

Table 40. High School Dropout Rates

County	Dropout Rates						
	2001	2002	2003	2004	2005	2006	2007
Jefferson	2.5	2.7	2.8	2.6	2.8	2.6	1
Statewide	3.8	5.7	4.6	4.3	4.5	4.4	3

Source: Based on the Dropout Rate (%) for the school years 2000-2007 published in the [2009 New York State Statistical Yearbook](#). <http://www.dese.mo.gov/qs/me/LEPCensus.htm>

Education: High School Graduates

Table 41 shows the number of High School Graduates in Jefferson County for the school years 1999-2000 through 2006-2007.

Table 41. High School Graduates

County	Persons Graduating High School						
	2001	2002	2003	2004	2005	2006	2007
Jefferson	1,082	1,016	1,020	1,010	1,041	1,061	1,153
Statewide	141,854	140,129	143,719	153,137	153,087	161,615	173,150

Source: Based on the number of Graduates for the school years 2000-2007 published in the [2009 New York State Statistical Yearbook](#).

Education: Educational Attainment

Table 42 shows the distribution of educational attainment levels in Jefferson County. Educational attainment is calculated for persons over 25, and is an average for the period from 2005 to 2009.

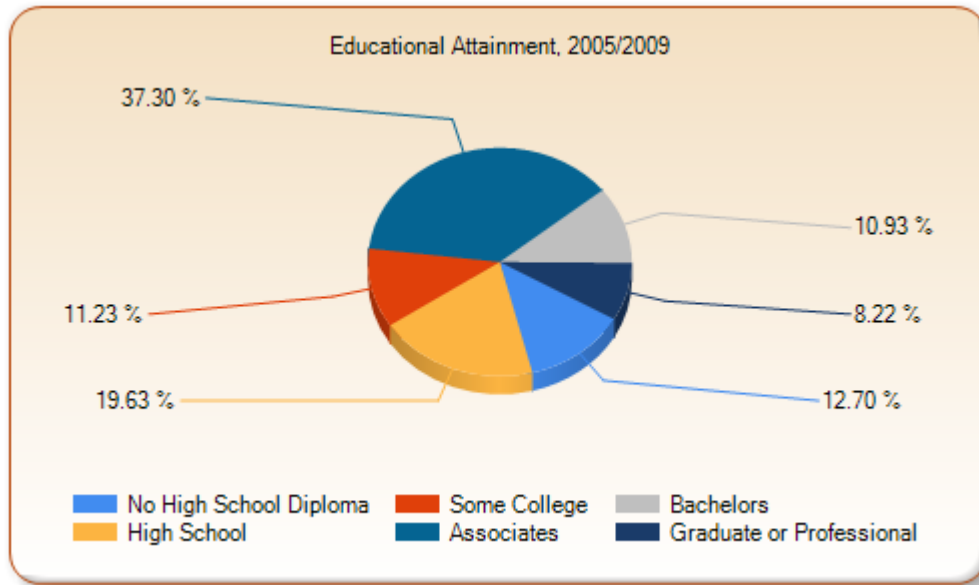


Table 42. Percent Attaining Educational Levels

County	% No High School Diploma, 2005/2009	% High School Only, 2005/2009	% Some College, 2005/2009	% Associates, 2005/2009	% Bachelors, 2005/2009	% Graduate or Professional, 2005/2009
Jefferson	12.69	37.30	19.63	11.23	10.93	8.22
Statewide	15.79	28.62	15.62	8.13	18.21	13.63

Source: [U.S. Census Bureau, American Community Survey, 2009 Data Release, December 2010.](#)

The 2009 American Community Survey 5-year data is a 5-year average of data collected from 2005 through 2009.

Housing

Housing: Housing Units

The number of housing units within Jefferson County in July of each year from 2000-2008 is shown in Table 46. According to the U.S. Census, there were a total of 57,786 housing units in the report area in 2008, an increase of 3,630 or 6.7% since 2000 compared to an 8.76% increase statewide.

Table 46. 2000 - 2008 Housing Units

County	July 2000	July 2001	July 2002	July 2003	July 2004	July 2005	July 2006	July 2007	July 2008
Jefferson	54,156	54,493	54,832	54,746	55,240	55,675	56,999	57,290	57,786
Statewide	7,688,399	7,722,672	7,757,857	7,794,694	7,830,476	7,871,083	7,907,329	7,943,880	7,977,286

Source: [U.S. Census Bureau, Population Division, Housing Unit Estimates for Counties: April 1, 2000 to July 1, 2008, Release Date August 6, 2009.](#)

Housing: Fair Market Rent

Fair market monthly rent for 0-4 bedrooms for Jefferson County is shown in Table 48. The average rent for 2-bedroom units in the report area was \$776 in 2011, compared to a statewide average of \$1,267.

