



**FLORIDA DEPARTMENT of
ECONOMIC OPPORTUNITY**

Community Services Block Grant (CSBG)

Community Action Plan

Submission Date:

FFY:

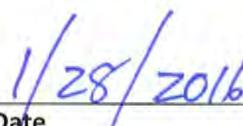
Agency Contact Person Regarding the Community Action Plan:

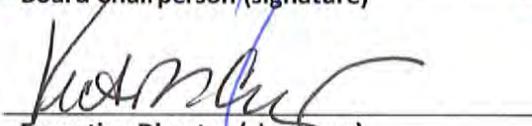
Name:	Lori North
Title:	Family Services Manager
Phone:	(941) 833-6502
Email:	Lori.North@charlottecountyfl.gov

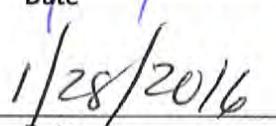
Certification of Community Action Plan and Assurances

The undersigned hereby certify that this agency complies with the Assurances and Requirements of this FFY 2015 Community Action Plan (CAP) and the information in this CAP is correct and has been authorized by the governing body of this organization.


Board Chairperson (signature)


Date


Executive Director (signature)


Date

Contents

Agency Information	3
Geographic Service Area	3
Geographic Service Area map.....	4
Vision Statement.....	4
Mission Statement	4
Community Needs Assessment	5
Most recent Community Needs Assessment.....	5
Define Your Community Needs Assessment Process:	6
Describe the findings and results of your Community Needs Assessment	7
Service Delivery System	9
Strategic Plan	10
Linkages and Funding Coordination.....	13
Tripartite Board of Directors.....	14
Grantee Bylaws	15
Grantee Agency-Wide Organizational Chart.....	15
Grantee Agency-Wide Budget	16
Federal Assurances	16
Appendices	
A: Geographic Service Area Map	17
B: 2013 Community Needs Assessment	18
C: Community Partners	188
D: CAAAB Tripartite Members	196
E: CAAAB By-Laws	199
F: Agency Organizational Chart	209
G: Agency Budget, FY 2015-2016	210

Agency Information

Agency Name:	Charlotte County Board of County Commissioners		
Address:	1050 Loveland Blvd.		
	Port Charlotte, FL 33980		
Phone:	(941) 833-6500		
Website:	https://www.charlottecountyfl.gov		
ED/CEO:	Victoria Carpenter		
Board Chair:	Michael Haymans		
Type of Agency:	Local Government		x
	Farmworker		
	Nonprofit		

Geographic Service Area

The Charlotte County Human Services Department operates an anti-poverty program in accordance with the Community Services Block Grant Act through funds allocated by the Executive Director of the Florida Department of Economic Opportunity and the U.S. Department of Health and Human Services.

List all Counties Served through CSBG:

Charlotte

Provide the location for all service centers, including the main office, below OR attach a listing of all service centers at Appendix/Attachment .

Main Office: 1050 Loveland Blvd., Port Charlotte, FL 33980

Satellite Office: 6868 San Casa Drive, Englewood, FL 34224

Geographic Service Area map

Please see **Appendix A** for a map of the Agency's service area.

Vision Statement

The Vision Statement describes a desired future based on your agency's values. The vision is broader than what any one agency can achieve; the agency collaborates with others in pursuit of the vision.

Date: January 20, 2011

(Enter the month/year when the Vision Statement was reviewed and approved by the tripartite board)

Provide your agency's Vision Statement.

The Charlotte County Human Services Department will partner with the Charlotte Community, including other human services agencies, government, businesses, and religious groups in creating an environment in which all individuals have opportunities to become self-sufficient, reach their full potential, improve the quality of their lives and those of their families, and participate as stakeholders in their community.

Mission Statement

The Mission Statement describes the agency's reason for existence and may state its role in achieving its vision.

Date: October 23, 2014

(Enter the month/year when the Mission Statement was reviewed and approved by the tripartite board)

Provide your agency's Mission Statement.

To improve the quality of life by connecting Charlotte County residents with supportive programs and services through community partnerships, advocacy, and information.

Community Needs Assessment

Most recent Community Needs Assessment

Date: October, 2013

(Enter the month/year when the CNA was approved by the tripartite board)

Timeframe: 2013-2016

(enter the timeframe the CNA covers)

Please see **Appendix B** for a copy of the Community Needs Assessment.

The narrative description provided for the needs assessment serves as the basis for the agency's goals, problem statements, and program delivery strategies of the CSBG/National Performance Indicators. The needs assessment should describe local poverty-related needs and prioritize eligible activities to be funded by CSBG.

Agency needs assessments shall identify the processes used to collect the most applicable information. In particular, describe how the agency ensures that the needs assessment reflects the current priorities of the low-income population in the service area, beyond the legal requirement for a local public hearing of the community action plan.

Please note which combination of activities to perform needs assessments were used, include when and how these activities occurred (circle one or more; provide details):

- | | |
|-----------------|-----------------------|
| 1. Focus groups | 2. Asset Mapping |
| 3. Surveys | 4. Community Dialogue |
| 5. Interviews | 6. Public Records |

Focus groups – Meetings were held bi-weekly on each of the focus areas beginning August 2013. Focus group consisted of needs assessment steering committee and subject area experts as appropriate.

Asset Mapping – Community strengths and resources are chronicled in the Community Needs Assessment and inventoried on a Human Services Community Resources map at:

<https://www.charlottecountyfl.gov/dept/humanservices/Pages/default.aspx>

Surveys – Eighty-two partner agencies and 869 client surveys were completed.

Community Dialogue – Over seventy participants attended the open forum on March 12, 2013.

Public Records – The Needs Assessment included statistical data collected from sources that included the United States Census Bureau, Department of Agriculture, Health and Human Services, Housing and

Urban Development, Bureau of Labor Statistics, Florida Department of Children and Families, and other national, state, and local resources. A complete list of resources is included in Appendix 1 of the Community Needs Assessment.

Define Your Community Needs Assessment Process:

1. How do you conduct your needs assessments? *(In this section please indicate the methods and strategies used by the agency to identify and assess CSBG-related family and community-level needs. Describe any intensive or “non-routine” needs assessment activities undertaken in preparation for the program year.)*

We partnered with the United Way and the Charlotte Community Foundation to conducted our year-long needs assessment. We also utilized the services of an AmeriCorps Vista member.

2. How is your CNA data coordinated with other needs assessment data within your agency? *(Indicate how the collection and assessment of family and community-level needs data is coordinated on an agency-wide or organization-wide basis.)*

869 clients of various human service agencies, including our own, were surveyed about their needs within the community. The information gleaned from the surveys gave us valuable insight into the gaps in programs or services in Charlotte County.

3. How is your CNA data coordinated with other needs assessment data within the community? *(Indicate how the collection and assessment of family and community-level needs data is coordinated with other community stakeholders collecting and analyzing similar data.)*

One of our greatest successes to date has been the collaboration between community partners. In addition to avoiding duplication of efforts and utilizing scarce resources more efficiently, collaboration has allowed us to enhance existing programs in our community and seek joint funding opportunities. The 10-Year Plan to Prevent and End Homelessness and the Community Health Improvement Plan are two examples of our successful joint efforts.

4. Identify existing gaps or unmet needs identified through the CNA. Explain how your agency plans to work towards reducing these gaps.

The Community Needs Assessment identified key community needs in six categories: education, employment, family services, health, poverty, and transportation. Where gaps exist, our agency is involved in advocating for new programs and services. We also maintain a robust information and referral service, known as 2-1-1, that helps individuals, families, and other agencies access community resources.

Describe the findings and results of your Community Needs Assessment

Top Five Needs	Agency Priority (Yes/No)	Description of programs/services /activities	Coordination	NPIs
1. Increase access to safe and affordable housing for the homeless and at-risk for homelessness population.	Yes	Homeless prevention and rapid re-housing services are provided for families through the Emergency Solutions Grant. Services include rent and relocation assistance, eviction mitigation, utility deposit assistance, and case management.	Receives referrals from Charlotte County Public Schools Homeless Families liaison, the Charlotte County Homeless Coalition, and other community agencies.	1.2H 6.2B 6.4G
2. Increase opportunities for short-term financial assistance and financial self-reliance to help break the cycle of poverty.	Yes	The Family Self-Sufficiency Program provides short-term financial assistance through employment and educational opportunities. Services include case management and life skills training, child care and transportation assistance, and financial literacy.	Develops a wraparound case management approach by collaborating with workforce development agencies, post-secondary institutions, Early Learning Coalition, and the business community.	1.1A 1.1B 1.1C 1.1D 1.2A-L 1.3D
3. Reduce crime rates and deter juvenile delinquency.	Yes	The Civil Citation Program allows law enforcement officers the opportunity to write citations rather than arrest youth for minor misdemeanor offenses, thereby giving youth a second chance through the evidence-based model of Restorative Justice.	Promotes awareness and utilization of the program with schools and law enforcement agencies. Tracks and reports outcomes to them and the Department of Juvenile Justice and State Attorney's Office.	6.3G

Top Five Needs	Agency Priority (Yes/No)	Description of programs/services /activities	Coordination	NPIs
4. Increase access to quality, affordable child care services.	Yes	<p>The Family Self-Sufficiency Program provides daycare assistance and before/after school childcare assistance to eligible clients. It also links families with services needed to support their children’s healthy development. Entry into Head Start (age 4) and Early Head Start (birth to age 3) helps low-income children achieve learning gains in literacy, math and school readiness. Involvement in youth programs outside of school provides a safe place to learn and grow.</p>	<p>Works with Charlotte County Public Schools, Early Learning Coalition, Department of Children and Families, Boys and Girls Club, and the local YMCA to build a foundation for success through quality, comprehensive, community and school-based programs.</p>	<p>1.2D 1.2E</p>
5. Improve academic success rates.	Yes	<p>In January 2014, community members and organizations gathered to hear a report of the Developmental Assets Survey given to 2,577 high school teens in Charlotte County during the previous August. This survey provides metrics on the 40 developmental assets that are the basic building blocks to help children and youth thrive and have a healthy development. As a result of subsequent Youth Summits, Charlotte County Voice of Local Teens (CCVOLT) emerged to help teens implement some of the action ideas that support positive youth development.</p>	<p>Contracted with the Search Institute and Charlotte County Public Schools in 2013 to conduct the survey and Drug Free Charlotte to conduct annual Youth Summits in 2014 and 2015. Through the Children’s Services Council, community leaders provided guidance and support to local youth.</p>	<p>6.3F</p>

Service Delivery System

Describe the overall Service Delivery System for services provided with CSBG funds and describe how the CAAs services enhance and/or differ from those offered by other providers, i.e. bundled services—please include specific examples.

1. Describe the agency’s service delivery system for services provided using CSBG funds. Please include when and how clients enter into your program.

CSBG funds are primarily used for the Family Self-Sufficiency Program (FSSP). The Charlotte County FSSP is designed to offer services to motivated, low-income participants. The overarching goal of the program is to enable families to become self-sufficient, reach their full potential, improve the quality of their lives, and become stakeholders in their community. Participants may be self-referred or referred by community partners and are screened for income eligibility and readiness to adhere to program goals.

2. How do your services/programs differ from those of other providers?

The FSSP is the only one of its kind in our community. It is based on a case management model that provides comprehensive services geared toward helping clients achieve self-sufficiency. Case planning is individualized and determined based upon a thorough assessment of eight key areas: income, employment, housing, education, transportation, child care, access to health care, and nutrition.

3. List your agencies programs/services/activities funded by CSBG, including a brief description, why these were chosen, how they relate to the CNA, and indicate the specific type of costs that CSBG dollars will support (examples: staff salary, program support, case mgmt., T/TA, etc).

Our programs and services were chosen based on agency capacity and resources, as well as community need. By addressing some of the root causes of key issues identified through the CNA, we can provide social and financial supports that improve quality of life indicators for our vulnerable populations. CSBG dollars fund staff salaries, training, case management, and direct client services. These services include:

- Asset Development
- Child Care Scholarships
- Educational Supports
- Financial Literacy
- Information and Referral
- Rental and Mortgage Assistance
- Transportation Assistance

Strategic Plan

1. Describe your agency's strategic planning process, including how often it occurs, how you use the needs assessment data, and the approval process of the tripartite board.

Charlotte County has a two-year budget and planning cycle. Every two years that process begins with the Charlotte Board of County Commissioners (BCC) updating their strategic focus areas and developing their strategic plan for the next two to five years. In January and February of 2015, the BCC met to discuss and establish long-range outcomes as well as specific initiatives for the next two to five years. The Human Services Department then updated its strategic plan accordingly.

The agency strategic plan is a drill-down approach that integrates the needs assessment data with the CSBG Work Plan. It aligns with the Charlotte County and Human Services Department strategic plans and is updated annually. Copies of the Family Services Strategic Plan are distributed to the tripartite board members prior to the quarterly meeting and adoption of the plan is voted upon for approval.

2. As part of your strategic plan describe outcomes your agency will use to monitor success, how they tie to your mission, vision, CNA and the NPIs.

The agency's mission is to improve the quality of life by connecting Charlotte County residents with supportive programs and services through community partnerships, advocacy, and information. It utilizes the CNA to identify key quality of life indicators and a root cause analysis to determine the underlying cause of community issues. The National Performance Indicators help us focus in on desirable outcomes and set specific, measurable, achievable, realistic, and time-bound objectives. The agency's vision helps guide the process.

The Community Needs Assessment identified key community needs in six categories: education, employment, family services, health, poverty, and transportation. The following goals reflect service delivery areas our agency is able to support under the broader umbrella of Public Safety, Economic Development, and Health and Human Services.

Focus Area 1: Homeless Prevention and Housing Stabilization

Strategy: Affordable housing is very scarce in Charlotte County; therefore, we aim to increase available housing options by making our clients more desirable tenants to landlords and property managers.

- Goal 1: By January 31, 2016, implement a new system to include a participant agreement for minimum housekeeping standards and monthly home inspections by case manager.
- Goal 2: By June 30, 2016, distribute satisfaction survey to landlords and property managers and receive a minimum percentage of 70% yes responses to the statement, "I would lease my property to a client in your program again."

Focus Area 2: Economic Self-Sufficiency

Strategy: Individuals who grew up in generational poverty struggle with functioning effectively in the middle class environment of education and employment. With the right tools, we can help clients learn to understand and adopt successful life strategies to end the cycle of poverty.

- Goal 1: By April 30, 2016, a minimum of one Family Services staff and one community partner will receive facilitator training for the Bridges Out of Poverty program, *Getting Ahead in a Just Getting by World*.
- Goal 2: By June 30, 2016, the first workshop series for Family Self-Sufficiency clients will be held.

Focus Area 3: Juvenile Diversion

Strategy: Having a criminal record severely limits a youth's educational and employment opportunities. Referral into the Civil Citation Program rather than arrest reduces the negative impact of delinquency so youth have the opportunity to succeed in life and become stakeholders in their community.

- Goal 1: Beginning August 2015, increase the percentage of eligible youth who receive a Civil Citation from an average of 30% to 35% for a rolling three-month period.
- Goal 2: Achieve and maintain a successful completion rate of 90% for youth enrolled in the Civil Citation Program.

Focus Area 4: Child Care

Strategy: The high cost of child care was one of the biggest barriers to economic self-sufficiency according to the Community Needs Assessment. If we reduce or eliminate this barrier by assisting with child care costs, our low-income families can obtain employment and/or seek post-secondary education.

- Goal 1: By September 30, 2016, enroll a minimum of eight children in before or after school programs.
- Goal 2: By September 30, 2016, maintain the percentage of low-income participants who are unemployed and get a job as a result of child care assistance at 100%.

Focus Area 5: Asset Development

Strategy: Youth with high asset levels are less likely to engage in high-risk behaviors (such as violence, sexual activity, drug use, and suicide), and more likely to engage in thriving behaviors (such as helping others, doing well in school, and taking on leadership roles). High asset levels directly correspond to higher graduation rates.

- Goal 1: By April 30, 2016, a minimum of 128 youth will participate in a planning process that provides input on community improvement initiatives for local teens.
- Goal 2: By May 31, 2016, youth will develop and deliver a presentation to the Board of County Commissioners about the annual Youth Summit activities and outcomes.

Linkages and Funding Coordination

1. Describe the process utilized by your agency to link services and coordinate funding in your service area.
 - a. Indicate how staff was involved, i.e. attended community meetings, I&R, etc.
 - b. Describe how services are targeted to low income individuals and families.
 - c. Describe how linkages will be developed to fill identified gaps in services.

Our agency utilizes information obtained from the Community Needs Assessment to link services and coordinate funding in our service area. Our staff was heavily involved in the assessment as Human Services was a major partner and participant of the CAN Steering Committee. We facilitated the community conversation and served as subject matter experts in focus area discussions.

Services provided by our agency are targeted to low-income individuals and families throughout Charlotte County. The Community Action Agency Advisory Board (CAAAB) brings together representatives of low-income residents to ensure they have a voice in how funding is coordinated and which services are needed to fill identified gaps. Where gaps exist, we work with our partner agencies to develop initiatives and advocate for new programs. We also work with our United Way to ensure funding priority is given to areas with a defined gap in service.

The CAAAB has designated priority neighborhoods most in need of our programs and services. We do extensive outreach in these priority neighborhoods to increase awareness about the availability of services and to increase enrollment in programs that are appropriate for client needs. We have a satellite office at the opposite end of the county and we educate our clients on the use of our transit system to ensure access to services is available for the transportation disadvantaged.

2. Explain if there is a formalized coalition of social service providers in your service area. If so list the coalitions by name, describe the mission of the coalition, who participates, and methods used by the coalition to coordinate services/funding.

The Charlotte County Homeless Coalition works diligently in our community to build agency partnership agreements with other organizations to meet the mental health, substance abuse, trauma care, physical health, and other social service needs of our clients. It is the lead agency for the Continuum of Care in Charlotte County. The Coalition organizes the collaboration of 65 local agencies to address the needs of clients and provide essential services.

Partners from the United Way, the Community Foundation, Human Services and the Health Department have begun the first planning stage of developing a unified Charlotte County Master Plan. The Plan will bring together strategic plans and needs assessments from Health and Human Services organizations throughout Charlotte County for one cohesive and unified vision.

3. Provide information on any memorandums of understanding and/or service agreements your agency has with other entities regarding coordination of services/funding.

We have a formalized memorandum of understanding (MOU) with the Southwest Florida Workforce Development Board Inc., d.b.a. CareerSource Southwest Florida. CareerSource administers state and federal funding to deliver a variety of employment and training programs.

We have an MOU with these utility companies: Florida Power and Light, Lee County Electric Cooperative, TECO Peoples Gas, and Amerigas.

We have funding agreements in place with the Department of Juvenile Justice, the Department of Children and Families, and the Department of Economic Opportunity so that we may deliver programs and services to the community. We also have a service provider agreement in place with Drug Free Charlotte County, a non-profit, anti-drug community coalition that is responsible for most of the Youth Summit activities via the Invest in Children Grant.

4. Identify the organizations with which your agency partners with to provide coordinated services to clients. List the following per organization:
 - Organization Name
 - Address
 - Services Area
 - Type of Agency (local government, hospital, non-profit, faith based, etc)
 - Coordinated service provided

Please see **Appendix C** for our list of Community Partners.

Tripartite Board of Directors

1. What is the total number of Board members as stated by your Bylaws?

There are twelve (12) Board members as stated by our Bylaws. The Board is comprised of representatives from the elected public, private, and low-income sectors.

2. Provide the names and addresses of all board of director members by sector in the chart below. If an elected official has selected a designee, please list the designee's name and address and identify the elected official represented. Reference the CSBG Field Monitoring Manual, Effective October 1, 2015, Part 3.3 for a representative template and minimum required information to be included in the roster. Be sure your roster includes all current members, by sector, as well as identifying the current officers.

Please see **Appendix D** for the names and addresses of all Board members.

3. If the total number of members on this list differs from your bylaws, please complete the Vacancy Resolution Plan, identifying by position, the date the position(s) was vacated, the estimated date the position will be filled, the reason for each vacancy, and the actions being taken to fill the vacancy

N/A

	Date position was vacated	Estimated date position will be filled	Reason for vacancy	Actions being taken to fill vacancy
Elected Public Officials				
Low-Income Representatives				
Private Sector Representatives				

Grantee Bylaws

Provide a copy of the current Grantee Bylaws and other governing policies (if applicable). Please see **Appendix E**.

Date: 01/23/2014

(Enter the month/year when the Bylaws were approved by the tripartite board)

Grantee Agency-Wide (or Department-Wide) Organizational Chart

Provide a copy of your agency-wide organizational chart.

Please see **Appendix F for our** Human Services Department Organizational Chart.

Grantee Agency-Wide (or Department-Wide) Budget

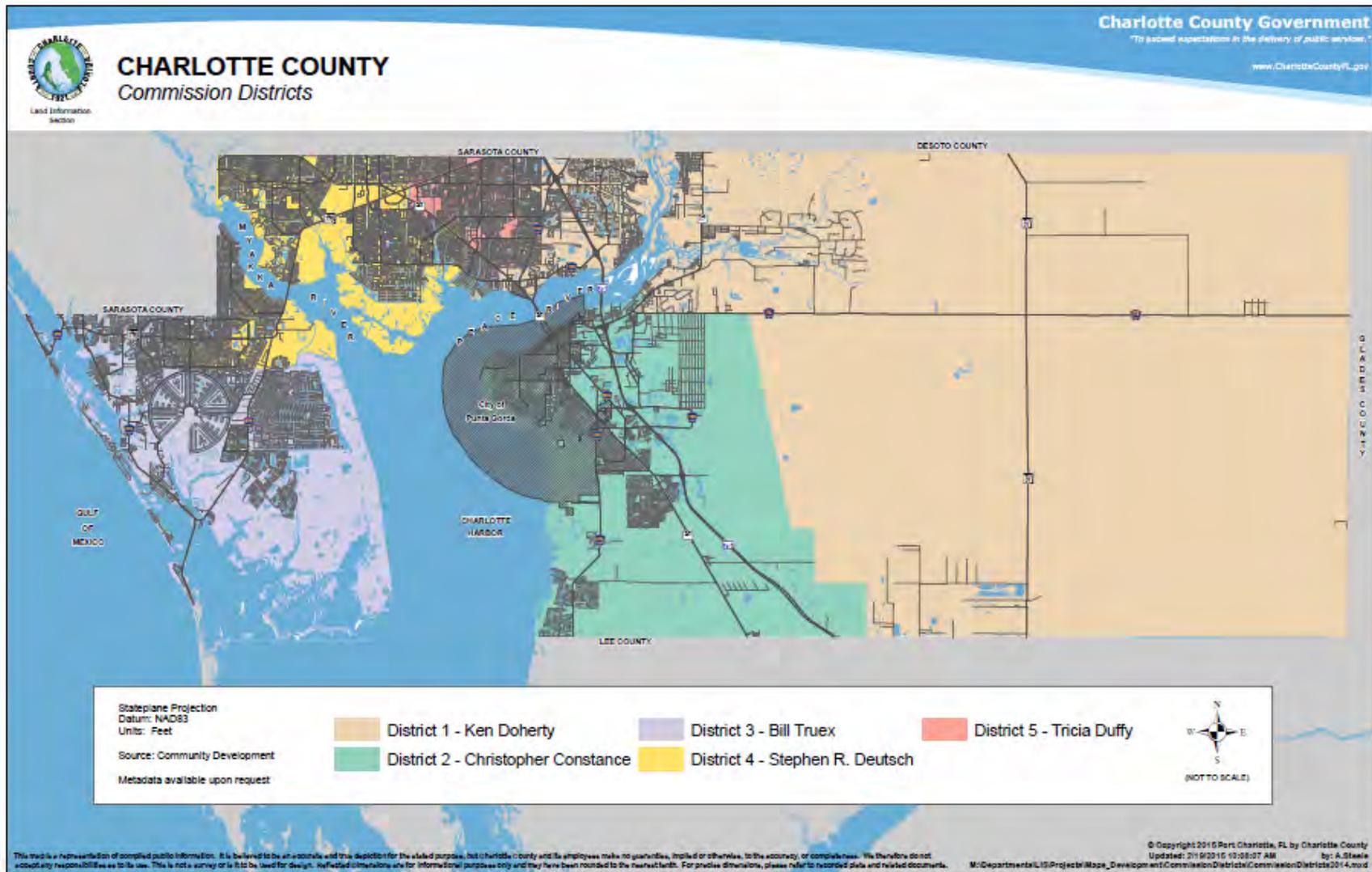
Provide a copy of your current agency-wide budget. Identify which fiscal year is covered.

Please see **Appendix G**.

Federal Assurances and Certification

Public Law 105-285, s. 676 (b) establishes federal assurances eligible entities are to comply with. DEO, in its state plan submission, provides a narrative describing how the eligible entities in Florida will comply with the assurances. By completing and submitting this Community Action Plan, your agency certifies that it will comply with all Federal Assurances, the annual DEO Federally Funded Subgrant Agreement, and any other laws, rules, and statutes in the performance of the activities funded through this grant.

Appendix A: Geographic Service Area Map



CHARLOTTE COUNTY COMMUNITY NEEDS ASSESSMENT 2013

Prepared by
United Way of Charlotte County,
Charlotte County Human Services,
and Charlotte Community Foundation

TABLE OF CONTENTS

Figures	iii
Acknowledgements	ix
Executive Summary	1
Introduction	11
Section 1: Education	17
Section 2: Employment.....	31
Section 3: Family Services	43
Section 4: Health	55
Section 5: Poverty	69
Section 6: Transportation	81
Conclusion.....	91
References.....	95
Appendices	
Appendix 1: Additional Data.....	105
Appendix 2: Human Services Agency Survey	115
Appendix 3: Human Services Clientele Survey	141
Appendix 4: Community Conversation.....	153

(this page intentionally left blank for two-sided reproduction)

FIGURES

Introduction

Figure A: Charlotte County Total Population	13
Figure B: Charlotte County Population by Race	13
Figure C: Charlotte County Population by Ethnicity	14
Figure D: Charlotte County Population by Age.....	14
Figure E: Educational Attainment: Population Ages 25 and Older.....	15
Figure F: Percentage of Population Below Poverty.....	16

Section 1: Education

Figure 1.1: Poverty Rate by Educational Attainment (Population Ages 25 and Older).....	18
Figure 1.2: VPK Enrollment	19
Figure 1.3: Kindergarten Readiness: 2011-2012	20
Figure 1.4: Charlotte County Public Schools Student Enrollment.....	21
Figure 1.5: Charlotte County Public Schools Enrollment by Grade	21
Figure 1.6: Percentage of Students At Risk For Academic Failure	23
Figure 1.7: High School Drop Out Rates	24
Figure 1.8: High School Graduation Rates	24
Figure 1.9: Educational Attainment: Population Ages 18 to 24	26
Figure 1.10: Educational Attainment: Population Ages 25 and Older.....	26
Figure 1.11: ACT Scores	27
Figure 1.12: SAT Scores.....	28
Figure 1.13: Advanced Placement.....	28

Section 2: Employment

Figure 2.1: Unemployment Rate.....	33
Figure 2.2: Poverty as a Percentage of the Population.....	34
Figure 2.3: Household Income	34
Figure 2.4: Median Household Income	35
Figure 2.5: Household Income Sources	35
Figure 2.6: Charlotte County Population Projection: 2010-2020.....	36
Figure 2.7: Charlotte County Employment by Industry: 2011	38
Figure 2.8: Job Growth by Industry: Workforce Region 24, 2012-2020	39
Figure 2.9: Fastest Growing Occupations, 2012-2020: Workforce Region 24.....	40

Section 3: Family Services

Figure 3.1: Child Abuse	44
Figure 3.2: Adult Domestic Violence	45
Figure 3.3: Referrals to the Department of Juvenile Justice	46
Figure 3.4: 2011-12 Offenses by Age Group.....	47
Figure 3.5: Youth Drug and Alcohol Offenses.....	47
Figure 3.6: Youth Who Have Used Drugs or Alcohol During Their Lifetime.....	48
Figure 3.7: Extra Curricular Participation: 2012	49
Figure 3.8: Disabilities: Population Ages 65 and Older.....	53
Figure 3.9: Medical Facilities	53

Section 4: Health

Figure 4.1: Screenings and Treatment (2010)	56
Figure 4.2: Adults Who Could Not See a Doctor in the Past Year Because of Cost	57
Figure 4.3: Adults with Any Type of Insurance	58
Figure 4.4: Uninsured Population: 2011	58
Figure 4.5: Medicaid Eligibility by Age: May 2013.....	59
Figure 4.6: Medicare Enrollment: 2011.....	59
Figure 4.7: Availability of Facilities	60
Figure 4.8: Availability of Providers	60
Figure 4.9: Births to Unwed Mothers: 2009-2011	61
Figure 4.10: Infant Deaths	62
Figure 4.11: Prenatal Care: 2009-2011	62
Figure 4.12: Percentage of Population with Disabilities by Age.....	66
Figure 4.13: Adults Receiving Necessary Social and Emotional Support: 2010.....	67

Section 5: Poverty

Figure 5.1: Poverty Rates by Age	70
Figure 5.2: Poverty in Families.....	70
Figure 5.3: Median Cost of Housing	71
Figure 5.4: Housing as a Percentage of Income: Percentage Paying Over 30% AMI	72
Figure 5.5: Housing Costs for Homeowners with Less than \$50,000 in Household Income	72
Figure 5.6: Point-In-Time Count, 2013: by Gender	74
Figure 5.7: Point-In-Time Count, 2013: by Age.....	74
Figure 5.8: Point-In-Time Count, 2013: Cause of Homelessness	75
Figure 5.9: Food Stamp/SNAP Participation.....	76
Figure 5.10: Free or Reduced Lunch by School: 2011-2012	78

Section 6: Transportation

Figure 6.1: Cars per Household.....	83
Figure 6.2: Means of Transportation to Work.....	84
Figure 6.3: Means of Transportation: Human Services Clientele	85
Figure 6.4: Rides and Operational Costs.....	88

APPENDICES

Appendix 1: Additional Data

Figure 1.A: Poverty Rate by Educational Attainment: Florida	106
Figure 1.B: Poverty Rate by Educational Attainment: United States	106
Figure 1.C: Florida Public Schools Enrollment	107
Figure 1.D: Chronic Absenteeism: 21 Days or More	107
Figure 1.E: Chronic Absenteeism by School: Charlotte County	108
Figure 1.F: Overall School Attendance Rate: Grades 1 – 12	108
Figure 1.G: Educational Attainment: Population Ages 18 to 24: Florida.....	109
Figure 1.H: Educational Attainment: Population Ages 18 to 24: United States.....	109
Figure 1.I: Educational Attainment: Population Ages 25 and Older: Florida.....	110
Figure 1.J: Educational Attainment: Population Ages 25 and Older: United States.....	110
Figure 1.K: Labor Force: Charlotte County	110
Figure 1.L: 2013 Poverty Guidelines for the 48 Contiguous States and the District of Columbia	111
Figure 1.M: 2011 Household Income: Florida	111
Figure 1.N: 2011 Household Income: United States	111
Figure 1.O: 2011 Employment by Industry: Florida.....	112
Figure 1.P: Poverty by Age: Florida	112
Figure 1.Q: Poverty by Age: United States	113
Figure 1.R: 2013 Fair Market Rents by Unit Bedrooms: Charlotte County	113
Figure 1.S: 2013 Income Limits by Family/Household: Charlotte County.....	113

Appendix 2: Agency Survey

Figure 2.A:	Which of the following best describes your agency?	116
Figure 2.B:	Does your agency currently receive funding from the United Way of Charlotte County?	116
Figure 2.C:	What is the focus of your organization’s role in the services that you provide to the community? (Select all that apply)	117
Figure 2.D:	Approximately how many clients (unduplicated) does your organization directly serve on an annual basis?	117
Figure 2.E:	What percentage of your clients live in Charlotte County?	118
Figure 2.F:	Which of the following Charlotte County zip codes are represented by your clientele? (Select all that apply).....	118
Figure 2.G:	What percentage of your clientele are:	119
Figure 2.H:	In the past year, how many clients did your organization serve in each of the following groups?	119
Figure 2.I:	In the past year, how many of your organization’s clients were members of the following racial/ethnic groups?	120
Figure 2.J:	Do your clients utilize the following resources? (Select all that apply)	120
Figure 2.K:	What is the average annual household income of your agency’s clientele?	121
Figure 2.L:	Which of the following best describes your typical client’s employment status?	121
Figure 2.M:	If you selected, “Not employed, looking for work,” or “Not employed, NOT looking for work” in the previous question, on average, how long have your clients been unemployed?	122
Figure 2.N:	On average, how many jobs have your clientele held over the past 2 years?	122
Figure 2.O:	On average, what is the highest level of education obtained by your clientele?	123
Figure 2.P:	What percentage of your clientele possess the following skill sets/work experience?.....	123
Figure 2.Q:	What percentage of your clientele have the following living arrangements?	124
Figure 2.R:	What percentage of your clientele have access to the following means of transportation?.....	124
Figure 2.S:	What percentage of your clientele have access to the following forms of healthcare?	125
Figure 2.T:	What percentage of your clientele have the following disabilities?.....	125
Figure 2.U:	Which of the following sectors does your agency provide services? (Select all that apply)	126
Figure 2.V:	Describe your agency’s targeted population(s). (Select all that apply).....	126
Figure 2.W:	What eligibility requirements must clients meet to receive services? (Select all that apply)	127
Figure 2.X:	What is the maximum number of clients your agency currently has the capacity to directly serve on an annual basis?	127
Figure 2.Y:	Over the past year, how has your number of clients changed?	128

Figure 2.Z:	Indicate the direct services that your organization (or department) provides, where at least 20% of budget resources are used: HUMAN SERVICES	129
Figure 2.AA:	Indicate the direct services that your organization (or department) provides, where at least 20% of budget resources are used: EDUCATION	130
Figure 2.BB:	Indicate the direct services that your organization (or department) provides, where at least 20% of budget resources are used: EMPLOYMENT/VOCATIONAL TRAINING.....	130
Figure 2.CC:	Indicate the direct services that your organization (or department) provides, where at least 20% of budget resources are used: HEALTH	131
Figure 2.DD:	Does your agency track the outcome of clients?	132
Figure 2.EE:	Do you feel your organization is able to serve all who seek assistance?	132
Figure 2.FF:	Do you feel your organization is referring those individuals you cannot serve to other agencies?	133
Figure 2.GG:	Do you feel your organization is turning people away in need of services without referring individuals to other agencies?	133
Figure 2.HH:	Does your organization maintain a waiting list?	134
Figure 2.II:	If "yes," how many have been on the list within the last 12 months?	134
Figure 2.JJ:	Which of the following statements best matches your organization's situation right now?	135
Figure 2.KK:	What types of funding resources does your agency use?.....	135
Figure 2.LL:	Based on your agency's annual budget, what percentage of the total budget comes from the following?	136
Figure 2.MM:	Approximately what percentage of your organization's budget resources are used in the following categories?.....	136
Figure 2.NN:	What is the extent of your organization's involvement with each of the following service providers/organizations within the past 12 months?.....	137
Figure 2.OO:	Does your organization provide the following support services to help clients better access your services?	138
Figure 2.PP:	In your opinion, how can unmet needs in the community best be resolved?	139
Figure 2.QQ:	What would you recommend to create systemic change for the most impact regarding direct services provided throughout the entire community? (Select up to three)	140

Appendix 3: Clientele Survey

Figure 3.A: Are you...?	142
Figure 3.B: Where do you live?	142
Figure 3.C: How old are you?	143
Figure 3.D: Which race/ethnicity best describes you?	143
Figure 3.E: What is the highest level of education you have completed?	144
Figure 3.F: Which of the following best describes your employment status?	144
Figure 3.G: Which of the following best describes your current living arrangement?	145
Figure 3.H: Which of the following best describes your mode of transportation?	145
Figure 3.I: Do you have health insurance?	146
Figure 3.J: If you have children under the age of 18, do you have access to affordable childcare?	146
Figure 3.K: Please tell us, in your opinion, which services are needed the most by assigning each one a score of 1 to 5, where 1 is the lowest priority and 5 is the highest: HUMAN SERVICES	147
Figure 3.L: Please tell us, in your opinion, which services are needed the most by assigning each one a score of 1 to 5, where 1 is the lowest priority and 5 is the highest: CHILD/YOUTH DEVELOPMENT	148
Figure 3.M: Please tell us, in your opinion, which services are needed the most by assigning each one a score of 1 to 5, where 1 is the lowest priority and 5 is the highest: EMPLOYMENT/PERSONAL FINANCE	149
Figure 3.N: Please tell us, in your opinion, which services are needed the most by assigning each one a score of 1 to 5, where 1 is the lowest priority and 5 is the highest: HEALTH	150
Figure 3.O: Have you ever used 2-1-1 to find a local human service provider?	151

ACKNOWLEDGEMENTS

United Way of Charlotte County

The United Way of Charlotte County works to solve the most critical problems facing our community. We take a four-pronged approach to solving these obstacles: Working with hundreds of community partners, we assess the need, develop strategies to address the top priority issues, mobilize partners and resources to implement the plan, and measure our results so that our impact can be reported to the community. United Way advances the common good by creating opportunities for a better life for all. Our focus is on education, resources and health—the building blocks for a good quality of life.



United Way of Charlotte County

Our role in this study has been one of facilitation and support by providing a full time project manager. Allison Tyler, through the AmeriCorps VISTA program, has coordinated this extensive effort for the duration of the project. Allison completed her bachelor's degree in International Relations from Samford University, and her master's degree in International Affairs from the University of Georgia. Upon completion of this project she has accepted a full time position as the Community Needs Director at the United Way.

www.unitedwayccfl.org

Charlotte County Human Services

The mission of Charlotte County Human Services is to identify community needs and services, seek and utilize resources to satisfy unmet needs, and build community partnerships. Also, provide, coordinate and evaluate programs and services. Provide information, education and outreach to the public, and advocate on behalf of those who are most in need and vulnerable. Through its five divisions, Charlotte County Human Services makes family support programs and services readily available to all families, administers funds available for affordable housing initiatives, provides numerous services and programs for senior citizens, operates public transportation and transportation for the disadvantaged and assists veterans in applying for and obtaining benefits and services.



The Charlotte County Board of County Commissioners has established Human Services as one of their focus areas with the goal of providing services to meet community needs. In support of this focus area the staff of the Human Services department provided leadership, content and assistance with the development of this document. Additionally, the department received support from both the Land Information Systems Division of Charlotte County Community Development and the GIS Division of Charlotte County Information Technology in the development of the asset mapping project.

www.charlottecountyfl.gov/dept/humanservices/Pages/default.aspx

ACKNOWLEDGEMENTS *(CONT.)*

Charlotte Community Foundation

Participation in the Charlotte County Needs Assessment is an important way that the Charlotte Community Foundation (CCF) is advancing information and knowledge about needs in the area so unmet needs can be effectively addressed.

It is the mission of the Foundation to enhance the quality of life in Charlotte County and advance the common good by nurturing a giving community and by connecting people who care with causes that matter.

The Foundation's Nonprofit Network's most fundamental purpose is to serve as a catalyst to improve the capacity and effectiveness of local nonprofit organizations in meeting the needs of the area. A key value is to foster collaboration with other organizations to address emerging community needs.

CCF is grateful for the opportunity to effectively collaborate to bring this important information and resource to the community so quality decisions can be made leading to desirable outcomes. The Nonprofit Network's staff has been a partner in the development of the concept and work products of this assessment. CCF funded the production of the needs assessment report.

www.charlottecommunityfoundation.org



EXECUTIVE SUMMARY

Charlotte County Community Needs Assessment 2013

Prepared by United Way of Charlotte County, Charlotte County Human Services and the Charlotte Community Foundation



Photo provided by Charlotte Harbor Visitor & Convention Bureau

In August of 2012, United Way of Charlotte County, Charlotte County Human Services and the Charlotte Community Foundation partnered to conduct a community needs assessment. The partnership was formed after the three agencies noticed an increase in needs, particularly since the economic recession began.

A comprehensive study, such as this one, has not been conducted in more than 10 years. In that time Charlotte County was devastated by, and recovered from Hurricane Charley, and has been affected by the worst economic downturn since the Great Depression. With that comes a loss of jobs in the community, in particular the construction industry, and an increase in those living at or below the poverty line.

The purpose of this study was to help identify the most significant needs within the community and to identify the gaps in services that are currently being offered. At a time when funding cuts are the norm, it is crucial that the resources available are directed towards the community's greatest needs and towards programs that will have the greatest impact on all citizens.

We anticipate the community-at large will benefit from this study because:

Gaps in human services will be more easily addressed.

Potential community partnerships will be more easily identified and developed.

Service agencies will be able to utilize this information when applying for and awarding grants.

Policy makers will be able to utilize this information when requesting federal funding and making local decisions.

Needs in the community will be more easily prioritized.

The community will be more informed.

This summary provides a brief overview of the research methodology, findings and recommendations for moving forward.

ABOUT THE COMMUNITY AND THE RESEARCH

The Charlotte County Community

Charlotte County is located on Southwest Florida's Gulf Coast and borders Sarasota and DeSoto Counties to the north, Glades County to the east, and Lee County to the south. Punta Gorda is the only incorporated city in the county.

Charlotte County has grown significantly over the past twenty years. During the 1990s, the county grew by 27.62% and an additional 12.96% during the 2000s, bringing its 2010 population to 159,978 people. Growth is expected to continue over the next decade. The population remains predominantly white (90.05%), but the black population has grown by 46% and the Hispanic population has grown by 97% over the past decade. The county continues to be predominantly a retirement community with the nation's second largest population over the age of 65.

The county continues to have lower levels of educational attainment than state and national averages. Only 19.3% of the adult population has a bachelor's degree or higher. The recession has left 11.9% of the county's population in poverty.

The Community Needs Assessment

The purpose of this study is designed to identify pressing needs in the community. Its intent is to identify areas that need to be addressed to improve the lives of residents and is in no way meant to detract from the effective programs and services that are being provided. The objective is to strengthen and inform the many organizations that work to advance the standard of living for Charlotte County citizens. To achieve this, the research team utilized a multi-faceted approach that focused on six key human service issue areas: Education, Employment, Family Services, Health, Poverty and Transportation.

The components of the study included statistical data collected from sources including the United States Census Bureau's *Decennial Census* and *American Community Survey*, the United States' Departments of Agriculture, Health and Human Services, Housing and Urban Development, and Bureau of Labor Statistics, Florida's Departments of Children and Families, Economic Opportunity, Education, and Health, as well as other national, state and local resources; a survey of local and regional human service agencies; a survey of the clientele using the services provided by these agencies, and a Community Conversation that was open to the community at-large.



KEY COMMUNITY NEEDS

The opportunities identified in this study are based on several key findings about the needs of the Charlotte County community. The opportunities are grouped by the six key human service issue areas. It became apparent during this study that while the needs identified within each human service issue area are necessary for everyone, they are even more crucial for an individual or family living in poverty, as it can be both a cause and an effect of other human service needs.

Education

- ◆ Support early childhood development and kindergarten readiness initiatives.
- ◆ Support Charlotte County Public Schools initiatives for academic success. High percentages of students receiving free and reduced lunches, low test scores and chronic absenteeism are indicators of students at risk of academic failure.
- ◆ Increase opportunities and reduce barriers at the high school level so that students can continue their education.

Employment

- ◆ Encourage educational attainment beyond high school to meet the growing needs for a high skilled workforce.
- ◆ Diversify the local economy.

Family Services

- ◆ Use the results of the Developmental Assets survey to further support youth development activities in Charlotte County.
- ◆ Increase education and awareness about youth and adult domestic and substance abuse.
- ◆ Increase affordability and decrease barriers of youth extra curricular programs.
- ◆ Increase capacity and availability of quality diversion programs for juvenile offenders.
- ◆ Improve the availability and capacity of services for Charlotte County's large but varied senior population.

Health

- ◆ Attract more physicians to Charlotte County and increase the number of Medicaid and Medicare providers to meet the needs of the population.
- ◆ Increase availability of and support existing efforts to provide affordable health care services.
- ◆ Support services that increase access to prenatal care to promote positive birth outcomes.

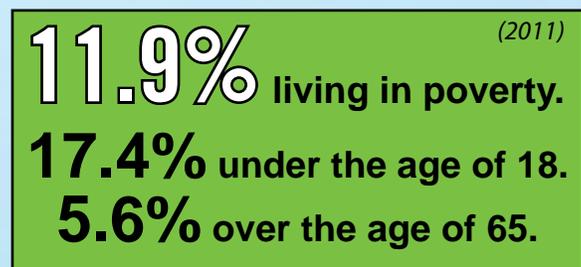
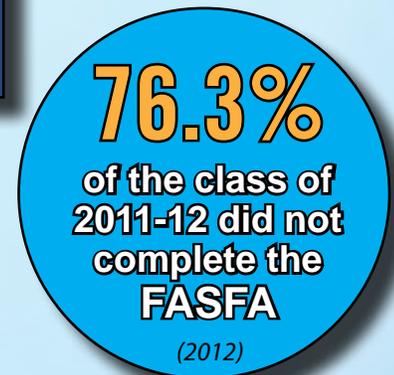
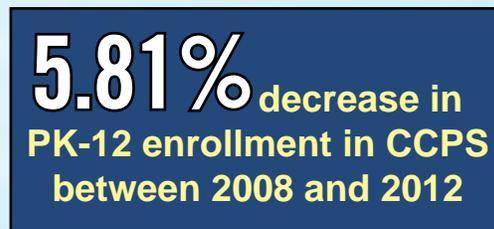
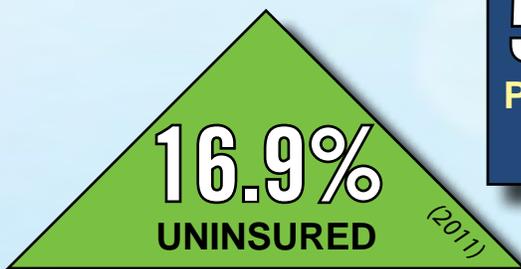
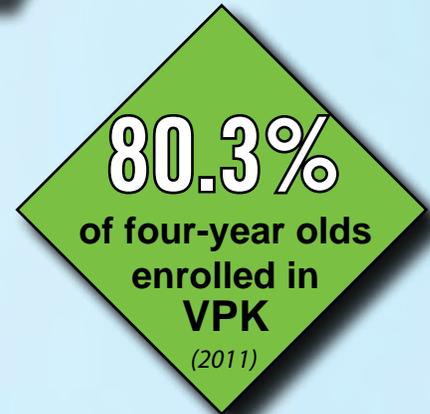
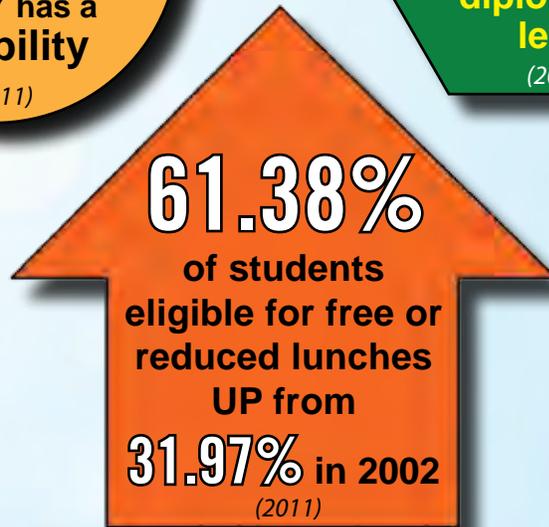
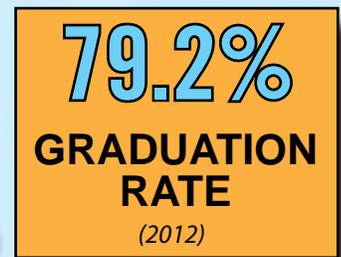
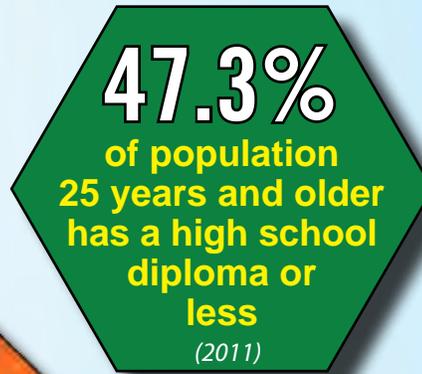
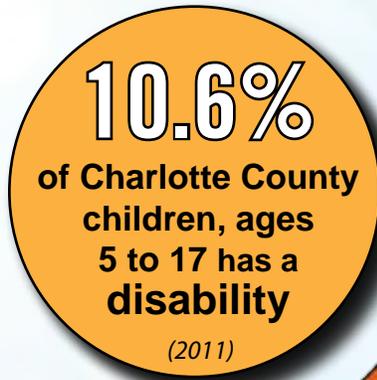
Poverty

- ◆ Explore best practices and innovative solutions for affordable housing in Charlotte County.
- ◆ Increase access to emergency shelter and transitional housing for the homeless population.
- ◆ Increase access to quality affordable childcare services.
- ◆ Increase opportunities for short-term financial assistance and financial self-reliance to help break the cycle of poverty.
- ◆ Support coordinated efforts among local food pantry providers to improve the services between providers addressing food needs.

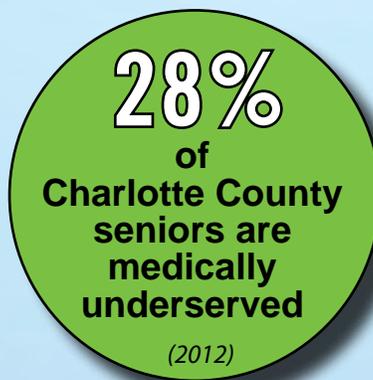
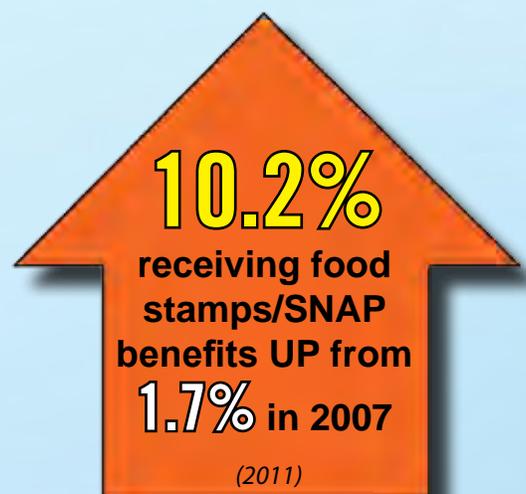
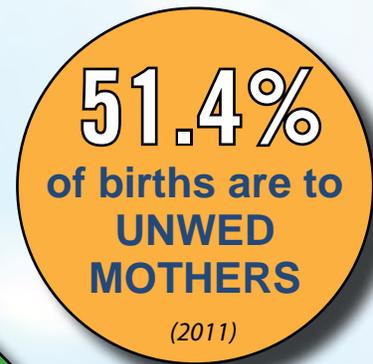
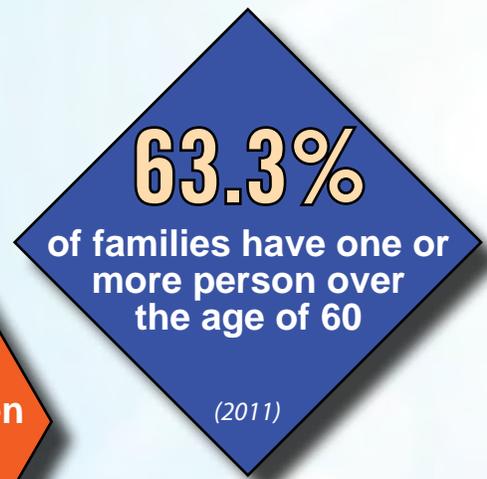
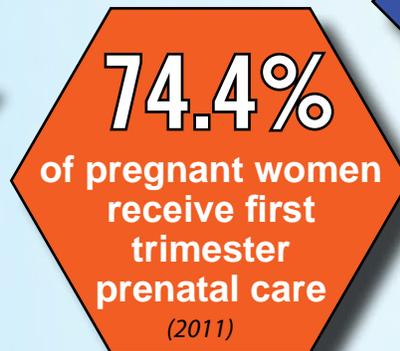
Transportation

- ◆ Embrace the findings of the upcoming 10 Year Transit Development Plan.
- ◆ Consider the options presented in the Transit Latent Demand Study.
- ◆ Form a community consensus on transportation needs.
- ◆ Explore alternative means of transportation.

KEY COMMUNITY NEEDS



KEY COMMUNITY NEEDS



RECOMMENDATIONS

It is apparent from this study that there is no shortage of needs or opportunities in Charlotte County. The number of agencies and individuals dedicated to bringing about change for good is abundant. This study's intent is to help bridge the gap between needs and existing services and bring to light key issues that need to be addressed holistically by the entire community.

Pursue a Theme of Prevention

It became apparent during this study that poverty is both a cause and effect of the other human service area issues. For example, children born into poverty often lack the opportunity to access quality education. Without a quality education, the likelihood of getting a job that earns a sufficient income decreases. Without a sufficient income, it becomes difficult to keep a roof over one's head, food on the table, and to see a doctor when ill. Thus the vicious cycle of poverty becomes nearly impossible to break.

The effects of poverty are detrimental not only to the individual but to the community at-large. By focusing energy and resources into preventative programs the number of people in need of assistance is ultimately reduced in the long run. The return on investment to the community greatly outweighs the initial program costs.

The term 'prevention' spans all areas of the human services sector. Preventative healthcare includes early detection and health promotion as a means to prevent future disease. Preventative education programs include ones that increase high school graduation rates and encourage continued education as a means to obtaining a higher paying job. Homelessness prevention includes programs that thwart crisis situations through financial literacy and budgeting, employment assistance and reducing barriers to affordable housing.

RECOMMENDATIONS

Increase Awareness of Existing Resources and Initiatives

The Charlotte County community has many human service agencies providing vital services to the residents, yet two issues became apparent throughout this study:

- **Consistent and effective communications among human service agencies can be approved.**
- **Individuals in need are not always aware of the services available.**

There is a need for better communication and cooperation between agencies about local initiatives that are taking place. Better communication would result in a more seamless delivery system of services and would lead to reduced duplication of services.

Furthermore, Charlotte County has a wide array of services available to our residents to help meet their basic needs. These services are provided through a variety of service providers, both public and private. As part of this study, the research team worked with Charlotte County 211 – the community’s government and non-profit information and referral service, the GIS team from the Charlotte County IT Department and the LIS team from the Charlotte County Community Development Department to develop an online interactive resource map.

This interactive map was developed to assist residents in locating essential human services that are available in our community. The map will provide you with basic provider information for the following service categories: Employment, Education, Housing, Food, Financial Assistance, Family & Youth Services, Senior Services, Transportation, Veteran Services and Health.

This tool can be accessed through Charlotte County Human Service’s website: www.charlottecountyfl.gov/dept/humanservices/Pages/default.aspx

RECOMMENDATIONS

Promote Community-Wide Investment

Poverty is an issue that affects the entire community but one many find uncomfortable to discuss. The issue is one that is often “out of site, out of mind.” At the same time, the issue of poverty is relative for someone who is living it and is surrounded by people with similar circumstances. Left unaddressed, the cycle of poverty will only continue to grow.

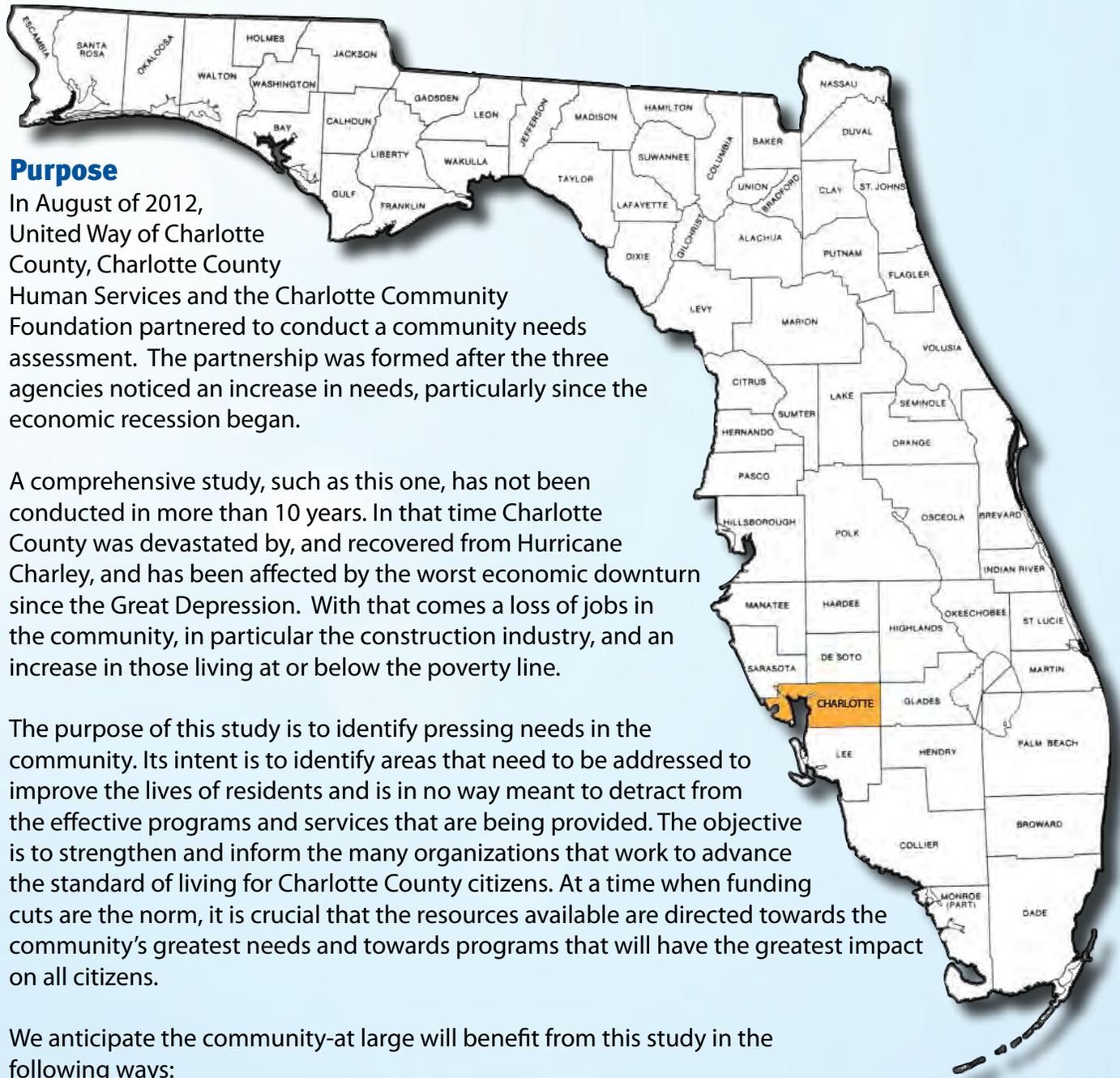
As the greatest need identified in this study, the burden of reducing poverty is one that is shared between the individual, local government, human service agencies and the community at-large. It is not enough for human service agencies to provide supportive services to those in need and to expect an individual to continue his or her education as a means to a better future.

The local economy must attract industries so that individuals can seek employment that meets their skill set and pays adequate living wages. Our elected officials and community members must recognize the long-term return on investment that comes with supporting programs in the short term through advocacy, financial support or volunteerism. It is up to the local agencies to communicate the value of this investment.

Human service providers are encouraged to look for ways to work together to attack the issue of poverty holistically through their individual missions. These agencies must work cooperatively to break down their barriers in order to collaborate on programs and initiatives that will bring about measurable change. After all, we are stronger together than we are alone.

(this page intentionally left blank for two-sided reproduction)

INTRODUCTION



Purpose

In August of 2012, United Way of Charlotte County, Charlotte County Human Services and the Charlotte Community Foundation partnered to conduct a community needs assessment. The partnership was formed after the three agencies noticed an increase in needs, particularly since the economic recession began.

A comprehensive study, such as this one, has not been conducted in more than 10 years. In that time Charlotte County was devastated by, and recovered from Hurricane Charley, and has been affected by the worst economic downturn since the Great Depression. With that comes a loss of jobs in the community, in particular the construction industry, and an increase in those living at or below the poverty line.

The purpose of this study is to identify pressing needs in the community. Its intent is to identify areas that need to be addressed to improve the lives of residents and is in no way meant to detract from the effective programs and services that are being provided. The objective is to strengthen and inform the many organizations that work to advance the standard of living for Charlotte County citizens. At a time when funding cuts are the norm, it is crucial that the resources available are directed towards the community's greatest needs and towards programs that will have the greatest impact on all citizens.

We anticipate the community-at-large will benefit from this study in the following ways:

- ◆ Gaps in human services will be more easily addressed.
- ◆ Potential community partnerships will be more easily identified and developed.
- ◆ Service agencies will be able to utilize this information when applying for and awarding grants.
- ◆ Policy makers will be able to utilize this information when requesting federal funding and making local decisions.
- ◆ Needs in the community will be more easily prioritized.
- ◆ The community will be more informed.

Methodology

In order to identify and prioritize the most significant needs within the Charlotte County community, the team utilized a multi-faceted approach that focused on six key human service issue areas: Education, Employment, Family Services, Health, Poverty, and Transportation.



Statistical data collected from sources including the United States Census Bureau's *Decennial Census* and *American Community Survey*, the United States' Departments of Agriculture, Health and Human Services, Housing and Urban Development, and Bureau of Labor Statistics, Florida's Departments of Children and Families, Economic Opportunity, Education, and Health, as well as other national, state and local resources served as the foundation for this study.

Eighty-two local and regional human service agencies serving the Charlotte County community were surveyed for information on the service they provide, the populations they serve and their perception on the greatest needs within the community.

At the same time, 869 clients of the human services agencies were surveyed about their needs within the community. By surveying both the agencies and their clients, we were able to get a better comparison of the agencies' perception of the needs and the clients' actual needs. It also enabled us to gain useful information from the clients about existing gaps in services.

Finally, input was sought from the community at-large. On March 12, 2013 approximately 70 members of the community attended a Community Conversation. Representatives from the community, local government leaders, business leaders, the healthcare industry, human service agencies, and the school system participated in an exercise to identify the top Strengths, Weaknesses, Opportunities and Threats to the community.

Detailed results of the surveys and Community Conversation can be found in the appendices of this study.

DEMOGRAPHIC PROFILE

Charlotte County is located on Southwest Florida’s Gulf Coast and borders Sarasota and DeSoto Counties to the north, Glades County to the east, and Lee County to the south. Punta Gorda is the only incorporated city in the county.

Population

Charlotte County has grown significantly over the past twenty years. During the 1990s, the county grew by 27.62%. It grew by an additional 12.96% during the 2000s, bringing its 2010 population to 159,978 people.¹ Projections from the Charlotte County Economic Development Office estimate that the county’s population will grow an additional 12.5% by 2020.²

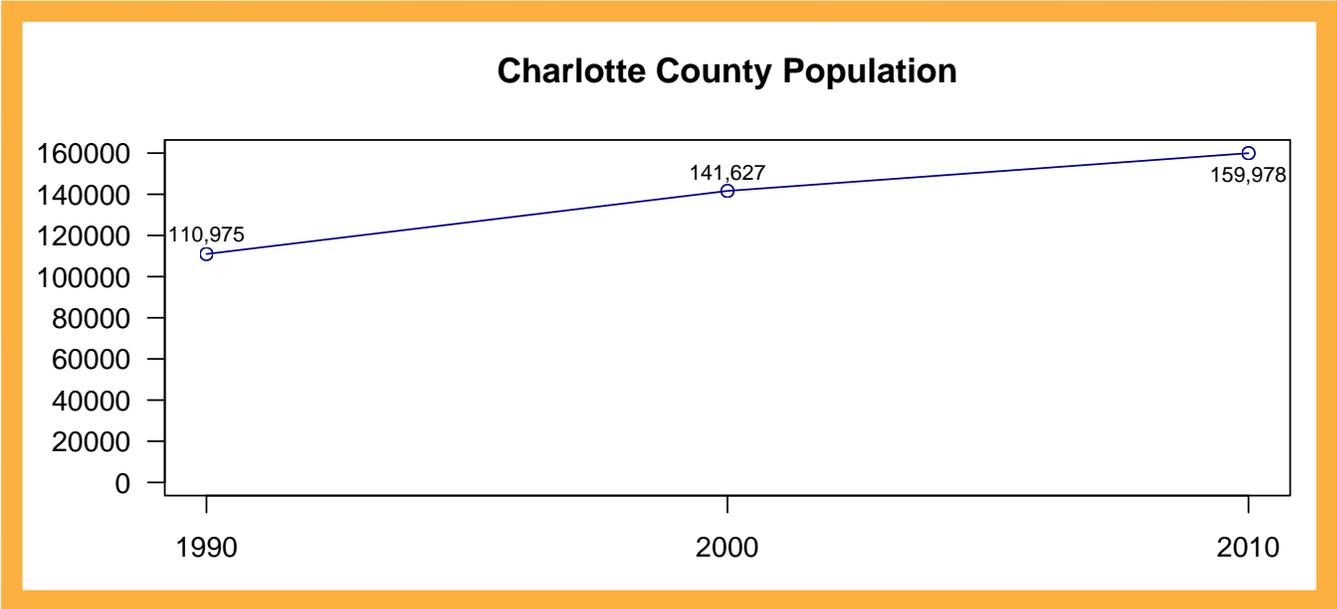


Figure A. Source: US Census Bureau, Decennial Census

Race and Ethnicity

Charlotte County has historically, and continues to be a predominantly white community, however as the overall population has grown, the percentage of its minority populations has also increased, though at a much slower pace. In 2000, the white population made up 92.58% of the total population, compared to 90.05% in 2010. The county’s population is 5.68% black, 1.20% Asian, and 0.26% Native American. The Hispanic population has grown from 3.30% to 5.76% in the last ten years.³

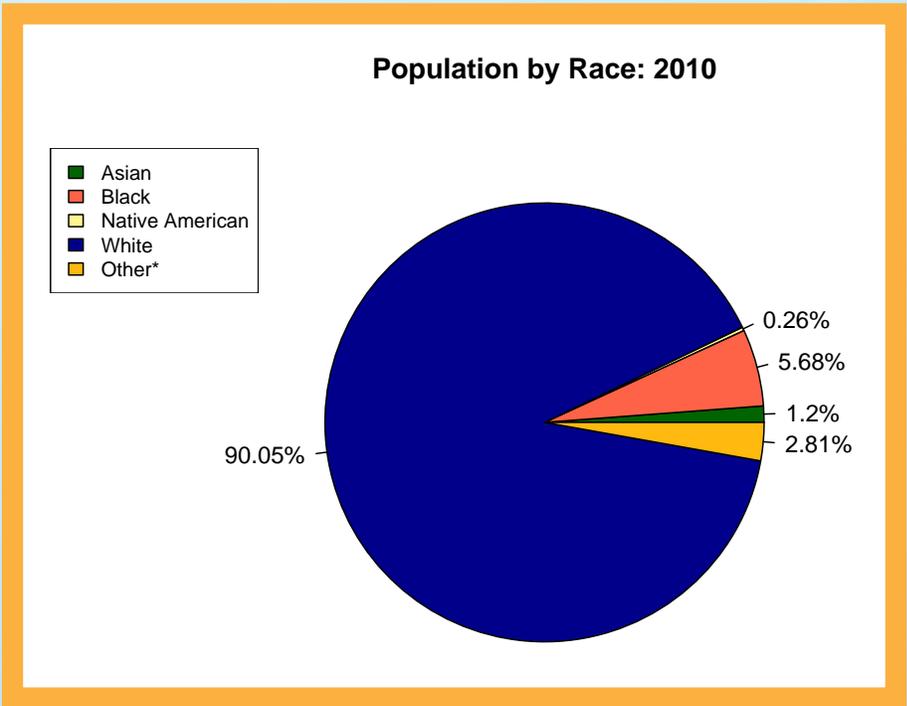


Figure B Source: US Census Bureau, Decennial Census *Includes multiple races

Population by Ethnicity: 2010

- Hispanic
- Non-Hispanic

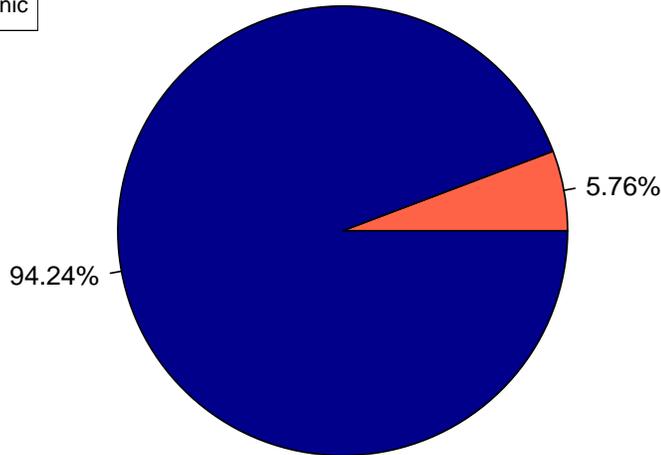


Figure C
Source: US Census Bureau, Decennial Census

Age

Charlotte County is predominantly a retirement community, with 34.10% of the population over the age of 65. Despite making up a slightly lower percentage of the overall population than in 2000 (34.70%), this age group grew by 11.04% during the same time period.⁴ Charlotte County has a median age of 55.9 and recently became the 2nd oldest county in the state as well as the nation.⁵ On the other hand, the population between the ages of 30 and 45 decreased by roughly the same amount, or 11.19%. The population under the age of 18 only grew by 3.12%⁶

Population by Age

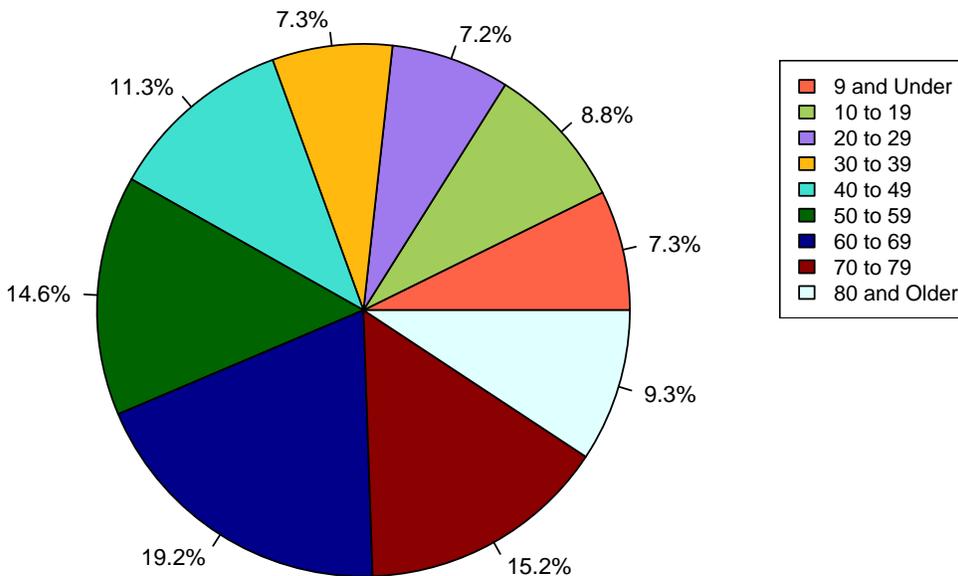


Figure D
Source: US Census Bureau, 2010 Decennial Census

Educational Attainment

The level of educational attainment in Charlotte County is lower than the national average. As of 2011, 47.3% of the population had a high school diploma or less, 33.3% had an associate's degree or some college, and 19.3% had a bachelor's degree or higher. Nationally, 28.5% of the population has a bachelor's degree or higher.⁷

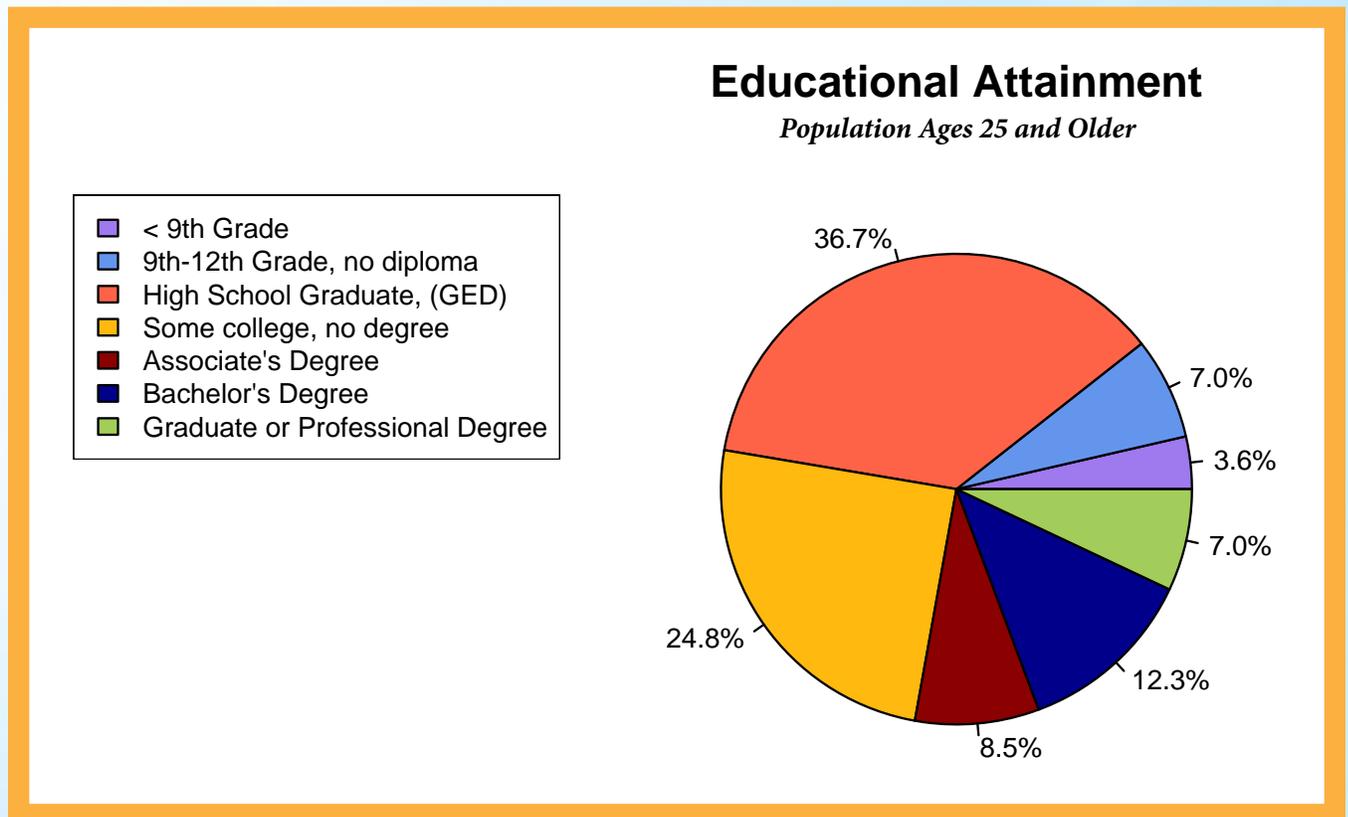


Figure E

Source: US Census Bureau, American Community Survey 2011, Table S1501

Approximately 55.9% of males continued their education beyond high school, compared to 49.9% of females in Charlotte County.⁸



Photo provided by
Charlotte County
Public Schools

Socioeconomic Status

As of 2011, Charlotte County's median household income was \$41,190. This is well below the national rate of \$50,502. Since 2009, the percentage of the population living below the poverty line has grown from 9.0% to 11.9% in 2011. Children under the age of 18 were hit hardest, with the percentage living below the poverty line peaking at 25.5% in 2010.⁹

The percentage of the population using Food Stamps/SNAP benefits has increased drastically from 1.7% in 2007 to 10.2% in 2011.¹⁰ Furthermore, the percentage of children eligible for free or reduced

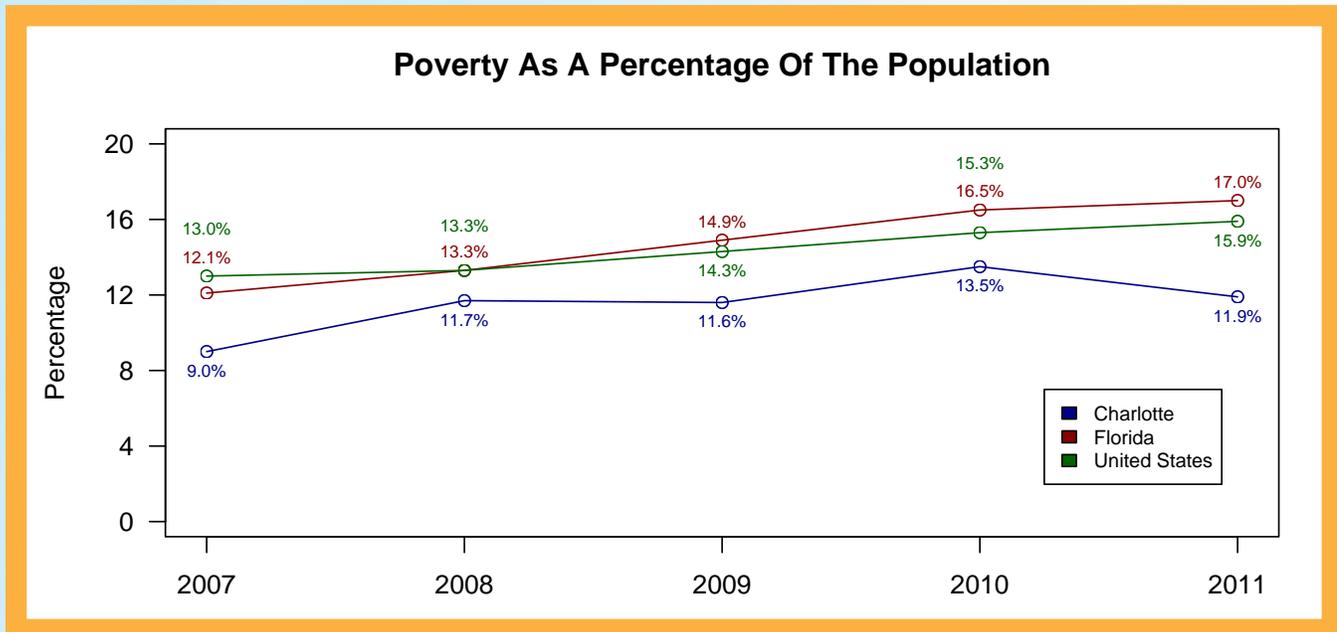


Figure F Source: US Census Bureau, American Community Survey, Table CP03

lunch has increased by 70.5% in the past decade. During the 2003-2004 school year, 32.8% of students were eligible, compared to 62.5% during the 2012-2013 school year.¹¹

Veterans

Charlotte County is home to a large veteran population. As of 2011, there were approximately 25,340 veterans living in the county. This equates to one out of every six residents. Of these, 33.6% are Vietnam era veterans, 18.9% served during the Korean War, 14.6% served during World War II, and 10% served during the first and second Gulf Wars. The data shows 7% of veterans are believed to be living below the poverty line.¹²

USING THIS STUDY

In the following sections are the findings in each of the six key human service issue areas: Education, Employment, Family Services, Health, Poverty and Transportation. Many of the subsections can be cross-referenced with other broader sections as each are intricately connected. These will be linked throughout the electronic document for ease of use. Additional statistical data as it relates to each section, and results from the Agency Survey, Clientele Survey and Community Conversation can be found in the appendices.

Disclaimer

The findings in this study represent the most pressing needs as identified by the most current statistics available at the time of data collection, surveys and community input, while recognizing that there are limitations to the quality and availability of data. The following is in no way meant to encompass the entire spectrum of needs within the Charlotte County community.

EDUCATION



Photo provided by Charlotte County Public Schools.

Access to a quality education has long been seen as a stepping-stone to a higher quality of life and viewed by many as a way to close socioeconomic gaps. Earning potential is continually linked to level of educational attainment. Internationally, the United States has found itself lagging behind many other countries in various education categories. As a result, policy makers have renewed efforts to increase access to high quality education with initiatives such as No Child Left Behind, Race to the Top, and STEM (Science, Technology, Engineering, and Mathematics).

The state of Florida is in the process of transitioning to the Common Core State Standards. The Standards outline what information students are expected to learn at each grade level and provide a consistent curriculum across state lines. They were adopted by the Florida Legislature in 2010 and will be fully implemented during the 2014-15 school year.

Numerous studies have shown that the importance of access to high quality education begins in a child’s formative years, before they enter kindergarten, and continues beyond high school. The relationship between access to quality education and quality of life in Charlotte County is no exception. Human service agencies surveyed as part of this study estimated that 15% of their clientele had not received a high school diploma and 41% only had their high school diploma or GED. Among the clientele surveyed, those numbers are even higher – 17% said they had not received a high school diploma and 52% only had a high school diploma or GED.

Poverty rates are noticeably higher among populations with lower levels of education. In Charlotte County, the poverty rate for the population age 25 and older without a high school diploma is 20.8%. This rate drops significantly as the level of education increases. This trend is consistent across the state and nation (see Appendix 1).¹

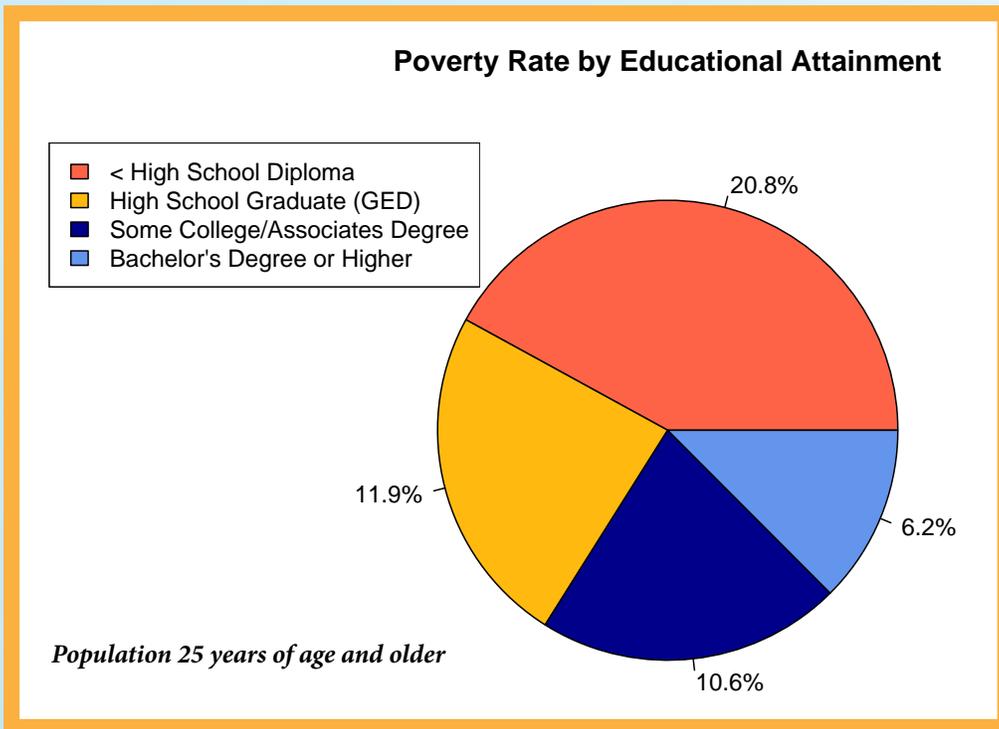


Figure 1.1
Source: US Census Bureau, American Community Survey 2011

At the same time, children living in poverty are more likely to drop out of school, be chronically absent, and have lower levels of academic performance. As a result, it becomes difficult to break the cycle of poverty from generation to generation. For more information on poverty in Charlotte County see Section 5.

EARLY EDUCATION

The first five years of a child’s life are extremely important for sensory and cognitive development, laying the foundation for the rest of their life.²

In the state of Florida there are two primary programs dedicated to early childhood education: Head Start/Early Head Start and the Voluntary Pre-Kindergarten (VPK) program.

Head Start/Early Head Start

Head Start is a federally funded school readiness program that serves preschool age children from low-income families during their most formative years by providing comprehensive education, health, and nutrition services. Emphasis is placed on the parent’s role in their child’s development. In addition, Early Head Start services are available to infants, toddlers, and pregnant women and their families who are below the federal poverty line. The Office of Head Start, within the Office of the Administration of Children & Families of the U.S. Department of Health & Human Services, administers these programs.³

Charlotte County Head Start/Early Start serves children ages nine weeks to four years old. Programs are available at the Baker Center and each elementary school. In addition to education services, children receive various health screenings as well as two meals and a snack each day. During the 2011-2012 school year, 330 Charlotte County children were enrolled in Head Start. Due to funding only 49% of eligible children were served. In addition, Early Head Start served 66 children and 15 pregnant women.⁴ Despite the need for expanded Head Start services, the program may lose funding as part of federal budget cuts.

Voluntary Prekindergarten (VPK)

In the state of Florida, every child turning four on or before September 1 of the current school year is eligible to enroll in a free voluntary pre-kindergarten (VPK) program.⁵ There are currently 45 approved VPK providers in Charlotte County.⁶ During the 2011-12 school year, they had the capacity to serve 1,162 students⁷ and enrolled 1,055.⁸ The following school year (2012-13) 1044 students were enrolled in kindergarten.⁹

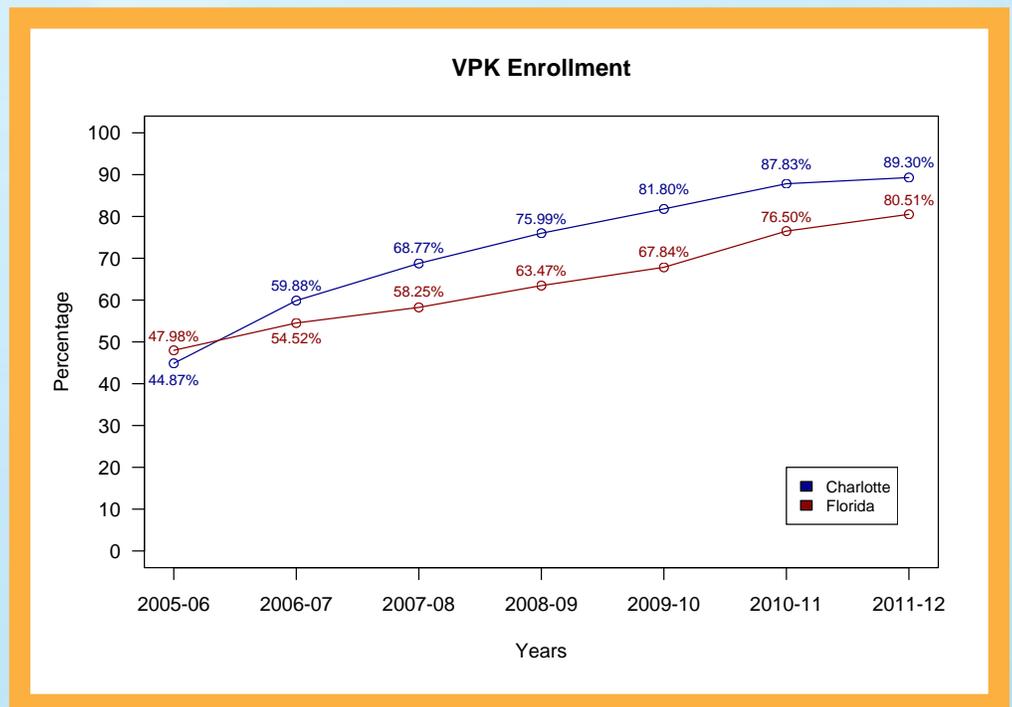


Figure 1.2 Source: Florida’s Office of Early Learning

Florida's Office of Early Learning estimated 80.51% of eligible four year olds in Florida were enrolled in a voluntary prekindergarten program during the 2011-2012 school year with the rate expected increase to 82.5% by 2016.¹⁰ However, the goal set by Florida's Office of Early Education for the same year is 88.24%.¹¹ Charlotte County is already meeting and exceeding the state's goal for VPK enrollment. Enrollment rates in VPK programs in Charlotte County have doubled since the 2005-06 school year, when the program was first implemented, and have consistently been above the state's enrollment rate.¹²

Kindergarten Readiness 2011-12		
School Name	% of Students Kindergarten Ready	
	ECHOS	FAIR
Sallie Jones Elementary	90.82%	68.29%
Peace River Elementary	97.17%	61.17%
East Elementary	94.79%	82.18%
Neil Armstrong Elementary	97.20%	67.83%
Meadow Park Elementary	94.53%	63.00%
Vineland Elementary	89.52%	76.42%
Liberty Elementary	*	72.45%
Myakka River Elementary	*	73.15%
Deep Creek Elementary	99.17%	71.20%
Kingsway Elementary	96.12%	75.24%
Charlotte (District Average)	94.41%	71.42%
Florida (State Average)	91.13%	70.67%

Students enrolled in VPK programs are screened in the first 30 days of kindergarten for kindergarten readiness using either the Early Childhood Observation System (ECHOS) or the Florida Assessments for Instruction in Reading (FAIR).

As a whole, the district ranks higher than the state in percentage of students ready for kindergarten based on ECHOS and FAIR assessments. Individually, kindergarteners

Figure 1.3 Source: Florida Department of Education * indicates population fewer than 10

at Sallie Jones Elementary and Vineland Elementary fell below the state average on the ECHOS measurement tool. Students at five schools – Sallie Jones Elementary, Peace River Elementary, Neil Armstrong Elementary, Meadow Park Elementary, and Deep Creek Elementary fell below the state average on the FAIR measurement tool.¹³



Photo provided by Big Brothers Big Sisters of the Sun Coast.

K-12 EDUCATION

The Charlotte County Public School system was recognized as an asset to the Charlotte County community by participants in the Community Conversation. It is comprised of ten elementary schools, four middle schools, and three high schools. The school system sponsors a public charter school, Edison Collegiate High School and six centers, each with a specialized focus. In addition, Charlotte County is home to numerous private elementary, middle, and high schools.

Total enrollment for grades pre-kindergarten thru 12th grade was 16,352 students in the fall of 2012. This number is down from 17,361 or 5.81% since the fall of 2008. In comparison, the state of Florida has seen a 2.38% increase in enrollment during the same time period (see Appendix 1).¹⁴

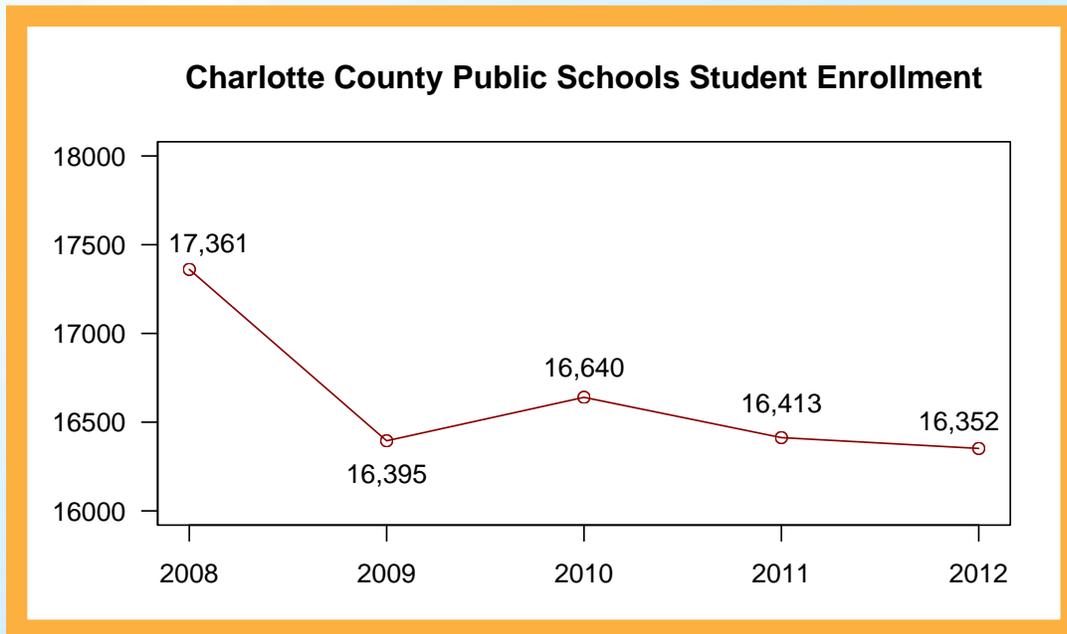


Figure 1.4
Source: Florida Department of Education

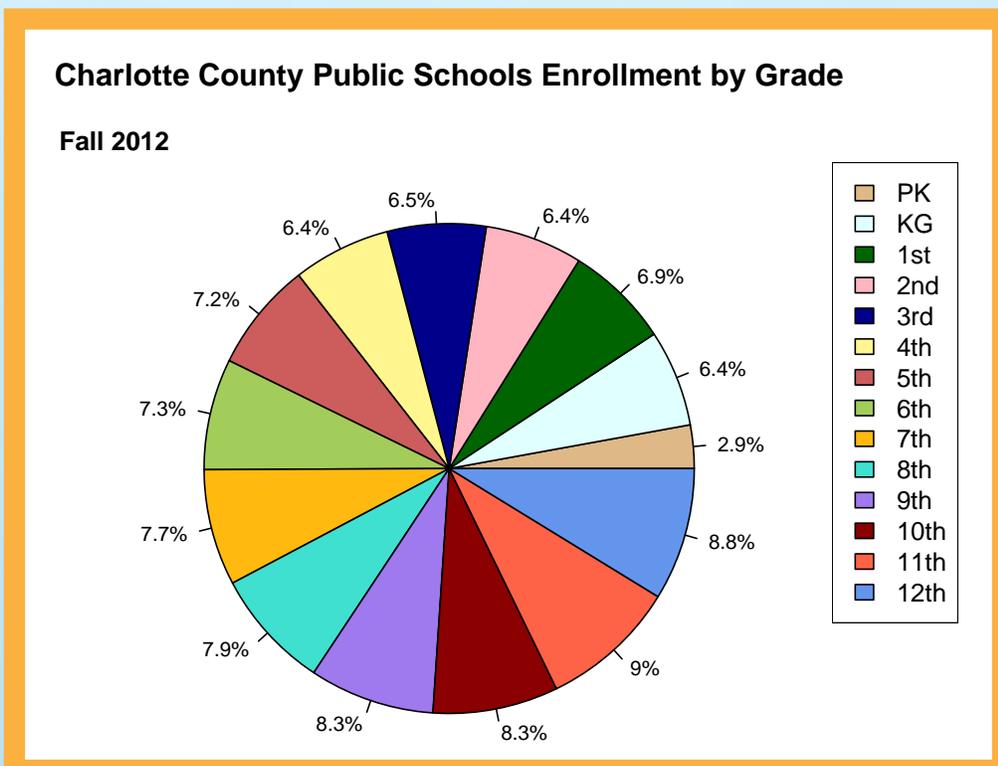


Figure 1.5
Source: Florida Department of Education

National School Lunch Program

Students living in households with an annual income between 0% and 185% of the federal poverty guidelines are eligible for free or reduced lunches through the National School Lunch Program.¹⁵ The number of students, district and statewide eligible for the National School Lunch Program has nearly doubled between the 2002-03 and 2011-12 school years. Charlotte County continues to have a higher percentage of students eligible for the program than the state of Florida. **During the 2002-03 school year, 31.97% of Charlotte County students were eligible for the National School Lunch Program; that rate rose to 61.38% during the 2011-12 school year.**¹⁶ Nationally, 42.9% of students are eligible for free and reduced rate lunches (2007-08).¹⁷ Across the district, Lemon Bay High School is the only school with less than half of its student body eligible. Peace River Elementary has a free and reduced rate lunch rate of 81.92%¹⁸ which designates it as a high poverty school by the Florida Department of Education. High poverty schools rank in the top quartile of schools based on free and reduced lunch status.¹⁹ Charlotte County has eleven schools classified as Title I schools which means they receive federal funding to improve the academic achievement of disadvantaged students.²⁰ For more information on the National School Lunch Program in Charlotte County see Section Five.

The number of students, district and statewide, eligible for the National School Lunch Program has nearly doubled between the 2002-03 and 2011-12 school years.

Chronic Absenteeism

Students who are absent from school for 21 days or more are classified as chronically absent. Across the state, 9.1% of students were chronically absent during the 2011-12 school year. Charlotte County had a rate of 6.0%.²¹ This rate has steadily dropped over the past five years. On average, 92.7% of students were in attendance on a daily basis.²² The rate was typically lowest in the elementary schools and increased as students became older. However, Peace River Elementary school's rate was nearly double the rate of other district elementary schools (see Appendix 1).²³

Students with Disabilities

An estimated 10.6% of the Charlotte County population, ages 5 to 17, has a disability. Of those, an estimated 9.2% have a cognitive disability.²⁴ During the 2012-2013 school year, 17% of students were enrolled in the Exceptional Student Education (ESE) program and 3% were classified as disabled per Section 504 of the Rehabilitation Act of 1973.²⁵



*Photo provided by
Charlotte Local
Education
Foundation*

FCAT Scores

The Florida Comprehensive Achievement Test (FCAT) has been used to measure student achievement since 1998; however, the state of Florida has been going through a transition since 2007 with the adoption of the Next Generation Sunshine State Standards and again with the state adoption of the Common Core State Standards in 2010. These standards will be fully implemented during the 2014-2015 school year.

As a result the FCAT is being phased out and replaced with the FCAT 2.0 and Florida End of Course (EOC) Assessments. Until these transitions are complete, the FCAT is the best tool available to measure student achievement.