Table 48. Fair Market Rents, 2011

County	Fair Market Rent (Monthly \$'s) for				
	0 Bedrooms	1 Bedroom	2 Bedrooms	3 Bedrooms	Four Bedrooms
Jefferson	644.00	646.00	776.00	1,000.00	1,051.00
Statewide	1,029.66	1,116.96	1,267.50	1,567.66	1,761.05

Source: [National Low Income Housing Coalition, Out of Reach 2011 Report, 2011.](#) This report is based on [Housing and Urban Development's \(HUD\) Final Fair Market Rent Documentation System.](#)

Income

Income: Income Levels

Two common measures of income are Median Household Income, based on U.S. Census Bureau estimates, and Per Capita Income, based on U.S. Department of Commerce estimates. Both measures are shown for Jefferson County in Table 54.

Table 54. Income Levels by County

County	Median Household Income, 2009	Per Capita Income, 2009
Jefferson	42,926	39,091
Statewide	54,554	46,516

Source: [U.S. Census Bureau, Small Area Income and Poverty Estimates \(SAIPE\), 2009](#); [U.S. Department of Commerce, Bureau of Economic Analysis, Regional Economic Information System \(REIS\), 2010](#).

Income: Household Income

Median annual household incomes in Jefferson County are shown in Table 56.

Table 56. 2009 Median Annual Household Income

County	Median Household Income (\$)
Jefferson	42,926.00
Statewide	54,554.00

Source: [U.S. Census Bureau, Small Area Income and Poverty Estimates \(SAIPE\), 2009](#).

Income: Temporary Assistance for Needy Families (TANF)

The number of persons receiving TANF in August 2011 within Jefferson County is shown in Table 57. The New York Office of Temporary and Disability Assistance reported that 1,268 persons were receiving TANF benefits at a cost of \$416,759, or \$329 per recipient, in the report area during August, 2011. 50.7% of the recipients were children.

Table 57. Persons Receiving TANF, August 2011

County	Persons Receiving TANF, August 2011			Cases, August 2011	Expenditures, August 2011		
	Total	Children	Adults		Total	Per Case	Per Person
Jefferson	1,268	643	625	786	416,759	530	328
Statewide	297,528	566,897	308,479	258,418	176,094,628	591	310

Source: [New York Office of Temporary and Disability Assistance, August, 2011](#).
Community Action Planning Council

Income: Supplemental Security Income

The number of Supplemental Security Income recipients and expenditures by the state and federal governments in Jefferson County are shown in Table 60.

Table 60. Supplemental Security Income, August, 2011

County	August Recipients	August Expenditures (\$)			Expenditure per Recipient
		Total	Federal	State	
Jefferson	3,016	1,652,089	1,418,673	233,416	547
Statewide	694,162	393,277,552	338,414,353	54,863,199	566

Source: [New York Office of Temporary and Disability Assistance, August, 2011.](#)

Income: Safety Net and Family Assistance

The number of persons receiving TANF in August, 2011 within Jefferson County is shown in Table 61. The New York Office of Temporary and Disability Assistance reported that 552 persons were receiving TANF benefits at a cost of \$231,572, or \$420 per recipient, in the report area during August, 2011. 16.8% of the recipients were children.

Table 61. Safety Net and Family Assistance Cases

County	Safety Net and Family Assistance Cases, August 2011			Cases, August 2011	Expenditures, August 2011		
	Total	Children	Adults		Total	Per Case	Per Person
Jefferson	552	93	459	440	231,572	526	419
Statewide	297,528	566,897	308,479	258,418	176,094,628	591	310

Source: [New York Office of Temporary and Disability Assistance, August, 2011.](#)

Nutrition

Nutrition: Free and Reduced Lunch Program

The number of students participating in the Free and Reduced Lunch Program in Jefferson County is shown in Table 63. The percentage of students in Jefferson County is 46.7% as opposed to 36.0% statewide.

Table 63. Students Participating in the Free and Reduced Lunch Program, 2011

County	Total Student Enrollment (September, 2011)	Students Participating	Percent of Students Participating
Jefferson	13,923	6,502	46.7
Statewide	1,189,047	427,981	36.0

Source: [New York State Education Department, Child Nutrition Management System, September, 2011.](#)

Nutrition: Supplemental Nutrition Assistance Program (SNAP) (formerly Food Stamp Program)

The number of households and persons receiving SNAP benefits and the total SNAP dollars issued for Jefferson County are shown in Table 66. According to the New York Office of Temporary and Disability Assistance, Jefferson County had an average benefit per household during August at \$256 per household.