The FCAT is administered to students annually from 3rd grade through 10th grade. The test is scored on a scale of 1 to 5 with level 1 indicating the greatest risk for academic failure. Over the past 5 years, Charlotte County has typically had a lower percentage of students scoring at Level 1 in reading and mathematics than students statewide. The percentage of students scoring at Level 1 in mathematics jumped by several percentage points between the 2010-2011 and 2011-2012 school years in grades 4 and 8; however, the 2011-2012 scores are based on FCAT 2.0. Students in the 10th grade took the Geometry EOC rather than the FCAT 2.0 during 2011-2012.²⁶

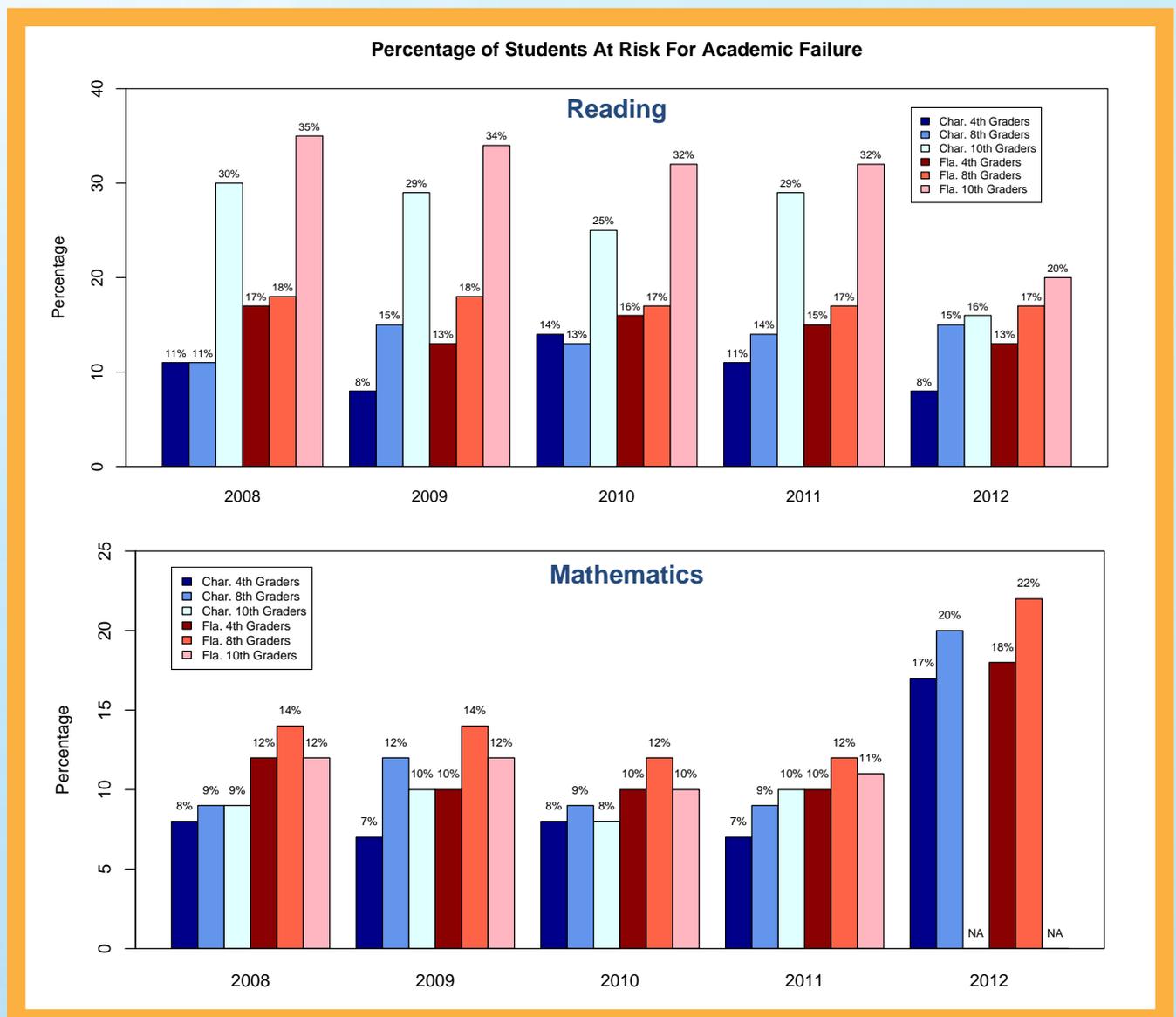


Figure 1.6 Source: Florida Department of Education
Charlotte County, Florida Community Action Plan

** FCAT Math is replaced by Geometry EOC

Dropout Rates

Over the past five years Charlotte County students in grades 9 thru 12 are dropping out of high school at a higher rate than students across the state.²⁷ Charlotte County's rate is lower than students nationally.²⁸

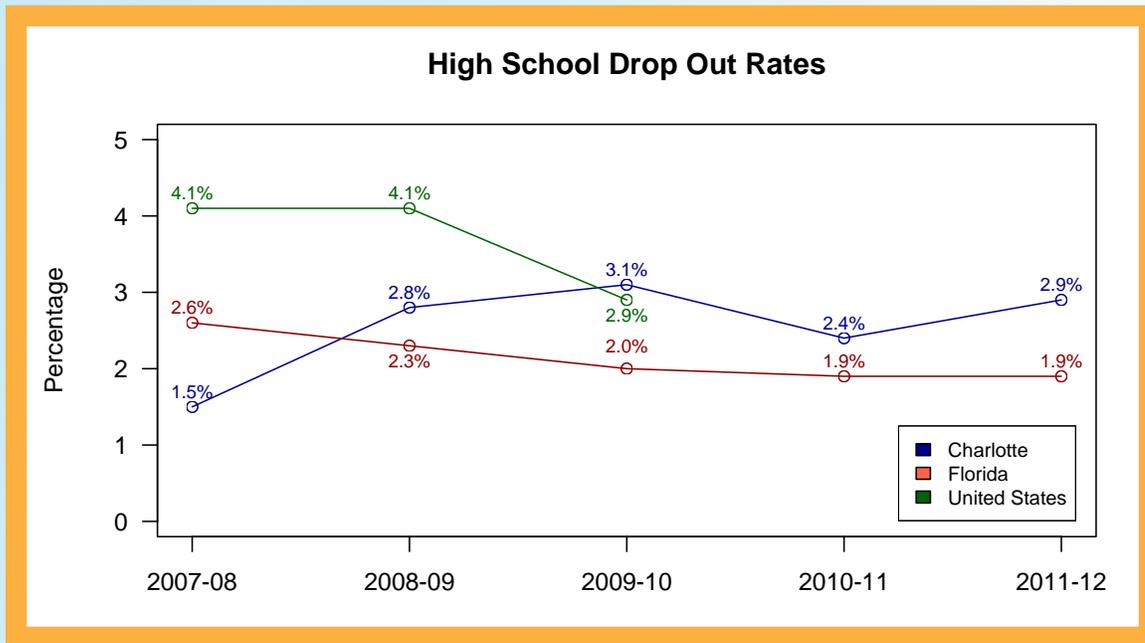


Figure 1.7
Source: Florida Department of Education; US Department of Education, National Center for Education Statistics

In 2012, 54% of middle school students and 53% of high school students in Charlotte County said they had a lack of commitment to school. This rate is above the state and national averages.²⁹

Graduation Rates

Over the past five years, students in Charlotte County are graduating at a higher rate than at the state average³⁰ but below the national average.³¹ Charlotte County students receiving free or reduced lunches (74.46%), enrolled in the Exceptional Student Education (65.05%) or English Language Learners (40.0%) programs, or classified as at-risk (57.56%) graduated at a rate lower than the district average during the 2011-12 school year.³²

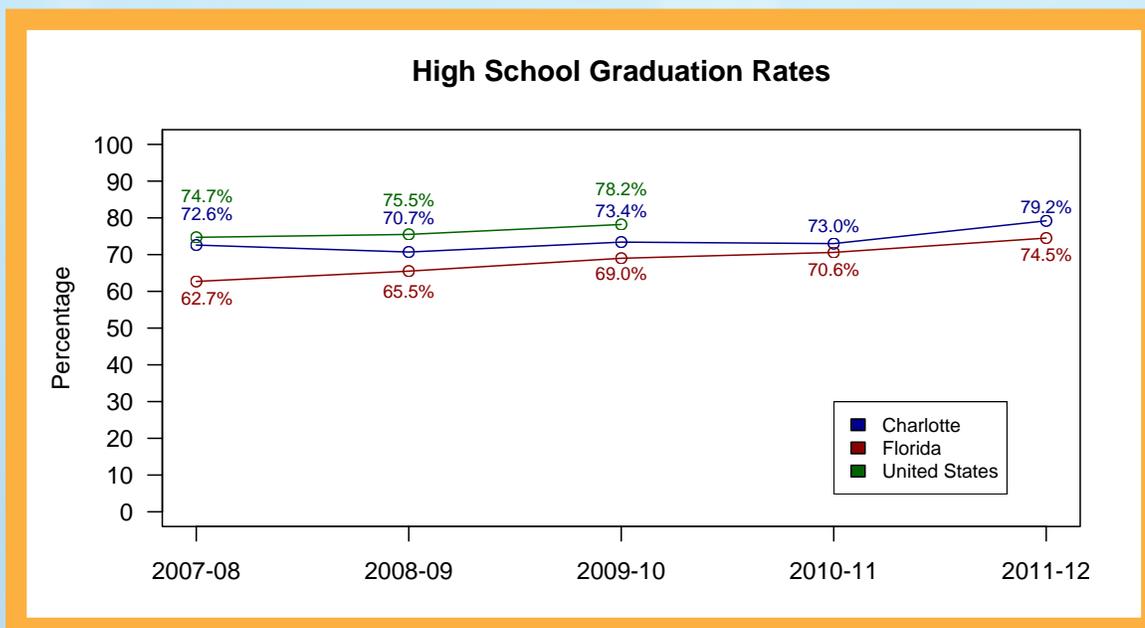


Figure 1.8
Source: Florida Department of Education, U.S. Department of Education

Note: Rates do not include GEDs or special diplomas

SPOTLIGHT

Leader in Me Program & Lighthouse Schools

Charlotte County Public Schools have instituted a “Leader in Me” program based on Stephen Covey’s book, *The 7 Habits of Highly Effective People* in all 10 of the county’s elementary schools. The program develops leadership and decision making tactics to create a school-wide culture of positive and proactive students and staff. The 7 Habits of Happy Kids are:

- ◆ Habit 1: Be Proactive - You’re in Charge
- ◆ Habit 2: Begin with the End in Mind - Have a plan
- ◆ Habit 3: Put First Things First - Work First, Then Play
- ◆ Habit 4: Think Win-Win - Everyone Can Win
- ◆ Habit 5: Seek First to Understand, Then to be Understood - Listen Before You Talk
- ◆ Habit 6: Synergize - Together is Better
- ◆ Habit 7: Sharpen the Saw - Balance Feels Best

Three area schools, Neil Armstrong Elementary, Vineland Elementary, and Sallie Jones Elementary schools are among 55 schools in the world to achieve Lighthouse School status. Lighthouse schools work with Franklin Covey to incorporate 7 Habits into the school’s model and must attain the following nine criteria:

- ◆ Have a Lighthouse Team that oversees implementation of the Leadership model with students, staff, parents and the community.
- ◆ Display leadership language and principles in hallways and classrooms.
- ◆ Teachers integrate leadership language daily.
- ◆ Staff collaborates to build a culture of leadership.
- ◆ Students have meaningful leadership roles.
- ◆ Parents understand the Leader in Me model and the 7 Habits and are involved in promoting both.
- ◆ School has a system for tracking school-wide, classroom, academic and personal goals.
- ◆ Obvious improvements can be seen, measured and tracked.
- ◆ School holds leadership events to share their progress.

Franklin Covey and Charlotte County Public Schools are working toward offering this exciting program in middle and high schools in the district.



Photo provided by Boys & Girls Clubs of Charlotte County.

POST-SECONDARY EDUCATION

Post-Graduation Intentions

The percentage of Charlotte County students continuing their education beyond high school is lower than state and national averages. An estimated 41.1% of the population ages 18 to 24 have some college education or have an associate’s degree and only 6.7% have a bachelor’s degree or higher. In comparison, 44.4% statewide and 45.6% nationwide have some college education or an associate’s degree. In Florida, 7.7% of the population have their bachelor’s degree or higher. Nationally the rate is 9.1% (see Appendix 1).³³

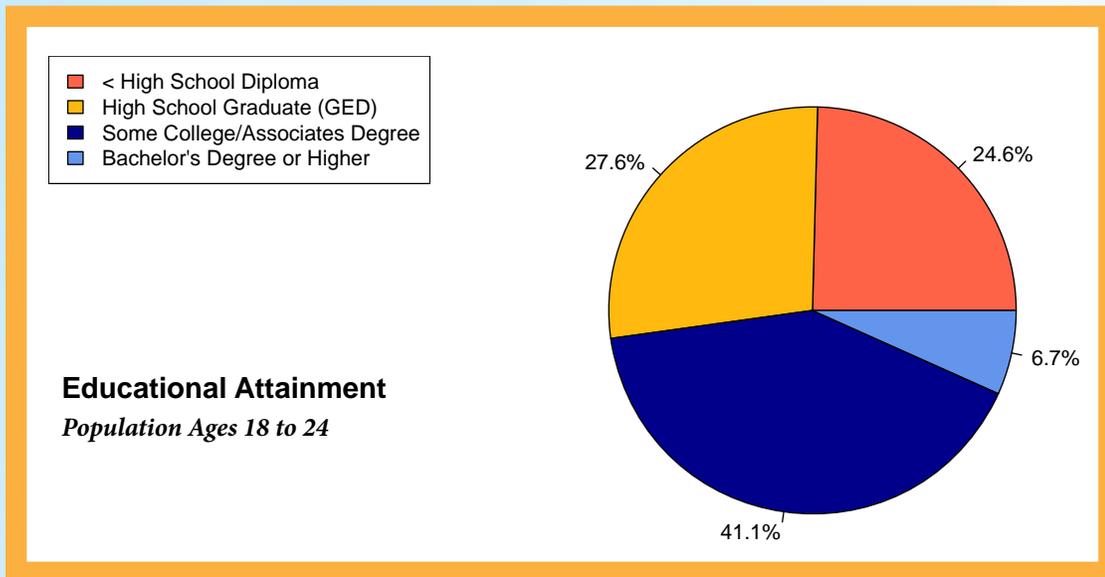


Figure 1.9
Source: American Community Survey 2011, Table S1501

This trend is consistent with the older population as well. Of the population 25 years and older, 36.7% stopped after graduating high school compared to a state rate of 30.4% and a national rate of 28.4%. Only 12.3% have a bachelor’s degree and 7.0% have a graduate or professional degree. At the state level, 16.5% have a bachelor’s degree and 9.3% have a graduate or professional degree. The rates are even higher at the national level. Eighteen percent have a bachelor’s degree and 10.6% have a graduate or professional degree (see Appendix 1).³⁴ These statistics are of concern since a high school diploma is no longer sufficient for many jobs in the United States.

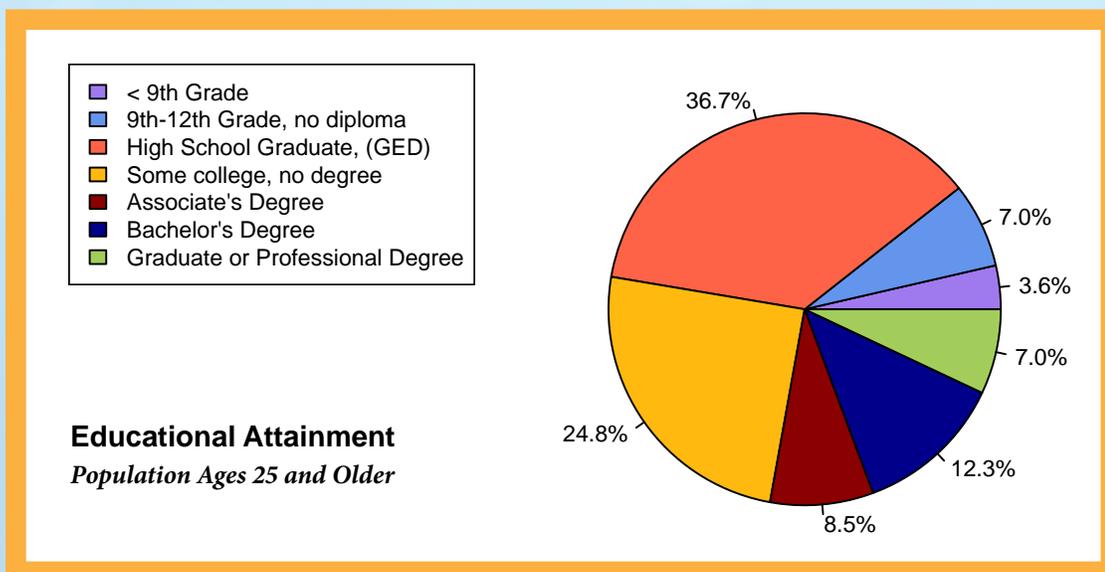


Figure 1.10
Source: American Community Survey 2011, Table S1501

Photo provided by Edison State College



Despite these trends, a higher percentage of Charlotte County students graduating in the class of 2011-2012 indicated that they planned to continue their education than students statewide. Of those graduating, 71.69% planned to continue their education compared to only 70.2% of Florida graduates.³⁵

Post-secondary Education Test Scores and AP Classes

Students planning to continue their education beyond high school are typically required to take the ACT, SAT, or both to determine college readiness. ACT sets a benchmark score in each of the four subject-area tests. Meeting the benchmark score indicates a 50% chance of receiving a B and a 75% chance of receiving a C in a corresponding college level course. The benchmark score is meant to provide a more accurate assessment of college preparedness than looking at the composite score.³⁶ In Charlotte County, students are on average meeting the benchmark in the areas of English and reading but failing to do so in mathematics and science.³⁷

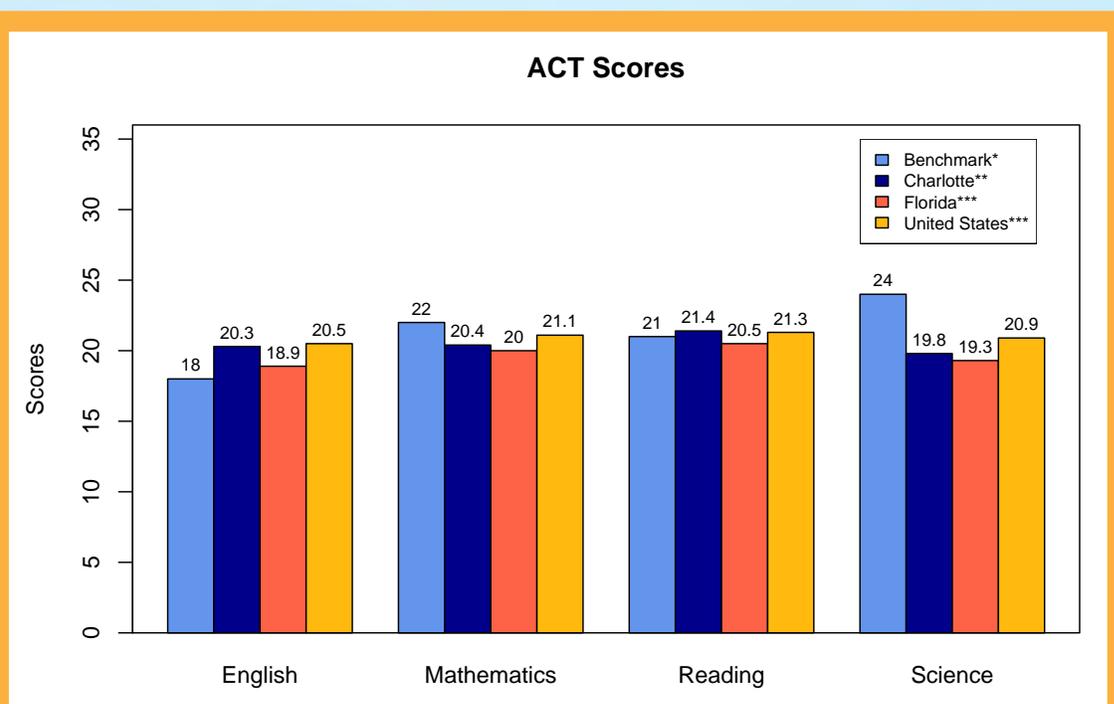


Figure 1.11
Source: ACT Profile Report 2012*; Florida Department of Education, ACT 2012 – FL Public School Avg. Scores**; ACT, Inc. 2012 ACT National and State Scores***

Like the ACT, the SAT also sets a benchmark to measure college preparedness. Meeting the benchmark score of 500 in each of the three subject-areas means a student will have a 65% chance of scoring a B- in corresponding college level course. The composite score benchmark has been set at 1550.³⁸ Charlotte County students taking the SAT appear to be meeting the individual benchmarks but failing to meet the composite benchmark.³⁹ In 2012, 61% of Charlotte County students took the ACT⁴⁰ and 37% took the SAT⁴¹. It is unknown how many students took both exams.

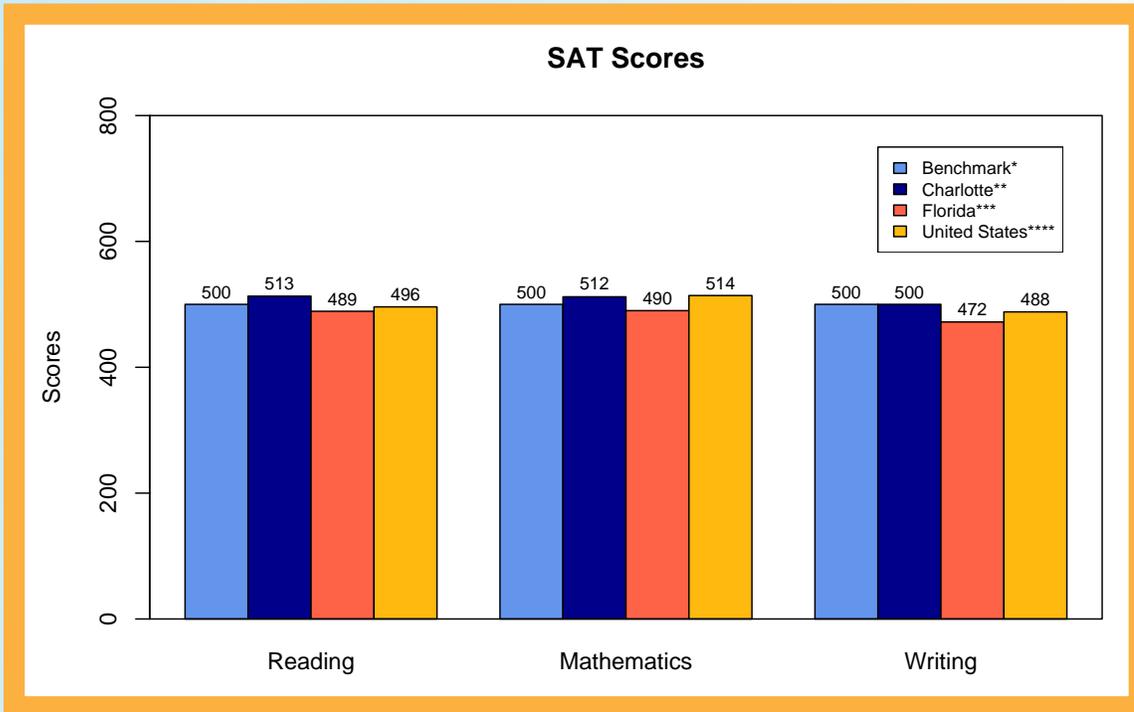


Figure 1.12
 Source: College Board "SAT Benchmarks"*, FLDOE, SAT 2012 FL Public School Avg. Scores**, The College Board, State Integrated Summary 2011-2012 Florida Public Schools***, College Board Avg. 2012 Scores****

The Advanced Placement (AP) program provides students with an opportunity to take high school courses that cover college level topics in order to prepare them for the AP exam. Students who take AP courses and successfully pass the AP Exam have the opportunity to earn college credit for their effort. By earning college credits while still in high school, students can save on tuition, books, and fees reducing their overall college costs. In 2012, only 13.8% of Charlotte County students took AP courses compared to 29.6% of students across the state⁴² and 32.4% of students across the country.⁴³

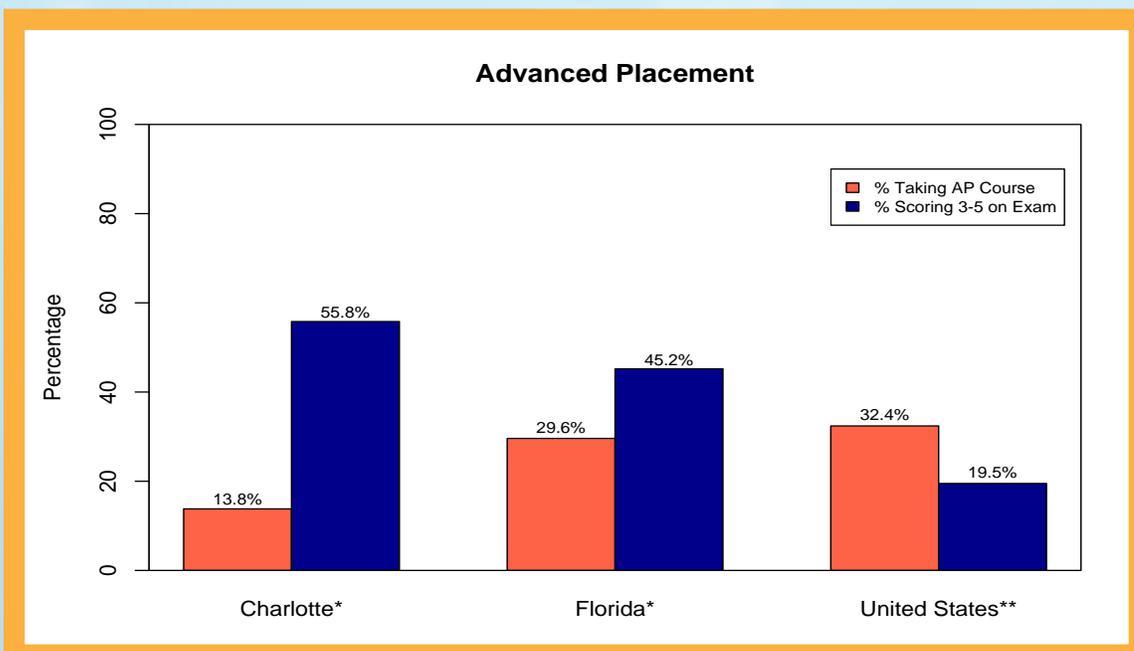


Figure 1.13
 Source: Florida Department of Education*, The College Board** 2012

FAFSA (Free Application for Student Aid)

Most students pursuing a technical certificate, associate's degree or bachelor's degree must complete a FAFSA form in order to be eligible for grants, need based scholarships, work-study opportunities, and federal student loans. **In Charlotte County alone, 76.3% of the class of 2011-2012 did not complete the FAFSA.** During the same year, 27.1% of students statewide completed the form.⁴⁴ This suggests that despite a high percentage of students indicating they plan to continue their education beyond high school, the percentage that follows through with this plan is lower than expected. This disconnect is concerning since it is projected that 58% of all jobs in the state of Florida will require some level of post-secondary education by the year 2020.⁴⁵

Post-Secondary Campuses Near Charlotte County

By attending a school close to home students can save on the cost of continuing their education. Charlotte County students have limited options for continuing their education in Charlotte County. Those wishing to pursue a technical certification have access to the Charlotte Technical Center. Students wishing to attend a college or university have the option of attending the Punta Gorda campus of Edison State College or Southwest Florida College otherwise they must leave the county. There are additional opportunities available in neighboring Lee and Sarasota counties.



*Photo provided
by Charlotte
Technical Center
- Culinary Arts.*

OPPORTUNITIES

- ◆ **Support early childhood development and kindergarten readiness initiatives.** Charlotte County is exceeding state averages for enrollment in VPK, but the data suggests that there is a need for improvements to the quality of kindergarten readiness programs offered by some providers. In addition, children from low-income families are often at higher risk but are also underserved.
- ◆ **Support Charlotte County Public Schools' initiatives for academic success.** High percentages of students receiving free and reduced lunches, students with disabilities, and chronic absenteeism are indicators of students at risk of academic failure. The number of students scoring at Level 1 on the FCAT further supports this need. The risk appears to be greater as students enter middle and high school.
- ◆ **Increase opportunities and reduce barriers at the high school level so that students can continue their education.** Students scoring higher on college entrance exams and AP exams are more likely to earn merit-based scholarships in order to continue their education. Furthermore, by increasing the percentage of students that take these exams and enroll in Advanced Placement courses it is likely that more students will attempt to continue their education after high school graduation.

(this page intentionally left blank for two-sided reproduction)

EMPLOYMENT



Photo provided by Gregg's Automotive

An educated and capable workforce is an essential component of a vibrant and sustainable community. Obtaining decent work with a livable wage is crucial for escaping poverty. Local economies face the challenge of meeting the employment needs of the current population in the short term, while continuing to look towards the future. Many find themselves in a low-wage/low-skill equilibrium. Employers have a demand for a low-skill/low-wage workforce, leaving little incentive to invest in human capital through on-the-job skills training or education. As a result, economic growth is slow. The cycle is hard to break without carefully coordinated strategies to attract new industries and to increase skilled talent. Failure to coordinate can result in “brain drain” where those with post-secondary training leave the area in pursuit of greater employment opportunities.¹

High unemployment and low wage jobs were frequently identified as challenges in Charlotte County throughout this study. Local human service agencies estimate that approximately 64% of their clientele earned less than \$20,000 a year. Most of their clients have past work experience in the retail and service industries, construction industry, or the military (see Appendix 3).

Of clients surveyed...

39% ARE NOT EMPLOYED

23.3% ARE EMPLOYED FULL TIME

17.6% ARE EMPLOYED PART TIME

20% ARE RETIRED

The majority lack education beyond a high school diploma. Respondents expressed that their greatest need is for job placement and training.

(see Appendix 3)

Participants at the Community Conversation identified economic development as one of Charlotte County's greatest weaknesses but also saw it as our greatest opportunity. They recognized that the community has been severely weakened by the collapse of the construction industry and that it is threatened by a lack of a ready workforce and population flight of younger residents. However, they view the existing business community as a source of strength (see Appendix 4).

UNEMPLOYMENT/LABOR FORCE

Following the economic downturn in 2007, unemployment rates began to rise. After several years of increases, Charlotte County's unemployment rates have finally started to drop and currently sit at 6.9% (May 2013). The unemployment rate nearly doubled from 4.9% to 8.1% between 2007 and 2008 and peaked at 12% in 2010. Rates were consistently higher than the state and national unemployment rates until this year.²

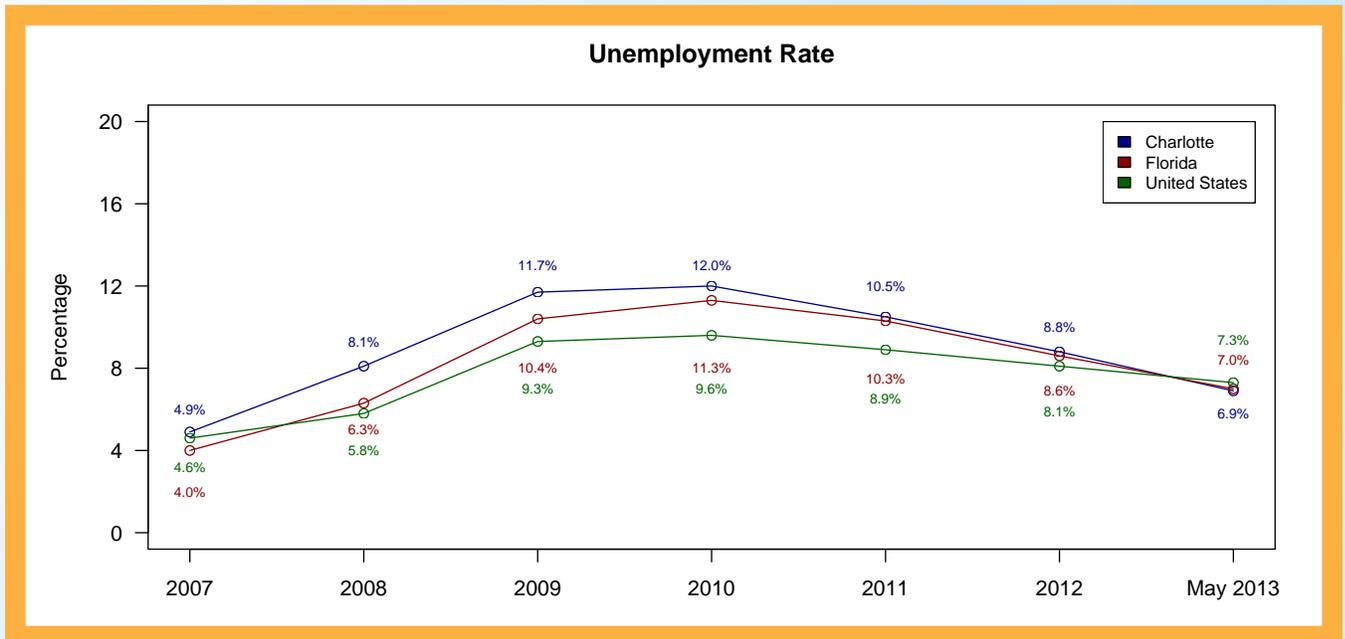


Figure 2.1 Source: Bureau of Labor Statistics

At the same time, the size of Charlotte County's labor force has grown slightly since the start of the recession, with the exception of 2008 and 2009 when there was some decline (see Appendix 1).³

The Southwest Florida Workforce Development Board, Inc. reports that there is a ratio of 1.4 unemployed individuals to every one job opening in Charlotte County (May 2013). Underemployment is an issue that is difficult to measure. Fifty-four percent of the current jobs posted with an education requirement were seeking someone with a high school diploma or less. Sixty-three percent of current job seekers have education beyond a high school diploma (July 2013),⁴ which indicates that we need higher paying, higher "knowledge based" jobs.



Photo provided by Goodwill Industries of Southwest Florida.

POVERTY

It became evident throughout this study that poverty was the common link with each area of concern. With an increase in unemployment came an increase in poverty rates. Charlotte County, like much of the rest of the country, saw an increase in poverty rates during the recession. While lower than the state and national rates, Charlotte County's poverty rate still increased from an estimated 9.0% in 2007 to 11.9% in 2011. The rate peaked at 13.5% in 2010⁵. For 2013, the federal poverty threshold is \$23,550 for a household of four (see Appendix 1).⁶ For more information on poverty in Charlotte County reference Section Five.

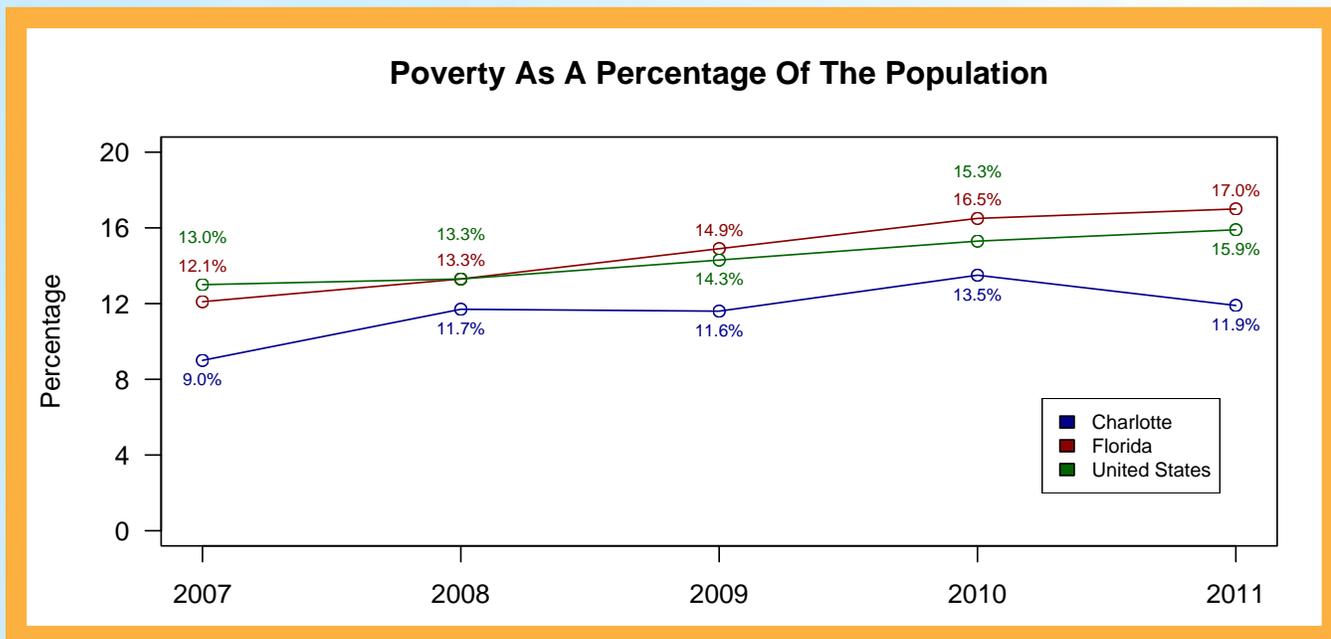


Figure 2.2 Source: American Community Survey, 1-year estimates, Table CP03

HOUSEHOLD INCOME

The median household income has decreased in Charlotte County since the start of the recession in 2007 from \$50,696 to \$41,190 in 2011. Furthermore, the county lags behind the state of Florida (\$44,299) and the nation (\$50,502) (see Appendix 1).⁷ **On average, employees earn five dollars, or 25%, less per hour in Charlotte County (\$14.88) than the state average (\$19.89).⁸**

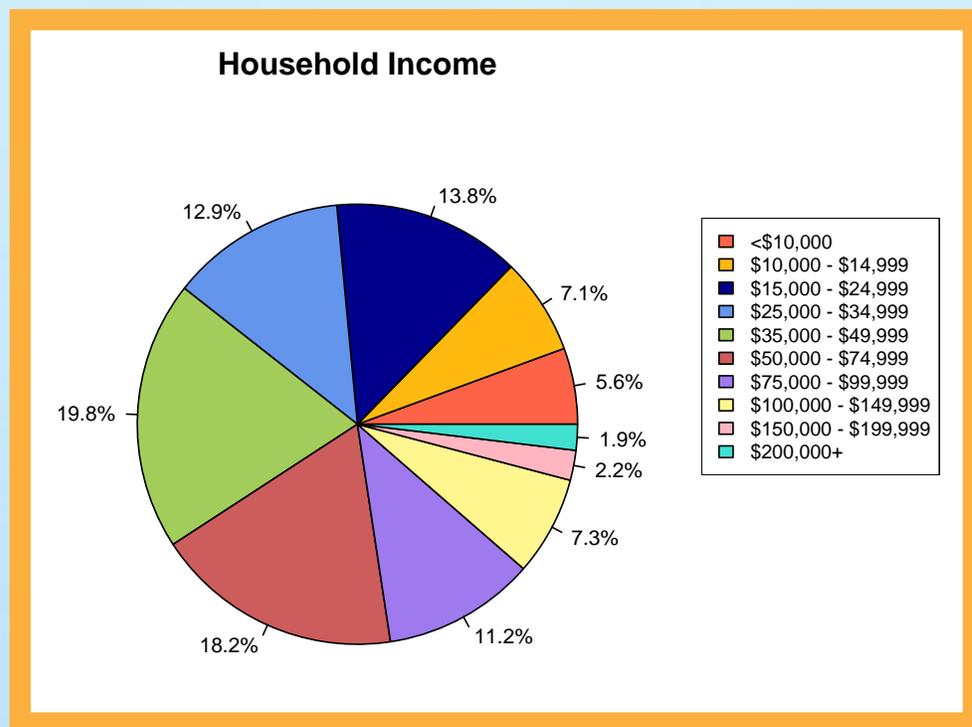


Figure 2.3 Source: American Community Survey, 2011, table CP03

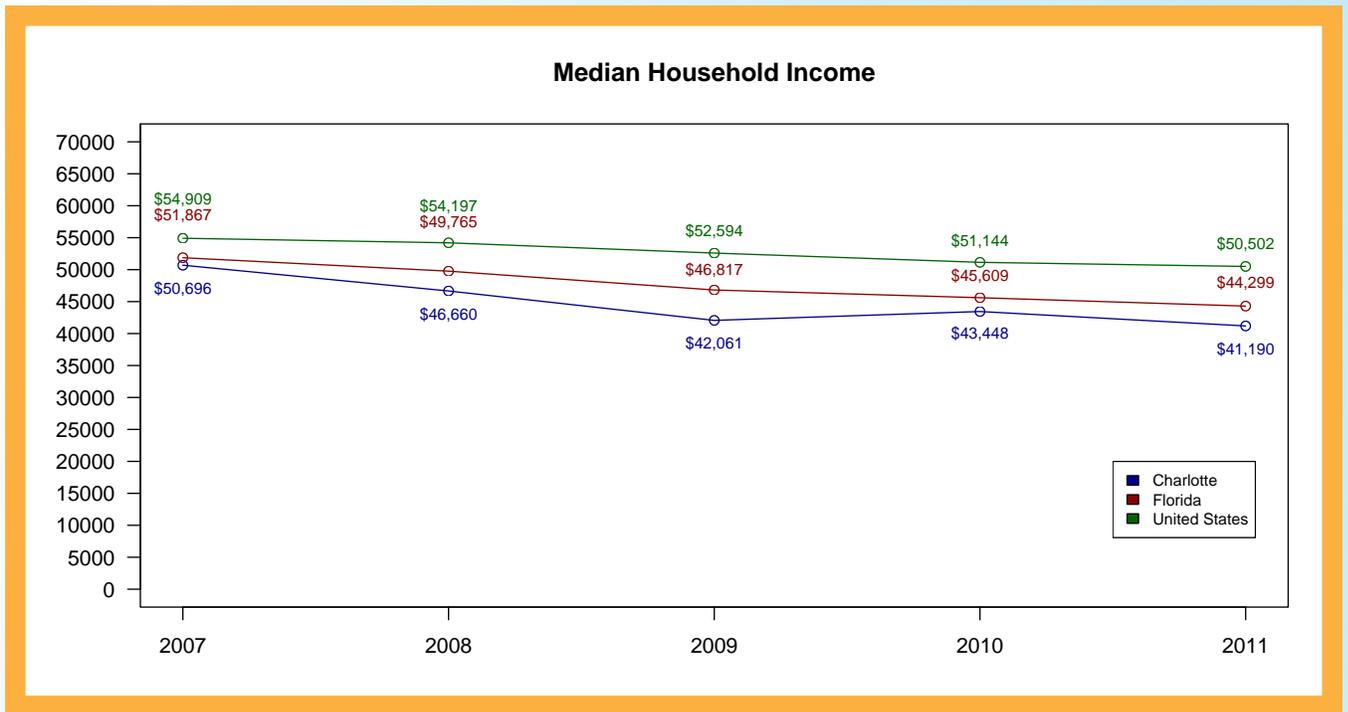


Figure 2.4 Source: American Community Survey, 1 yr. estimates, table CP03

HOUSEHOLD INCOME AND SOURCES

Charlotte County has a substantially larger percentage of households whose income comes from Social Security benefits and retirement income and fewer households with income coming from salary earnings. Only 54.5% of Charlotte County households receive income from salary earnings compared to 72.2% of Florida households and 77.7% of households nationwide. On the other hand, 58% of Charlotte County households receive Social Security benefits and 38.4% receive retirement income.⁹ It is unknown what percentage of those earning Social Security are receiving retirement benefits and what percentage are receiving disability benefits from the Social Security Administration (see Appendix 1).

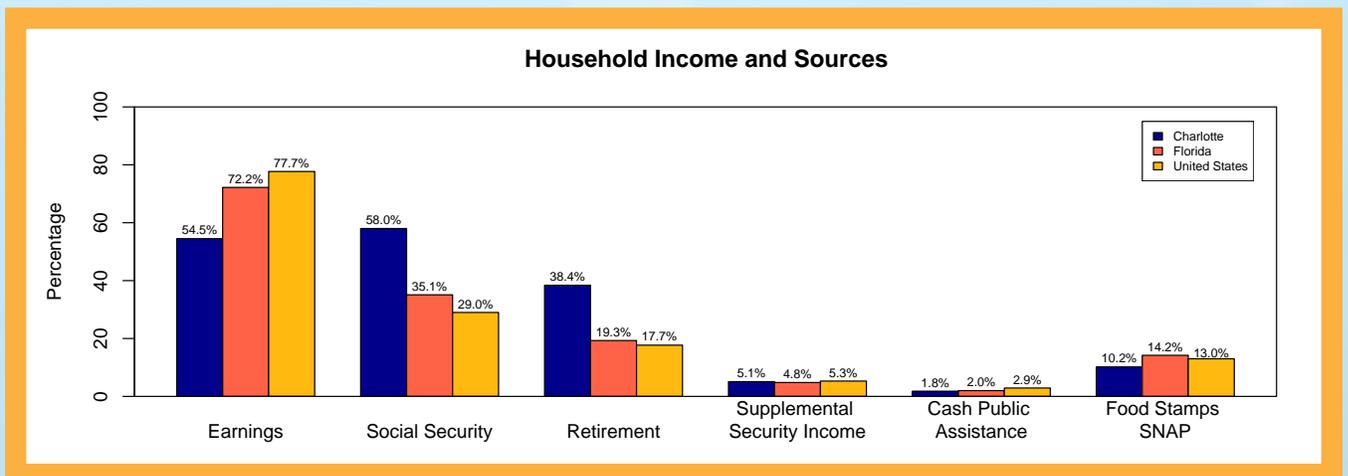
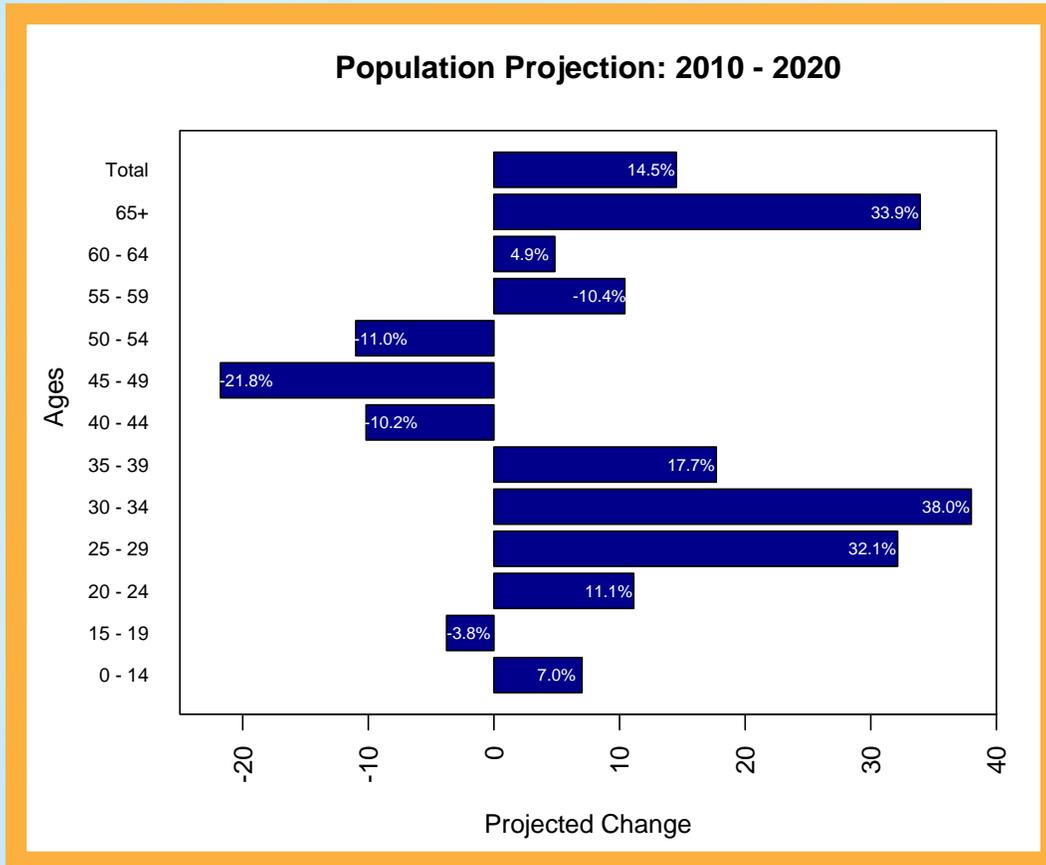


Fig 2.5 Source: American Community Survey, 2011 1 year estimate Table DP03

WORKFORCE

The population ages 15 to 64 typically make up the majority of the labor force, with those ages 25 to 54 considered at the peak of their careers when earnings are typically highest.¹⁰ While this population is projected to increase by 3.58% between 2010 and 2020, the majority of growth will come from those ages 20 to 39, while the population ages 40 to 54 is expected to decrease. Additionally, the population age 65 and older is projected to increase by 33.93% in 2020¹¹ representing a large percentage of the county's population likely to drop out of the workforce.



The population age 65 and older is projected to increase by 33.93% in 2020 representing a large percentage of the county's population likely to drop out of the workforce.

Figure 2.6 Source: Charlotte County Economic Development Office, "Charlotte County Demographic Profile", 2013.

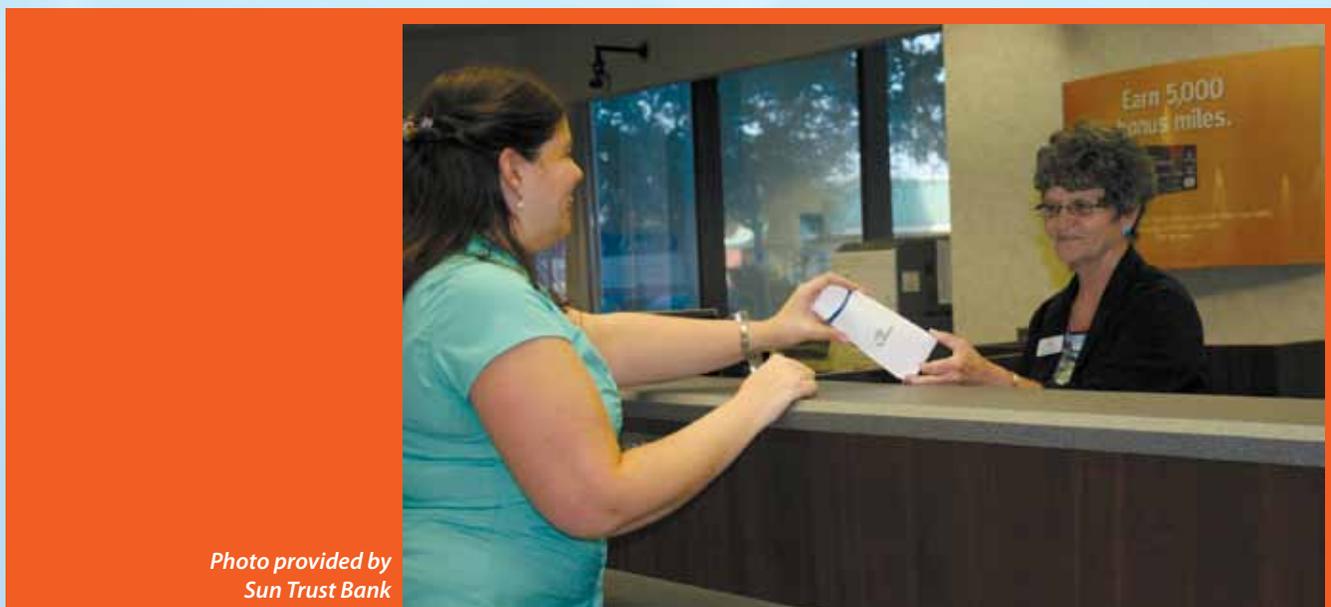


Photo provided by Sun Trust Bank

SPOTLIGHT

Local Currency boosts communities economy and assists those who are unemployed or underemployed

It may seem like Monopoly money to outsiders, but a growing number of communities across the U.S. are using homegrown local currencies to stimulate their economies and protect themselves from the nation's broader economic woes.

While there were only about 20 active community currencies in the United States in 2009, there has been a recent resurgence, with at least a dozen communities developing their own currencies in the past couple of years, estimates Loren Gatch, a professor of political science at the University of Central Oklahoma who researches these alternative currencies. In addition, currencies that have been around for years have seen a spike in interest, with membership doubling in some cases.

Francis Ayley, the founder of Life Dollars, a currency started in Bellingham, Wash., in 2004, said fear of a shortage of U.S. dollars and frustration with the growing wealth gap in the country are driving more people to his currency. "Many people are short of cash because they are unemployed or under-employed ... many are questioning what they have been told about the economy and the way the free market supposedly works," said Ayley.

Local Trade Partners, in Fayetteville, Ark., combines a local currency called the "Trade Dollar," which is equal to one U.S. dollar, with old-fashioned bartering. An owner of an auto repair shop could change the oil in someone's car, for example, and the car's owner could pay them in Trade Dollars. The repairman could then use that money at the local restaurant, or even at the orthodontist. And because the aim is to help local businesses, members must be locally-owned -- no big corporations allowed.

"When you go to Home Depot and buy \$100 worth of lumber, some of that profit is leaving your town and going to a different part of the world, never to come back," said Rich Creyer, co-founder of the currency. "By making trade money, we have created a sealed system. It's our own little economy and country in a fishbowl."

Source: Ellis, Blake. (2012, January 18). Local currencies: 'In the U.S. we don't trust'. CNN Money. Retrieved from http://money.cnn.com/2012/01/17/pf/local_currency/index.htm.

EMPLOYMENT BY INDUSTRY

Charlotte County's economy is largely supported by three industries: trade, transportation, and utilities (27.02%); education and health services (25.12%); and the leisure and hospitality industry (15.51%). **The county's largest industry, construction, has been cut in half since 2007** while industries like leisure and hospitality, and education and health services have grown. Charlotte County lags behind the state in industries such as Manufacturing, Financial Activities, and Professional and Business Services (see Appendix 1).¹²

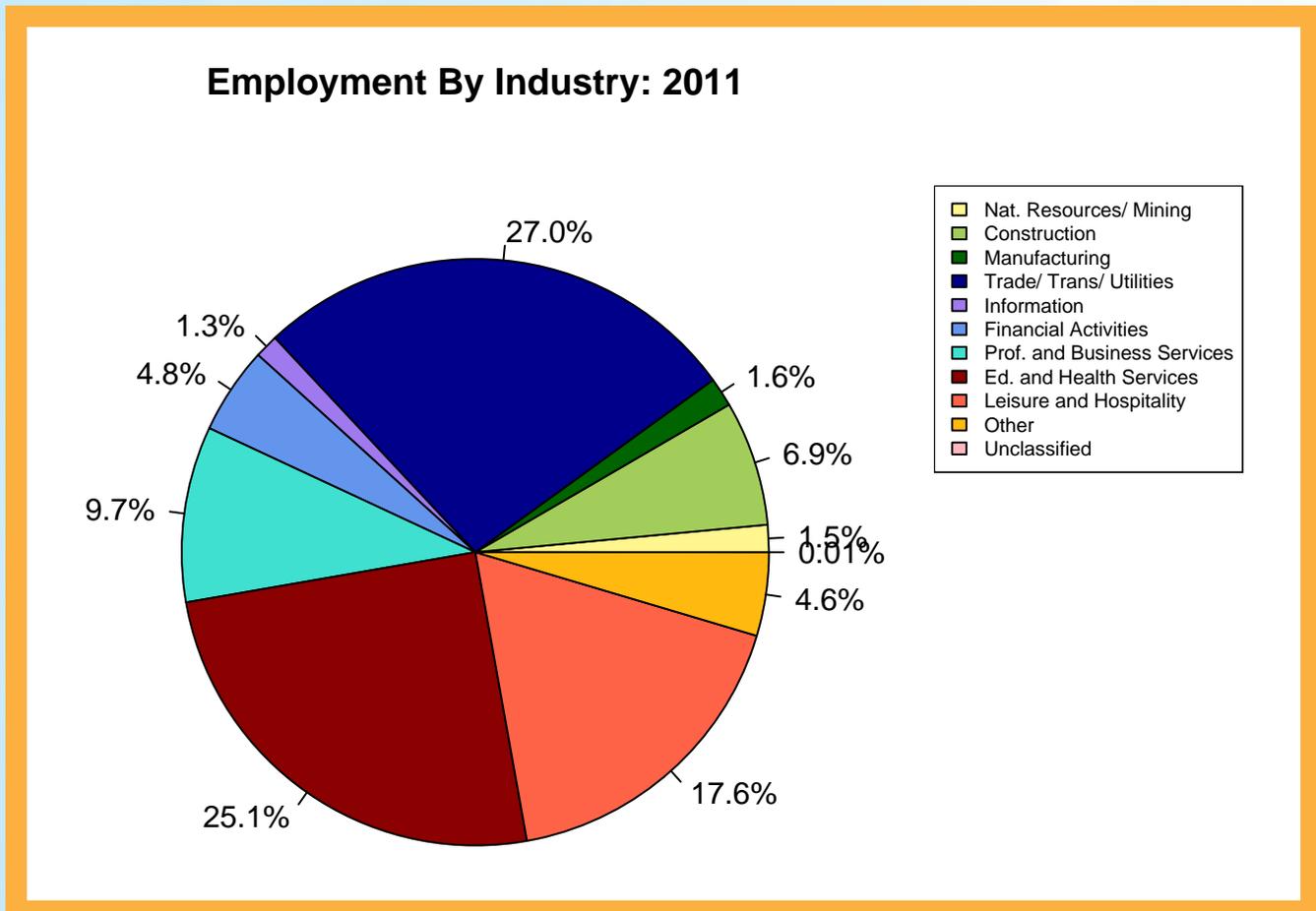


Figure 2.7 Source: Bureau of Labor Statistics, Quarterly Census of Employment and Wages, 2011 Annual Average



Photo provided by Publix Super Markets

GROWTH PROJECTIONS BY INDUSTRY/OCCUPATION

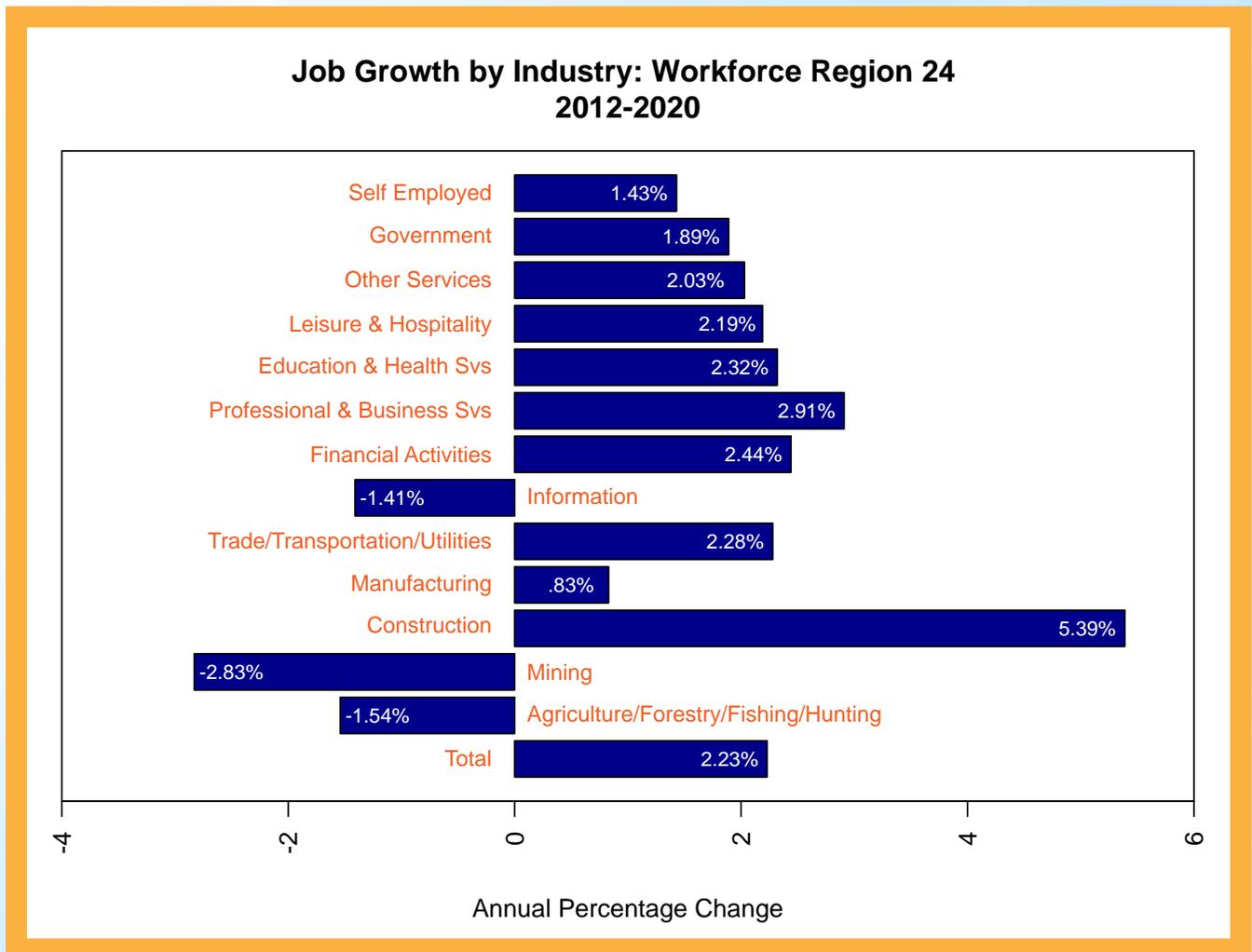


Figure 2.8 Source: Florida Department of Economic Opportunity, Employment Projections Data, 2012 – 2020

The Florida Department of Economic Opportunity (DEO) divides the state into 24 workforce regions. Charlotte County is part of Workforce Region 24, which is also comprised of Collier, Glades, Hendry, and Lee Counties. The DEO projects that job growth for the region will grow annually by 2.23% through 2020. Industries such as Agriculture, Forestry, Fishing and Hunting, Mining, and Information are projected to decline annually while all others industries are projected to grow and/or reclaim the jobs that were lost since 2007.¹³

Further, DEO identifies the fastest growing occupations within these industries based on projected growth between 2012 and 2020. Of those, 15 require a vocational certificate and 3 require an associate's degree. Only 1 requires a bachelor's degree and 1 requires less than a high school diploma.¹⁴ This suggests that while it will be important for high school graduates to continue their education a bachelor's degree is not necessarily required.

Fastest Growing Occupations 2012 – 2020: Workforce Region 24			
Occupation	Annual % Chg	2012 Avg. Hr \$	Education
Brick/Block Masons	6.41%	\$16.66	Vocational Cert.
Glaziers	6.00%	\$16.12	Vocational Cert.
Cost Estimator	5.99%	\$26.66	Associate Deg.
Cement Masons	5.81%	\$14.62	Vocational Cert.
Drywall/Ceiling Tile Installer	5.61%	\$15.19	Vocational Cert.
Plasterer/Stucco Masons	5.25%	\$15.50	Vocational Cert.
HVAC Mechanic & Installer	4.82%	\$19.72	Vocational Cert.
Construction Equipment Operator	4.74%	\$18.27	Vocational Cert.
First-Line Construction Supervisor	4.70%	\$26.65	Associate Deg.
Sheet Metal Workers	4.54%	\$17.28	Vocational Cert.
Market Research Analyst	4.53%	\$29.72	Bachelor Deg.
Construction Laborers	4.48%	\$13.04	< HS Diploma
Paralegal/Legal Assistant	4.47%	\$21.09	Vocational Cert.
Welders/Cutters/Solderers/Brazers	4.46%	\$16.19	Vocational Cert.
Tile and Marble Setters	4.32%	\$15.85	Vocational Cert.
Loan Officers	4.31%	\$36.10	Associate Deg.
Diagnostic Medical Sonographer	4.24%	\$32.41	Vocational Cert.
Security/Fire Alarm System Installer	4.07%	\$18.16	Vocational Cert.
Painters/Construction/Maintenance	4.06%	\$14.63	Vocational Cert.
Industrial Machinery Mechanics	4.04%	\$20.69	Vocational Cert.

Figure 2.9 Source: Florida Department of Economic Opportunity

OPPORTUNITIES

◆ Increase educational attainment beyond high school.

There is little doubt that there is a correlation between education and higher earnings. For decades, one could maintain a middle class lifestyle with a high school diploma. However, that trend has continued to shift. For many jobs, a high school diploma is no longer sufficient. As of 2012, 59% of all jobs nationally required some form of post-secondary education or training. It is anticipated that this number will increase to 66% by the year 2020.¹⁵ Statewide, 58% of all jobs are expected to require some form of postsecondary education by the year 2020.¹⁶ Of the top 20 occupations for Workforce Region 24, the majority requires some form of post-secondary education but not necessarily a Bachelor's degree.¹⁷ Alternative methods of attaining post-secondary education without getting a bachelor's degree include associate's degrees, post-secondary certificates, employer based training, apprenticeships, and industry-based certifications. These alternatives provide a more cost effective way of attaining a post-secondary education without the high costs associated with a four-year degree. These programs are often shorter with more specific training and offer comparable earning potential.

◆ Diversify the local economy

Lack of economic diversification makes a region susceptible to downturns, and as a result, a slow recovery.¹⁸ The majority of Charlotte County's employment is in three industries: trade, transportation and utilities; education and health services; and leisure and hospitality, and needs to expand to additional areas in order to better weather economic downturns.

Furthermore, Charlotte County has a history of relying on cyclical industries like construction, which was hit harder than many during the most recent economic downturn. Yet, projections from the Department of Economic Opportunity suggest that the construction industry will see the most growth between 2012 and 2020. Not only will the industry as a whole see significant growth, but also the majority of the fastest growing occupations in Region 24 are part of the construction industry. While this growth is encouraging, the community as a whole must be prepared for future downturns by growing other industries and be poised to be creative in diversifying the local economy.



Photo provided by
United Way

(this page intentionally left blank for two-sided reproduction)

FAMILY SERVICES



Photo provided by Joseph Resendez, Florida Weekly

A person’s overall health and well-being begins at home. Their support system plays a vital role in laying the foundation for a productive and healthy future, whether at school or at work, and spreads beyond the individual to impact the entire community. The make up of the family has evolved beyond the nuclear family to include multi-generations, grandparents serving as primary caregivers, single parent households and others. The importance of family was also a concern of the Charlotte County community throughout this assessment.

Participants in the Clientele and Agency Surveys expressed concern about the impact of poor parenting and risky behaviors such as drugs, crime, and abuse, as well as, inadequate support systems for youth and seniors (see Appendices 2 and 3). Participants in the Community Conversation questioned whether or not an aging community could maintain a sense of hometown pride. It became apparent that young adults leave the community due to lack of professional job opportunities. Furthermore, participants identified an opportunity for seniors to serve as mentors for the community’s youth population (see Appendix 4).

FAMILIES

Charlotte County is home to an estimated 45,444 families. Only 18.7% of these families have children under the age of 18 and 63.3% have one or more person over the age of 60. The average family size is 2.76, slightly smaller than the state (3.26) and national (3.25) averages. Approximately 18.73% of families are single-parent families.¹

Family Violence

In 2010, the Florida Department of Children and Families received 5.14 reports of child abuse per 1,000 children in Charlotte County compared to 3.68 reports statewide. This number is up from 2006 when 3.7 cases were reported per 1,000 children.² In the same year, the Center for Abuse and Rape Emergencies (C.A.R.E.) reported serving 46 youth, under the age of 18 in its shelter and 35 youth in its outpatient services program; 8 sexual assault victims between the ages of 12 and 18 were served by C.A.R.E. The number of domestic violence victims under the age of 18 served by C.A.R.E.'s shelter has declined; however, the number of sexual assault victims between the ages of 12 and 18 served by C.A.R.E. doubled between 2010 and 2011 and again in 2012 reaching 35.³

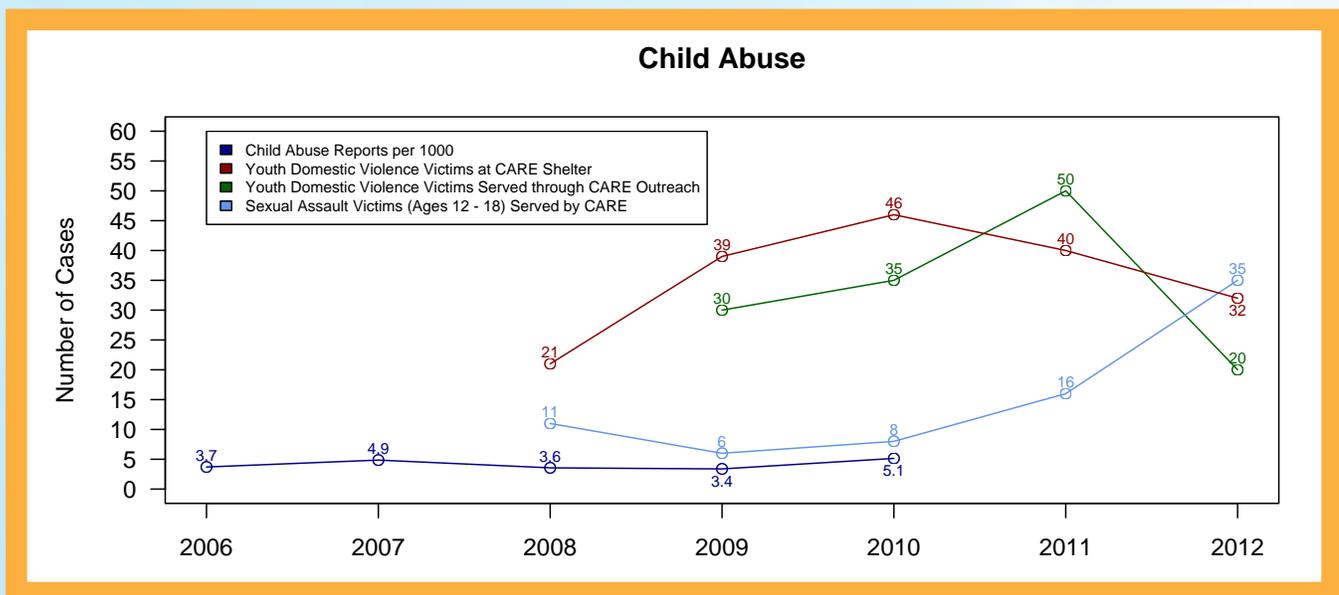


Figure 3.1 Source: Juvenile Justice Council, Risk Factor Indicator Inventory, 2013

Charlotte County has 214 children served by the child welfare system as of June 30, 2013. This number has continued to increase over the past year. In July 2012, only 131 children were being served.⁴

In an effort to prevent children from entering the formal foster care system more emphasis has been placed on diversion. This program works directly with families at risk of losing their children to develop a plan of action and to keep the children in the home. During the past year (FY 2012-2013) 175 children in 100 families were served in Charlotte County.⁵

The number of adult clients served by C.A.R.E.'s shelter has decreased since 2008; however, the number served by their outreach services increased during the same time. Like the number of youth sexual assault victims, the number of victims between the ages of 18 and 29, served by C.A.R.E., increased significantly since 2008.

Adult Domestic Violence

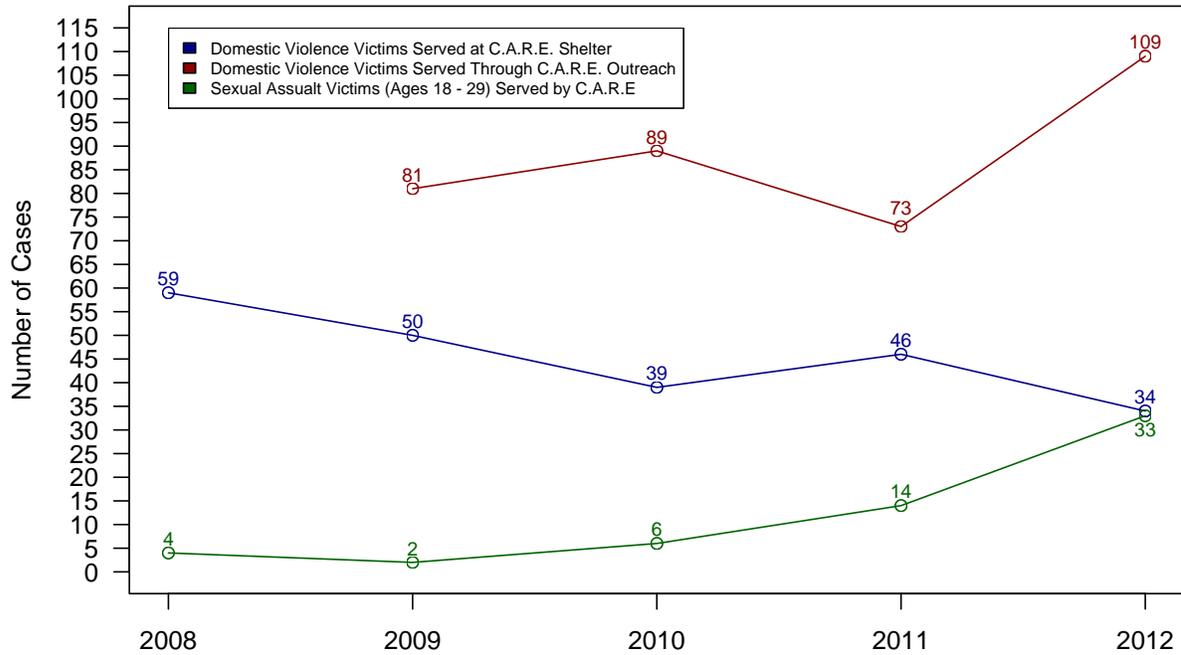


Figure 3.2 Source: Juvenile Justice Council, Risk Factor Indicator Inventory, 2013

Photo provided by AMIKids Crossroads.



Photo provided by Big Brothers Big Sisters of the Sun Coast.

YOUTH SERVICES

Developmental Assets

In 1990, Search Institute released a framework of 40 Developmental Assets, which identifies a set of skills, experiences, relationships, and behaviors that enable young people to develop into successful and contributing adults. Over the following two decades, the Developmental Assets framework and approach to youth development became the most frequently cited and widely utilized in the world, creating what Stanford University’s William Damon described as a “sea change” in adolescent development.

Data collected from Search Institute surveys of children and youth from all backgrounds and situations has consistently demonstrated that the more Developmental Assets young people acquire, the better their chances of succeeding in school and becoming happy, healthy, and contributing members of their communities and society. The Charlotte County Children’s Services Council will be conducting a survey of all Charlotte County high school students in August 2013 to determine what the level of Developmental Assets are among our community’s youth.

Juvenile Offenses

The Department of Juvenile Justice received referrals for 779 criminal offenses during the 2011-12 fiscal year. While, this number is up slightly from the previous year, the number of referrals has been decreasing over the past five years, down from 1,040 in 2007-08. Of the offenses in 2011, 168 were felonies, 419 were misdemeanors, and 192 were classified as other offenses. White males committed 54.69% of all juvenile offenses, and white females committed 23.11% offenses. The number of offenses increased with age group; 58.79% of offenses were committed by youth age 16 and older. Only 17 youth referred in 2011 were committed to a residential facility while under the supervision of the Department of Juvenile Justice; 307 youth were referred to diversion programs and 194 received probation. ⁶

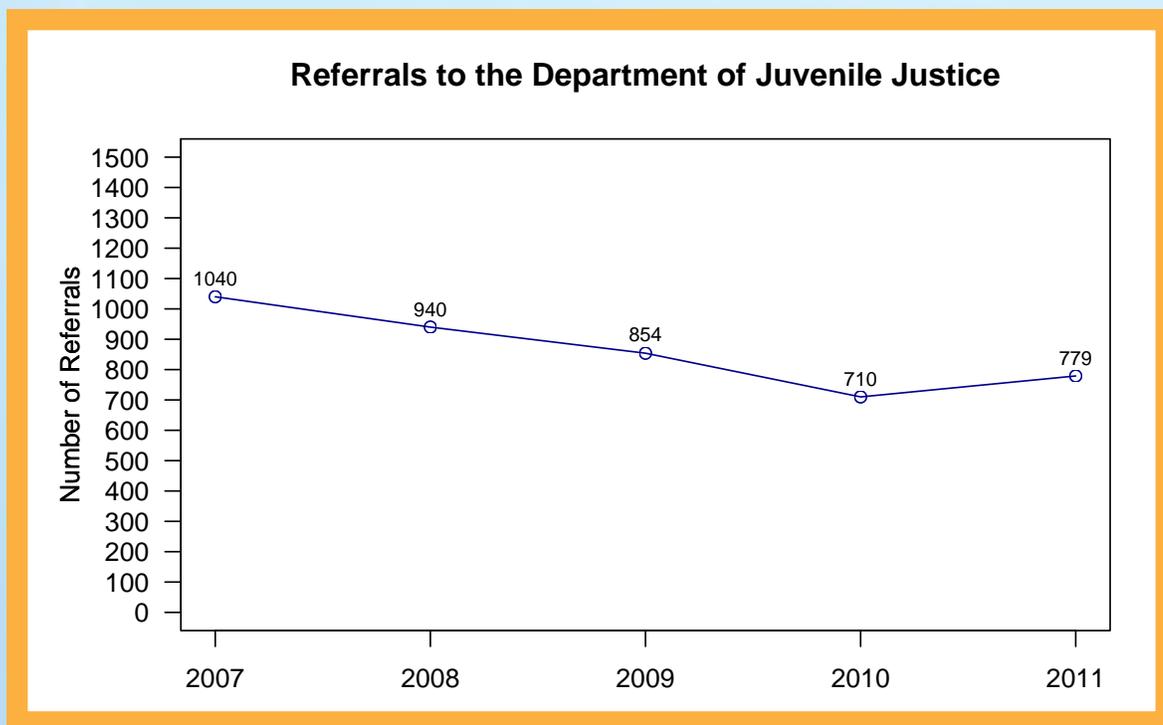
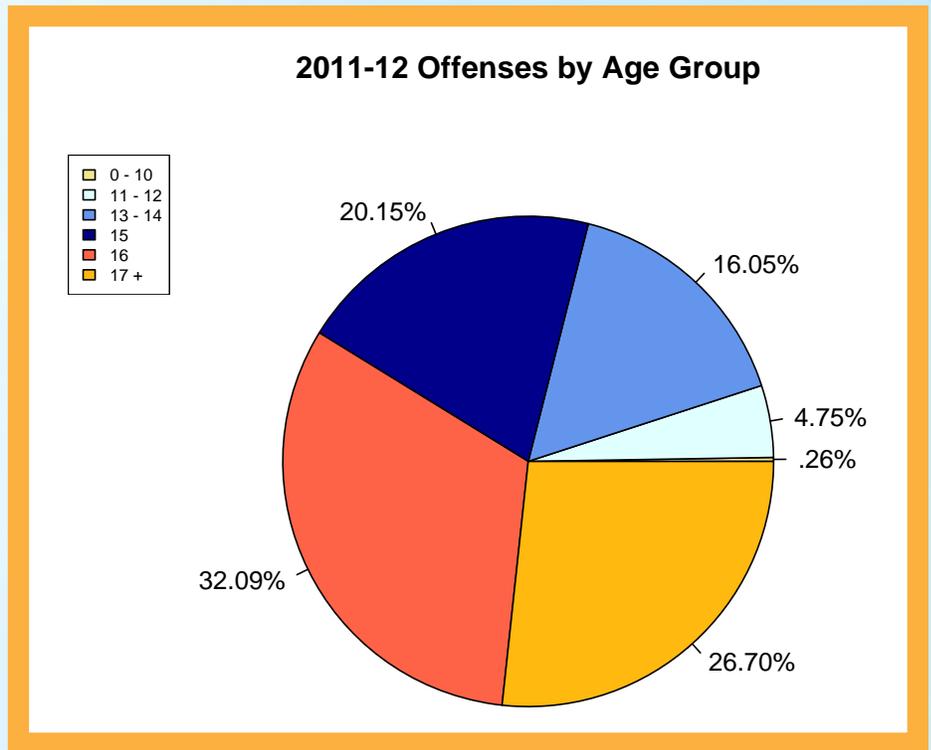


Figure 3.3
Source:
Florida
Department
of Juvenile
Justice,
Delinquency
Profile

Figure 3.4
 Source:
 Florida
 Department
 of Juvenile
 Justice,
 Delinquency
 Profile



Drug related felonies are down among youth in Charlotte County over the past five years

Drug/Alcohol Use

Drug related felonies are down among youth in Charlotte County over the past five years; however, drug related misdemeanors are on the rise after dropping in 2008-09. In 2007-08, there were 24 drug felony cases referred to the Department of Juvenile Justice. By 2011-12, this number had dropped to eight. The number of misdemeanor drug offenses dropped from 102 in 2007-08 to 79 the following year. The number has continued to rise since then and was up to 107 offenses by 2011-12. Alcohol offenses have increased from 6 in 2007-08 to 20 in 2011-12.⁷

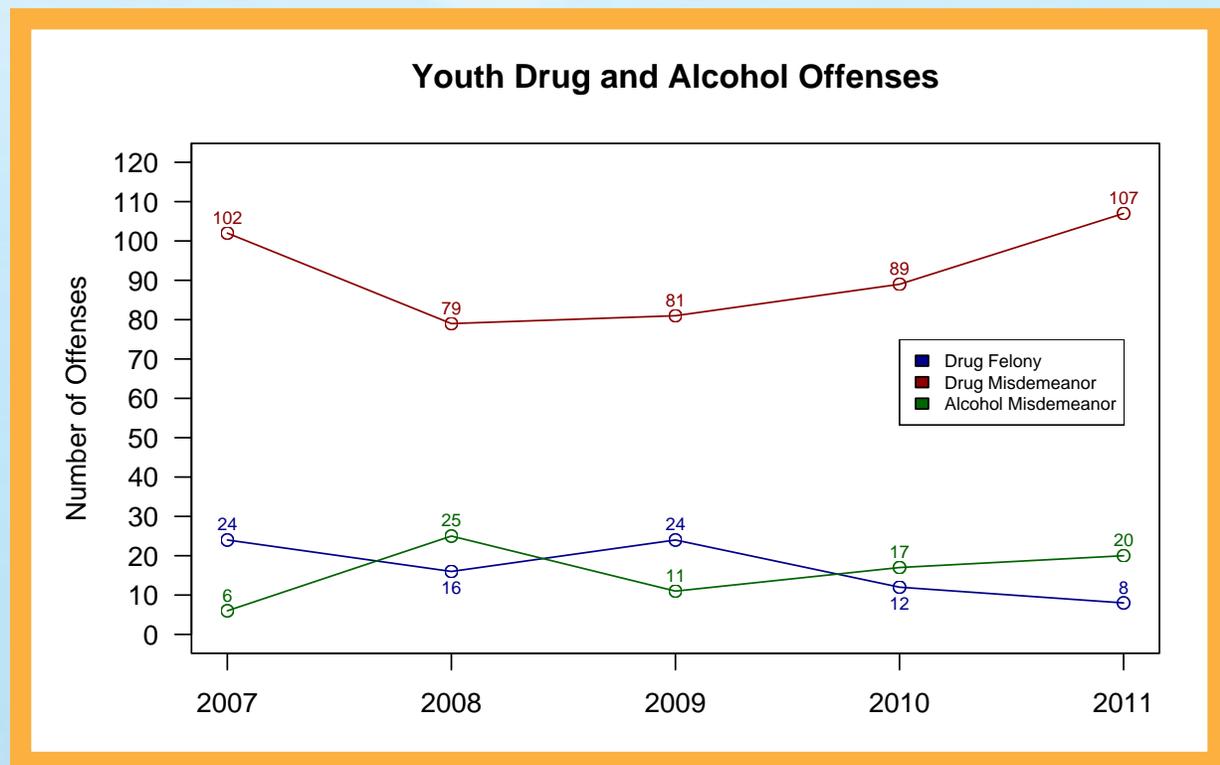


Figure 3.5 Source: Department of Juvenile Justice, Delinquency Profile
 Charlotte County, Florida Community Action Plan

Furthermore, 6.5% of Charlotte County students, grades 6 thru 12 surveyed by the Florida Youth Substance Abuse Survey, said they participated in selling drugs compared to 5.0% of students statewide. In addition, 13.1% reported being drunk or high at school compared to 11.2% of students statewide. Forty-seven percent of youth reported having used alcohol at some point in their lifetime down from 69% in 2002. Thirty-eight percent reported having used some type of illicit drug at some point in their lifetime down from 45% in 2002. Despite being lower than rates in 2002, the percentage of those reporting having used drugs at some point in their lifetime is on the rise again after declining for several years.⁸

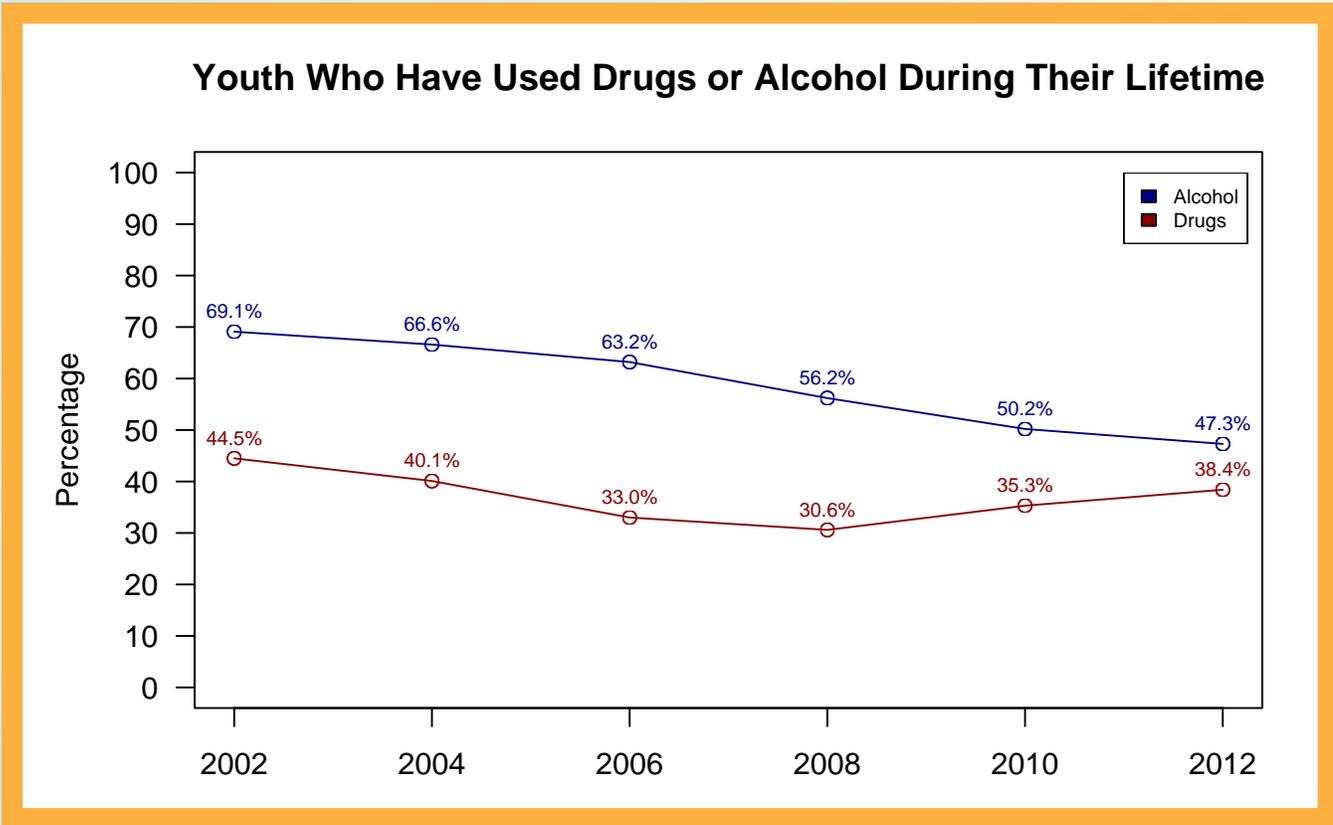


Figure 3.6 Source: Florida Youth Substance Abuse Survey, 2012 Note: Survey administered in even years



Photo provided by Charlotte County Public Schools

Extra Curricular Activities

Participation in extra curricular activities has long been associated with positive youth development. Studies have shown that involvement in such programs has a positive impact on students' performance in the classroom, and also acts as a deterrent against risky behavior associated with adolescence.⁹

Participation rates in extra curricular activities by Charlotte County youth are consistent with rates for youth across the state. Of those surveyed in the Florida Youth Substance Abuse Survey, 37% said they participated in school sports, an additional 34% participated in sports outside of school, 11% participated in the school band, 26% participated in school clubs, and 12% participated in community based clubs.¹⁰

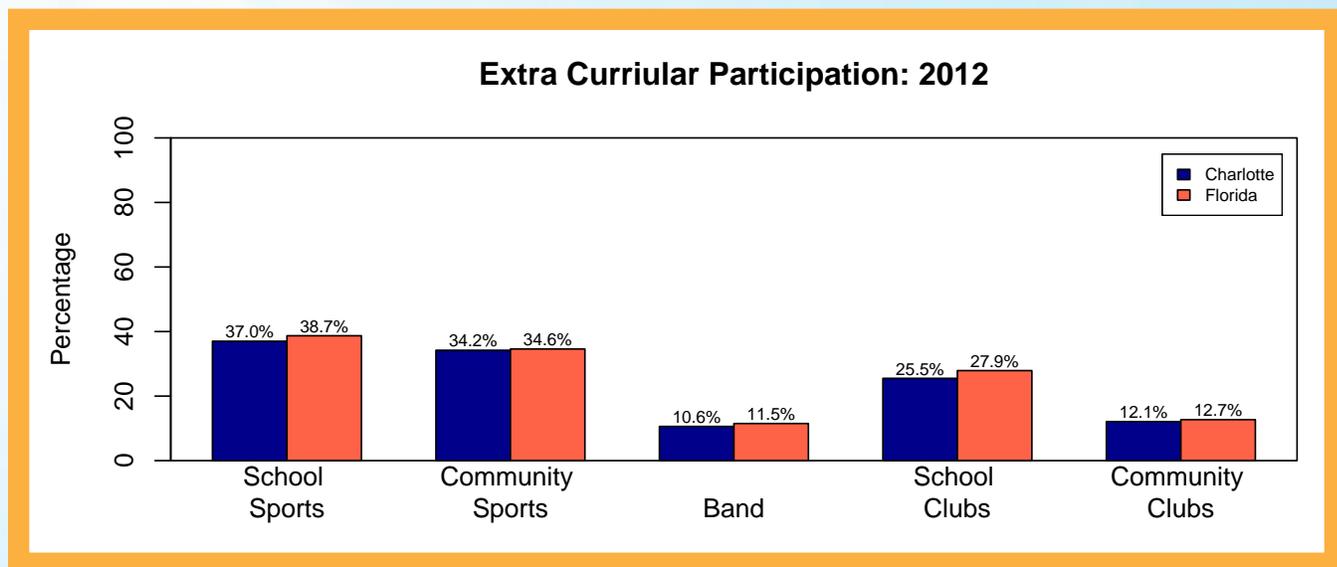


Figure 3.7 Source: Florida Youth Substance Abuse Survey, 2012

A number of extracurricular programs are available for youth in Charlotte County. Charlotte County Community Services, the Charlotte County Family YMCA, the South County YMCA (Englewood Branch), Pop Warner, and AAU offer programs such as dance, aquatics, and sports leagues. Through Charlotte County Public Schools, students can participate in activities such as band, clubs, theater, and sports. The Boys and Girls Clubs provide youth opportunities to develop character and leadership skills, participate in fine arts programs, sports, and education and career development programs. Organizations such as Boy Scouts, Girl Scouts, 4-H, and Civil Air Patrol provide leadership development opportunities.

Despite numerous opportunities available for youth with a wide variety of interests, there are still barriers to participation for children in low-income families. Most programs have a cost associated with participation. Some programs offer scholarship assistance, but for those that do not the cost can be substantial. In addition to program costs, other issues such as transportation and family work schedules create barriers to participation.



SPOTLIGHT

Highlighting a positive community initiative: Parkside

After 50 years, the heart of Port Charlotte had become an area that few wanted to call home. Businesses were leaving and store-fronts left empty. Many residential properties neglected or abandoned all together. The remaining residents and businesses were dealing with the increasing problems of homelessness, criminal activity, and an overall lost sense of community. It was time for this area to be revitalized and brought back to the neighborhood it once was and to rekindle the spirit of hometown pride through significant financial investment/commitment, strong leadership, community ownership, and new partnerships.

Below is the executive summary taken from the 'Citizens' Master Plan' adopted August 16, 2011. (Full copy is available at www.charlottefl.com/cra). The plan outlines an older area in Port Charlotte now referred to as 'Parkside' and provides a blueprint of proposed changes to come over the next several years. Regular updates and progress reports are developed and shared with the many community partners within the district and anyone else interested. Regular update on progress helps keep the momentum for revitalizing this area alive. In addition, TEAM Port Charlotte d/b/a TEAM Parkside was developed to serve as the liaison between Charlotte County Government and the citizens and businesses within the Parkside area. TEAM Port Charlotte is a not-for-profit, 501c3 made up of area residents and other community volunteers, professionals, laymen, and clergy. Under its umbrella there are established committees; Communications/Fundraising, Lakes & Waterways, Housing, Parkside Tree Canopy Restoration, Parkside Business, Communities for a Lifetime, and Weed and Seed that develop, undertake, and implement various projects that complement the overall Citizens' Master Plan and help to keep the overall plan mission, and progress moving forward with citizen participation and input.

The Parkside project commitment is currently approved and will take place over the next 20 years with an anticipated investment of \$21 million dollars.

EXECUTIVE SUMMARY

On September 21, 2010, the Board of County Commissioners (Board) unanimously approved the Parkside area as a Community Redevelopment Area (CRA). This action demonstrated recognition of the need to revitalize the CRA area and the will to positively impact the historic residential and business center of Charlotte County.

Through the CRA process, the Board established a means by which revitalization of and reinvestment in the area would occur. Key to this process was the Board's wish to see a private/public partnership formed in which the public would share in the development and implementation of the Citizens' Master Plan (Plan). Citizens responded individually and collectively. For example, an effective district partner formed TEAM Port Charlotte, a not-for-profit, 501c3. They have offered tremendous leadership and assistance in making improvements in a variety of areas in service to the district. In all, over 300 private citizens have participated and contributed to the Plan's development. Public participation involved a robust series of public meetings, citizen and business surveys, and one-on-one stakeholder interviews, concluding with a series of well-attended public charrettes.

The Plan is written in conformity with §163.360, Florida Statute, as the district's Community Redevelopment Area (CRA) Plan. As such, it serves three main purposes:

- ◆ The Plan prescribes the actions that will be taken to revitalize the area.
- ◆ The Plan provides guidance regarding when and how the Plan initiatives will be funded.
- ◆ The Plan serves as support for grant applications to help future partners choose to fund the district's improvements.

In its 50th year, it is fitting that the district receives attention and reinvestment. The 1,100 acre area has served as the center or heart of Charlotte County's commerce for a large portion of the County's history. The district is home to approximately 8,000 residents, 800 businesses (including two of the County's three major hospitals, a prominent mall, and a large automobile dealership) and many medical, financial office, institutional and commercial retail businesses. Almost every County resident has relied on the businesses and services within the district at one time or another.

The district's development pattern is unique for Charlotte County, rivaled only by the City of Punta Gorda. The area contains a strong mix of commercial and low-, medium-, and high-density residential dwellings. The area, often thought of as a center for senior citizens actually represents all age groups, with approximately one-third youth, one-third senior and one-third young to middle age adults. The area also possesses a strong mix of social and cultural assets which, properly reconfigured, would transform this area from simply serving as a place to go for a doctor's visit to an active and bustling pedestrian-oriented community area with attractive and inviting commercial, cultural, recreation and public open spaces. The district will be looked at as, *"A Great Destination; a Great Place to Live, Work and Play."*

The Plan is comprehensive in nature, offering solutions not only to current critical problems such as higher than average crime and property maintenance violations within the district, but more importantly, it establishes a long-term vision and defines the actions that will prevent the decline from continuing and ultimately lead to renewal.

In order to accomplish this, the Plan is divided into four sections. Section 1 describes the purposes of the plan and the study area. Section 2 provides background on the conditions of the area. Section 3 provides the Plan initiatives and policies that will lead to renewal. Section 4 provides the funding plan, which includes Tax Increment Financing (TIF).

It is important to note that no single suggested improvement will mend the district; it will take time and the full list of Plan recommendations to fully transform the area. Each piece of this Plan is a critical building block for revitalizing the district as a healthy community area. It is important that work commence immediately to build upon the momentum and support of the residents and business owners.

SENIORS SERVICES

Individuals over age 65 represent approximately 36% of the county's population. **Charlotte County's senior population ranks 2nd in the state, as well as, 2nd in the nation in size behind only Sumter County,**¹¹ home to the retirement community The Villages. As life expectancy continues to increase, this population can be expected to grow. By 2020, it is expected that Charlotte County's population age 65 and older will increase by 33.93%.¹²

In conducting this assessment, it became apparent that the needs of this population are difficult to pinpoint and warrant further study. There appears to be an abundance of for-profit services for seniors, but few services for those with limited financial resources. As a result many seniors find themselves living in dangerous conditions and face issues including malnutrition, poor health, lacking in social interaction and difficulty with mobility and transportation.

Nearly 52.8% of households in Charlotte County have at least one or more persons over the age of 65 in them.

Households

Nearly 52.8% of households in Charlotte County have at least one or more persons over the age of 65 in them. An estimated 18.2% of these residents are living alone.¹³ At the same time, 41.74% of grandparents over the age of 60 are living with their grandchildren under the age of 18 and are responsible for them.¹⁴ Statewide, only 28.90% of grandparents over 60, living with their grandchildren under the age of 18 are responsible for them.¹⁵ Both situations - those living alone and those who are the primary caregiver for their grandchildren - present problems for an aging population.

Poverty

An estimated 5.6% of those over the age of 65 in Charlotte County are living in poverty compared to 10% statewide and 9.3% nationwide.¹⁶ However, an additional 10% are below 125% of the poverty guideline. Only 0.5% of seniors are without insurance¹⁷ yet 28% of seniors in Charlotte County are classified as medically underserved.¹⁸ Approximately, 14.35% of seniors over the age of 65 are eligible for Medicaid.¹⁹ Only 28% of seniors eligible for food stamps participate.²⁰ The Senior Services Division of the Charlotte County Human Services Department currently maintains a waitlist of 299 residents for senior related assistance.²¹



Photo provided by
Joseph Resendez,
Florida Weekly

Health

An estimated 34.4% of seniors in Charlotte County have a disability, which is consistent with the senior population state and nationwide. Of those 15.9% had a hearing difficulty, 5.9% had a vision difficulty, 9.7% have a cognitive disability, 19.7% have an ambulatory disability, 6.5% have a self-care disability, and 9.2% have an independent living disability.²² An estimated 4.56% of residents in Charlotte County have Alzheimer's disease²³, compared to 2.37% of residents statewide.²⁴

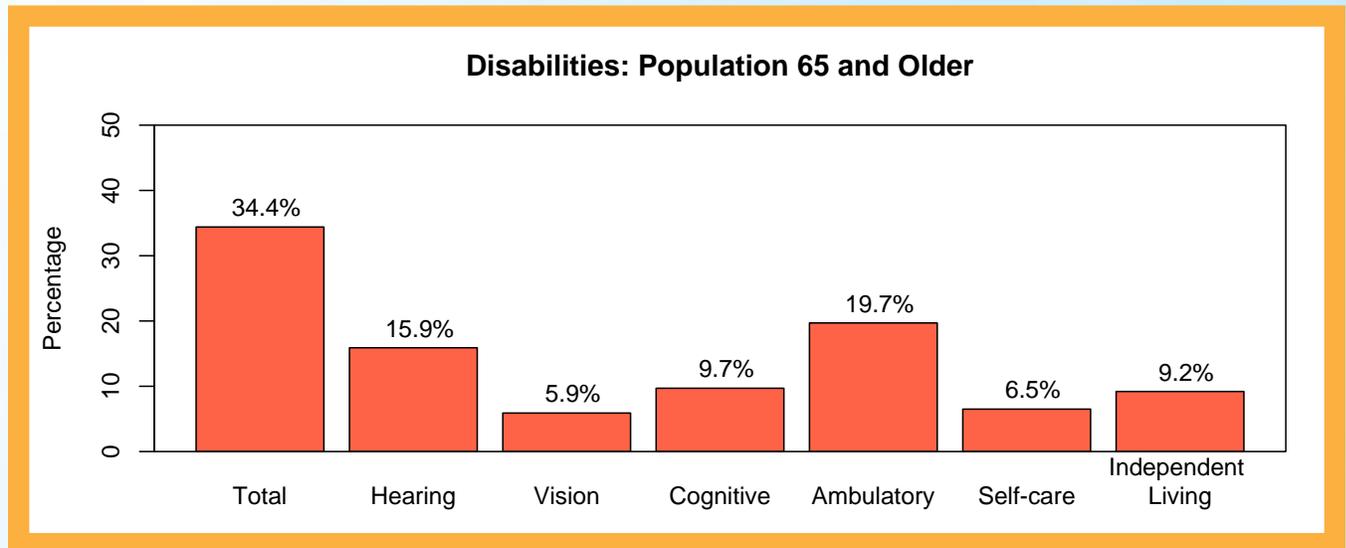


Figure 3.8 Source: American Community Survey, 2011 1 year estimate, table S1810

Charlotte County has 8 public and 1 veterans' nursing homes with 1,228 beds.²⁵ This equals 764.5 beds per 100,000 people which is well above the state average of 438 beds per 100,000 people.²⁶ Patients on Medicaid utilize 53.3% of these beds. There are also 18 assisted living facilities with the capacity to serve 1,024 clients. In addition, Charlotte County has only one adult day care facility with a capacity to serve 60 people. There are 22 adult family care homes with a capacity to serve 89 people. Of the county's 18 home health agencies, only one is Medicaid certified and 14 are Medicare certified.²⁷ Furthermore, it is unknown how seniors participating in Medicaid will be affected by the state's transition to a managed care system in 2014.

The Senior Services Division of the Charlotte County Human Services Department currently maintains a waitlist of 299 residents for senior related assistance.

Medical Facilities	
Public Nursing Homes	8
Veterans' Nursing Homes	1
Total Beds	1,228
Assisted Living Facilities	18
Capacity	1,024
Adult Day Care Facilities	1
Capacity	60
Adult Family Home Care Homes	22
Capacity	89
Home Health Agencies	18

Figure 3.9 Source: Florida Department of Elder Affairs 2012



*Photo provided by
Edison State College*

OPPORTUNITIES

- ◆ **Use the results of the Developmental Assets survey to further support youth development activities in Charlotte County.**
- ◆ **Increase education and awareness about youth and adult abuse.** The increasing number of sexual assault cases in youth and adults is particularly concerning.
- ◆ **Increase affordability and decrease barriers of youth extra curricular programs in an effort to deter risky youth behavior and promote positive youth development and instill a sense of community.**
- ◆ **Increase capacity and availability of quality diversion programs for juvenile offenders.**
- ◆ **Improve the availability and capacity of services for Charlotte County's large but varied senior population, in particular those with limited financial resources, through further program and resource development.**

HEALTH



Photo provided by Charlotte County Employee Health Center

In this study, the Client and Agency Surveys, as well as community members attending the Community Conversation, consistently identified health care as a need (see Appendices 2 thru 4). Social and economic factors often go hand in hand with the health of individuals as well as the community. Studies show that those who have access to education, employment, and safe environments are more likely to have access to preventative health services, which results in healthier lifestyles.¹

Rising health care costs and a recovering economy have made it difficult for many to access the health care services they need. As a result, conditions are left untreated until they become serious, leading to more expensive medical services.

41.4% of adults earning below \$25,000 said they could not see a doctor in the past year because of cost, compared to only 15% of those making more than \$25,000.

This relationship between health and socio-economic status is consistent with the findings in Charlotte County. The percentage of adults with any type of insurance increased significantly with higher income brackets, as well as, higher levels of education. Only 76.4% of those making under \$25,000 annually reported having any type of insurance compared to 88.4% earning between \$25,000 and \$49,999 annually and 93.5% earning \$50,000 or above. Furthermore, 41.4% of adults earning below \$25,000 said they could not see a doctor in the past year because of cost, compared to only 15% of those making more than \$25,000. Those with higher incomes were also more likely to receive preventative screenings such as colonoscopies, breast exams, and pap smears. They were also found to be in better overall and mental health.²

SCREENINGS AND TREATMENT (2010)					
	Education		Annual Income		
	HS/GED	HS or higher	\$25K or under	\$25K - \$49,999	\$50K or higher
Adults 50+ receiving colonoscopy in past 5 yrs	56.9%	61.7%	48.4%	61.3%	63.3%
Women 18+ receiving clinical breast exam in past year	45.8%	67.1%	46.0%	56.8%	81.0%
Women 18+ receiving a Pap test in past year	47.9%	55.3%	41.8%	51.1%	72.0%
Adults with diagnosed high blood cholesterol	45.7%	43.5%	42.9%	38.0%	48.0%
Adults with diagnosed diabetes	10.2%	11.5%	13.6%	9.4%	8.8%
Adults with any type of insurance	81.8%	89.9%	76.4%	88.4%	93.5%
Adults with a personal doctor	80.7%	89.5%	72.8%	89.8%	89.4%
Adults who could not see a doctor in past year due to cost	22.4%	20.2%	41.4%	14.5%	15.0%
Adults with good to excellent overall health	71.4%	82.8%	67.9%	88.4%	84.6%
Adults with good mental health	83.0%	89.5%	79.4%	84.9%	93.9%

Figure 4.1 Source: Florida Department of Health, 2010 Florida Behavioral Risk Factor Surveillance System Data Report

The overall health of the Charlotte County community is further impacted by its significant aging population. The median age in Charlotte County was 55.9³, making Charlotte County one of the oldest counties in the state of Florida. Approximately 36% of the population is over the age of 65, compared to 17.8% of the population, statewide.⁴

ACCESS TO CARE

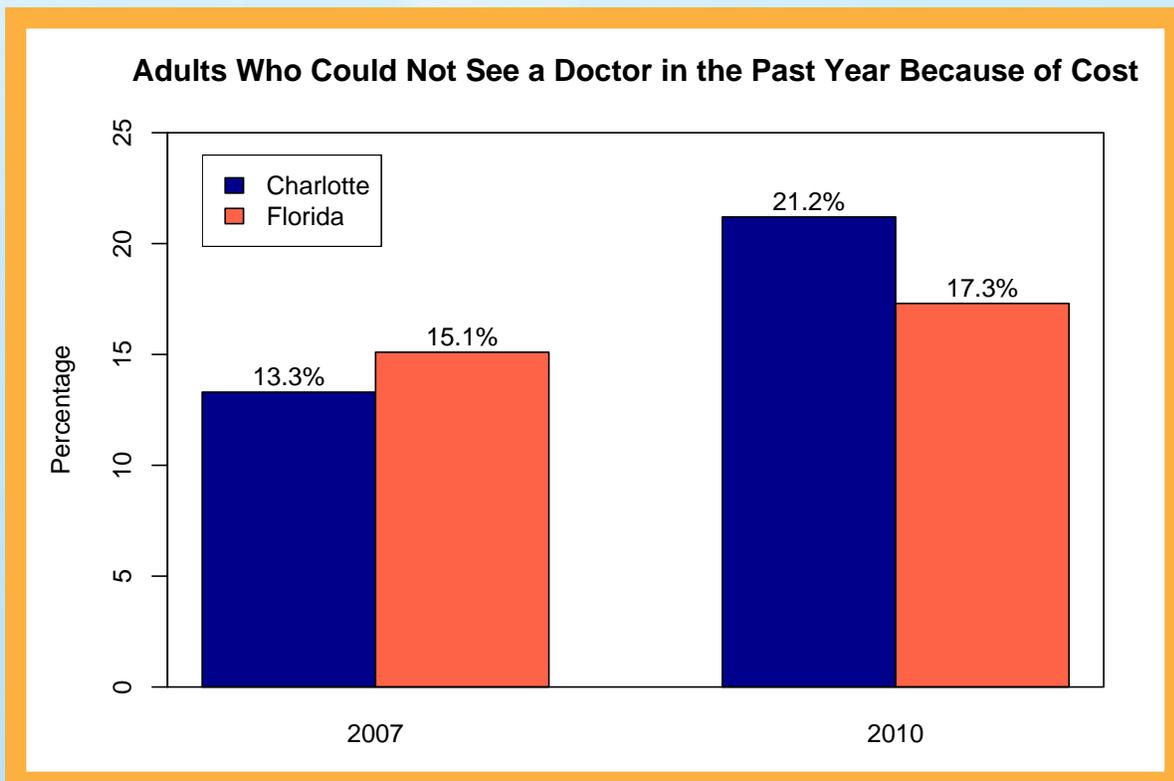
The overall health and well being of an individual is associated with their ability to access the health care services they need. Routine access to medical care has been known to prevent disease, increase quality of life, and increase life expectancy. Further, establishing a relationship with a primary care provider leads to greater trust and communication between provider and patient, as well, as increasing the likelihood that the patient will receive necessary care.⁵ Changes in health care reform (Affordable Care Act), as well as, the Charlotte County Health Department's transition away from providing primary care services will impact the Charlotte County community.