Table 66. Households and Persons Receiving SNAP Benefits, August 2011

County	Households Receiving Benefits			Persons Receiving Benefits			Benefits Issued (\$)			Benefi ts Per HH
	Total	Temp	Non Temp	Total	Temp	Non Temp	Total	Temp	Non Temp	
Jefferson	7,855	2,062	5,793	15,641	2,444	13,197	2,011,614	403,750	1,607,864	256
Statewide	1,624,477	640,349	984,128	3,040,684	962,044	2,078,640	452,675,705	158,388,032	294,287,673	278

Source: [New York Office of Temporary and Disability Assistance, August, 2011.](#)

Health Care

Health Care: Persons Receiving Medicare

The total number of persons receiving Medicare is shown, broken down by number over 65 and number of disabled persons receiving Medicare for Jefferson County in Table 71. The U.S. Department of Health and Human Services reported that a total of 16,160 persons were receiving Medicare benefits in Jefferson County in 2007. A large number of individuals in our society are aware that persons over 65 years of age receive Medicare; however, many of them are unaware that disabled persons also receive Medicare benefits. A total of 3,286 disabled persons in the report area received Medicare benefits in 2007.

Table 71. Medicare Enrollment by County, July 2007

County	Persons Over 65 Receiving Medicare	Disabled Persons Receiving Medicare	Total Persons Receiving Medicare
Jefferson	12,874	3,286	16,160
Statewide	2,388,981	458,016	2,846,997

Source: [U.S. Department of Health and Human Services, Centers for Medicare and Medicaid Services, Medicare County Enrollment Report, as of July 1 2007.](#)

Health Care: Persons Receiving Medicaid

The average number of persons receiving Medicaid during First Quarter 2010 is shown in Table 72 for Jefferson County. At 100.26 per 1,000 persons, the average rate of Medicare recipients during First Quarter 2010 in Jefferson County is lower than the overall state rate of 198.84 per 1,000 persons.

Table 72. Monthly Average Number of Persons Receiving Medicaid, 1st Quarter 2010

County	Monthly Average Number of Persons Receiving Medicaid, 1st Quarter 2010						Total	Per 1000
	Children	Adults	Elderly	Disabled	Family Health	Other		
Jefferson	3,542	2,998	908	3,036	1,525	58	11,653	100.26
Statewide	1,438,308	1,004,606	270,813	597,259	379,213	225,376	3,853,061	198.84

Source: [New York Department of Health, Information for a Healthy New York, Medicaid Quarterly Reports of Beneficiaries and Expenditures by Category of Eligibility and Social Service District.](#)

Health Care: Child Health Plus

Table 73 shows the total enrollment for the New York Child Health Plus program for September 2009, 2010, 2011. According to the New York Department of Health, there were 2,471 persons enrolled in the Child Health Plus Program during September 2011. Between September 2009 and September 2011, enrollment increased in the report area by 121 persons, or 5.1%.

Table 73. Child Health Plus

County	Total Enrollment		
	Sept 2009	Sept 2010	Sept 2011
Jefferson	2,350	2,386	2,471
Statewide	389,190	395,312	411,892

Source: [New York Department of Health, Information for a Healthy New York, Child Health Plus Enrollment by Insurer](#)

Health Care: Uninsured Population

The uninsured population is calculated by estimating the number of persons eligible for insurance (generally those under 65) minus the estimated number of insured persons. In 2007, the percentage of persons uninsured was 20.6 in Jefferson County.

Table 74. Uninsured Persons, 2007

County	Insurance Population (2007 Estimate)	Number Insured	Number Uninsured	Percent Uninsured
Jefferson	97,663	77,567	20,096	20.6
Statewide	16,703,992	14,162,235	2,541,757	15.2

Source: [U.S. Census Bureau, Small Area Health Insurance Estimates, 2007 \(May 2010 release\)](#).

Health Care: HIV/AIDS

In 2007, there were 363 reported cases of HIV/AIDS in Jefferson County. The reported cases are split into all cases, including prisoners and excluding prisoners. Of these 81% of the cases were reported in the prison population.

Table 77. Living HIV and AIDS CASES, 2007

County	Total HIV/AIDS Cases (Including Prisoners)			Total HIV/AIDS Cases (Excluding Prisoners)		
	HIV/AIDS	HIV Only	AIDS Only	HIV/AIDS	HIV Only	AIDS Only
Jefferson	363	187	176	69	27	42
Statewide	27,260	10,400	16,860	20,622	7,726	12,896

Source: [2009 New York State Statistical Yearbook, Living HIV and AIDS CASES, 2007, Rockefeller Institute, University at Albany, State University of New York.](#)

Health Care: Deaths

Table 78 includes the number of deaths and death rates in Jefferson County for the years 2003, 2004, 2005, 2006 and 2007. Death rates were 7.3 deaths per 1,000 persons in Jefferson County versus 7.6 deaths per 1,000 persons statewide.