The Affordable Care Act was signed into law on March 23, 2010 and is scheduled to go into full effect in 2014.⁶ The law is designed to provide quality affordable healthcare for all Americans and has left the healthcare field in a pattern of "wait and see." The effects of the law will not be fully realized until its full implementation.

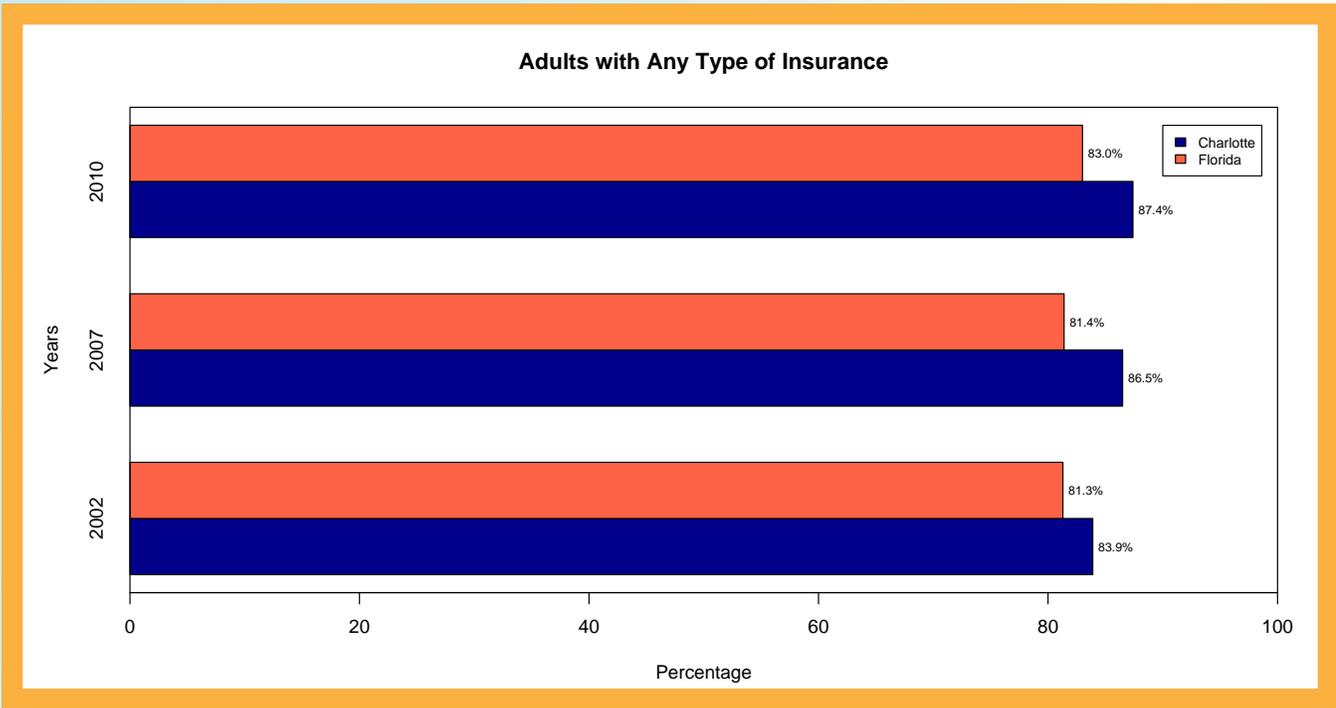
Until 2013, the Florida Department of Health offices in Charlotte County had been a key agency in providing primary care services especially to the uninsured and underinsured. The Health Department is currently in the process of transitioning out of primary care services and refocusing on prevention and public health.⁷

Insured and Uninsured

Since 2002 the percentage of adults, in Charlotte County, with any type of health insurance has increased and continues to be above the state average. At the same time, the percentage of adults who said they could not see a doctor at least once in the past year, due to cost, has also increased and is now higher than the state average.⁸ The Virginia B. Andes Volunteer Community Clinic operates a free clinic and pharmacy for the uninsured and underinsured population in Charlotte County. In 2012, the clinic served 2,100 uninsured residents.⁹



Figures 4.2 Source: Florida Department of Health, FloridaCHARTS County Health Profile, 2011



Figures 4.3 Source: Florida Department of Health, FloridaCHARTS County Health Profile, 2011

Charlotte County has fewer uninsured residents than the state but a higher percentage than the nation. The percentage is highest among the adult population ages 18 to 64 years; however, 19.3% of the population under age 18 is uninsured, compared to 11.9% statewide and 7.5% nationally.¹⁰ As of May 2013, 20,297 Charlotte County residents, or approximately 13% of the population, were eligible for Medicaid. Of those eligible, 50% were under the age of 18, 35.63% were between 19 and 64, and 14.35% were over age 65.¹¹ Approximately 73% of the population age 65 and older is enrolled in Medicare.¹²

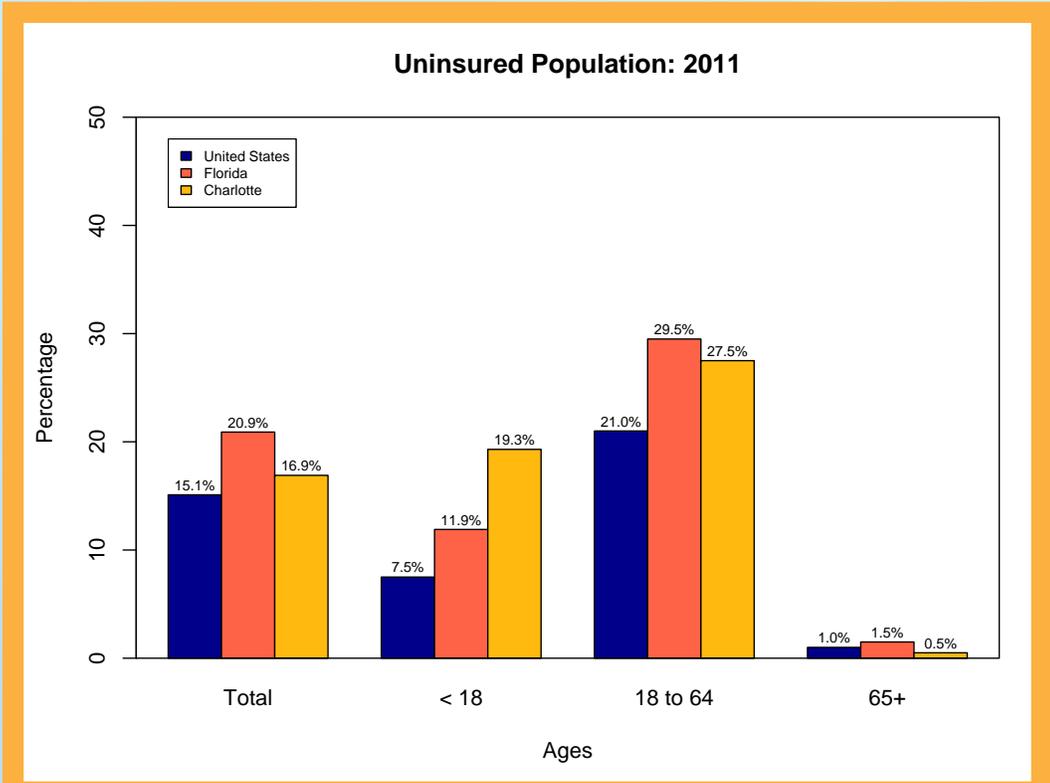


Figure 4.4 Source: American Community Survey, 2011 year estimate, table S2701

As of May 2013, 20,297 Charlotte County residents, or approximately 13% of the population, were eligible for Medicaid. Of those eligible, 50% were under the age of 18, 35.63% were between 19 and 64, and 14.35% were over age 65.

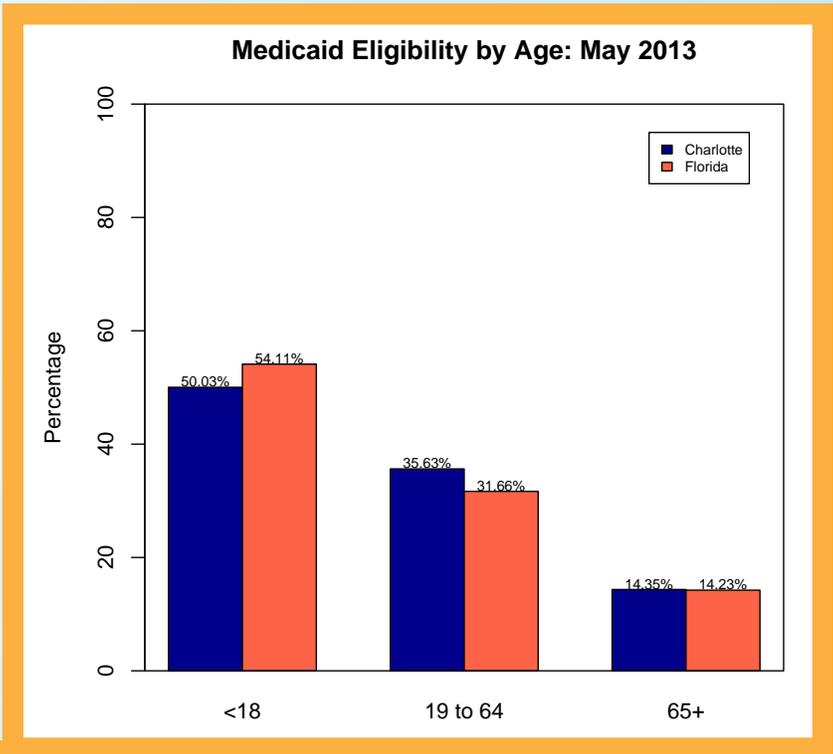


Figure 4.5

Source: Agency for Health Care Administration, 2013

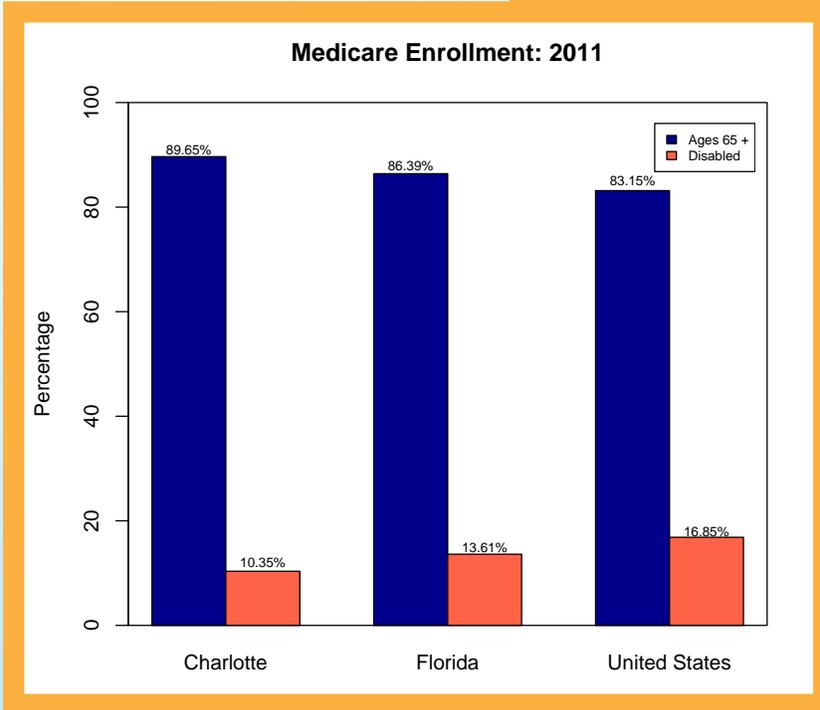


Figure 4.6

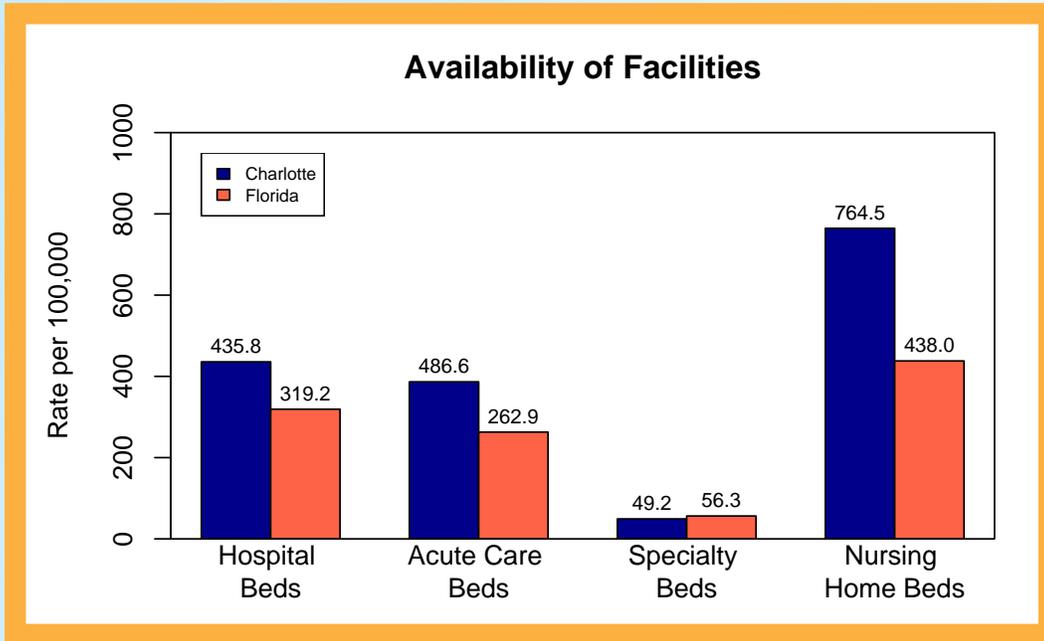
Source: U.S. Department of Health and Human Services, 2011



Photo provided by Joseph Resendez, Florida Weekly

Availability of Health Resources

The county has a higher number of hospital beds and nursing home beds, per 100,000 people, than the state. However, the county lacks a sufficient number of medical providers across specialties. The county averages 221 physicians per 100,000 compared to the state average of 342 per 100,000 people.¹³ Only 92 providers in the county accept Medicare and Medicaid.¹⁴



The county lacks a sufficient number of medical providers across specialties.

Figure 4.7 Source: Florida Department of Health, Florida CHARTS County Health Profile, 2011

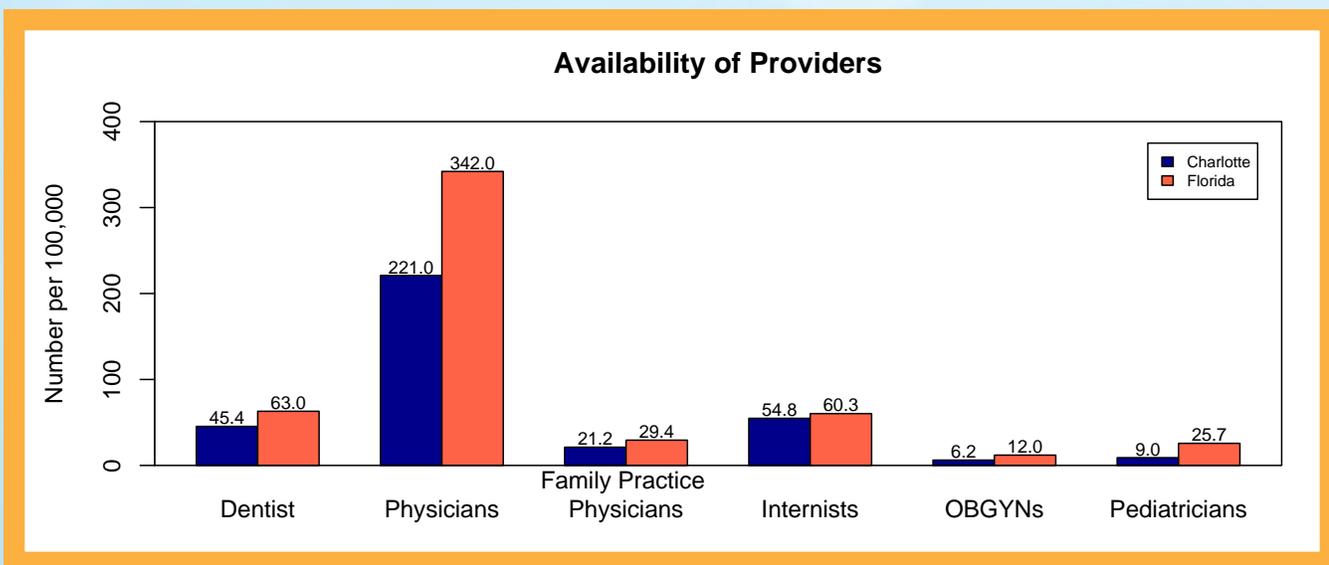


Figure 4.8 Source: Florida Department of Health, Florida CHARTS County Health Profile, 2011

MATERNAL AND CHILD HEALTH

The future success of a community is dependent on the health of its future generations. The poor health of a pregnant mother increases the risk of complication during childbirth. Preterm births and low birth weights often present lifelong challenges for the child including visual and hearing

impairments, developmental delays, and behavioral or emotional problems. Prenatal care is crucial for identifying existing health conditions, as well as, preventing future health problems.¹⁵ Overall, Charlotte County ranked well below the state in number of births to mothers ages 15 – 44 (52.7 births per 1,000). However, the percentage of births to unwed mothers was higher than the state average.

An estimated 51.4% of births in Charlotte County were to unwed mothers, compared to 47.6%, statewide.¹⁶

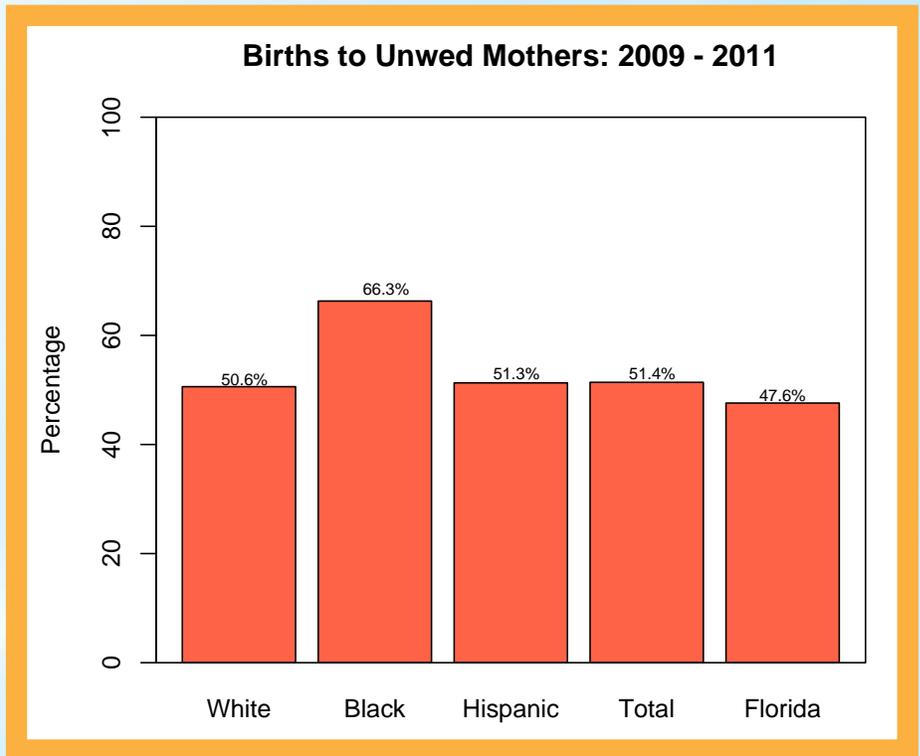


Figure 4.9 Source: Florida Department of Health, FloridaCHARTS County Health Profile, 2011

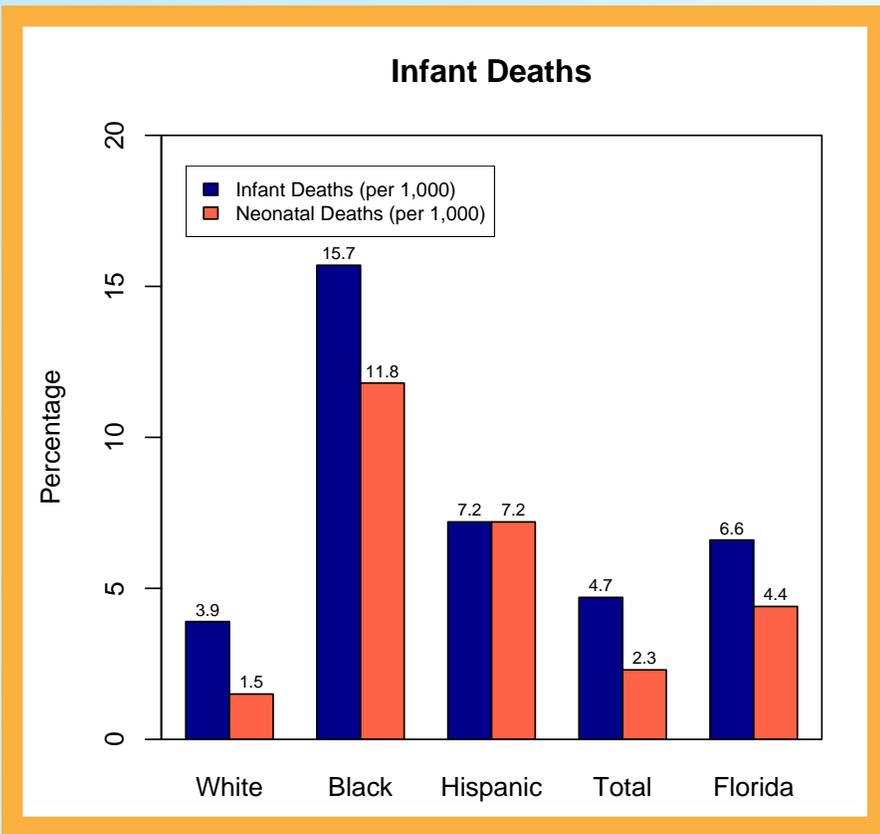
Infant Deaths

In general, Charlotte County ranked well below the state in number of infant (0 – 364 days) and neonatal (0 – 27 days) deaths; however, this number was notably higher among births to black and Hispanic mothers. Additionally, black and Hispanic populations had a higher percentage of births where the infant weighed less than 1500 grams (3.5% and 1.4%, respectively).¹⁷



Photo provided by Charlotte County Employee Health Clinic

Figure 4.10
 Source: Florida Department of Health, FloridaCHARTS
 County Health Profile, 2011



Charlotte County ranked below the state in both percentage of births with first trimester prenatal care and percentage of births with late or no prenatal care.

Prenatal Care

These higher percentages of infant death and low birth rates can likely be attributed to access to prenatal care. Charlotte County ranked below the state in both percentage of births with first trimester prenatal care and percentage of births with late or no prenatal care. These percentages were especially low among births to black mothers.

Charlotte County Healthy Start Coalition, Inc. provided services to 560 women and 317 infants during the 2011-12 fiscal year.¹⁸

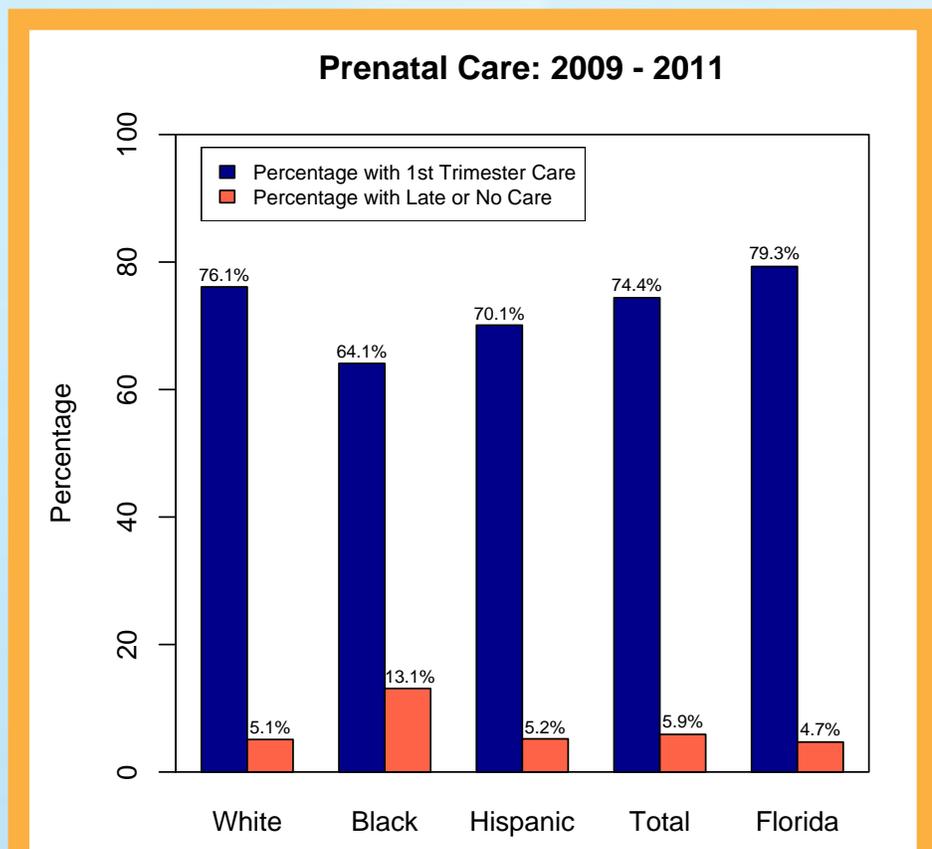


Figure 4.11
 Source: Florida Department of Health, FloridaCHARTS
 County Health Profile, 2011

DENTAL CARE

Participants in the Clientele and Agency Surveys consistently expressed a need for affordable dental care in Charlotte County (see Appendices 2 and 3). Neither Medicaid¹⁹ nor Medicare²⁰ covers routine dental services. Diseases resulting from a lack of appropriate dental care not only have cosmetic consequences, but also are associated with numerous chronic diseases including diabetes, heart disease, and stroke.²¹

Consistent with the state rate, 19% (2007) of the adult population could not see a dentist because of cost. Approximately 61.2% (2010) of the adult population has had a permanent tooth removed because of tooth decay or gum disease. Comparatively, 53% of the adult population statewide has had a permanent tooth removed²². Further, Charlotte County has fewer licensed dentists per 100,000 people than the state. In 2011, Charlotte County had 45.4 dentists per 100,000, compared to 63 per 100,000 people statewide.²³

**Charlotte County
had 45.4 dentists
per 100,000,
compared to
63 per 100,000
people statewide.**



Photo provided by Forster Davis Roberts & Boeller

SPOTLIGHT

Community Health Improvement Plan (CHIP): Overview

Community health improvement planning is a strategic process to identify and address local health problems. It utilizes health assessments, population surveys, and community feedback on quality of life indicators. In June 2012, work began on the Charlotte County Community Health Improvement Plan (CHIP). The idea of bringing together local residents and community organizations to help solve some of our most pressing health issues grew out of concern that our community resources were not enough to meet a growing need in Charlotte County.

In September, 2012, community leaders representing all areas of Charlotte County—schools, faith-based organizations, hospitals, government entities and many others—were invited to the Florida Department of Health in Charlotte County to learn more about CHIP and how they may become actively involved with it. CHIP identified three priority issues specific to our community:

- ◆ ***Chronic Disease Prevention*** – Focus will be on reducing high-risk behaviors that contribute to chronic disease in our community at the population level.
- ◆ ***Mental Health*** – Integrated, community-based solutions will work to identify and mitigate the factors that adversely affect social and emotional well-being.
- ◆ ***Access to Care*** – Emphasis will be on timely provision of health services for the uninsured and under-insured members of our community.

Please refer to [Charlotte County CHIP](#) to read the full document.

Community involvement is the driving force behind a successful CHIP. We are pleased to report that one of our greatest successes to date has been the collaboration between so many community partners and dedicated individuals. In addition to avoiding duplication of efforts and utilizing scarce resources more efficiently, collaboration has also allowed us to enhance existing programs in our community and seek joint funding opportunities.

The CHIP Committee of Charlotte County has been hard at work for the past several months. Since February 2013, they have been reviewing evidence-based guidelines and recommendations from leading public health experts to find the best fit for our community. The CHIP Committee is comprised of a steering committee and three subcommittees, one for each priority issue. Together, all will develop mutually beneficial programs, policies, and activities for the overarching goal of community health improvement.

CHIP: Moving Forward

As we move into the implementation phase of our plan, it is important to note that this final phase is by no means “the end” of the community health improvement process. A key component of CHIP is the ongoing evaluation of programs and activities to make sure we are meeting our goals and objectives. As such, CHIP will continue to evolve along with the needs of Charlotte County residents. Sustaining the process and ensuring that results continue to be achieved will have long-term benefits for the community and public health system as a whole.

Our continued success relies upon strong community involvement and open dialogue. Through discussion and presentation of the various components of CHIP, opportunities to coordinate and collaborate with organizations throughout the community will continue to emerge.

Each of us can play an important role in health improvement for Charlotte County. Here are a few ways community members can help:

- ◆ Encourage and support healthy behaviors in the home, school and workplace.
- ◆ Mobilize community leaders to take action by investing in programs and policies that help members of our community lead healthier lives.
- ◆ Volunteer time or expertise for an event or activity that helps support any of the CHIP initiatives.

If you would like to lend your expertise to any of our initiatives, contact the Charlotte County CHIP Coordinator: Lori_North@doh.state.fl.us.

Download the CHIP report from the Florida Department of Health in Charlotte County website at www.CharlotteCHD.com.

***Adapted from the Charlotte County CHIP Annual Report, June 2013.*

*Photo provided by
Charlotte County Health
Department.*



DISABILITIES

Nearly twice as many residents in Charlotte County have a disability than the state and national averages. What is surprising, considering Charlotte County's substantial elderly population, is that the percentage of the population over age 65 with a disability is consistent with state and national averages but the rate is higher among younger generations.²⁴

Among the population under age 5 an estimated 8.3% were identified as having a vision difficulty, compared to 0.5% statewide and 0.8% nationwide.²⁵

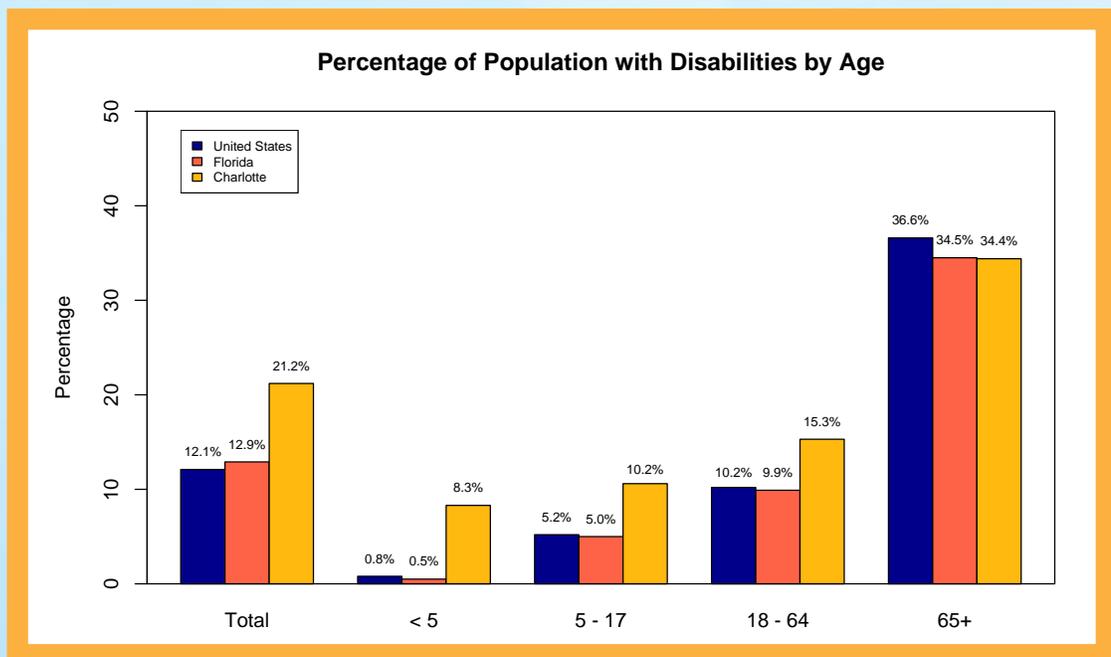
Eleven percent of the populations, ages 5 to 17, are living with a disability. Of those, 9.2% were identified as having a cognitive difficulty, which is more than twice the state and national average of 3.9%.²⁶

The population, ages 18 to 64, is most greatly impacted by ambulatory difficulties (8.8% of the population). In addition, 4.0% have a self-care difficulty, 5.8% have an independent living difficulty, 4.7% have a cognitive difficulty, 3.2% have a hearing difficulty, and 1.8% have a vision difficulty. With the exception of vision, these percentages are higher than the state and national averages.²⁷

Overall, the population age 65 and older is in line with state and national averages. 19.7% of the population has an ambulatory difficulty, 15.9% have a hearing difficulty, 9.7% have a cognitive difficulty, 9.2% have an independent living difficulty, 6.5% have a self-care difficulty and 5.9% have a vision difficulty.²⁸

Eleven percent of the population, ages 5 to 17, are living with a disability. Of those, 9.2% were identified as having a cognitive difficulty, which is more than twice the state and national average of 3.9%.

Figure 4.12
Source:
American
Community
Survey, 2011
1 year
estimates,
table S1810



Disabilities impact the caregiver in addition to the individual. Financial challenges grow if the caregiver has to choose between working and caring for their loved one. There are further challenges if the caregiver is an aging parent caring for an adult child. In addition to financial challenges, the caregiver often sacrifices his or her own mental and physical health.

MENTAL HEALTH

Agencies, clients, and community members frequently identified mental health care as a need in Charlotte County. Agencies estimated that approximately 29% of their clients had some sort of mental disability and another 20% suffered from drug and/or alcohol addiction (see Appendix 2).

Mental illness not only affects the individual and their families, but can also impact the entire community. Untreated mental illnesses can lead to an increase in unhealthy and self-destructive behaviors, as well as, suicide. In addition, it can have an impact on a person’s physical health.²⁹

The 2010 Behavioral Risk Factor Surveillance System (BRFSS) Data Report showed that a higher percentage of Charlotte County adults said they always or usually received the social and emotional support they needed (80.7%) than in previous years (77.5% in 2007). However, this percentage appeared to decrease as the respondent’s age increased and annual income decreased.³⁰

Mental illness not only affects the individual and their families, but can also impact the entire community.

Adults Receiving Necessary Social and Emotional Support (2010)			
% BY AGE GROUP			
Age Group	18-44	45-64	65+
Percentage	86.9%	78.7%	77.0%
% BY ANNUAL INCOME			
Annual Income	<\$25K	\$25K-\$49,999	\$50K +
Percentage	73.4%	77.4%	86.4%

Figure 4.13 Source: Florida Department of Health, 2010 Florida Behavioral Risk Factor Surveillance System Data Report

Only 86.4% of adults said they were in good mental health, compared with 91.2% in 2007. The report showed a decrease across all demographics. Further, respondents said that on average 5.1 days out of the last 30 were impacted by poor physical or mental health. This number was higher among men, in particular.³¹

ALCOHOL CONSUMPTION AND SMOKING

The overall percentage of adults engaging in behavior such as drinking and smoking has declined in recent years. Only 12.3% of adults said they engaged in heavy or binge drinking in 2010, down from 14.9% in 2007. In particular, the percentage of heavy or binge drinkers ages 18 – 44 had dropped to 11.1%, down from 19.6%. The percentage of heavy or binge drinkers among adults earning between \$25,000 and \$49,999 has decreased by half from 21.3% in 2007 to 10.4% in 2010. However, among those earning \$50,000 or more, the rate jumped from 15.3% to 22.9% in 2010.³²

Smoking has decreased among the adult population from 22.9% in 2007 to 20.7% in 2010. The number of smokers ages 45 and older has decreased from 12.1% in 2007 to 8.3% in 2010, but the percentage of those ages 18 to 44 has increased from 30.7% in 2007 to 33.5% in 2010. The percentage of smokers appears to decrease as annual income increases. Thirty-three percent of smokers earned below \$25,000 compared to 18.4% earning between \$25,000 and \$49,999 and 8.8% of those earning \$50,000 or more.³³

The percentage of smokers appears to decrease as annual income increases. Thirty-three percent of smokers earned below \$25,000 compared to 18.4% earning between \$25,000 and \$49,999 and 8.8% of those earning \$50,000 or more.

OPPORTUNITIES

- ◆ **Attract more physicians to Charlotte County and increase the number of Medicaid providers to meet the needs of the population.** The data shows that Charlotte County lags behind the state in the ratio of providers to population. The County's significant low-income and elderly populations suggest a need for more Medicaid and Medicare providers.
- ◆ **Increase the availability of and support existing efforts to provide affordable health care services.** This includes prescription drugs, dental care, mental health care and respite care services, in addition to primary care services for the County's uninsured and underinsured populations. The County currently has only one service provider for these populations. This need is likely to increase since the Health Department has stopped providing primary care services.
- ◆ **Support services that increase access to prenatal care to promote positive birth outcomes.** The first five years of a child's life are extremely important for sensory and cognitive development, laying the foundation for the rest of their life.

POVERTY



Photo provided by Harry Chapin Food Bank of Southwest Florida

The data shows concerning trends about poverty in Charlotte County. Despite a traditionally low cost of living, rising food, housing, health, and childcare costs have created a significant financial burden for an increasing number of Charlotte County residents. These increasing costs coupled with a lack of high paying jobs have made it difficult for many to get by day-to-day (see Section 2).

Charlotte County has a lower percentage of the population living in poverty than the state and nation (See Appendix 1.5); however, this population has increased from 9.0% in 2007, at the start of the recession, to 11.9% in 2011. The percentage of the population living in poverty peaked at 13.5% in 2010. Children under the age of 18 living in poverty jumped from 15.0% in 2007 to 25.5% in 2010 before falling to 17.4% in 2011.¹

Children under the age of 18 living in poverty jumped from 15.0% in 2007 to 25.5% in 2010 before falling to 17.4% in 2011.

Despite Charlotte County's comparatively low poverty rates, the median household income in Charlotte County is \$41,190 compared to \$44,299 in the state of Florida and \$50,502, nationwide. Fifty-nine percent of households in Charlotte County earn \$50,000 or below a rate approximately 10% higher than households nationwide.²

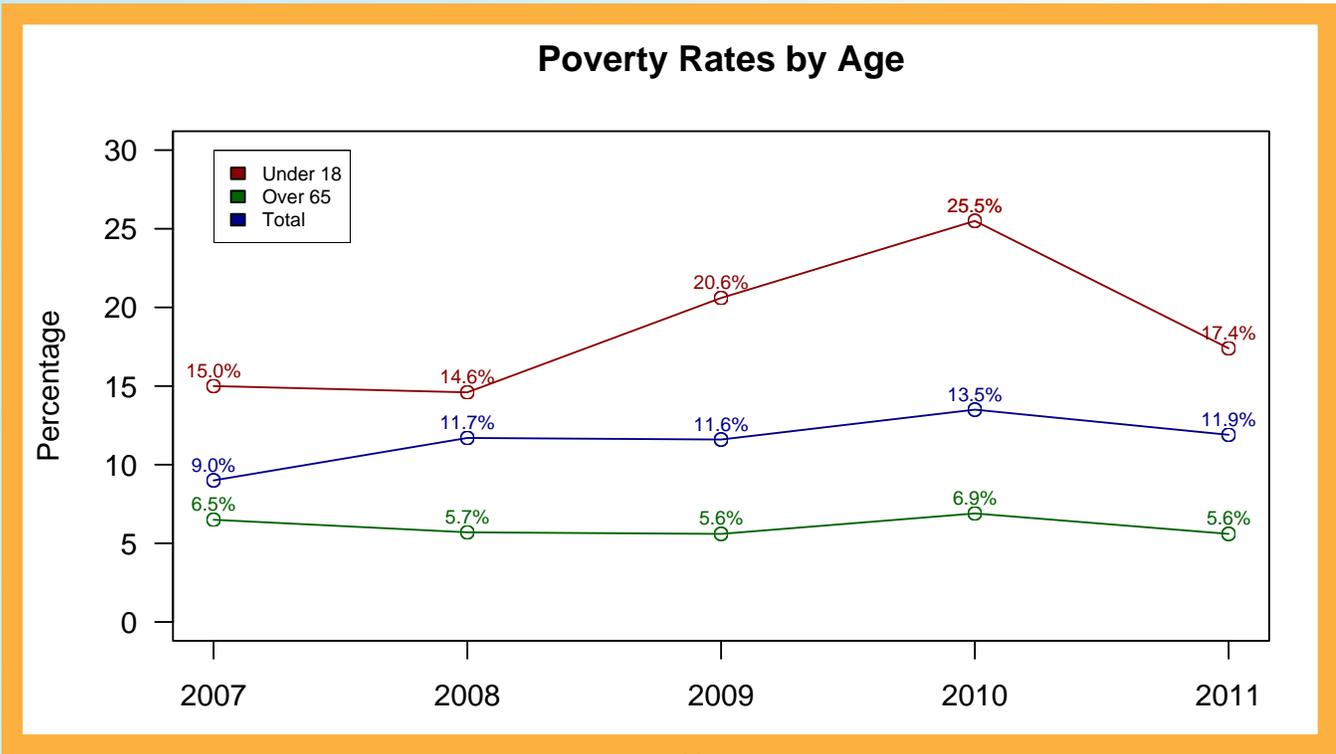


Figure 5.1 Source: American Community Survey, 1 year estimates, CP03

FAMILIES

The federal poverty line for a family or household of four is \$23,550 (see Appendix 1).³ On average, 8.7% of families in Charlotte County are living below the poverty line. Rates in families where the female is the head of household and there is no male present are even higher. In 2011, 25.9% of families with female heads of household were living below the poverty level. When children under 18 are present this rate jumps to 40.9% living below the poverty level. Further, an estimated 80.1% of families where the head of household has less than a high school degree and is female, with no husband present, are living below the poverty level compared to 48.6% of similar families in Florida, and 50.4% of families in the United States.⁴

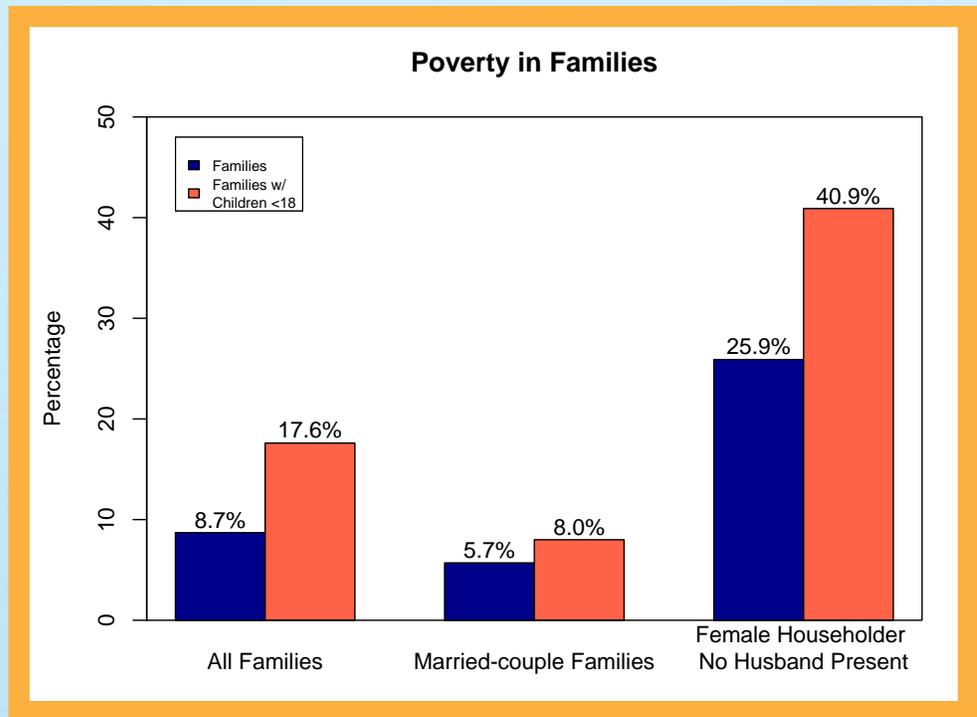


Figure 5.2 Source: American Community Survey, 2011, 1 year estimates, table S1702

HOUSING

Having a roof over one's head is a basic necessity for a good life yet rising housing costs and recent spikes in unemployment have left many with limited options. Roughly 24% of human service clients surveyed said they lived with family or friends or were homeless while another 46% were renters and 30% were homeowners (see Appendix 3). Clients, agencies, and community members frequently identified

affordable housing as a need in the Charlotte County community.

Of the estimated 100,614 housing units in Charlotte County, 67.8% are occupied while 32.2% are vacant. Owners occupy 77.8% of the available units and renters occupy the other 22.2%. The median home value is \$134,200. Statewide, the median home value is \$151,000 and nationwide, it is \$173,600.⁵

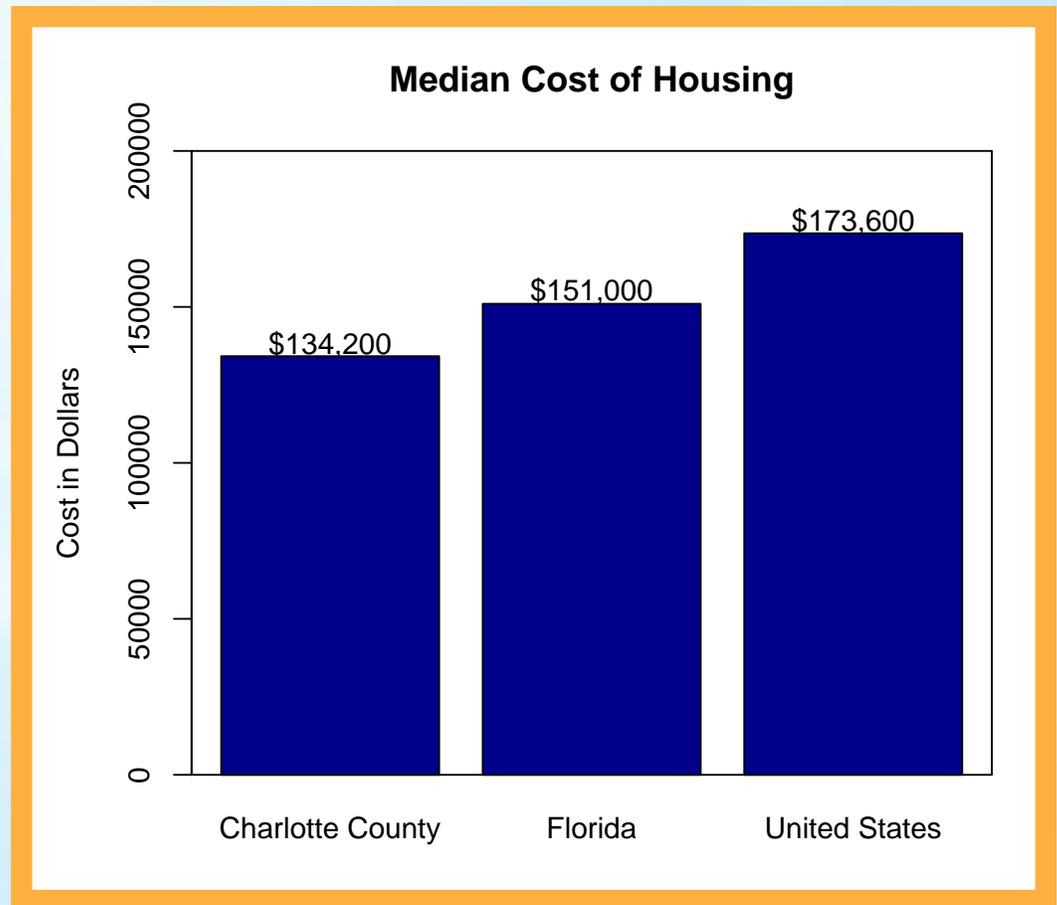


Figure 5.3 Source: American Community Survey, 1 year estimate, 2011, table DP03

Housing as a Percentage of Income

Despite lower home values homeowners in Charlotte County are still paying a higher percentage of their monthly household income on housing costs. As a result, more houses are being foreclosed on. As of September 2012, the Punta Gorda Metropolitan Statistical Area ranked 10th in the country and 9th in the state with a foreclosure rate of 14.06%.⁶

A family or household paying more than 30% of their annual income in housing costs is considered cost burdened. As a result, they often have difficulty paying for other necessities.⁷ An estimated 51.5% of homeowners with a mortgage payment pay more than 30% of their household income on housing costs. This is compared to 46.4% of homeowners statewide and 36.8% nationwide. Though renters in Charlotte County fair better than those state and nationwide, **48.5% of renters still spend 30% or more of their household income in housing costs.**⁸

As of September 2012, the Punta Gorda Metropolitan Statistical Area ranked 10th in the country and 9th in the state with a foreclosure rate of 14.06%.

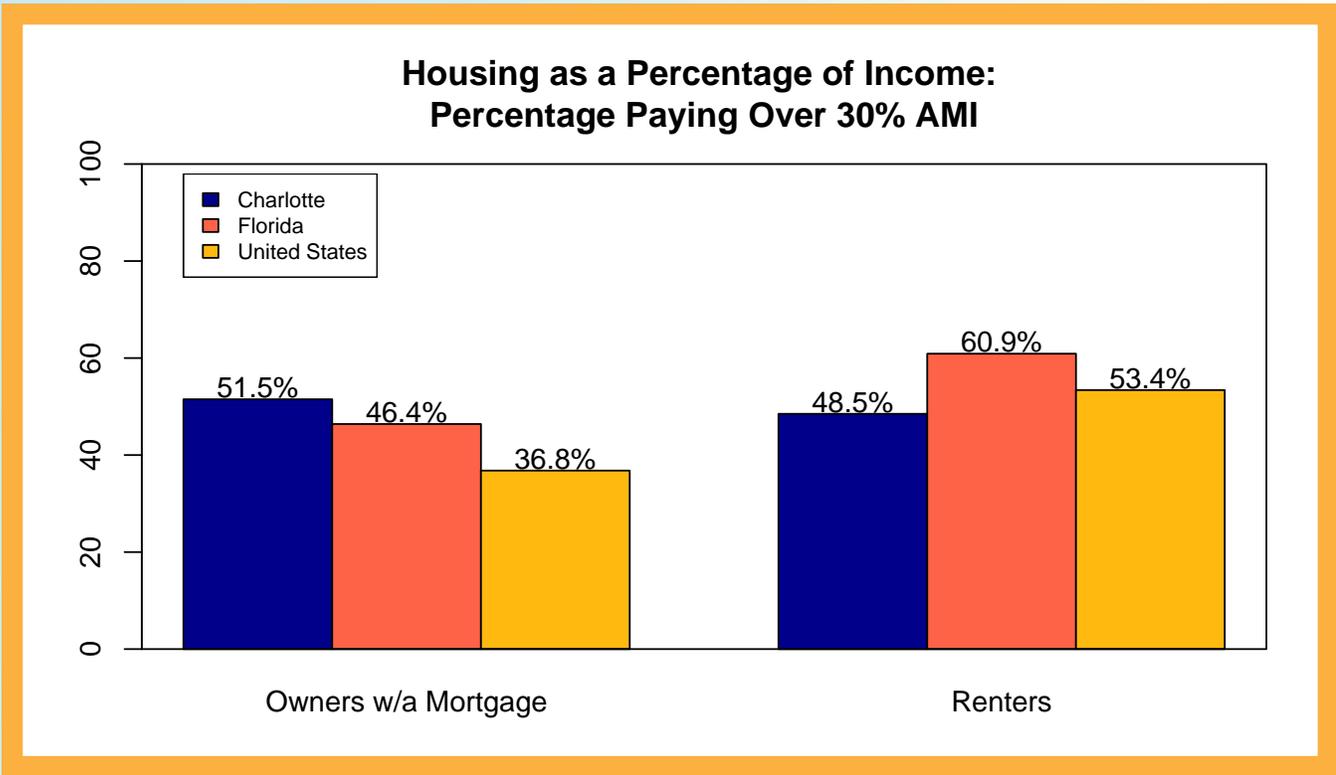


Figure 5.4 Source: American Community Survey, 2011 1-year estimates table DP04

Compared to state and national averages, Charlotte County has a higher percentage of homeowners who make less than \$50,000 annually and currently have mortgages. Of these homeowners 37% are paying more than 30% of their annual household income in housing costs.⁹

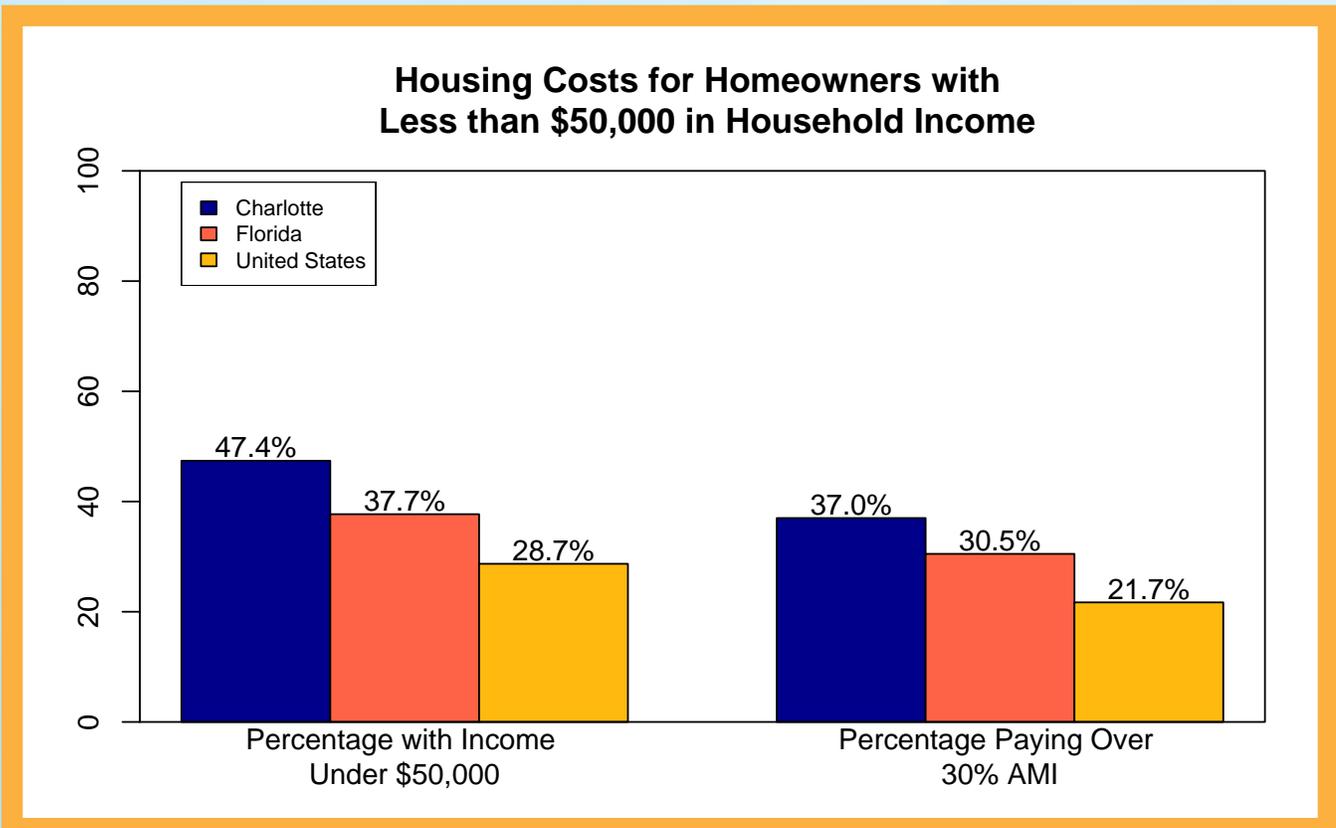


Figure 5.5 Source: American Community Survey, 2011 1-year estimate, table S2506
Charlotte County, Florida Community Action Plan

Affordable Housing

The U.S. Department of Housing and Urban Development (HUD) reports, “a family with one full-time worker earning the minimum wage cannot afford the local fair-market rent for a two bedroom apartment anywhere in the United States.”¹⁰ HUD sets fair market rent rates annually to determine eligibility in its subsidized housing programs. For 2013, fair market rent for a two-bedroom rental in Charlotte County is \$861 (see Appendix 1).¹¹ It also sets income limits to determine eligibility in various voucher programs on an annual basis. In 2013, the “very low income limit” for a family of four is \$26,550. This limit is used to determine a geographic area’s eligibility to participate in HUD programs and is set at 50% of the median area income. Seventy-five percent of an area’s vouchers must be used for residents who fall at or below the “extremely low (30%) income limit” or in the case of Charlotte County, \$15,950 for a family of four. The “low (80%) income limit” is set for families falling above the very low-income limits but who are eligible due to special circumstances, as determined by HUD or local Public Housing Authorities.¹² In Charlotte County, the low-income limit for a family of four is \$42,500 (see Appendix 1).¹³

The county has 307 Section 8 vouchers but as of fall 2012 there is a four-year waiting list.

Charlotte County has limited resources available in the forms of subsidized housing. There are currently 115 public housing units. The county has 307 Section 8 vouchers but as of fall 2012 there is a four-year waiting list. Thirty-seven vouchers for rental assistance are available for homeless Veterans through the HUD-Veterans Affairs Supportive Housing (HUD-VASH) program. The Punta Gorda Housing Authority provides assistance with 57 vouchers. In addition, 86 Low-income Housing Tax Credit Development units and 70 USDA Rural Development units are available.¹⁴



Photo provided by Goodwill Industries of Southwest Florida

HOMELESSNESS

Those living in poverty often find themselves on the brink of homelessness. A single unexpected incident such as the loss of a job or a medical emergency can leave someone living on the street, in his or her car, or on the couch of a friend or family member. Though the homeless population is difficult to calculate accurately due to the transient nature of the population, the Charlotte County Homeless Coalition conducts and submits a Point-in-Time (PIT) Count Report to the Department of Children and Families annually. The most recent Point-in-Time Count conducted in January 2013 identified 573 homeless individuals in Charlotte County. Sixty-two percent of these individuals were male and 38% were female. Fifty-one percent were between the ages of 24 and 60, 31% were under the age of 18, 4% between the ages of 18 and 24, and 14% over the age of 60. Eighty-four percent of the individuals surveyed in the PIT Count have been homeless one or more prior times and 38% have been homeless for one year or longer.¹⁵

Figure 5.6
Source:
Charlotte County
Homeless Coalition,
2013 PIT Count

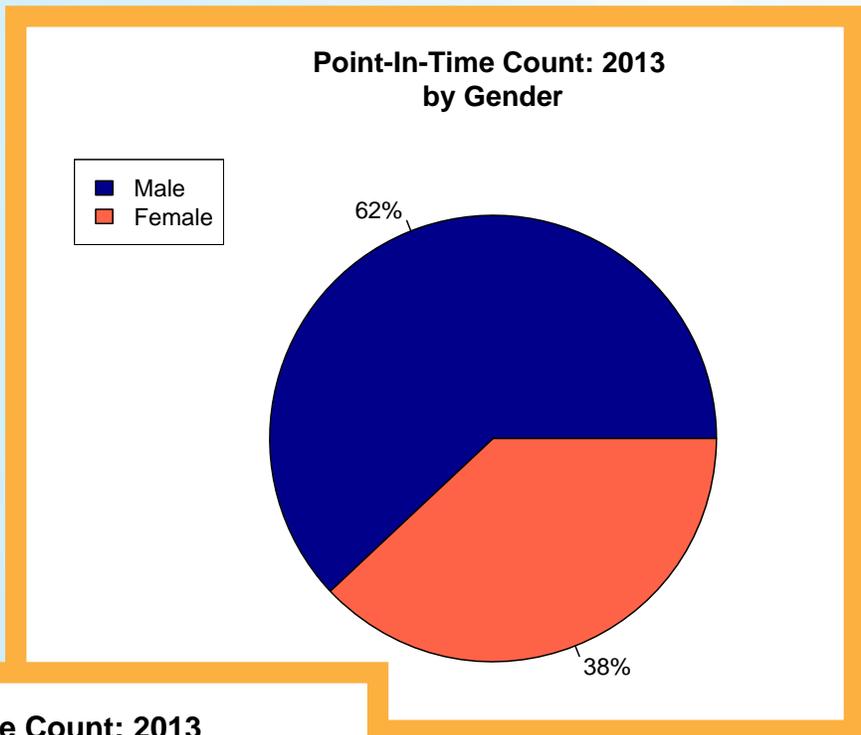
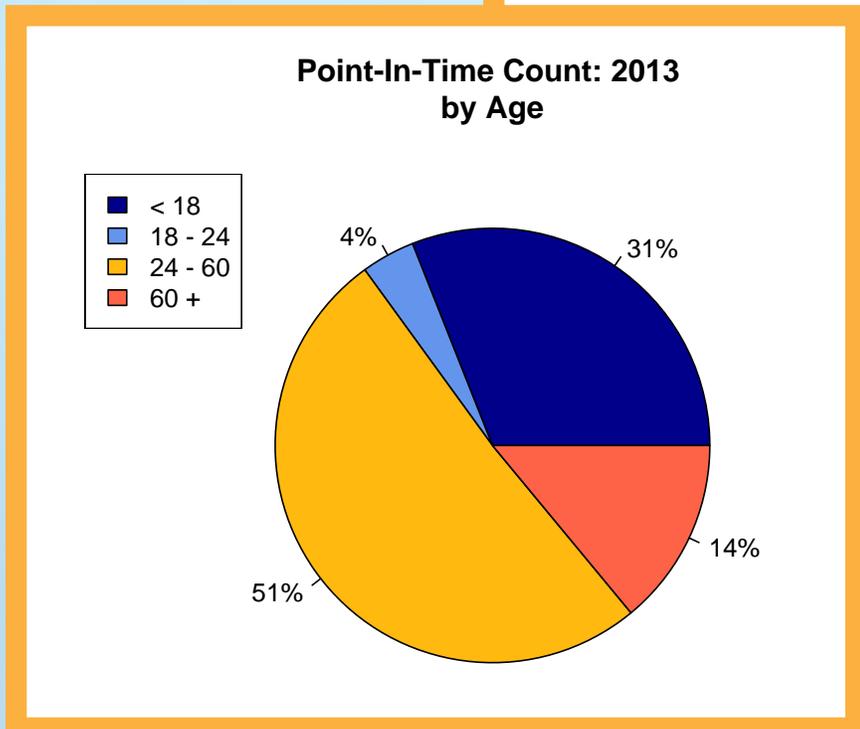


Figure 5.7
Source:
Charlotte County
Homeless Coalition,
2013 PIT Count



Eighty-four percent of the individuals surveyed in the PIT Count have been homeless one or more prior times and 38% have been homeless for one year or longer.

Point-in-Time survey respondents were asked to identify the cause of their homelessness. Thirty-eight percent said they were homeless due to employment or financial reasons, 20% because of housing issues, 22% because of medical/disability problems, and 20% because of family problems.

Charlotte County has limited resources for the homeless population. The Charlotte County Homeless Coalition provides emergency shelter for up to sixty days but space is limited. The shelter is currently set up to serve 13 single males, 8 single females, and 12 families. In addition, the Coalition oversees transitional housing units (greater than 60 days) for 4 single males and 3 families. Twenty-four individual permanent supportive beds are available at the Chara and Bishop Houses.¹⁶

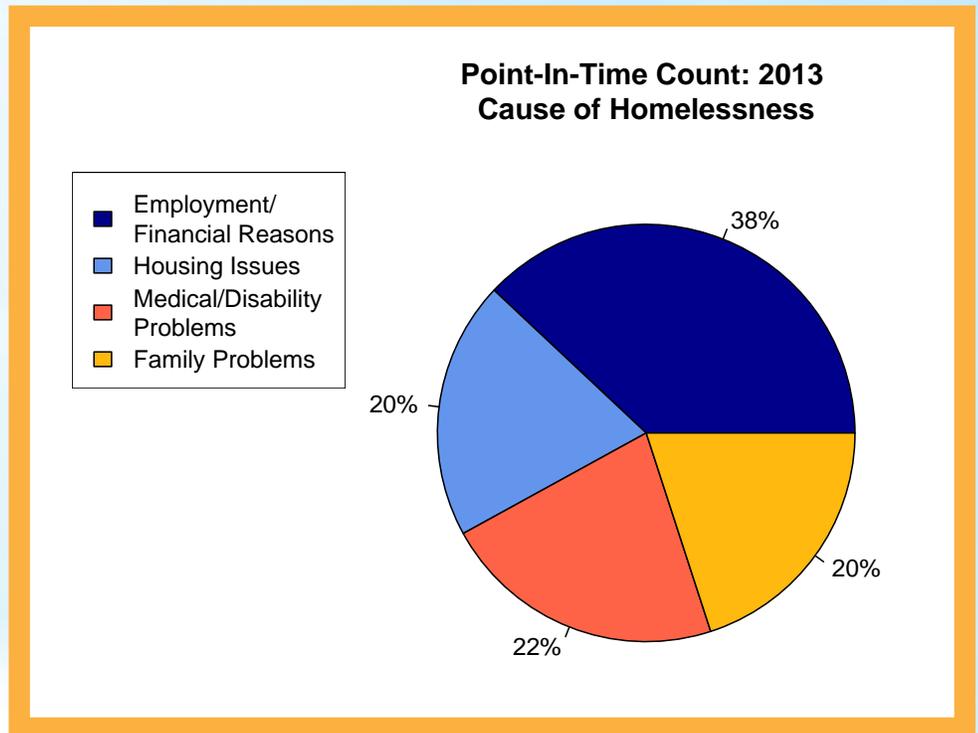


Figure 5.8 Source: Charlotte County Homeless Coalition, 2013 PIT Count

As the Lead Agency on Homelessness in Charlotte County for the Department of Housing and Urban Development and the Florida Department of Children and Families State Office on Homelessness, the Coalition formed the Gulf Coast Partnership to oversee the *10 Year Plan to Prevent and End Homelessness in Charlotte County*. This communitywide initiative unites agencies and vested members of the community to bring about change and necessary programs with funding to Charlotte County.



Photo provided by Charlotte County Homeless Coalition

FOOD

Food is a basic necessity for survival. Those living in poverty are often faced with the choice of eating or keeping a roof over their head. Charlotte County residents are served by 30 food pantries located throughout the county, as well as, numerous other agencies that serve meals at various times during the week¹⁷ yet many still go hungry. Those eligible can participate in the Federal Supplemental Nutrition Assistance Program (SNAP) and/or the National School Lunch Program.

Food Stamps/Supplemental Nutrition Assistance Program (SNAP)

The Supplemental Nutrition Assistance Plan replaced the federal food stamp program in October 2008 and is administered by the United States Department of Agriculture. Through the program,

individuals receive monthly assistance purchasing food. On average, eligible individuals in Florida receive \$138.98 a month in SNAP benefits.¹⁸ Though Charlotte County has fewer participants in the SNAP program than state and national averages, **the percentage of participants in SNAP has increased from 1.7% of the population in 2007 to 10.2% in 2011.**¹⁹ This is particularly concerning since the SNAP program faces cuts from the federal government.

Approximately 42.1% of households receiving SNAP benefits have one or more person 60 years or older. This rate is higher than both the state (31.8%) and the nation (25.5%) and is likely attributed to the county's large senior population. At the same time, 45.6% of households receiving SNAP benefits have children under the age of 18. This rate is lower than the state (49.7%) and nation (55.2%).²⁰

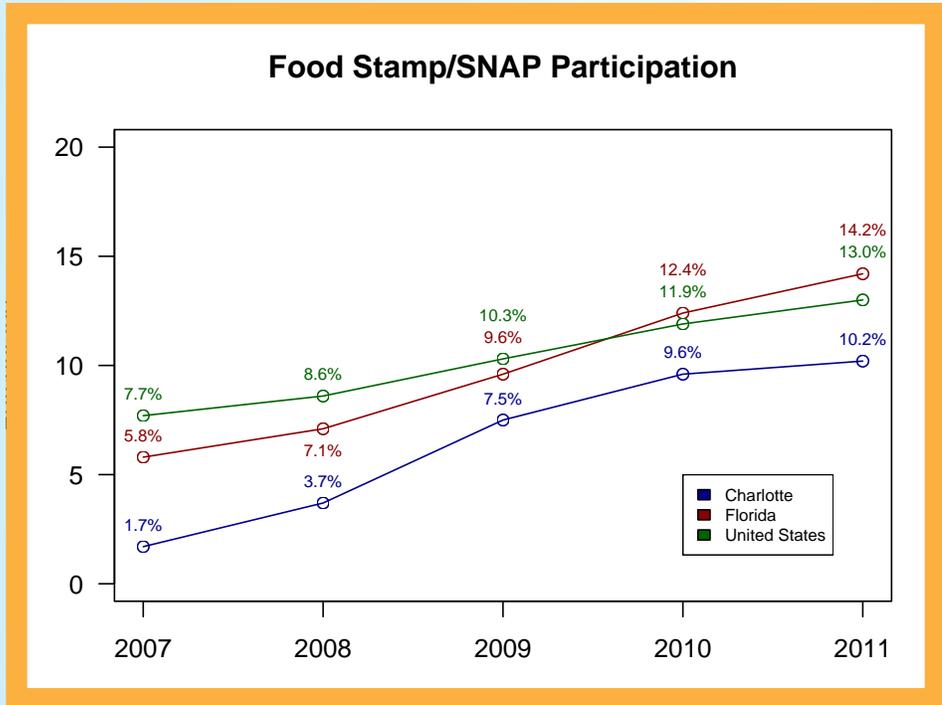


Figure 5.9 Source: American Community Survey, 1 year estimates, Table CP03



Photo provided by Charlotte County Homeless Coalition Food Pantry.

SPOTLIGHT

Raising a Family in Charlotte County

“The U.S. Bureau of Labor Statistics reported in December 2004 that 25% of all the jobs in the U.S. economy did not pay enough to lift a family above the poverty line... This country has become a nation where people can work full time and still be in poverty.”

– Bridges out of Poverty, p.4.

The Economic Policy Institute’s Family Budget Calculator measures the income a family needs in order to attain a secure yet modest living standard by estimating community – specific costs of housing, food, child care, transportation, health care, other necessities, and taxes.

As compared with official poverty thresholds such as the federal poverty line and Supplemental Poverty Measure, EPI’s family budgets offer a higher degree of geographic customization and provide a more accurate measure of economic security. In all cases, they show families need more than twice the amount of the federal poverty line to get by.

Punta Gorda, FL Metropolitan Statistical Area Two Parents, Two Children 2013

ITEM	COST
Monthly Housing	\$940
Monthly Food	\$754
Monthly Child Care	\$864
Monthly Transportation	\$607
Monthly Health Care	\$1,423
Monthly Other Necessities	\$434
Monthly Taxes	\$230
Monthly Total	\$5,251
Annual Total	\$63,010

Minimum wage in the state of Florida is \$7.79 an hour. **A family of four with both parents working full time, earning minimum wage would earn \$32,406 annually (or \$16,320 each) before taxes and would be living at 138% of the federal poverty line.** The federal poverty line for a family of four is \$23,550.

Sources:

- Economic Policy Institute. “Family Budget Calculator.” www.epi.org/resources/budget/
- U.S. Department of Labor. Wage and Hour Division. “Minimum Wage Laws in the States – January 1, 2013.” www.dol.gov/whd/minwage/america.htm
- U.S. Department of Health & Human Services. Office of the Assistant Secretary for Planning and Evaluation. “2013 Poverty Guidelines.” www.aspe.hhs.gov/poverty/13poverty.cfm

The median annual income of households receiving SNAP benefits is \$25,621 compared to a median annual household income of \$43,907 for those not receiving benefits. Approximately 24.8% of households receiving benefits have had no workers in the past 12 months. At the same time, 43.3% of households receiving benefits have had two or more workers in the past 12 months. The percentage of households where two or more members have worked in the past 12 months is 29.8% in the state of Florida and 28.1% in the United States.²¹

Despite Charlotte County’s traditionally low cost of living, this data suggests factors like rising food costs and a lack of high paying jobs has impacted many residents’ ability to have even the most basic necessities of life. For more information on employment see Section 2.

National School Lunch Program

The National School Lunch Program (NSLP), also administered by the United States Department of Agriculture, provides reduced and free lunches to eligible students attending public and non-profit elementary and secondary schools.²² Students in households with income between 0% and 130% of the Federal Poverty Guidelines are eligible for free lunches. Students in households with income between 130% and 185% of the Federal Poverty Guidelines are eligible for reduced price lunches.²³ Participation in the program has increased greatly over the past decade. **In the 2011-12 school year 61.38% of students in Charlotte County were living in a household with an annual income below 185% of the poverty line. This is an increase from 43.12% during the 2002-03 school year.** This is higher than both the state (57.57%)²⁴ and the nation (46% in 2009-2010).²⁵ This suggests a much larger underlying issue within the community including education (Section 1) and employment (Section 2).

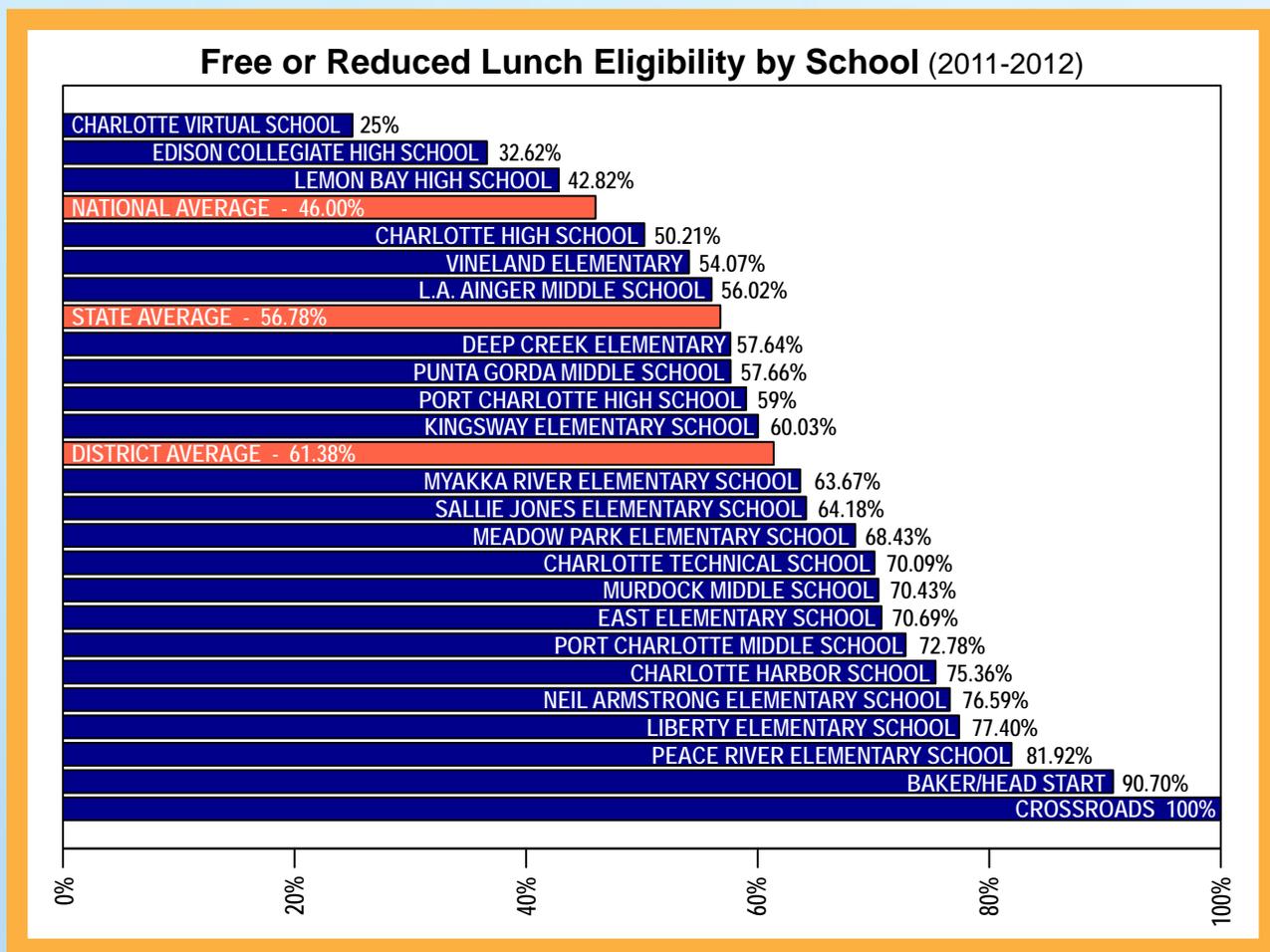


Figure 5.10 Source: Florida Department of Education
Charlotte County, Florida Community Action Plan

AFFORDABLE CHILDCARE

It is estimated that a single parent earning approximately \$20,000 and raising two children would spend 44% of their annual household income on childcare. With financial assistance from the School Readiness program, a parent will spend on average 6% of their annual household income on childcare.²⁶ In households where both parents work, access to quality affordable childcare becomes a necessity. In Charlotte County, approximately 67.8% children under the age of six live in households where all parents are working. This rate is higher than both the state (67.1%) and nation (64.1%).²⁷ Such a high percentage of households with both parents working suggests the need for access to quality affordable childcare.

In Charlotte County, approximately 1,706 children under the age of 6 were living in poverty in 2011.²⁸ That year, 1,122 children received school readiness subsidies from the Early Learning Coalition of Florida's Heartland, Inc. The Coalition contracts with 72 school readiness providers throughout the county. It currently has a waiting list with an average wait time of 5 months.²⁹

Florida's School Readiness program provides a means for parents to remain in the work force and to remain financial stability by reducing the barriers to adequate and affordable childcare. The program offers scholarships to supplement the cost of childcare for low-income families. In order to be eligible, parents must be working or enrolled in an education program for 20 hours or more per week. In addition, they must meet an income requirement based on the Federal Poverty Guidelines and pay a co-pay.³⁰

While the School Readiness program provides vital assistance to families with parents who work or go to school, Charlotte County lacks affordable childcare assistance for families where the members are unemployed but looking for work.

It is not enough to provide affordable childcare. In addition, it must be high quality and sufficiently prepare children for kindergarten. The Department of Children and Families (DCF) is responsible for licensure of childcare facilities in the state of Florida, though counties can legally set their own licensure standards that meet or exceed the state requirements. Charlotte County is one of 62 counties that do not require additional quality measures above state licensure standards. Only Broward, Hillsborough, Palm Beach, Pinellas, and Sarasota counties administer their own requirements.³¹

In Charlotte County, approximately 1,706 children under the age of 6 were living in poverty in 2011.



Photo provided by Boys & Girls Clubs of Charlotte County.

OPPORTUNITIES

- ◆ **Explore best practices and innovative solutions for affordable housing in Charlotte County.** Charlotte County has a high percentage of homeowners and renters spending more than 30% AMI on housing costs. The county's foreclosure rates are among the highest in the nation. Despite the availability of some housing vouchers, there is a four-year waiting list.
- ◆ **Increase access to emergency shelter and transitional housing for homeless population.**
- ◆ **Increase access to quality affordable childcare services.** This is essential to ensure that children are ready for kindergarten. In addition to those that are working or in school, there is a lack of childcare services for parents looking for work.
- ◆ **Increase opportunities for short term financial assistance and awareness of opportunities such as the federal Earned Income Tax Credit (EITC).**
- ◆ **Support coordinated efforts among food pantry providers to improve the services between providers addressing food needs.** This will result in reduced duplication and increased efficiency of services.



*Photo provided by
Charlotte County
Homeless Coalition*

TRANSPORTATION



Photo provided by Audrey Lanczki, Grafico Industries, Inc.

Transportation is a key component for a vibrant and thriving community. Even if a community has a sufficient number of job opportunities and services available, access to affordable transportation plays a vital role in whether or not an individual can take advantage of these opportunities and services.

Transportation is the second largest budget item for households, behind housing.¹ For those with limited incomes, affordable transportation becomes an even greater challenge. Those who own a car are still burdened with additional costs such as gas, insurance, and routine maintenance. For those who cannot afford their own car, they must rely on friends and family, walk, bike, or use public transportation.

In an emerging urbanized community, like Charlotte County, public transportation is often inadequate. Public transportation routes and times are usually limited, and for individuals with low incomes, base fares are often too expensive.

Public transportation in Charlotte County has been a difficult issue to resolve. First, the county is largely suburban without a true urban center. Bridges separate the most densely populated areas: Punta Gorda, Port Charlotte, and Englewood. Second, the county has a large elderly population who would likely have difficulty accessing stops on a fixed bus route. The frail, elderly and disabled riders are more likely to use Americans with Disability Act (ADA) comparable and/or transportation disadvantaged service. Third, the county is lacking in adequate infrastructure to support a fixed route system including sidewalks and turnouts for buses to stop without blocking traffic. Finally, the community lacks a central business district making each resident's transportation needs different. Many workers in Charlotte County are shift workers who do not necessarily work traditional nine-to-five jobs, when public transportation is generally available. Transportation was consistently identified as a perceived need throughout this study by agencies, clients and community members.

Transportation was consistently identified as a perceived need throughout this study by agencies, clients and community members.



Image provided by Charlotte Harbor Visitor & Convention Bureau and the city of Punta Gorda

EMPLOYMENT AND TRANSPORTATION

Transportation is often a major problem for individuals making the transition from unemployed to working. Not having a car can pose a barrier for job seekers. Those without a car or other form of reliable transportation are limited to applying for jobs within walking or biking distance to their homes and as a result, miss out on job opportunities in other parts of town. In some cases, job applicants without a car are not even considered. Once an individual does land a job, lack of reliable transportation often contributes to absenteeism.

In Charlotte County, 23% of households have only one vehicle.² While this would likely be manageable in a community with an urban center or centralized business district, it poses a challenge for households in a community like Charlotte County. Car ownership offers a mixed blessing for low income workers. On the positive side, car owners can seek employment in a broader range of locations; take children to childcare; go to doctors appointments; run errands, etc. However, car ownership is expensive. Repairs, upkeep and insurance create additional barriers and hardships. Transit options are increasingly important.

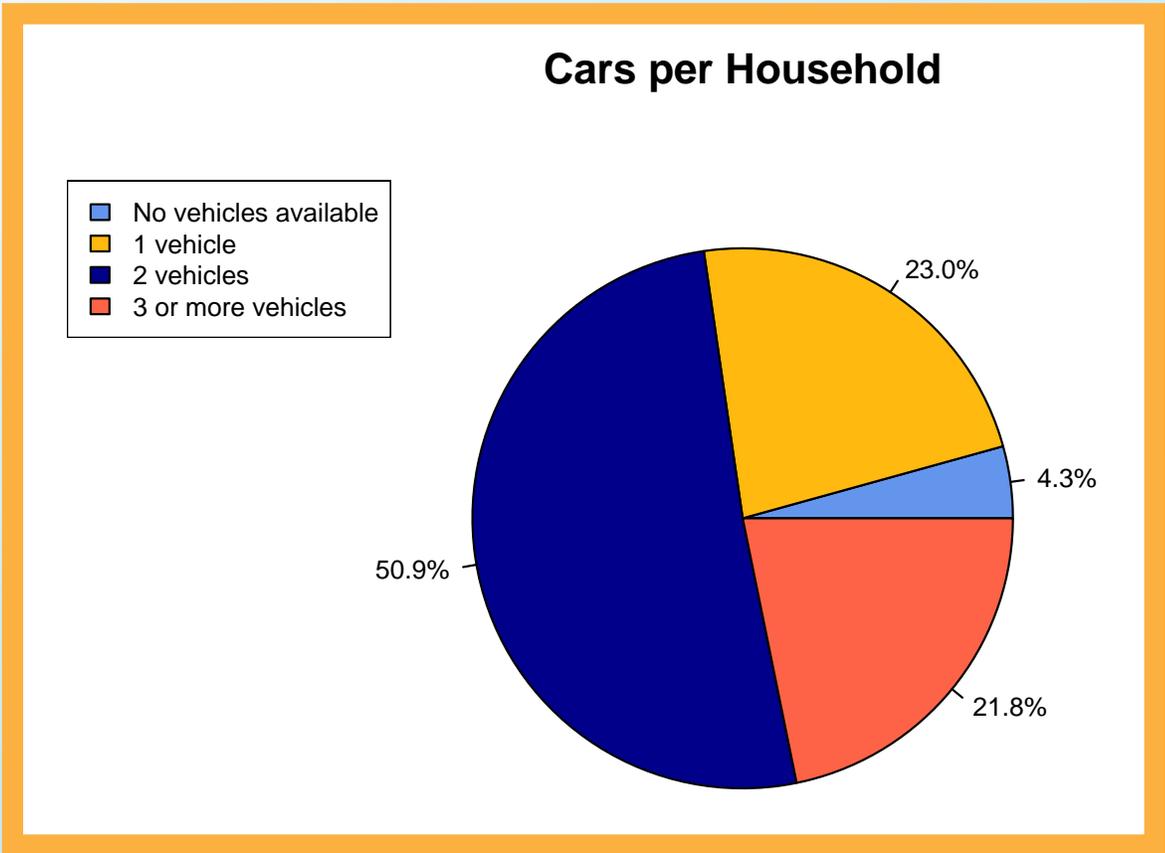


Figure 6.1 Source: American Community Survey, 2011 1 year estimates Table S0801

According to the Federal Transit Administration three quarters of welfare recipients live in central cities or rural areas not well served by transit.³ As a result, low income households spend up to 40% of their household budget on transportation related costs, compared to the national average of 19%.⁴

Transportation affects more than just individuals, but the community as a whole. A report by the American Public Transit Association (APTA) found that for every dollar invested in public transportation \$4 or more is generated in economic returns.⁵ Others estimate the return on investment to be as high as \$6 for every dollar invested.⁶

Transportation corridors, such as I-4 between Tampa and Orlando and proximity to airports are increasingly playing a role in determining where businesses choose to locate. A poll of corporate real estate executives conducted by the trade journal, *Site Selection* demonstrated that transportation infrastructure ranked as the number one factor when deciding where to locate.⁷

Means of Transportation

Charlotte County residents rely heavily on automobiles as the primary form of transportation. In 2011, an estimated 86.7% of workers drove to work – of those, 77.9% drove alone and 8.8% carpooled – 6.7% traveled to work by taxi or motorcycle, 5.4% worked from home, 0.8% walked, and 0.5% took public transportation.⁸

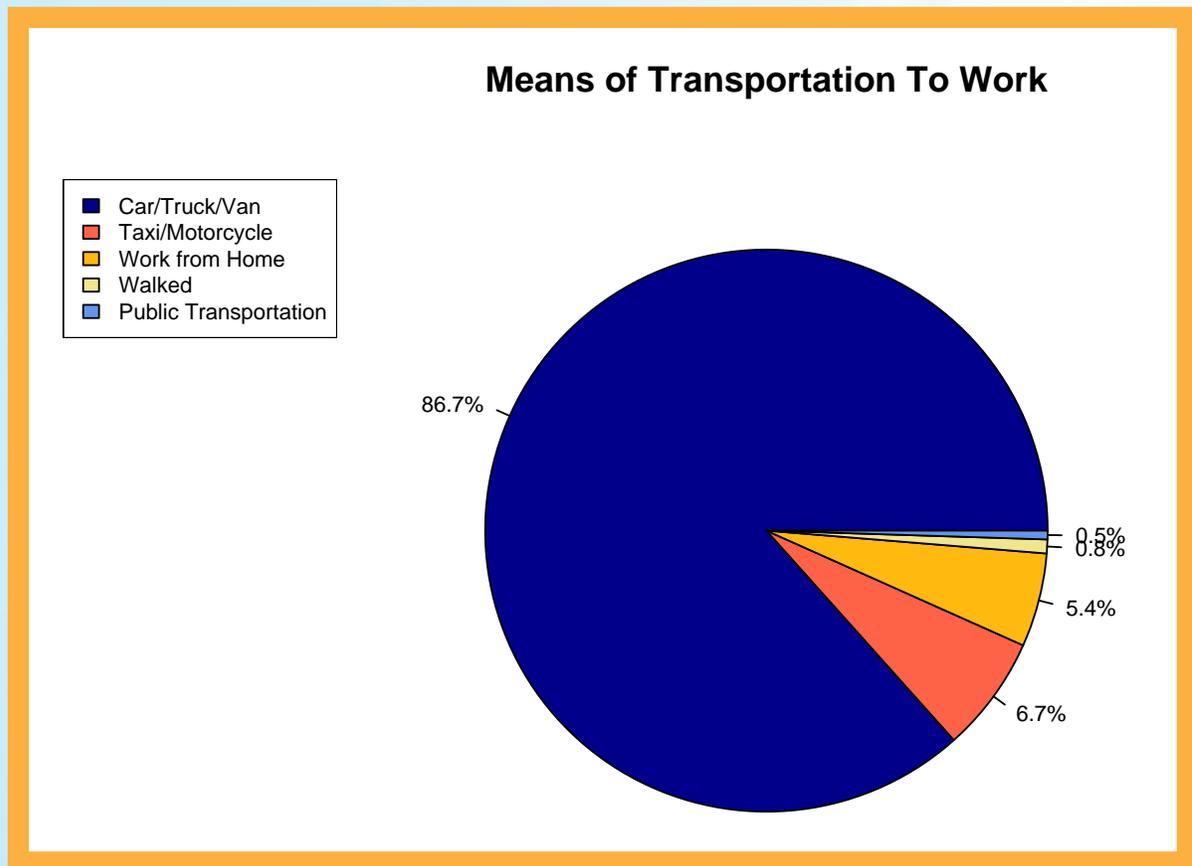


Figure 6.2
Source:
American
Community
Survey, 2011
1 year
estimates
Table S0801

The necessary reliance on automobiles in Charlotte County is evident among the human service agency clientele surveyed throughout this study. Sixty-nine percent of respondents said that they own or lease a car, 14% rely on family and friends, 6.3% use Dial-a-Ride or Sunshine Ride, 5% use bicycles, 2.9% walk, 2.4% have no means of transportation and 0.3% rely on taxis to get where they are going.⁹

Approximately one fourth of workers commute outside of Charlotte County to get to work. On average, commuters need 21.7 minutes to get to work.¹⁰ As a result of the necessary reliance on automobiles in Charlotte County, low income households are forced to seek help with other necessities such as childcare, food, housing, and healthcare.

**Approximately
one fourth of
workers
commute
outside of
Charlotte County
to get to work.**

Human Service Clientele: Mode of Transportation

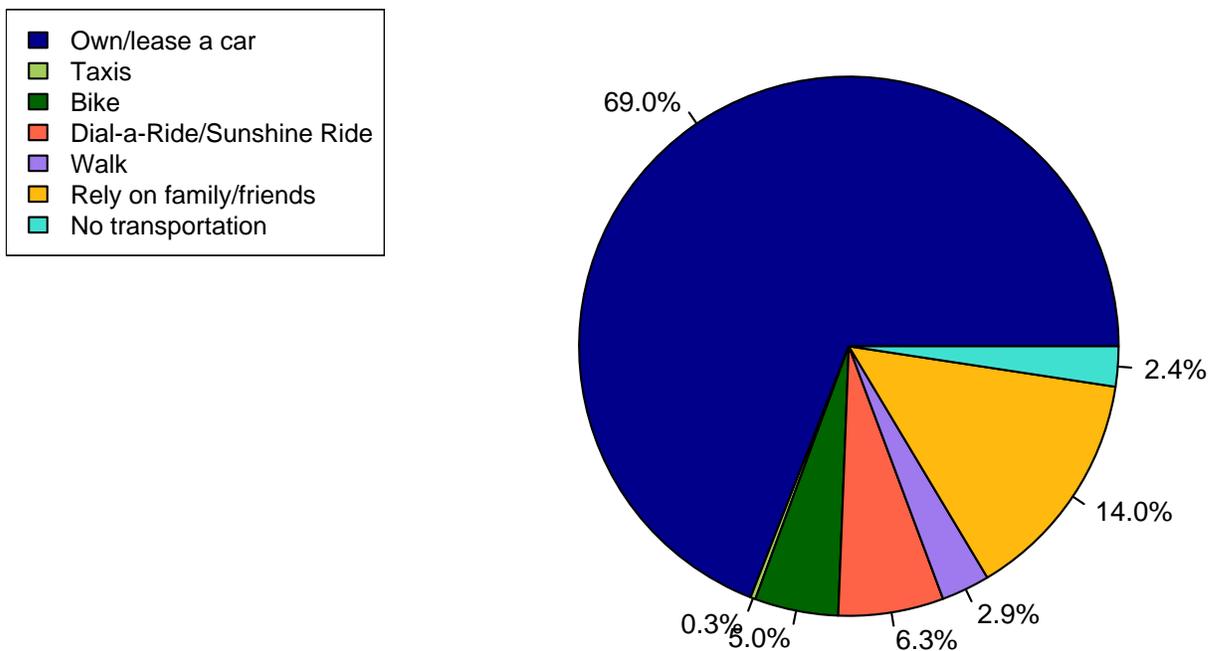


Figure 6.3 Source: Clientele Survey, Appendix 3

Shift Work and Transportation Schedules

Due to the high concentration of service industry jobs in Charlotte County, many residents do not leave for work during peak travel times. Only 40.5% of workers travel to work during the peak hours between 7:00 am and 9:00 am, 29.5% leave for work between midnight and 7:00 am, and 30% travel to work between 9:00 am and midnight.¹¹

Charlotte County's three largest industries: trade, transportation and utilities (27.02%); education and health services (25.12%); and leisure and hospitality (15.51%)¹² each include a wide variety of occupations that do not have typical 9:00 am to 5:00 pm shifts. The Florida Department of Economic Opportunity expects that these industries will continue to grow in Workforce Region 24, which includes Charlotte County, through 2020.¹³

Furthermore, the majority of the fastest growing occupations in Workforce Region 24 are part of the construction industry. This industry is expected to grow by 5.39% annually between 2012 and 2020¹⁴ and is heavily dependent on employees that work during off-peak hours. As a result, transportation to and from work will continue to be an important issue for the community.

Charlotte County's current available public transportation options, Sunshine Ride and Dial-A-Ride are para-transit systems that operate during peak business hours Monday thru Friday. Dial-a-Ride also operates on Saturday. As a result, they are not viable transportation options for many workers employed in these industries.

Households with multiple employed persons but only one vehicle are also likely face difficulty if both do not work the same shift. Even if they do work the same hours, getting to work can be difficult if both do not work in the same general area of town, which is likely in a community like Charlotte County that does not have a centralized business district.

AVAILABLE PUBLIC TRANSPORTATION OPTIONS

Two existing para-transit transportation systems currently exist in Charlotte County, and are operated by the Transit Division of the Charlotte County Human Services Department through the Board of County Commissioners. Para-transit is point-to-point service that accumulates riders in a pre-scheduled format and delivers them to their destinations by proximity rather than time.

Transit operations in Charlotte County are largely funded by the Transportation Disadvantaged Commission, the Federal Transit Administration, Florida Department of Transportation, Agency on Health Care Administration (Medicaid) and Charlotte County General Revenue.¹⁵

Dial-a-Ride – Public Paratransit

The Dial-a-Ride program is available to all Charlotte County residents with advance reservation. Service is available on weekdays from 6:30 am to 6:00 pm and on Saturdays from 8:45 am to 6:00 pm. Dial-a-Ride has 13 routes covering all urbanized areas of Charlotte County. A standard one-way fare is \$3.00 plus an additional \$1.00 for travel across the Myakka or Peace River Bridges and \$3.00 for travel across the Boca Grande Bridge.¹⁶ Dial-a-Ride provided 59,501 one-way rides during the Charlotte County Board of County Commission's Fiscal Year ending September 30, 2012.¹⁷ The operational cost per ride is \$25.28.¹⁸

The challenges to the current system are the incompatibility between route scheduling and work scheduling as well as the cost for both the individual and the county.



*Photo provided by
Charlotte County Transit Division*

SPOTLIGHT

Commuter Services Provides Alternatives to Driving Alone

Many think of fixed-route public transportation as the only solution to a community's transportation needs, yet this solution is often costly and inadequate. Communities are turning to alternative methods to meet these needs. These alternatives are often easy to implement, are much more cost effective for both the community and the individual, and offer other health and environmental benefits.

In 2007 the Florida Department of Transportation introduced the Commuter Services program for travelers living and working in the 12-county Southwest Florida region. This program works with businesses and commuters in the region to find alternatives to driving alone. There are numerous benefits to alternative commuting including: saving money on gas, reducing the wear and tear on your automobile, and reducing pollution, which is beneficial to the environment and your health.

The Commuter Services website (www.commuterservicesfl.com) provides several suggestions for alternative commuting including:

- ◆ **Carpooling** - sharing a ride with one or more friends or co-workers.
- ◆ **Vanpooling** - similar to carpooling, larger groups split the costs associated with van payment, gasoline, and parking.
- ◆ **Bicycling or Walking** - commuters travelling by bike or on foot not only save money but get the added benefit of built-in exercise.
- ◆ **Telework** – by working from home, employees reduce the costs associated with commuting and are often more productive and satisfied in their jobs.
- ◆ **Alternative Work Hours** – working fewer days but longer days enables commuters to save on the number of trips they make each week.

The program website provides numerous resources for business and commuters interested implementing an alternative commuting program including:

- ◆ **Cost Calculator** - to help commuters figure the current cost of their commute and how those costs can be reduced by choosing an alternative.
- ◆ **EZ Ride** – this online tool will help match commuters with similar schedules and destinations
- ◆ **Employer Services** – Commuter Services will assist employers looking to make their workplace more commuter friendly.

For more information, contact: Commuter Services, 1.866.585.RIDE or
www.commuterservicesfl.com



Photo provided by
Charlotte County Transit Division

Sunshine Ride – Transportation Disadvantaged

Sunshine Ride is available to Charlotte County residents with “physical disabilities, those age 60 and older, children at-risk, Medicaid recipients, qualified low income residents, and those living in rural areas.”¹⁹ Passengers must be pre-qualified and must make reservations 24 hours in advance. One-way co-pay fare is \$1.00 for Sunshine Ride. Sunshine Ride provided 93,419 one-way rides during the Charlotte County Board of County Commission’s Fiscal Year ending September 30, 2012.²⁰ The operational cost per ride is \$12.33.²¹

Rides and Operational Costs		
	Operational Cost	One-way Rides
DIAL-A-RIDE	\$25.28/ride	59,501
SUNSHINE RIDE	\$12.33/ride	93,419

Figure 6.4
Source: Charlotte County Board of County Commission, Budget/Fiscal Division; Charlotte County Board of County Commission, Department of Human Services, Transit Division 2012.

The challenges to the current system are the incompatibility between route scheduling and work scheduling as well as the cost for both the individual and the county.

PUBLIC FIXED ROUTE BUS SYSTEM

In an emerging urbanized community, a limited or pilot fixed route system often becomes the next step in blending a para-transit system with a fixed route system. A fixed route system provides consistent route services without requiring advanced reservations and provides additional transportation options for seniors and low income households. Challenges to implementing a fixed route system include identifying demand for route usage, route scheduling, infrastructure, equipment and operating expenses, funding sources and community support.

PUBLIC TRANSPORTATION ALTERNATIVES

Charlotte County recognizes that future economic growth and stability, environmental sustainability, public health and social welfare, are affected by a shift to a more balanced transportation system supportive of travel by public transit, walking, and bicycling as well as accommodating the automobile, which is currently the most utilized mode of travel.

In fact, there are many efforts underway to create this shift. Punta Gorda has already been recognized for its success and leadership through its Punta Gorda Pathways project with an honorable mention as a “Bicycle-Friendly Community” by the League of American Bicyclists. Over 18 miles of pedestrian trails and paths surround and connect the city. The Pathways Project is comprised of many smaller projects including Harborwalk, Linear Park, Connector Projects, and the US 41 Multi Use Recreational Trail.

The City of Punta Gorda in collaboration with Team Punta Gorda, a non-profit organization dedicated to enhancing and improving the city of Punta Gorda, has created a bicycle loaner program. Bright yellow bicycles can be borrowed from area businesses along with a brochure that highlights the Pathways Project for cyclists to follow.