Table 78. Deaths and Death Rates

County	2003		2004		2005		2006		2007	
	Total	Rate /1000	Total	Rate /1000	Total	Rate /1000	Total	Rate /1000	Total	Rate /1000
Jefferson	851	7.4	928	8.3	824	7.1	839	7.3	860	7.3
Statewide	155,015	8.1	151,455	7.9	150,987	7.8	147,615	7.6	146,266	7.6

Source: [2009 New York State Statistical Yearbook, Deaths/Deathrates, 2003-2007, Rockefeller Institute, University at Albany, State University of New York.](#)

Health Care: Physicians

Table 79 shows the number of Physicians, Physicians with 3-year licenses, Physician Assistants and Specialist Assistants for Jefferson County. There are 2.46 physicians per 1,000 persons in the report area; the statewide average is 3.99 physicians per 1,000 persons.

Table 79. Physicians and Assistants, 2010

County	Physicians, MD	Physicians, 3yr	Physician Assistants	Specialist Assistants	Physicians/Assistants per 1,000 Persons
Jefferson	211	14	60	1	2.46
Statewide	67,920	754	8,496	68	3.99

Source: [New York Office of the Professions, New York State Licensed Professions](#)>; [U.S. Census Bureau, Population Division, Census 2010. Release Date: February 2011](#)

Health Care: Dentists

Table 80 shows the number of Dentists, Dental Hygienists, and Certified Dental Assistants for Jefferson County. The Jefferson County average is 1.16 dental professionals per 1,000 persons versus the statewide average of 1.28 dental professionals per 1,000 persons.

Table 80. Dental Professionals, 2010

County	Dentists	Dental Specialists	Dental Hygienists	Dental Professionals per 1,000 Persons
Jefferson	61	69	5	1.16
Statewide	14,946	8,967	958	1.28

Source: [New York Office of the Professions, New York State Licensed Professions](#)>; [U.S. Census Bureau, Population Division, Census 2010. Release Date: February 2011](#)

Health Care: Nurses

Table 81 shows the number of Nurses, Nurse Practitioners, and Midwives for Jefferson County. The county average is 17.25 nursing professionals per 1,000 persons versus a statewide average of 15.06 nursing professionals per 1,000 persons.

Table 81. Nurses, 2010

County	Nurse, RN	Nurse, LPN	Nurse Practitioners	Midwives	Nurses per 1,000 Persons
Jefferson	1,113	817	67	8	17.25
Statewide	212,671	64,513	13,725	879	15.06

Source: [New York Office of the Professions, New York State Licensed Professions](#); [U.S. Census Bureau, Population Division, Census 2010. Release Date: February 2011](#)

Health Care: Mental Health Professionals

Table 82 shows the number of Mental Health professionals for Jefferson County. The county average and the statewide average are 0.32 Mental Health professionals per 1,000 persons.

Table 82. Mental Health Professionals, 2010

County	Psychoanalysts	Mental Health Counselors	Creative Arts Therapists	Marriage and Family Therapists	Mental Health Professionals per 1,000 Persons
Jefferson	0	34	2	1	0.32
Statewide	668	3,863	1,071	661	0.32

Source: [New York Office of the Professions, New York State Licensed Professions](#); [U.S. Census Bureau, Population Division, Census 2010. Release Date: February 2011](#)

Health Care: Therapists

Table 83 shows the number of Physical, Occupational and Massage Therapists for Jefferson County. The county average is 1.69 Physical, Occupational and Massage Therapists per 1,000 persons versus the statewide average of 2.45 per 1,000 persons.

Table 83. Therapists, 2010

County	Physical Therapist	Physical Therapist Assistants	Occupational Therapist	Occupational Therapist Assistants	Massage Therapists	Therapists/Assistants per 1,000 Persons
Jefferson	75	23	39	10	49	1.69
Statewide	15,662	4,327	9,263	3,722	14,409	2.45

Source: [New York Office of the Professions, New York State Licensed Professions](#)>; [U.S. Census Bureau, Population Division, Census 2010. Release Date: February 2011](#)

Health Care: Special Health Professionals

Table 84 shows the number of Optometrists, Audiologists, Speech Pathologists, Respiratory Therapists, and Respiratory Technicians for Jefferson County. The county average is .83 special health professionals per 1,000 persons versus the statewide average of 1.23 per 1,000 persons.

Table 84. Special Health Professionals, 2010

County	Optometrists	Audiologists	Speech Pathologists	Respiratory Therapists	Respiratory Technicians	Special Health Professionals per 1,000 Persons
Jefferson	14	2	40	34	7	0.83
Statewide	2,573	1,181	13,871	4,901	1,235	1.23

Source: [New York Office of the Professions, New York State Licensed Professions](#)>; [U.S. Census Bureau, Population Division, Census 2010. Release Date: February 2011](#)