Through the Charlotte County-Punta Gorda Metropolitan Planning Organization, the Long Range Transportation plan for Charlotte County includes an expansion of the bicycle network, sidewalks and multi-use trails.

Moving Forward

Transportation has consistently been identified as one of the highest priority needs in Charlotte County by agencies, clients, and community members alike. The ability to access jobs, education, healthcare and other services is vital to individual’s well-being. In addition, transportation has constantly been shown to play a vital role in a community’s economic success. Yet, effective transportation systems are expensive to implement and operate. They often require joint collaboration between multiple private and public partners.

Transportation in Charlotte County presents its own special challenges and is not without controversy. Our large retired population does not necessarily have the same transportation needs as the community’s working population. In addition, suburban sprawl makes a fixed-route system difficult. Further, there is a question of whether or not a fixed-route system would have sufficient ridership to justify its operational costs.

Despite these challenges, work is being done on a daily basis to improve the available transportation options in the community. The Charlotte County-Punta Gorda Metropolitan Planning Organization (MPO), in collaboration with Sarasota/Manatee Metropolitan Planning Organization has just completed a Transit Latent Demand Study for the Board of County Commission’s review and consideration. Charlotte County and the MPO are preparing to conduct a comprehensive 10 Year Transit Development Plan. With these studies, it is hopeful that transportation options will continue to improve in Charlotte County.

Challenges to implementing a fixed route system include identifying demand for route usage, route scheduling, infrastructure, equipment and operating expenses, funding sources and community support.

OPPORTUNITIES

- ◆ **Embrace the findings of the upcoming 10 Year Transit Development Plan.** Beginning late 2013 and early 2014, Charlotte County will be conducting a comprehensive update to its 10 Year Transit Development Plan as required by the Florida Department of Transportation. This planning document will identify transit needs, resources and gather community input on transit services.²²
- ◆ **Consider the options presented in the Transit Latent Demand Study.** The Latent Demand Study completed in 2013 provided data which suggested that a fixed route between the Parkside district in Port Charlotte and North Port in south Sarasota County was feasible. Both counties may consider future connectivity possibilities.²³

Federal and State regulatory, planning and funding agencies have generally been supportive of Charlotte County's interest in a fixed route system with possibilities for regional coordination and linkages to Lee County to the south and Sarasota County to the north.

- ◆ **Form a community consensus on transportation needs.** Public participation, workshops and surveys can assist in providing community consensus on transportation needs and direction in transit planning.
- ◆ **Explore alternative means of transportation.** Alternative means of transportation can be explored to offset the demand on a public transit system.



Photo provided by
Charlotte County Transit Division

CONCLUSION



Photo provided by Charlotte Harbor Visitor & Convention Bureau

It is apparent from this study that there is no shortage of needs or opportunities in Charlotte County. The number of agencies and individuals dedicated to bringing about change for good is abundant. This study's intent is to help bridge the gap between needs and existing services and bring to light key issues that need to be addressed holistically by the entire community.

Pursue a Theme of Prevention

It became apparent during this study that poverty is both a cause and effect of the other human service area issues. For example, children born into poverty often lack the opportunity to access quality education. Without a quality education, the likelihood of getting a job that earns a sufficient income decreases. Without a sufficient income, it becomes difficult to keep a roof over one's head, food on the table, and to see a doctor when ill. Thus the vicious cycle of poverty becomes nearly impossible to break.

The effects of poverty are detrimental not only to the individual but to the community at-large. By focusing energy and resources into preventative programs the number of people in need of assistance is ultimately reduced in the long run. The return on investment to the community greatly outweighs the initial program costs.

The term 'prevention' spans all areas of the human services sector. Preventative healthcare includes early detection and health promotion as a means to prevent future disease. Preventative education programs include ones that increase high school graduation rates and encourage continued education as a means to obtaining a higher paying job. Homelessness prevention includes programs that thwart crisis situations through financial literacy and budgeting, employment assistance and reducing barriers to affordable housing.

Increase Awareness of Existing Resources and Initiatives

The Charlotte County community has many human service agencies providing vital services to the residents, yet two issues became apparent throughout this study:

- ◆ Agencies do not effectively or consistently communicate with each other about the services they provide.
- ◆ Individuals in need are not always aware of the services available.

There is a need for better communication and cooperation between agencies about local initiatives that are taking place. Better communication would result in a more seamless delivery system of services and would lead to reduced duplication of services.

Furthermore, Charlotte County has a wide array of services available to our residents to help meet their basic needs. These services are provided through a variety of service providers, both public and private. As part of this study, the research team worked with Charlotte County 211 – the community's government and non-profit information and referral service, the GIS team from the Charlotte County IT Department and the LIS team from the Charlotte County Community Development Department to develop an online interactive resource map.

This interactive map was developed to assist residents in locating essential human services that are available in our community. The map will provide you with basic provider information for the following service categories: Employment, Education, Housing, Food, Financial Assistance, Family & Youth Services, Senior Services, Transportation, Veteran Services and Health.

This tool can be accessed through Charlotte County Human Service's website:
www.charlottecountyfl.gov/dept/humanservices/Pages/default.aspx

Promote Community-wide Investment

Poverty is an issue that affects the entire community but one many find uncomfortable to discuss. The issue is one that is often “out of site, out of mind.” At the same time, the issue of poverty is relative for someone who is living it and is surrounded by people with similar circumstances. Left unaddressed, the cycle of poverty will only continue to grow.

As the greatest need identified in this study, the burden of reducing poverty is one that is shared between the individual, local government, human service agencies and the community at-large. It is not enough for human service agencies to provide supportive services to those in need and to expect an individual to continue his or her education as a means to a better future.

The local economy must attract industries so that individuals can seek employment that meets their skill set and pays adequate living wages. Our elected officials and community members must recognize the long-term return on investment that comes with supporting programs in the short term through advocacy, financial support or volunteerism. It is up to the local agencies to communicate the value of this investment.

Human service providers are encouraged to look for ways to work together to attack the issue of poverty holistically through their individual missions. These agencies must work cooperatively to break down their barriers in order to collaborate on programs and initiatives that will bring about measurable change. After all, we are stronger together than we are alone.



Photo provided by Goodwill Industries of Southwest Florida

(this page intentionally left blank for two-sided reproduction)

REFERENCES



Map Art provided by Charlotte Harbor Visitor & Convention Bureau

BIBLIOGRAPHY

- ACT, Inc. (2012). *ACT Profile Report – State: Graduating class of 2012, Florida*. Retrieved from: www.act.org/newsroom/data/2012/pdf/profile/Florida.pdf
- Agency for Health Care Administration, (2012). *2012-2013 Florida Medicaid Summary of Services*. Retrieved from: <http://www.ahca.myflorida.com/Medicaid/flmedicaid.shtml>
- . (2013). *Eligibility for Medicaid Services, "Age by County."* Retrieved from: <http://ahca.myflorida.com/medicaid/about/about2.shtml>
- Angela Hogan, Executive Director, Charlotte County Homeless Coalition, (2013).
- Anne Bouhebert, Executive Director, Early Learning Coalition of Florida's Heartland, Inc. (2013).
- Bureau of Labor Statistics. (2011). *Quarterly Census of Employment and Wages, 2011 Annual Average*. Retrieved from: http://data.bls.gov/location_quotient/ControllerServlet
- . (2013). *Local Area Unemployment Statistics*. "Labor force data by county, annual averages." Retrieved from: www.bls.gov/lau/#tables
- Carnevale, Anthony P. and Nicole Smith. (2012). "A Decade Behind: Breaking out of the Low-skill trap in the Southern Economy." *Center for Education and the Workforce*. Washington, D.C.: Georgetown University, Georgetown Public Policy Institute. Retrieved from: <http://www9.georgetown.edu/grad/gppi/hpi/cew/pdfs/DecadeBehind.FullReport.073112.pdf>
- Center for Urban Transportation Research, University of South Florida. (2009). *Charlotte County FY 2009/2010-FY2018/2019 Transit Development Plan*. Retrieved from: <http://www.ccmpo.com/index.php/en/plan/transit-development-plan/transit-development-plan>
- Centers for Medicare and Medicaid Services. (2011), *Medicare County Enrollment Report*.
- . (2012). *Provider of Services File, Fourth Quarter, 2012*.
- . (2013). *Your Medicare Coverage*.
- Charlotte County 211, (2013). *Food Pantries – Donation List*. Retrieved from: <http://www2.charlottefl.com/Repository/Human%20Services/Food%20Pantries-%20Donation%20list.pdf>
- Charlotte County Economic Development Office (2013). *Charlotte County Demographic Profile*. Retrieved from: www.floridasinnovationcoast.com/SiteSelection/Demographics/PDFs/Demographic_Profile.pdf
- Charlotte County Healthy Start Coalition, Inc.
- Charlotte County Homeless Coalition. (2013). *Lead Agency Survey of 2013 Point-in-Time Count*.
- Charlotte County Human Services Department, Senior Services Division
- Charlotte County Public Schools. (2011). *Annual District Report Card, 2010-2011*. Retrieved from: www.yourcharlotteschools.net/documents/fedprograms/district_report_card_1011.pdf
- Charlotte County Public Schools, Early Childhood Programs. (2012). *CCPS Early Childhood Programs Annual Report 2012*. Retrieved from: <http://bac.ccps.k12.fl.us/>

Children's Network of Southwest Florida, LLC.,

Early Learning Coalition of Florida's Heartland, Inc. (2013). *2012-2013 Voluntary Pre-Kindergarten Approved Providers Profile*

Eccles, Jacquelynne S., Bonnie L. Barber, Margaret Stone, and James Hunt. (2003). *Journal of Social Issues*. "Extracurricular Activities and Adolescent Development." Vol. 59, No. 4, p. 865-889.

Florida College Access Network. (2012). *FAFSA completion and submission data for 12th graders attending Florida Schools during 2011-12 school year by county*. Retrieved from: http://www.floridacollegeaccess.org/?s=FAFSA&post_type=research_documents

Florida Department of Children and Families, (2012). *Florida Youth Substance Abuse Survey, "2012 FYSAS County Tables"*. Retrieved from: <http://www.myflfamilies.com/service-programs/substance-abuse/fyas/2012-county-tables>

—. (2013). *Licensing Information*. Retrieved from: www.myflfamilies.com/service-programs/child-care/licensing-information

Florida Department of Economic Opportunity. (2012) *Employment Projections Data 2012-2020: Workforce Region 24*. Retrieved from: <http://www.floridajobs.org/labor-market-information/data-center/statistical-programs/employment-projections>

Florida Department of Education, Education Information & Accountability Services. (2012). Retrieved from: <http://www.fldoe.org/eias/eiaspubs/pubstudent.asp>

Florida Department of Education, Office of Early Learning. (2006). *Florida Statutes and Administrative Rules Related to the Voluntary Prekindergarten (VPK) Education Program*. Retrieved from: www.fldoe.org/earlylearning/pdf/vpk-statutes-rules.pdf

—. (2011). *Voluntary Prekindergarten Education Program Funding Allocations by County and Coalition, 2011-12*. Retrieved from: www.fldoe.org/earlylearning/funding.asp

Florida Department of Elder Affairs, (2012). *2012 Florida County Profiles (Projection) – Charlotte County*. Retrieved from: http://elderaffairs.state.fl.us/doea/pubs/stats/County_2012Projections/Florida_Map.html

Florida Department of Health, (2010). *Behavioral Risk Factor Surveillance System. "2010 County BRFSS Reports: Charlotte County"*. Retrieved from: http://www.doh.state.fl.us/Disease_ctrl/epi/BRFSS_Reports/2010/BRFSS_2010.htm

—. (2011). *Florida CHARTS 2011 County Health Profile*. Retrieved from: <http://www.floridacharts.com/charts/default.aspx>

Florida Department of Health, Charlotte County. (2013). *Changes to Health Department Services*. Retrieved from: <http://www.doh.state.fl.us/chdcharlotte/Clinic/Changes.html>

Florida Department of Juvenile Justice. (2012). *Delinquency Profile 2011-2012*. Retrieved from: <http://www.djj.state.fl.us/research/delinquency-data/delinquency-profile>

Florida's Office of Early Learning. (2011). *School Program Readiness Data: 2011*. Retrieved from: <http://www.floridaearlylearning.com/Documents/CCRR-Handbooks/School%20Readiness%20Fact%201-24-2012.pdf>

BIBLIOGRAPHY (CONT.)

- . (2012). *Long Range Program Plan: Fiscal Years 2013-14 through 2017-18*. Retrieved from: <http://www.floridaearlylearning.com/Documents/All-Annual/LRPP13-14.pdf>
- Juvenile Justice Council. (2013). *Charlotte County, Florida Risk Factor Indicator Inventory*.
- Michael Overway, Homeless Management Information System Director,
Charlotte County Homeless Coalition, (2013).
- Nelson, Charles A. "Neural plasticity and human development: The role of early experience in sculpting memory systems." *Developmental Science* 3 (2000): 115-130. Retrieved from: <http://icdl.com/graduate/Portal/IMH212/documents/Nelson2000.pdf>
- Office of Economic and Demographic Research. (2013). *Voluntary Prekindergarten Estimating Conference: Executive Summary*. Retrieved from: <http://edr.state.fl.us/Content/conferences/vpk/VPKsummary.pdf>
- . (2013). *Voluntary Prekindergarten Estimating Conference: Post Conference Packet*. Retrieved from: <http://edr.state.fl.us/Content/conferences/vpk/VPKResults.pdf>.
- Organization for Economic Cooperation and Development. (2011). *OECD Factbook 2011-2012: Economic, Environmental and Social Statistics*. OECD Publishing. Retrieved from: <http://dx.doi.org/10.1787/factbook-2011-en>
- Renaissance Planning Group. (2013). *Transit Latent Demand Study, South Sarasota/Charlotte County*. Retrieved from: <http://www.ccmpto.com/index.php/en/plan/transit-development-plan>
- Shimberg Center for Housing Studies, University of Florida, (2012). *Florida Housing Data Clearinghouse*. "Foreclosure and Serious Delinquency Rates." Retrieved from: http://flhousingdata.shimberg.ufl.edu/a/foreclosure?report=foreclosure_all&go.x=16&go.y=8&go=1&action=results&nid=1
- Southwest Florida Workforce Development Board, Inc. (2013).
- Stillwell, Robert and Jennifer Sable. (2013). "Public School Graduates and Dropouts from the Common Core of Data: School Year 2009- 2010." *National Center for Education Statistics*. Retrieved from: <http://nces.ed.gov/pubsearch/pubsinfo.asp?pubid=2013309rev>
- The College Board. (2013). *The 9th Annual AP Report to the Nation*. Retrieved from: <http://media.collegeboard.com/digitalServices/pdf/ap/rtn/9th-annual/9th-annual-ap-report-single-page.pdf>
- U.S. Census Bureau. *American Community Survey (One-Year Estimates)*.
- . (2013). *2012 Population Estimates*.
- . (2010). *2010 Decennial Census*.
- U.S. Department of Agriculture. Food and Nutrition Service. (2012) *National School Lunch Program (NSLP) Program Fact Sheet*. Retrieved from: <http://www.fns.usda.gov/slp>
- . (2013). *Child Nutrition Programs; Income Eligibility Guidelines*, Retrieved from: www.fns.usda.gov/cnd/governance/notices/iegs/iegs.htm
- . (2013). *National School Lunch Program*. Retrieved from: <http://www.fns.usda.gov/slp>

- (2013). *Supplemental Nutrition Assistance Program: Average Monthly Benefit Per Person*. Retrieved from: <http://www.fns.usda.gov/pd/snapmain.htm>

- US Department of Education, National Center for Education Statistics, Common Core of Data (CCD). (2011). *Public Elementary/Secondary School Universe Survey, 2010-11*. Retrieved from: www.nces.ed.gov/programs/digest/d11/tables/dt11_045.asp

- U.S. Department of Health and Human Services. (2013) *Healthy People 2020*. "2020 Leading Health Indicators." Retrieved from: <http://www.healthypeople.gov/2020/LHI/default.aspx>

- (2013). *Key Features of the Affordable Care Act*. Retrieved from: <http://www.hhs.gov/healthcare/facts/timeline/index.html>

- . Office of Head Start within the Administration of Children and Families. (2013) *Head Start Services*. Retrieved from: www.acf.hhs.gov/programs/ohs/about/head-start.

- . Office of The Assistant Secretary for Planning and Evaluation. (2013). *2013 Poverty Guidelines*. Retrieved from: <http://aspe.hhs.gov/poverty/13poverty.cfm#guidelines>

- US Department of Housing and Urban Development, (2013), *Affordable Housing*. Retrieved from: <http://www.hud.gov/offices/cpd/affordablehousing/>

- . Office of Policy Development and Research. (2013) *US Housing Market Conditions: Summary – Fair Market Rents*. Retrieved from: <http://www.huduser.org/periodicals/ushmc/winter98/summary-2.html>

- (2013). *Housing Choice Voucher Program Guidebook*. "Chapter 5." Retrieved from: http://portal.hud.gov/hudportal/documents/huddoc?id=DOC_11749.pdf

- (2013). *FY2013 Fair Market Rents and FY2013 Income Limits Summary System*. Retrieved from: http://www.huduser.org/portal/datasets/fmr/fmr_il_history.html

- Wyatt, Jeffrey, Jennifer Korbin, Andrew Wiley, Wayne J. Camera, and Nina Proestler. (2011). "SAT Benchmarks: Development of a College Readiness Benchmark and its Relationship to Secondary and Postsecondary School Performance." *College Board*. Retrieved from: <http://research.collegeboard.org/sites/default/files/publications/2012/7/researchreport-2011-5-sat-college-readiness-benchmark-secondary-performance.pdf>

ENDNOTES

Introduction

- ¹ US Census Bureau, *Decennial Census*, 1990, 2000, 2010
- ² Charlotte County Economic Development Office, *Charlotte County Demographic Profile*, 2013
- ³ US Census Bureau, *Decennial Census*, 2000, 2010
- ⁴ Ibid.
- ⁵ US Census Bureau, *2012 Population Estimates*
- ⁶ US Census Bureau, *Decennial Census*, 2000, 2010
- ⁷ US Census Bureau, *American Community Survey (One-year Estimates)*, Table S1501 Educational Attainment, 2011
- ⁸ Ibid.
- ⁹ US Census Bureau, *American Community Survey (One-year Estimates)*, Table CP03 Selected Economic Characteristics, 2011
- ¹⁰ Ibid.
- ¹¹ Florida Department of Education, *Free/Reduced Price Lunch Eligibility, 2011-12*
- ¹² US Census Bureau, *American Community Survey (One-year Estimates)*, Table S2101 Veteran Status, 2011

Section 1 – Education

- ¹ U.S. Census Bureau, *American Community Survey (One-Year Estimates)*, Table S1501: Educational Attainment, 2011
- ² Charles A. Nelson, "Neural plasticity and human development: The role of early experience in sculpting memory systems," *Developmental Science* 3 (2000): 115-130.
- ³ U.S. Department of Health and Human Services, Office of Head Start within the Administration of Children and Families, *Head Start Services*
- ⁴ Charlotte County Public Schools, Early Childhood Programs. *CCPS Early Childhood Programs Annual Report 2012*.
- ⁵ Florida Department of Education, Office of Early Learning. *Florida Statutes and Administrative Rules Related to the Voluntary Prekindergarten (VPK) Education Program*, 2006.
- ⁶ Early Learning Coalition of Florida's Heartland, Inc. *2012-2013 Voluntary Pre-Kindergarten Approved Providers Profile*, 2013.
- ⁷ Early Learning Coalition of Florida's Heartland, Inc., email to United Way of Charlotte County, May 2013.
- ⁸ Florida Department of Education. *Voluntary Prekindergarten Education Program Funding Allocations by County and Coalition, 2011 – 12*.
- ⁹ Florida Department of Education. *Membership in Florida's Public Schools, Fall 2012*.
- ¹⁰ Office of Economic and Demographic Research. *Voluntary Prekindergarten Estimating Conference: Executive Summary*. 2013.
- ¹¹ Florida's Office of Early Learning. *Long Range Program Plan: Fiscal Years 2013-14 through 2017-18*. 2012.
- ¹² Office of Economic and Demographic Research. *Voluntary Prekindergarten Estimating Conference: Post Conference Packet*. 2013.
- ¹³ Florida Department of Education. *Readiness to Start School, 2011 – 2012*.
- ¹⁴ Florida Department of Education. *Membership in Florida's Public Schools, Fall 2012*.
- ¹⁵ US Department of Agriculture, Food and Nutrition Service. *National School Lunch Program (NSLP) Program Fact Sheet*, 2012.
- ¹⁶ Florida Department of Education. *Free/Reduced Price Lunch Eligibility by School, 2011-12*.
- ¹⁷ US Department of Education, National Center for Education Statistics, Common Core of Data (CCD). *Public Elementary/Secondary School Universe Survey*. 2011
- ¹⁸ Florida Department of Education. *Free/Reduced Price Lunch Eligibility by School, 2011-12*.
- ¹⁹ Florida Department of Education. *High Poverty Schools for 2011-2012*.
- ²⁰ Charlotte County Public Schools. *Annual District Report Card, 2010-2011*.
- ²¹ Florida Department of Education. *Absent 21+ Days, 2011-12*.
- ²² Juvenile Justice Council. *Charlotte County, Florida, Risk Factor Indicator Inventory*. 2013
- ²³ Florida Department of Education. *Absent 21+ Days, 2011-12*.
- ²⁴ US Census Bureau. *American Community Survey (One-year Estimates)*, Table S1810: Disability Characteristics, 2011
- ²⁵ Juvenile Justice Council. *Charlotte County, Florida, Risk Factor Indicator Inventory*. 2013
- ²⁶ Ibid.
- ²⁷ Florida Department of Education. *Florida's Dropout Rate by Race by School. 2011-12*
- ²⁸ Robert Stillwell and Jennifer Sable. "Public School Graduates and Dropouts from the Common Core of Data: School Year 2009 – 2010." *National Center for Education Statistics*, 2013.
- ²⁹ Juvenile Justice Council. *Charlotte County, Florida, Risk Factor Indicator Inventory*. 2013
- ³⁰ Florida Department of Education. *2011-12 Cohort Graduation Rate*.
- ³¹ Robert Stillwell and Jennifer Sable. "Public School Graduates and Dropouts from the Common Core of Data: School Year 2009 – 2010." *National Center for Education Statistics*, 2013.
- ³² Florida Department of Education. *2011-12 Cohort Graduation Rate*.
- ³³ US Census Bureau, *American Community Survey (One-year estimates)*, Table S1501: Educational Attainment, 2011
- ³⁴ Ibid
- ³⁵ Florida Department of Education. *High School Graduate Intentions, 2010-11*.

- ³⁶ ACT, Inc., *ACT Profile Report – State: Graduating class of 2012, Florida*.
- ³⁷ Florida Department of Education, *ACT School Means, 2012*
- ³⁸ Wyatt, Jeffrey, Jennifer Korbin, Andrew Wiley, Wayne J. Camera, and Nina Proestler. "SAT Benchmarks: Development of a College Readiness Benchmark and its Relationship to Secondary and Postsecondary School Performance," *College Board*. 2011.
- ³⁹ Florida Department Of Education, *SAT District Means, 2012*
- ⁴⁰ Florida Department of Education, *ACT School Means, 2012*
- ⁴¹ Florida Department Of Education, *SAT District Means, 2012*
- ⁴² Florida Department of Education. *AP District Reports, 2012*
- ⁴³ The College Board. *The 9th Annual AP Report to the Nation, 2013*
- ⁴⁴ Florida College Access Network. *FAFSA completion and submission data for 12th graders attending Florida Schools during 2011-12 school year by county, 2012*
- ⁴⁵ Anthony P. Carnevale and Nicole Smith "A Decade Behind: Breaking out of the Low-skill trap in the Southern Economy." *Center on Education and the Workforce*. 2012

Section 2 – Employment

- ¹ Anthony P. Carnevale and Nicole Smith "A Decade Behind: Breaking out of the Low-skill trap in the Southern Economy." *Center on Education and the Workforce*. 2012
- ² Bureau of Labor Statistics, *Local Area Unemployment Statistics*, "Labor force data by county, annual averages", 2013
- ³ Ibid.
- ⁴ Southwest Florida Workforce Development Board, Inc., 2013.
- ⁵ US Census Bureau, *American Community Survey, (One- Year Estimates)*, Table CP03 Selected Economic Characteristics, 2011
- ⁶ US Department of Health and Human Services. Office of The Assistant Secretary for Planning and Evaluation. *2013 Poverty Guidelines*.
- ⁷ US Census Bureau, *American Community Survey, (One- Year Estimates)*, Table CP03 Selected Economic Characteristics, 2011
- ⁸ Charlotte County Economic Development Office. *Charlotte County Demographic Profile*, 2013
- ⁹ US Census Bureau, *American Community Survey, (One-Year Estimates)*, Table DP03 Selected Economic Characteristics, 2011
- ¹⁰ OECD, *OECD Factbook 2011-2012: Economic, Environmental and Social Statistics*, 2011
- ¹¹ County Economic Development Office. *Charlotte County Demographic Profile*, 2013
- ¹² Bureau of Labor Statistics, *Quarterly Census of Employment and Wages, 2011 Annual Average*.
- ¹³ Florida Department of Economic Opportunity. *Employment Projections Data 2012-2020: Workforce Region 24.*, 2012
- ¹⁴ Ibid.
- ¹⁵ Anthony P. Carnevale and Nicole Smith "A Decade Behind: Breaking out of the Low-skill trap in the Southern Economy." *Center on Education and the Workforce*. 2012
- ¹⁶ Ibid.
- ¹⁷ Florida Department of Economic Opportunity. *Employment Projections Data 2012-2020: Workforce Region 24.*, 2012
- ¹⁸ Anthony P. Carnevale and Nicole Smith "A Decade Behind: Breaking out of the Low-skill trap in the Southern Economy." *Center on Education and the Workforce*. 2012

Section 3 – Family Services

- ¹ US Census Bureau, *American Community Survey, (One-Year Estimates)*, Table S1101 Households and Families, 2011
- ² Juvenile Justice Council. *Charlotte County, Florida, Risk Factor Indicator Inventory*. 2013
- ³ Ibid.
- ⁴ Children's Network of Southwest Florida, LLC.
- ⁵ Ibid.
- ⁶ Florida Department of Juvenile Justice. *Delinquency Profile 2011-2012*
- ⁷ Ibid.
- ⁸ Department of Children and Families, *Florida Youth Substance Abuse Survey, 2012*
- ⁹ Eccles, Jacquelynne S., Bonnie L. Barber, Margaret Stone, and James Hunt. *Journal of Social Issues*. "Extracurricular Activities and Adolescent Development." 2003.
- ¹⁰ Department of Children and Families, *Florida Youth Substance Abuse Survey, 2012*
- ¹¹ U.S. Census Bureau, *2012 Population Estimates*
- ¹² Charlotte County Economic Development Office. *Charlotte County Demographic Profile*, 2013
- ¹³ US Census Bureau, *American Community Survey, (One-Year Estimates)*, Table S1101 Households and Families, 2011
- ¹⁴ Florida Department of Elder Affairs, *2012 Florida County Profiles (Projection) – Charlotte County*
- ¹⁵ Florida Department of Elder Affairs, *2012 Florida Profile (Projection)*
- ¹⁶ US Census Bureau, *American Community Survey, (One-Year Estimates)*, Table DP03 Selected Economic Characteristics, 2011
- ¹⁷ US Census Bureau, *American Community Survey, (One-Year Estimates)*, Table S2701 Health Insurance Coverage Status, 2011
- ¹⁸ Florida Department of Elder Affairs, *2012 Florida County Profiles (Projection) – Charlotte County*
- ¹⁹ Agency for Health Care Administration, *Eligibility for Medicaid Services, "Age by County."* May 31, 13.
- ²⁰ Florida Department of Elder Affairs, *2012 Florida County Profiles (Projection) – Charlotte County*

ENDNOTES

Section 3 – Family Services (cont.)

- ²¹ Charlotte County Human Services Department, Senior Services Division, 2013
- ²² US Census Bureau, *American Community Survey (One-Year Estimates)*, Table S1810 Disability Characteristics, 2011
- ²³ Florida Department of Elder Affairs, *2012 Florida County Profiles (Projection) – Charlotte County*
- ²⁴ Florida Department of Elder Affairs, *2012 Florida Profile (Projection)*
- ²⁵ Florida Department of Elder Affairs, *2012 Florida County Profiles (Projection) – Charlotte County*
- ²⁶ Florida Department of Health, *Florida CHARTS 2011 County Health Profile*
- ²⁷ Florida Department of Elder Affairs, *2012 Florida County Profiles (Projection) – Charlotte County*

Section 4 – Health

- ¹ US Department of Health and Human Services. *Healthy People 2020*. “2020 Leading Health Indicators: Social Determinants.”
- ² Florida Department of Health, *Behavioral Risk Factor Surveillance System*. “2010 County BRFSS Reports: Charlotte County,” 2010
- ³ US Census Bureau, *2010 Decennial Census*
- ⁴ US Census Bureau, *American Community Survey (One-Year Estimates)*, Table S0101 Age and Sex, 2011
- ⁵ US Department of Health and Human Services. *Healthy People 2020*. “2020 Leading Health Indicators: Access to Health Services.”
- ⁶ US Department of Health and Human Services. *Key Features of the Affordable Care Act*, 2013
- ⁷ Florida Department of Health, Charlotte County. *Changes to Health Department Services.*, 2013.
- ⁸ Florida Department of Health, *Florida CHARTS 2011 County Health Profile*
- ⁹ Virginia B. Andes Volunteer Community Clinic, 2012
- ¹⁰ US Census Bureau, *American Community Survey (One-Year Estimates)*, Table S2701 Health Insurance Coverage Status, 2011
- ¹¹ Agency for Health Care Administration, *Eligibility for Medicaid Services*, “Age by County.” May 31, 13.
- ¹² Centers for Medicare and Medicaid Services, *Medicare County Enrollment Report*, 2011.
- ¹³ Florida Department of Health, *Florida CHARTS 2011 County Health Profile*
- ¹⁴ Centers for Medicare and Medicaid Services, *Provider of Services File, Fourth Quarter 2012*.
- ¹⁵ US Department of Health and Human Services. *Healthy People 2020*. “2020 Leading Health Indicators: Maternal, Infant and Child Health”
- ¹⁶ Florida Department of Health, *Florida CHARTS 2011 County Health Profile*
- ¹⁷ Ibid.
- ¹⁸ Charlotte County Health Start Coalition, Inc., 2012
- ¹⁹ Agency for Health Care Administration. *2012-2013 Florida Medicaid Summary of Services*.
- ²⁰ Centers for Medicare and Medicaid Services. *Your Medicare Coverage*
- ²¹ US Department of Health and Human Services. *Healthy People 2020*. “2020 Leading Health Indicators: Oral Health.”
- ²² Florida Department of Health, *Florida CHARTS 2011 County Health Profile*
- ²³ Ibid.
- ²⁴ US Census Bureau, *American Community Survey (One-Year Estimates)*, Table S1810 Disability Characteristics, 2011
- ²⁵ Ibid.
- ²⁶ Ibid.
- ²⁷ Ibid.
- ²⁸ Ibid.
- ²⁹ US Department of Health and Human Services. *Healthy People 2020*. “2020 Leading Health Indicators: Mental Health.”
- ³⁰ Florida Department of Health, *Behavioral Risk Factor Surveillance System*. “2010 County BRFSS Reports: Charlotte County,” 2010
- ³¹ Ibid.
- ³² Ibid.
- ³³ Ibid.

Section 5 – Poverty

- ¹ US Census Bureau, *American Community Survey (One-Year Estimates)*, Table CP03 Selected Economic Characteristics, 2011
- ² Ibid.
- ³ US Department of Health and Human Services. Office of The Assistant Secretary for Planning and Evaluation. *2013 Poverty Guidelines*
- ⁴ US Census Bureau, *American Community Survey (One-Year Estimates)*, Table S1702 Poverty Status in the Past 12 Months of Families, 2011
- ⁵ US Census Bureau, *American Community Survey (One-Year Estimates)*, Table DP04 Selected Housing Characteristics, 2011

- ⁶ Shimberg Center for Housing Studies, University of Florida, *Florida Housing Data Clearinghouse*. "Foreclosure and Serious Delinquency Rates." 2012
- ⁷ US Department of Housing and Urban Development, *Affordable Housing*, 2013
- ⁸ US Census Bureau, *American Community Survey (One-Year Estimates)*, Table DP04 Selected Housing Characteristics, 2011
- ⁹ US Census Bureau, *American Community Survey (One-Year Estimates)*, Table S2506 Financial Characteristics for Housing Units with a Mortgage, 2011
- ¹⁰ US Department of Housing and Urban Development, *Affordable Housing*, 2013
- ¹¹ US Department of Housing and Urban Development. Office of Policy Development and Research. *US Housing Market Conditions: Summary – Fair Market Rents*
- ¹² US Department of Housing and Urban Development. *Housing Choice Voucher Program Guidebook*. "Chapter 5"
- ¹³ US Department of Housing and Urban Development. *FY2013 Fair Market Rents and FY2013 Income Limits Summary System*.
- ¹⁴ Michael Overway, Homeless Management Information System Director, Charlotte County Homeless Coalition, 2013
- ¹⁵ Charlotte County Homeless Coalition. *Lead Agency Survey of 2013 Point-in-Time Count.*, 2013.
- ¹⁶ Angela Hogan, Executive Director, Charlotte County Homeless Coalition, 2013.
- ¹⁷ Charlotte County 211, *Food Pantries – Donation List*. Updated May 7, 2013
- ¹⁸ US Department of Agriculture. *Supplemental Nutrition Assistance Program: Average Monthly Benefit Per Person*, 2013.
- ¹⁹ US Census Bureau, *American Community Survey (One-Year Estimates)*, Table CP03 Selected Economic Characteristics, 2011
- ²⁰ US Census Bureau, *American Community Survey (One-Year Estimates)*, Table S2201 Food Stamp/SNAP, 2011
- ²¹ Ibid.
- ²² USDA, Food and Nutrition Service. *National School Lunch Program*.
- ²³ USDA, Food and Nutrition Service. *Child Nutrition Programs; Income Eligibility Guidelines*, 2013.
- ²⁴ Florida Department of Education, *Free/Reduced Price Lunch Eligibility by School, 2011-12*.
- ²⁵ US Department of Education, National Center for Education Statistics, Common Core of Data (CCD). *Public Elementary/Secondary School Universe Survey*. 2011
- ²⁶ Florida's Office of Early Learning. *School Program Readiness Data: 2011*.
- ²⁷ US Census Bureau, *American Community Survey (One-Year Estimates)*, Table DP03 Selected Economic Characteristics, 2011
- ²⁸ Ibid.
- ²⁹ Early Learning Coalition of Florida's Heartland, Inc., 2013
- ³⁰ Florida's Office of Early Learning *School Readiness Program Data: 2011*.
- ³¹ Florida Department of Children and Families. *Licensing Information.*, 2013

Section 6 – Transportation

- ¹ US Department of Transportation, Federal Transit Administration. *Affordable Housing Near Transit*. 2013.
- ² US Census Bureau, *American Community Survey, (One-year Estimates)*, Table S0801 Commuting Characteristics by Sex
- ³ US Department of Transportation, Federal Transit Administration. *Use of TANF, WtW, and Job Access Funds for Transportation*. 2013.
- ⁴ Surface Transportation Policy Report, *Transportation Costs and the American Dream*. 2003.
- ⁵ American Public Transportation Association. *Open for Business: The Business Case for Investment in Public Transportation*. 2013.
- ⁶ Kaliski, John and Evan Enarson-Hering. *Site Selection*. "Intersection: Transportation and Site Selection Cross Paths Everywhere You Look." 2010.
- ⁷ Ibid.
- ⁸ US Census Bureau, *American Community Survey, (One-year Estimates)*, Table S0801 Commuting Characteristics by Sex
- ⁹ Appendix 3, Clientele Survey
- ¹⁰ Ibid.
- ¹¹ Ibid.
- ¹² Bureau of Labor Statistics, *Quarterly Census of Employment and Wages, 2011 Annual Average*
- ¹³ Florida Department of Economic Opportunity. *Employment Projections Data 2012-2020: Workforce Region 24.*, 2012
- ¹⁴ Ibid.
- ¹⁵ Charlotte County Human Services, Transit Division. 2013.
- ¹⁶ Center for Urban Transportation Research, University of South Florida, *Charlotte County FY 2009/2010-FY2018/2019 Transit Development Plan*, 2009
- ¹⁷ Charlotte County Human Services, Transit Division. *Annual Report provided to the Local Coordination Board*. 2012.
- ¹⁸ Charlotte County Board of County Commission, Budget/Fiscal Division. *Published Performance Measures FY12*.
- ¹⁹ Ibid.
- ²⁰ Charlotte County Human Services, Transit Division. *Annual Report provided to the Local Coordination Board*. 2012.
- ²¹ Charlotte County Board of County Commission, Budget/Fiscal Division. *Published Annual Operating Report FY12*.
- ²² *10 Year Transit Development Plan* to be prepared by Tindal Oliver Consulting for the Charlotte County Board of County Commission and the Charlotte County – Punta Gorda Metropolitan Planning Organization
- ²³ Renaissance Planning Group. *Transit Latent Demand Study, South Sarasota/Charlotte County*, 2013

(this page intentionally left blank for two-sided reproduction)

APPENDIX 1 **ADDITIONAL DATA**



Photo provided by Charlotte Harbor Visitor & Convention Bureau

The following represents county, state and national level data that was analyzed and referenced throughout the study, but was not presented due to space limitations. It is presented here in the order that it appears in the report.

Poverty Rate by Educational Attainment: Florida

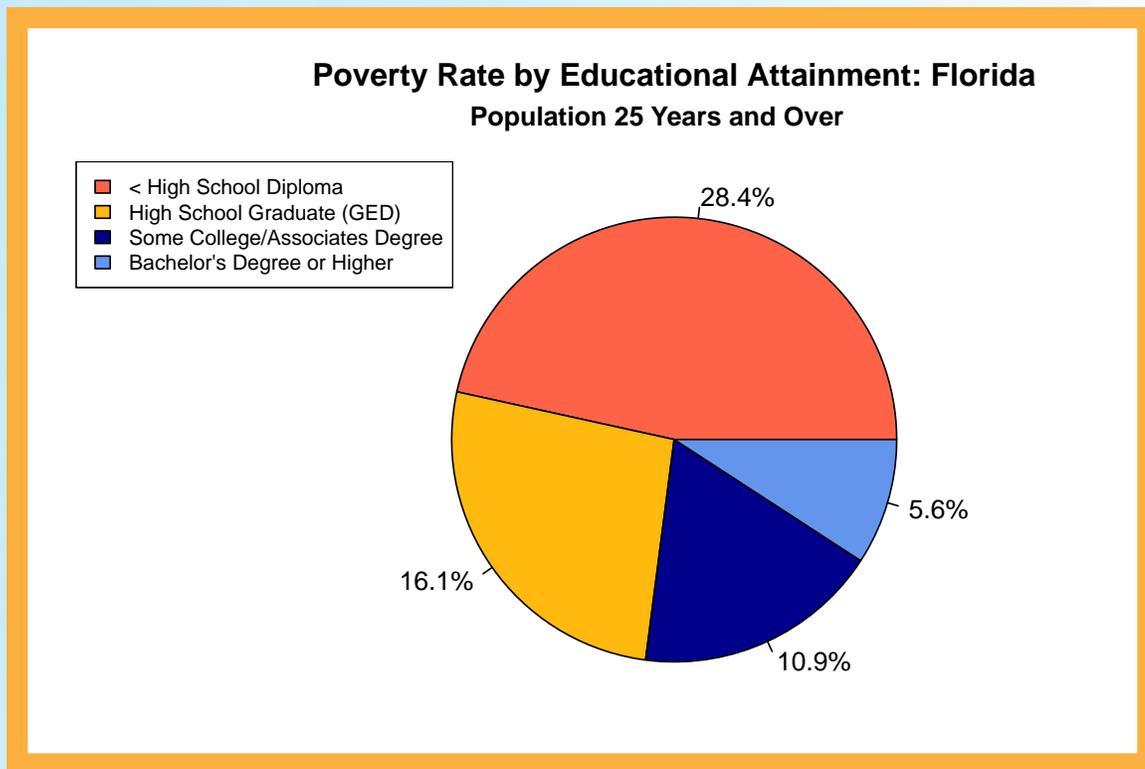


Figure 1.A Source: American Community Survey, 2011, Table S1501

Poverty Rate by Educational Attainment: United States

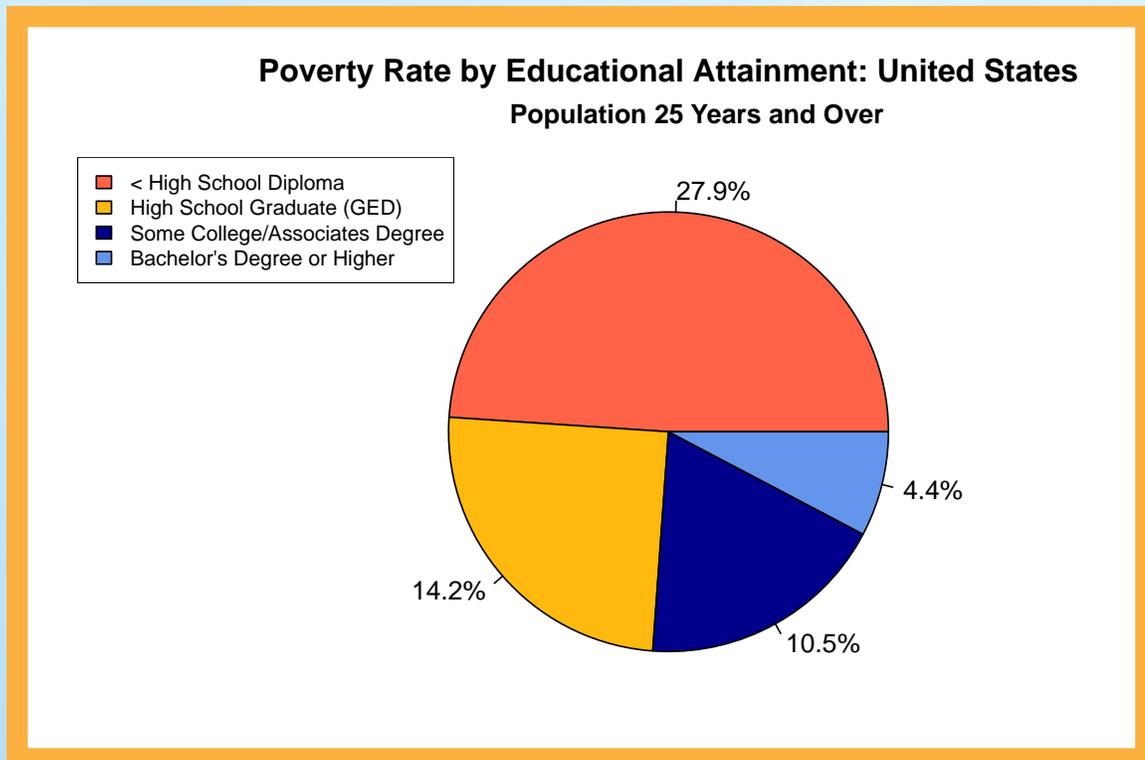


Figure 1.B Source: American Community Survey, 2011, Table S1501

Florida Public School Enrollment

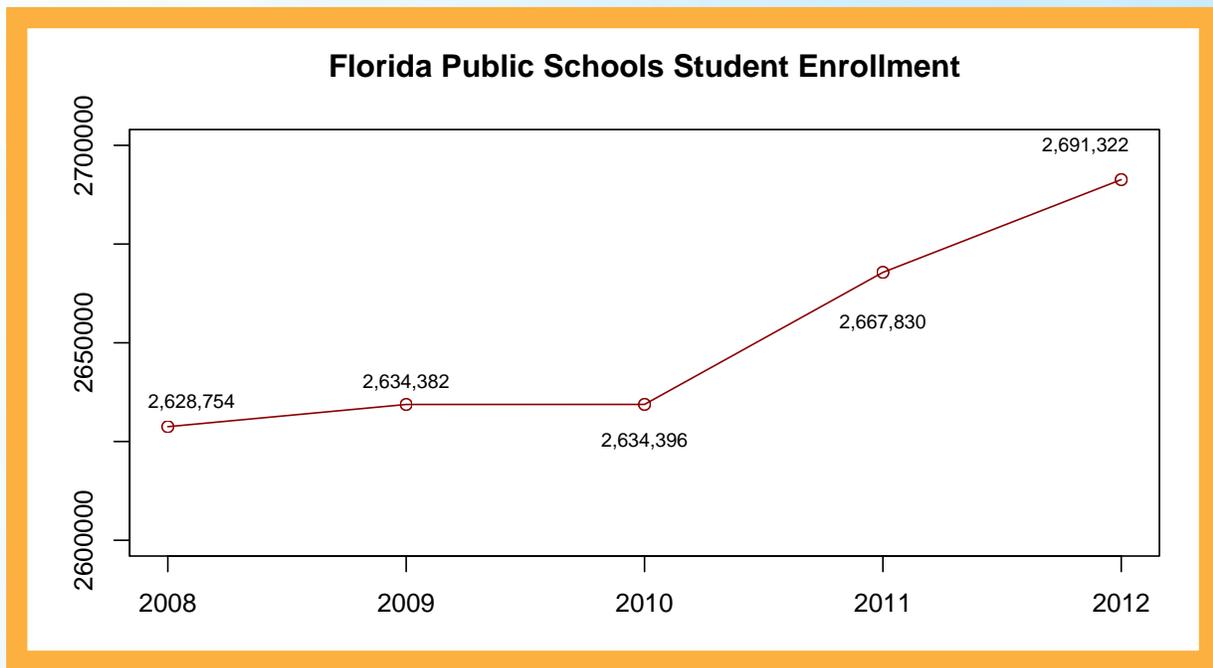


Figure 1.C Source: Florida Department of Education

Chronic Absenteeism: 21 Days or More

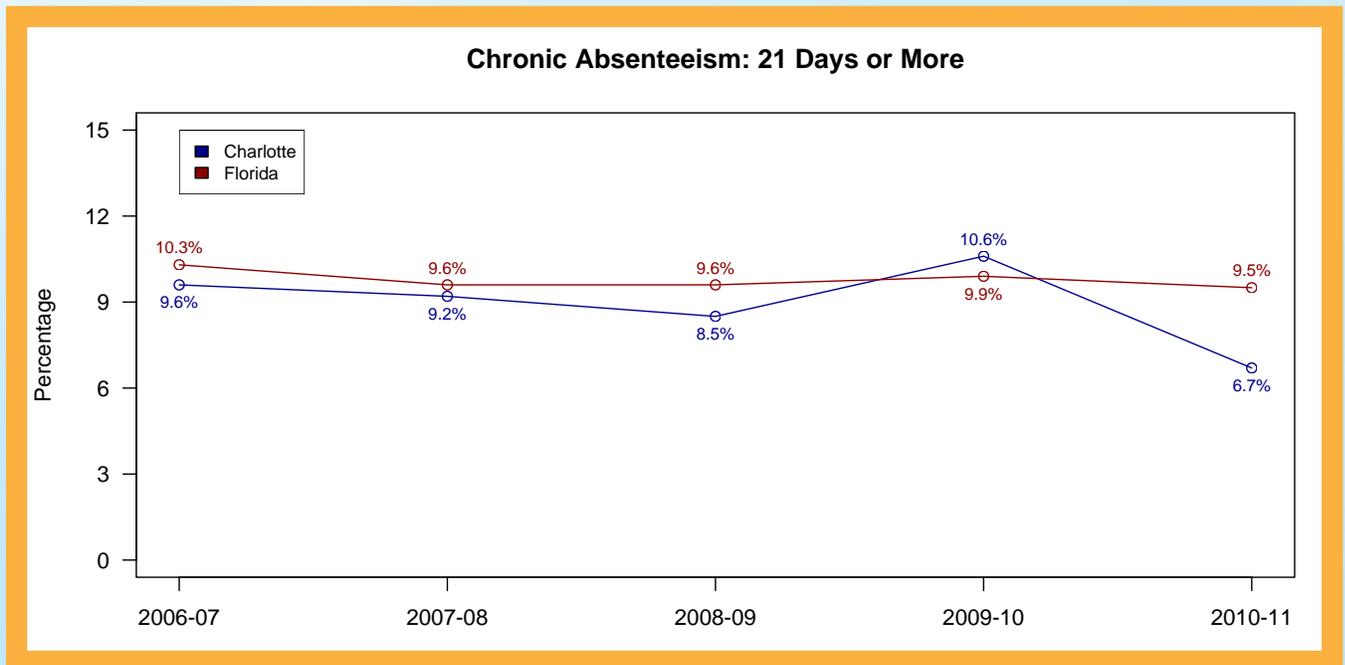


Figure 1.D Source: Florida Department of Education

Chronic Absenteeism by School: Charlotte County

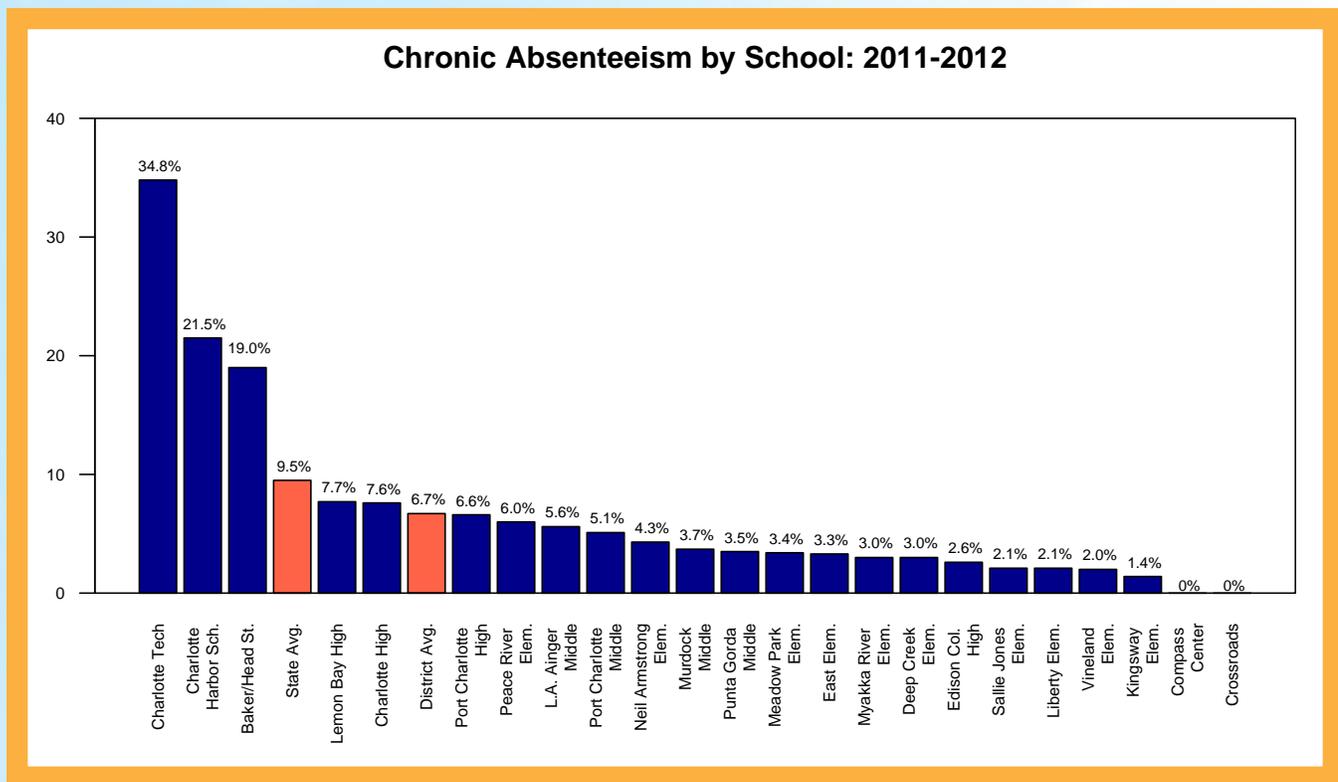


Figure 1.E Source: Florida Department of Education

CCPS Overall School Attendance Rate: Grades 1 – 12

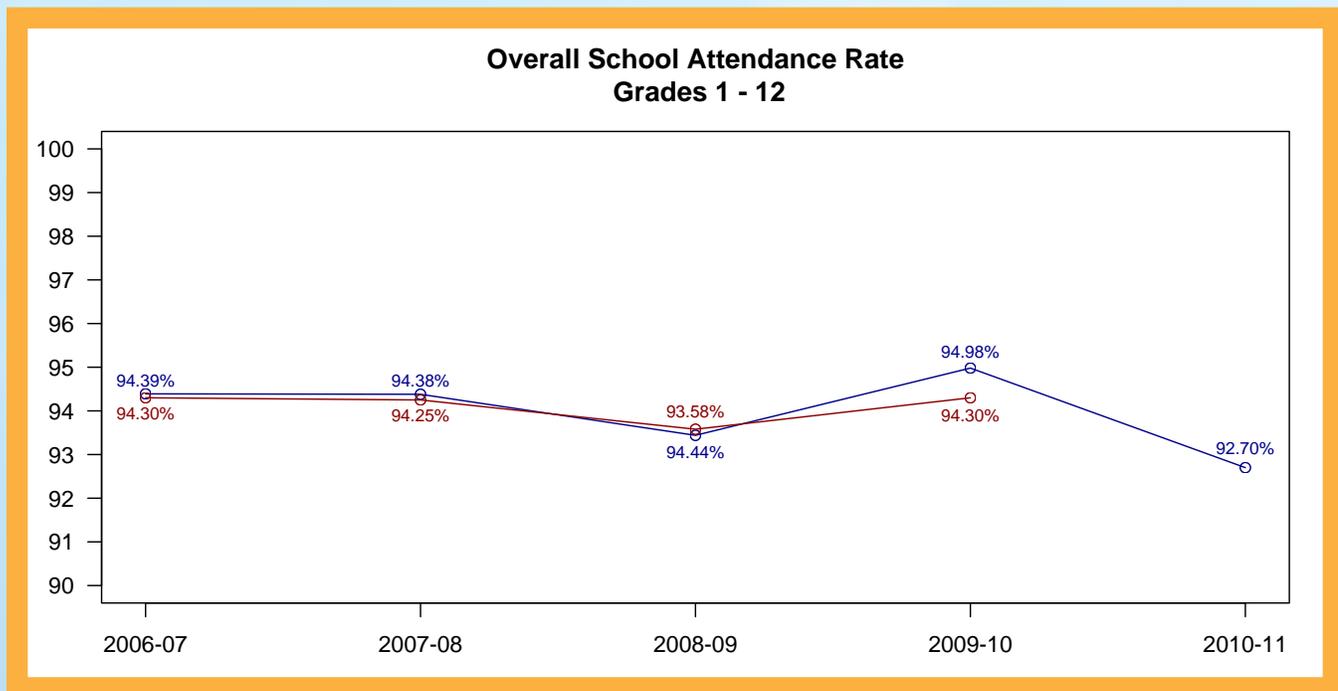


Figure 1.F Source: Florida Department of Education

Educational Attainment: Population Ages 18 to 24 – Florida

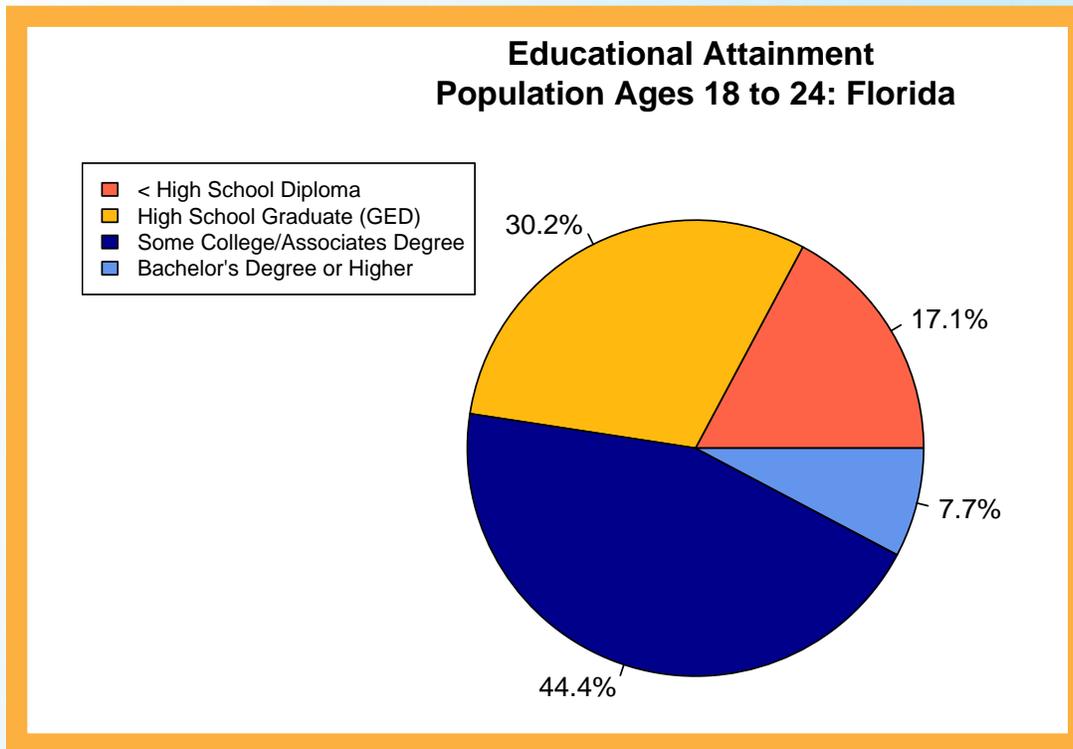


Figure 1.G Source: American Community Survey, 2011, Table S1501

Educational Attainment: Population Ages 18 to 24 – United States

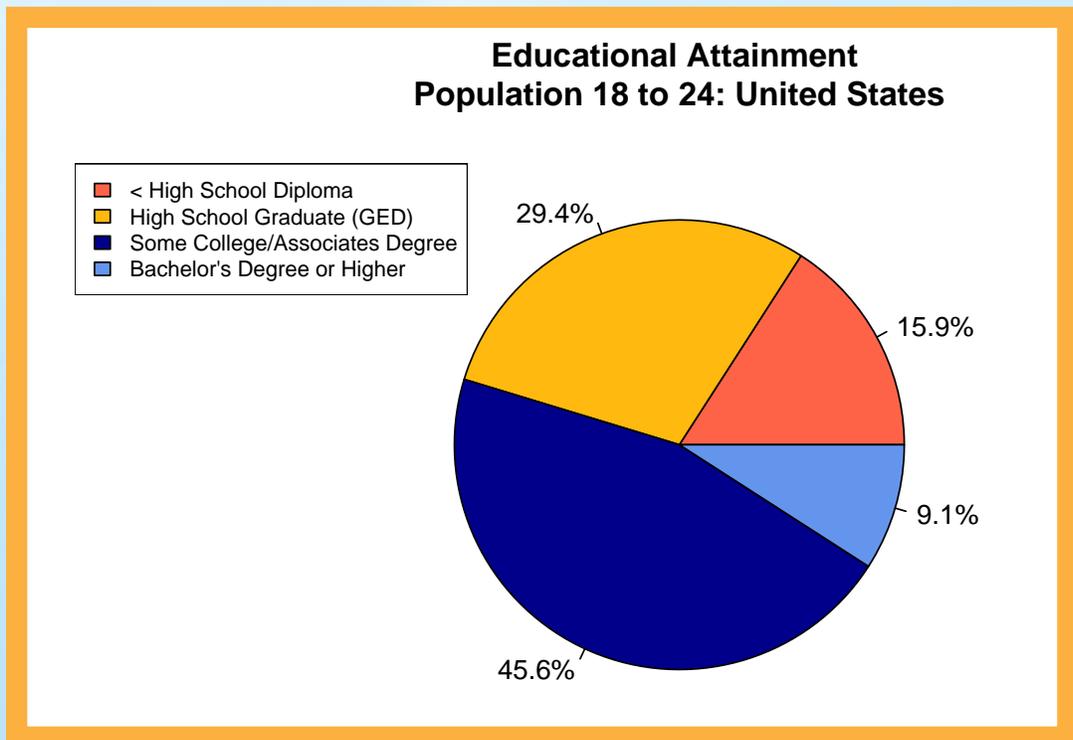


Figure 1.H Source: American Community Survey, 2011, Table S1501

Educational Attainment: Population Ages 25 and Older – Florida

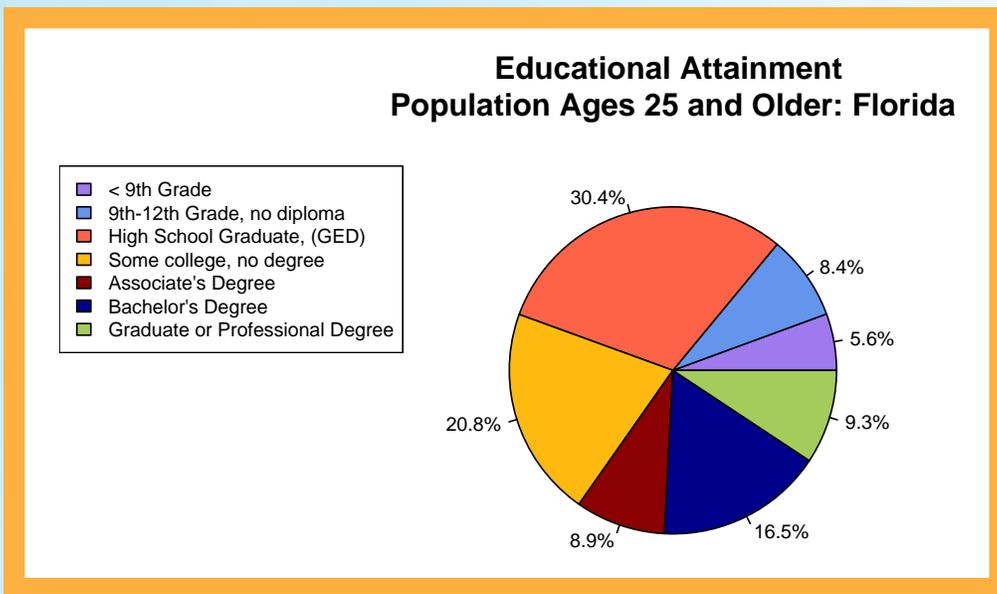


Figure 1.I
Source: American Community Survey, 2011, Table S1501

Educational Attainment: Population Ages 25 and Older – United States

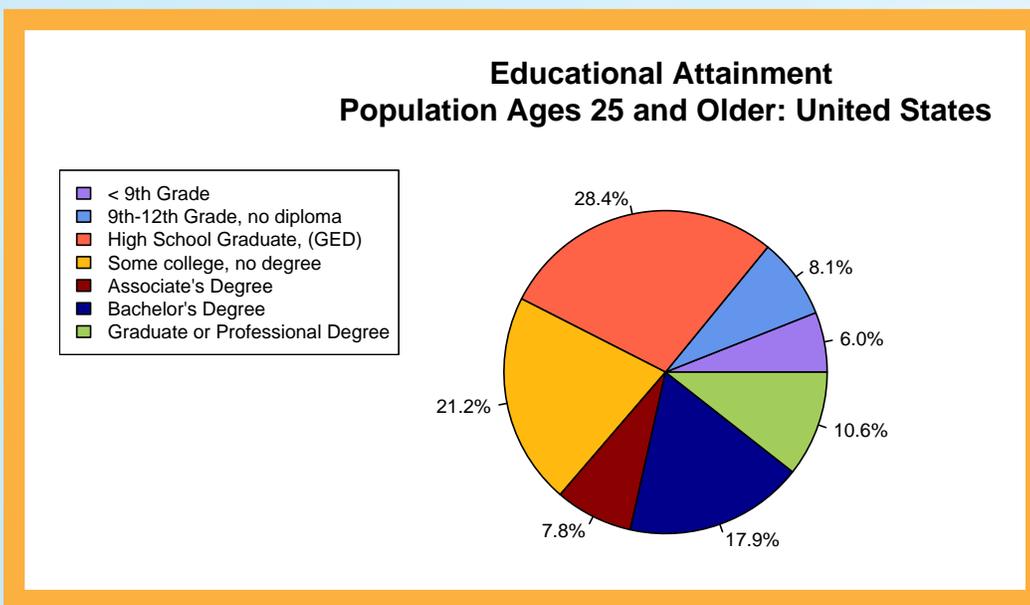


Figure 1.J
Source: American Community Survey, 2011, Table S1501

Labor Force: Charlotte County

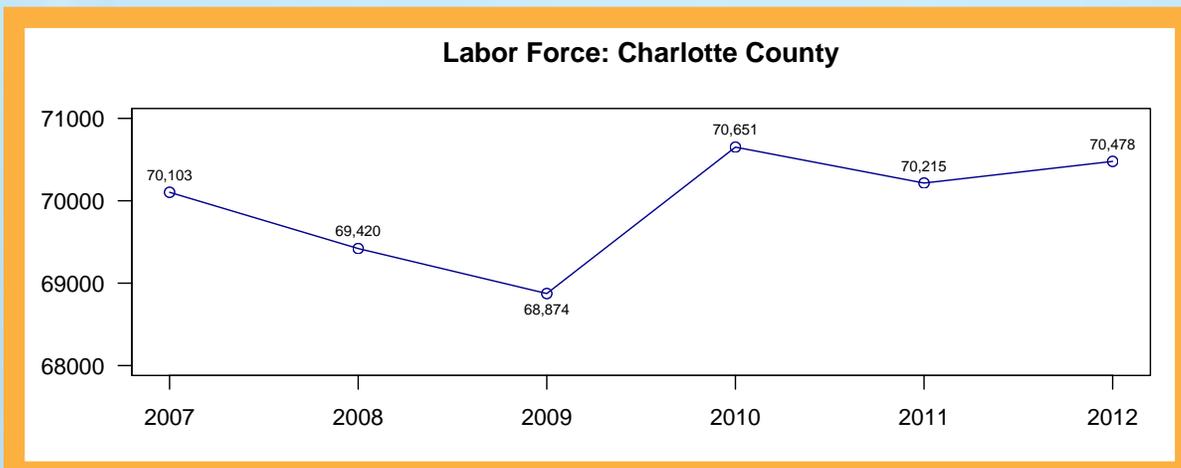


Figure 1.K
Source: Bureau of Labor Statistics

2013 Poverty Guidelines for the 48 Contiguous States and the District of Columbia

Poverty Guidelines 2013	
Persons in family/household	Poverty guideline
1	\$11,490
2	\$15,510
3	\$19,530
4	\$23,550
5	\$27,570
6	\$31,590
7	\$35,610
8	\$39,630

For families/ households with more than 8 persons, add \$4,020 for each additional person.

Figure 1.L
Source: United States Department of Health & Human Services

2011 Household Income: Florida

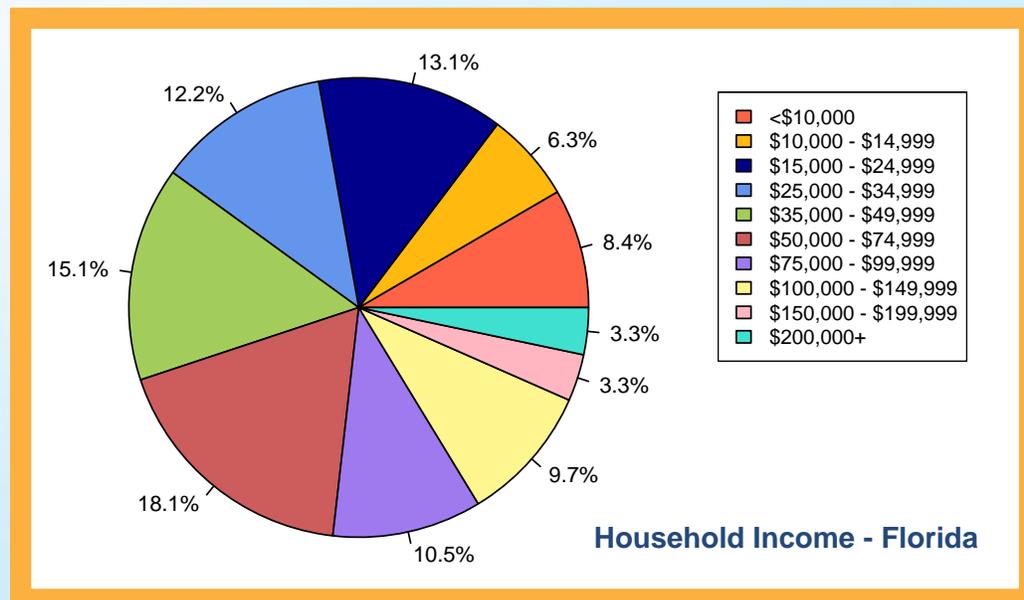


Figure 1.M
Source: American Community Survey, 2011, Table CP03

2011 Household Income: United States

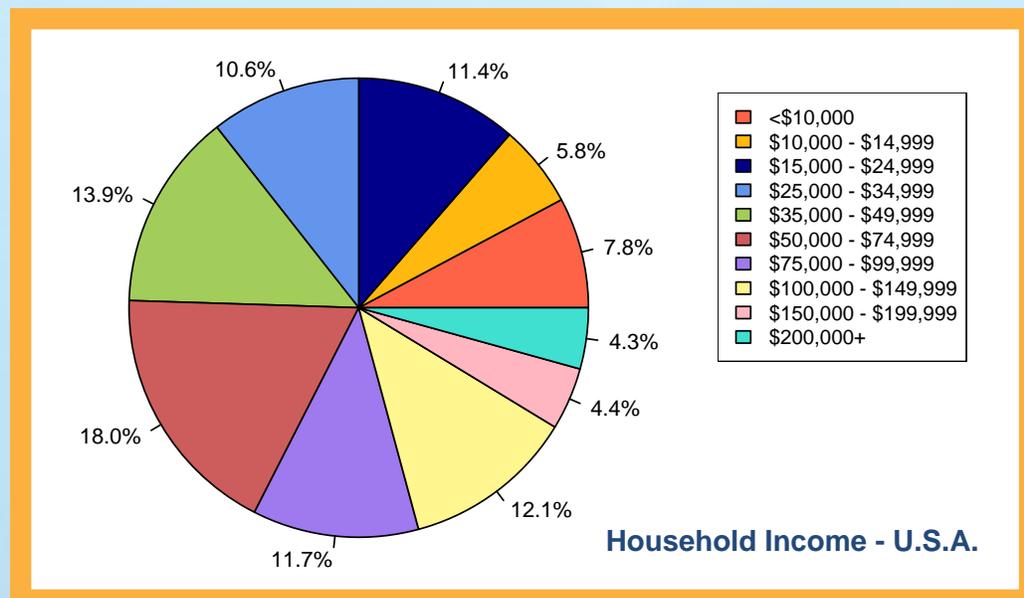


Figure 1.N
Source: American Community Survey, 2011, Table CP03

2011 Employment by Industry: Florida

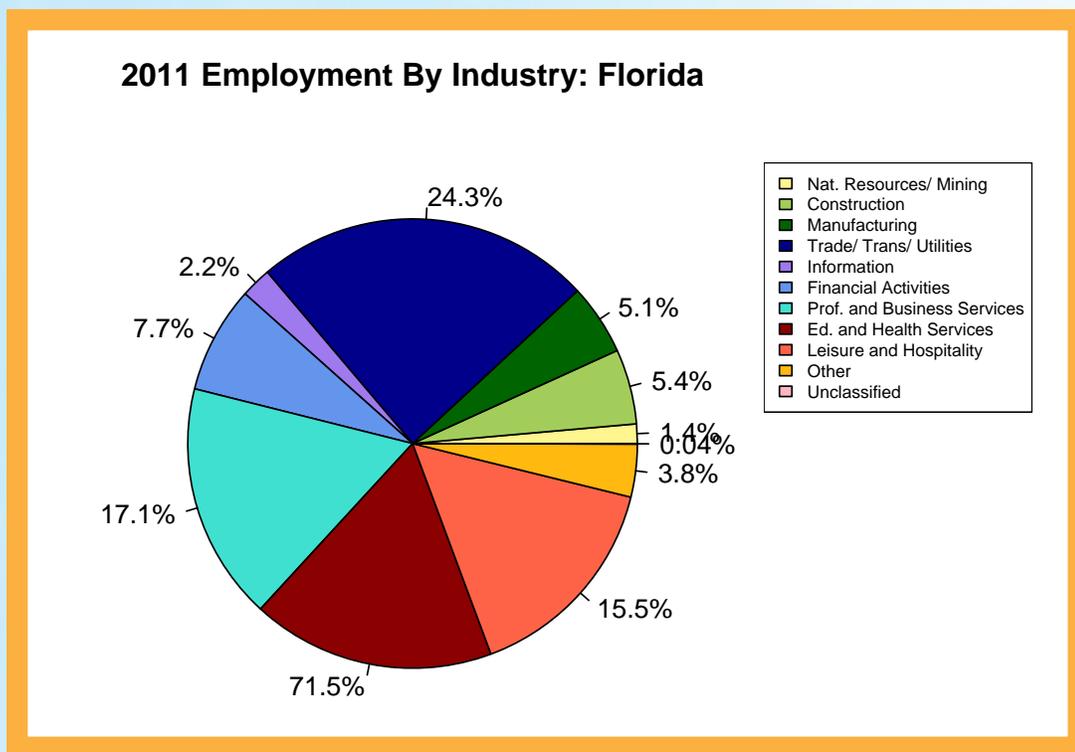


Figure 1.O
Source: Bureau of Labor Statistics

Poverty by Age: Florida

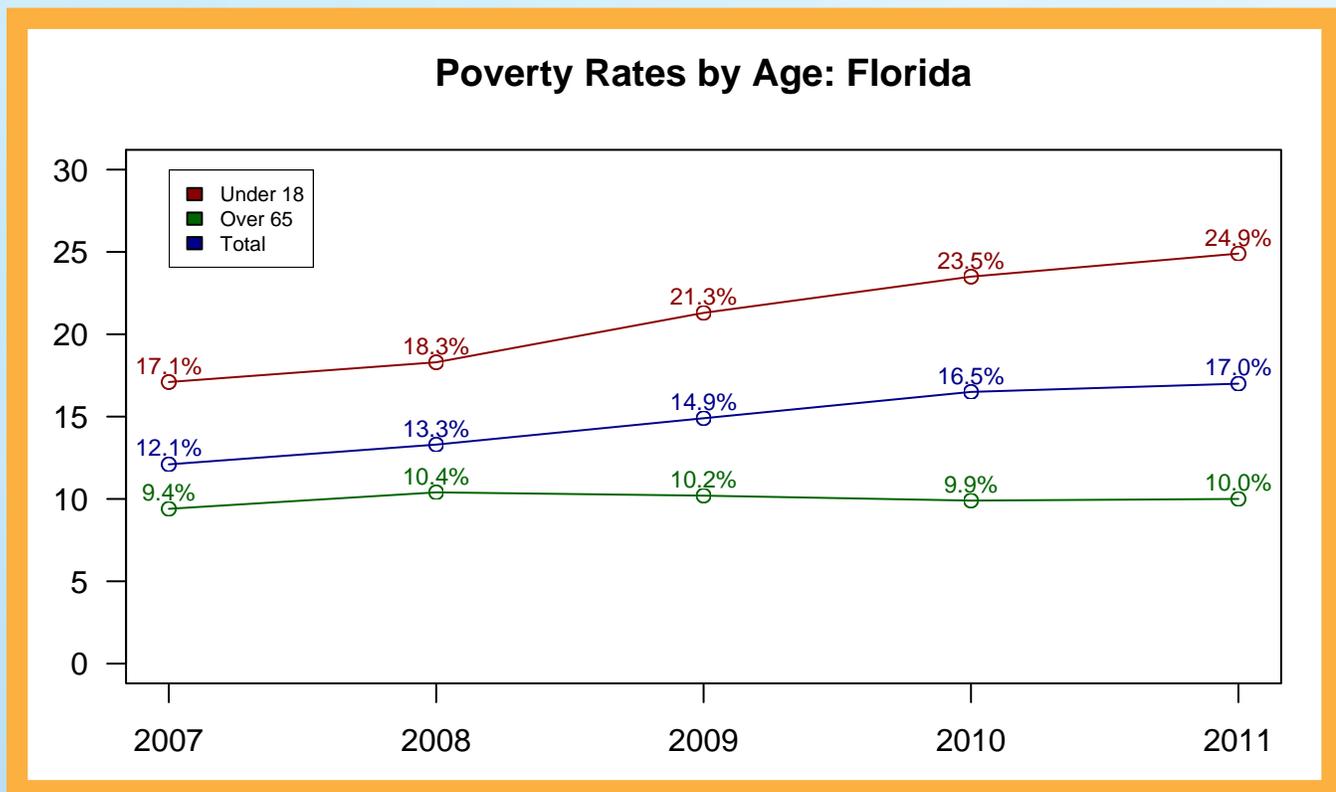


Figure 1.P Source: American Community Survey (One-Year Estimates), Table CP03

Poverty by Age: United States

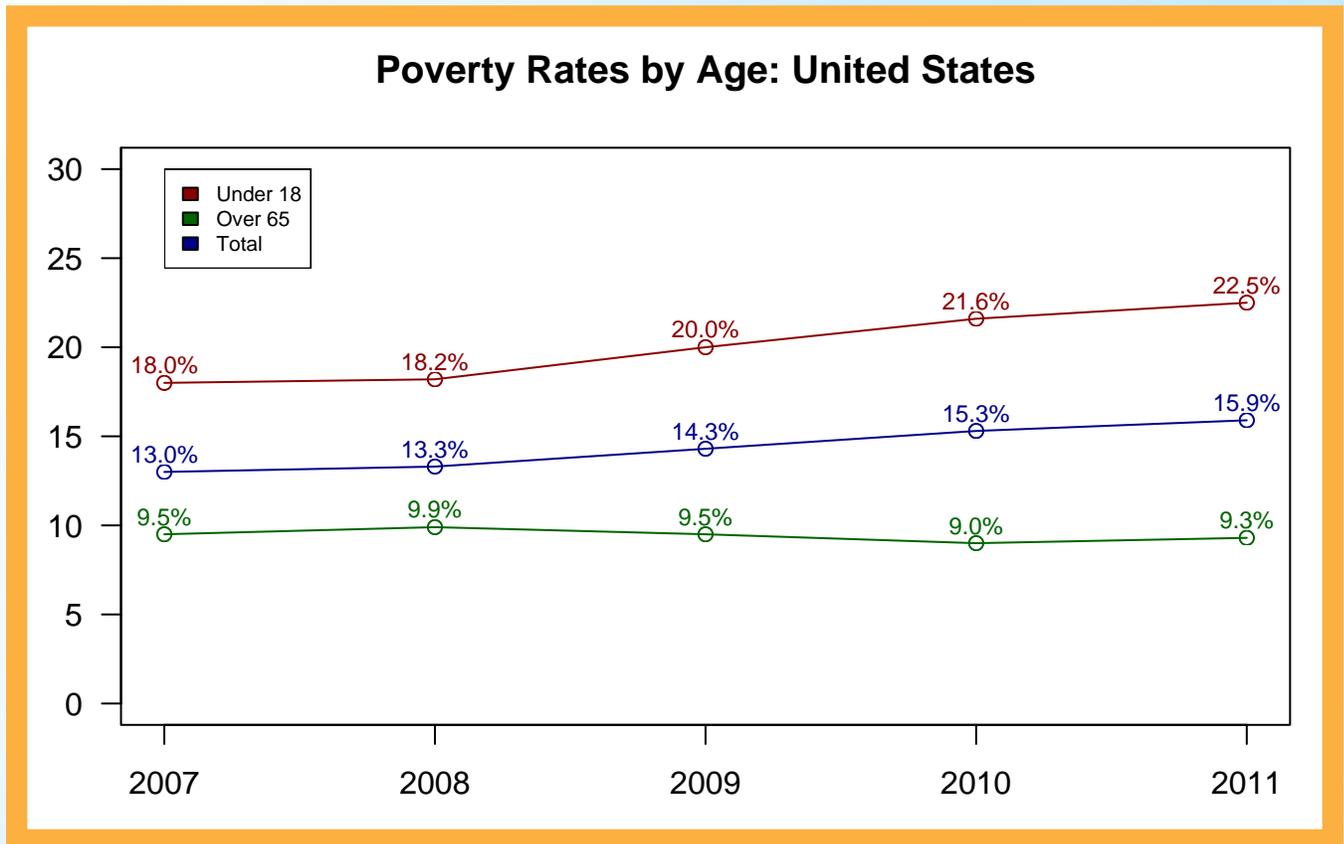


Figure 1.Q Source: American Community Survey (One-Year Estimates), Table CP03

2013 Fair Market Rents by Unit Bedrooms: Charlotte County

2013 Fair Market Rents by Unit Bedrooms: Charlotte County					
	Efficiency	1-BR	2-BR	3-BR	4-BR
2013 FMR	\$512	\$675	\$861	\$1,223	\$1,227

Figure 1.R
Source: United States Department of Housing and Urban Development

2013 Income Limits by Family/Household: Charlotte County

2013 Income Limits by Family/Household: Charlotte County								
2013 Income Limit Category	Family/Household Size							
	1	2	3	4	5	6	7	8
Very Low (50%)	\$18,600	\$21,250	\$23,900	\$26,550	\$28,700	\$30,800	\$32,950	\$35,050
Extremely Low (30%)	\$11,200	\$12,800	\$14,400	\$15,590	\$17,250	\$18,550	\$19,800	\$21,100
Low (80%)	\$29,750	\$34,000	\$38,250	\$42,500	\$45,900	\$49,300	\$52,700	\$56,100

Figure 1.S Source: United States Department of Housing and Urban Development

(this page intentionally left blank for two-sided reproduction)

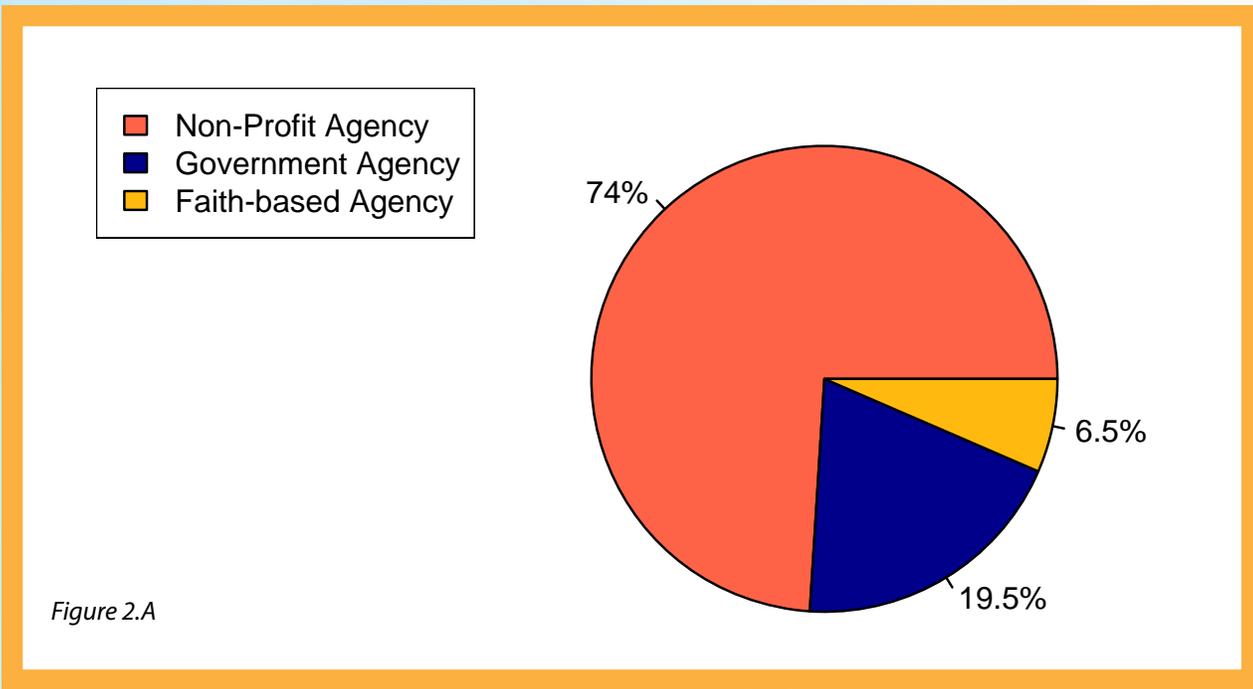
APPENDIX 2 AGENCY SURVEY



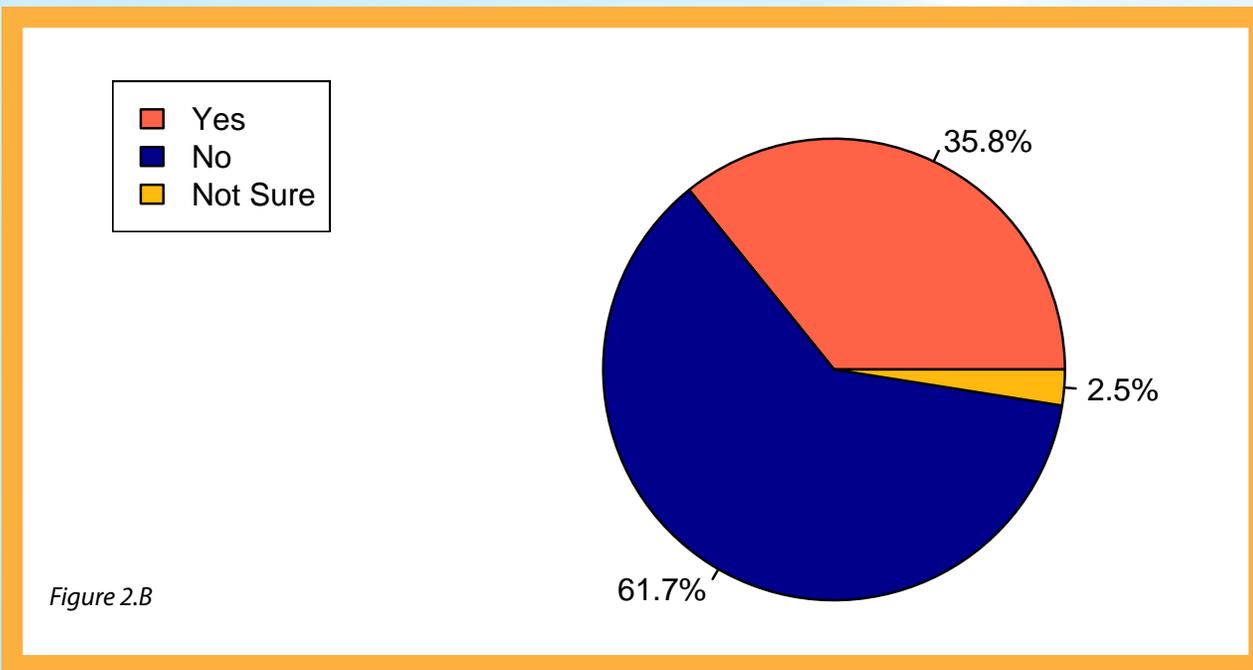
Photo provided by Charlotte Harbor Visitor & Convention Bureau

This survey was distributed electronically to over 200 regional and local government and non-profit human service agencies serving the Charlotte County community. Eighty-two respondents provided feedback on the nature of the services they provide, the demographics of their clients, and their perception of the human service needs in the community.

Which of the following best describes your agency?



Does your agency currently receive funding from United Way of Charlotte County?



**What is the focus of your organization’s role in the services that you provide to the community?
(Select all that apply)**

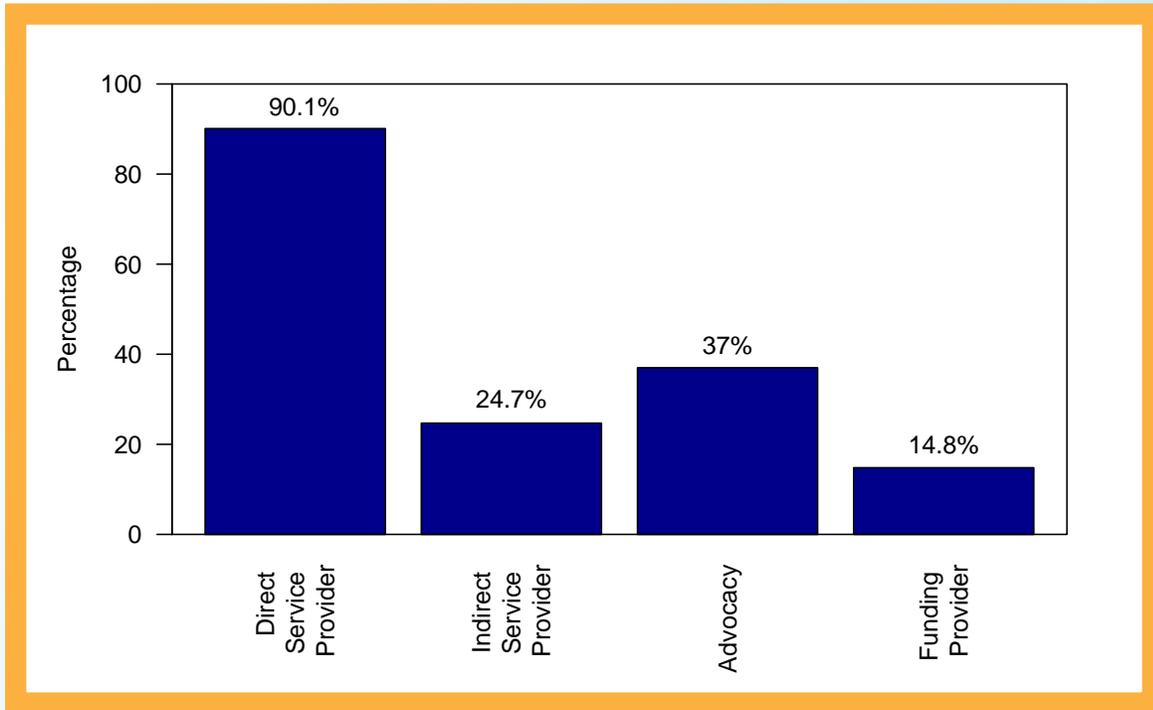


Figure 2.C

Approximately how many clients (unduplicated) does your organization directly serve on an annual basis?

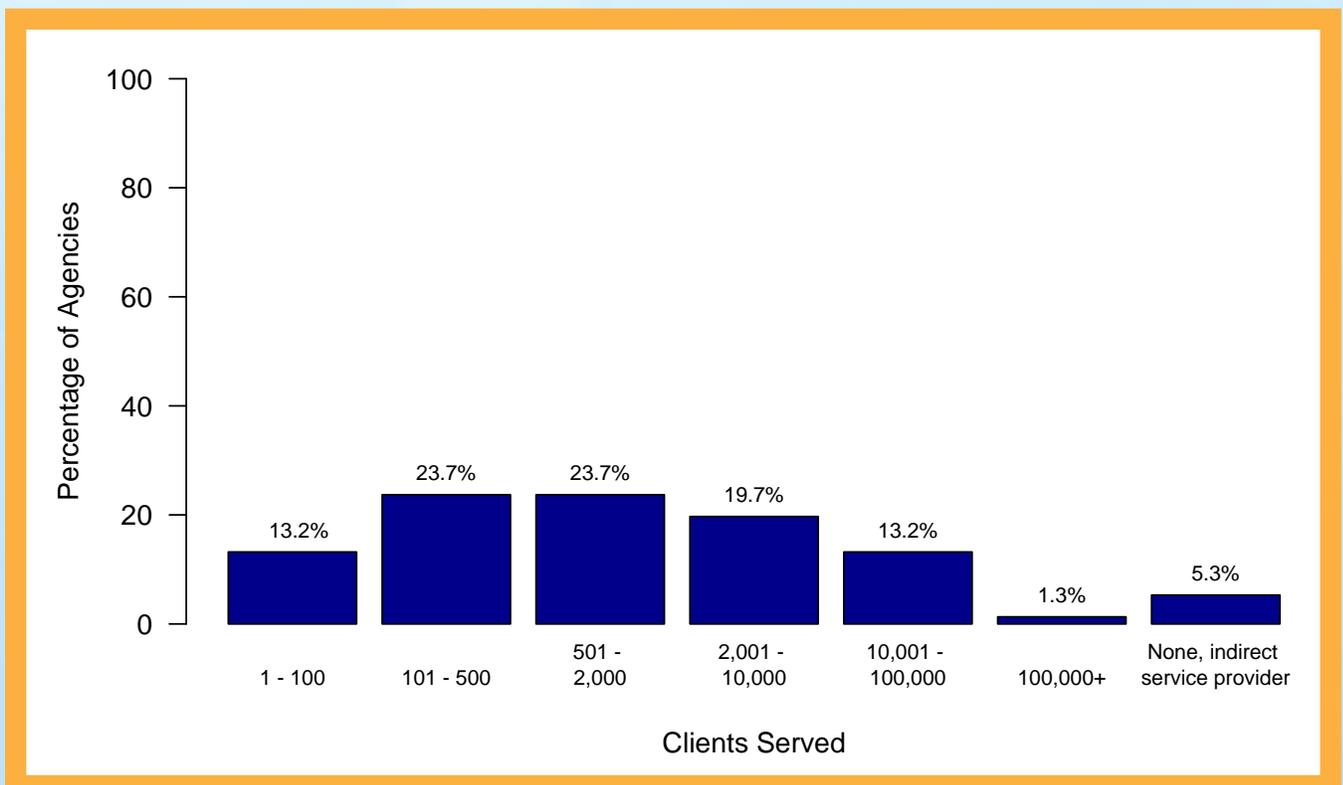


Figure 2.D

What percentage of your clients live in Charlotte County?

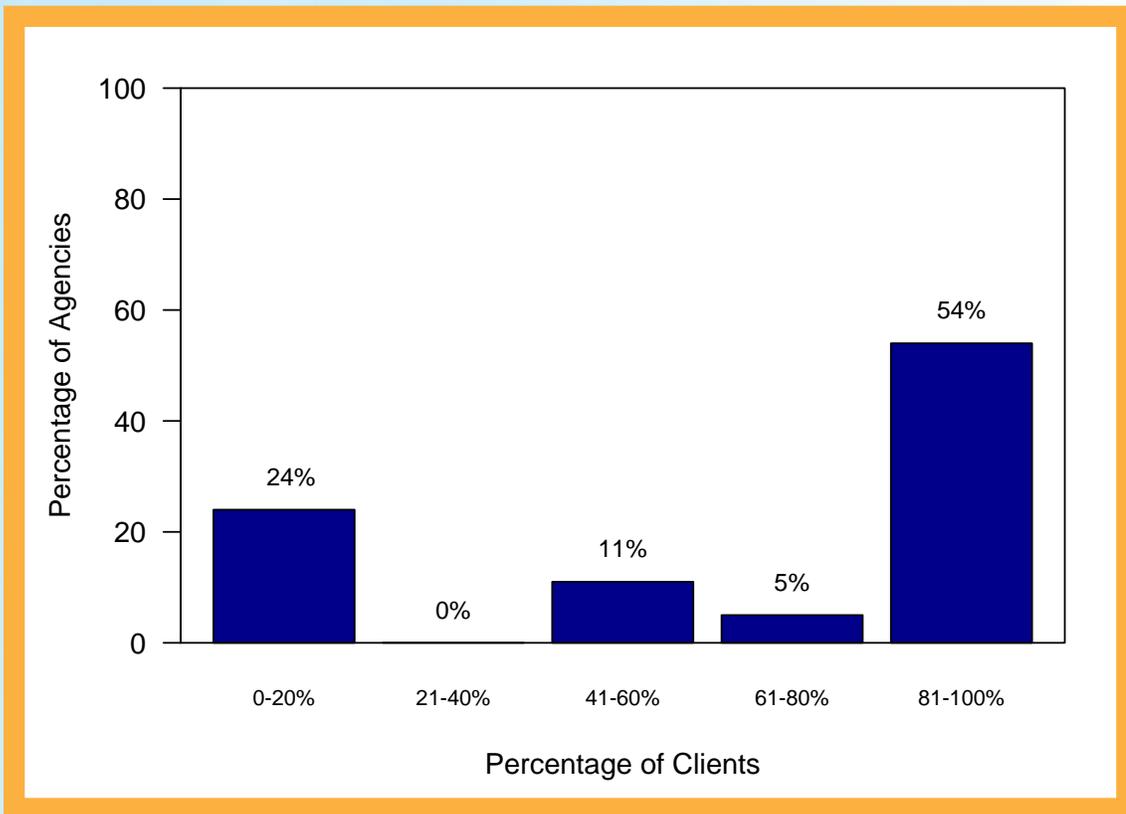


Figure 2.E

Which of the following Charlotte County zip codes are represented by your clientele? (Select all that apply)

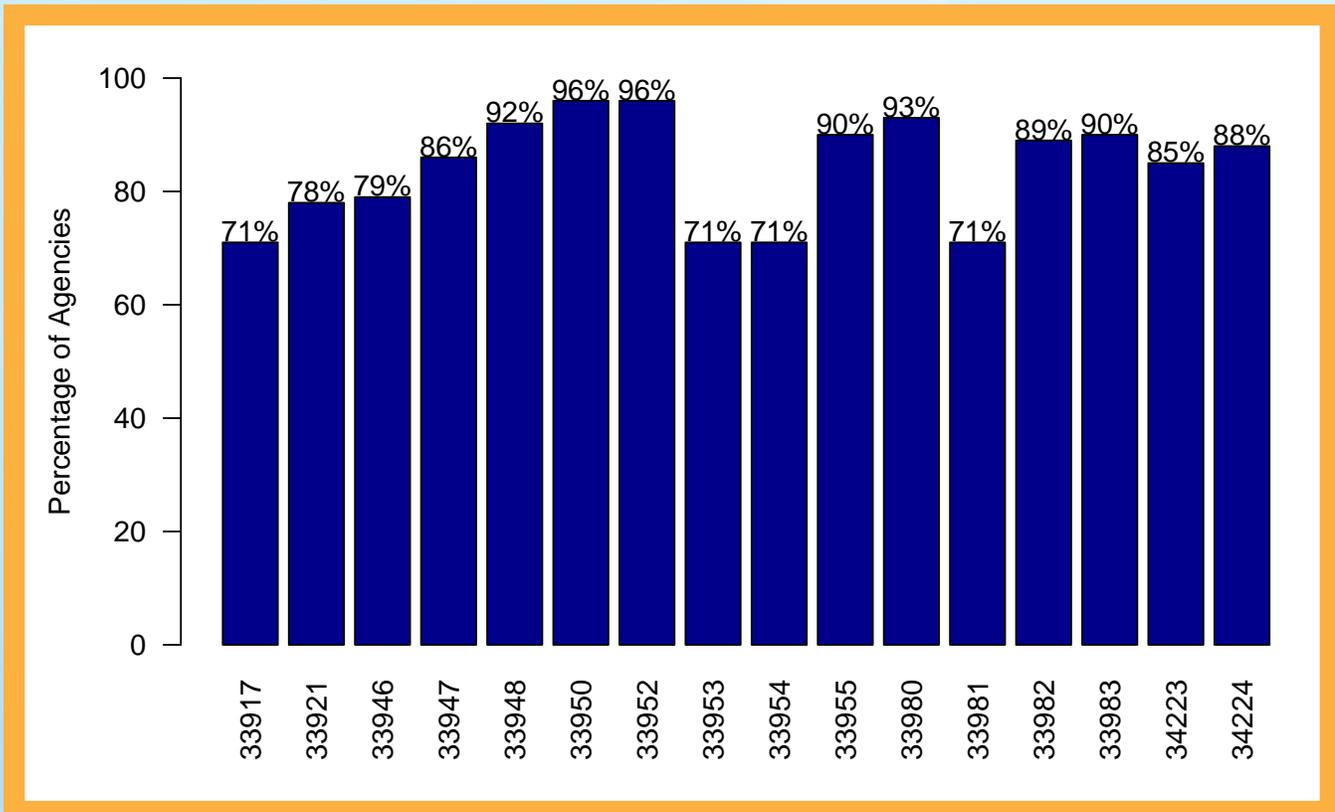


Figure 2.F

What percentage of your clientele are:

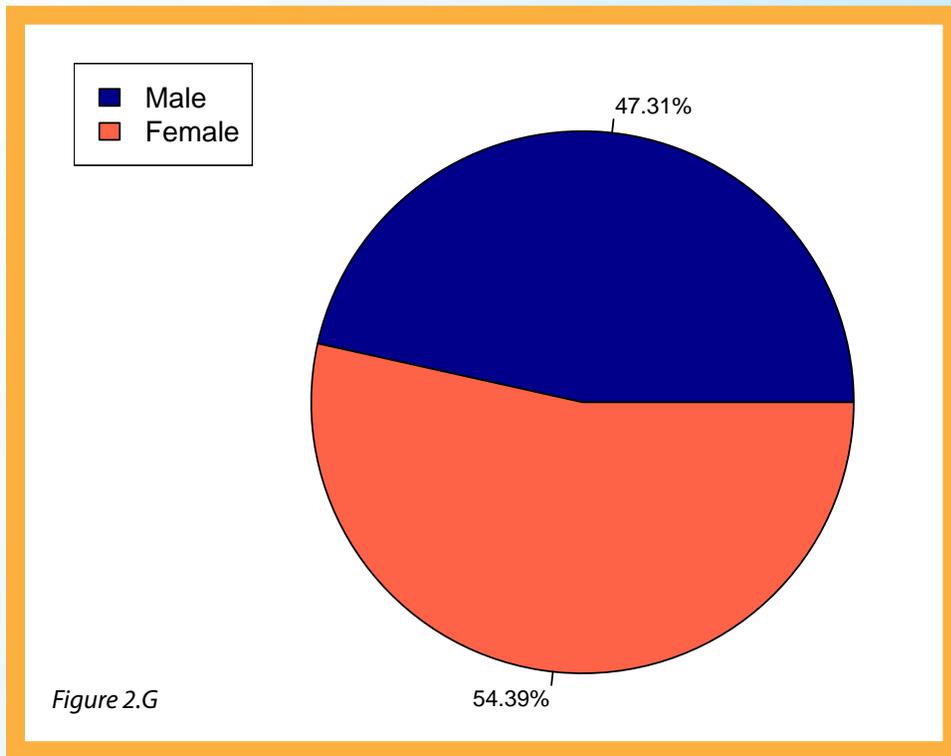


Figure 2.G

In the past year, how many clients did your organization serve in each of the following age groups?

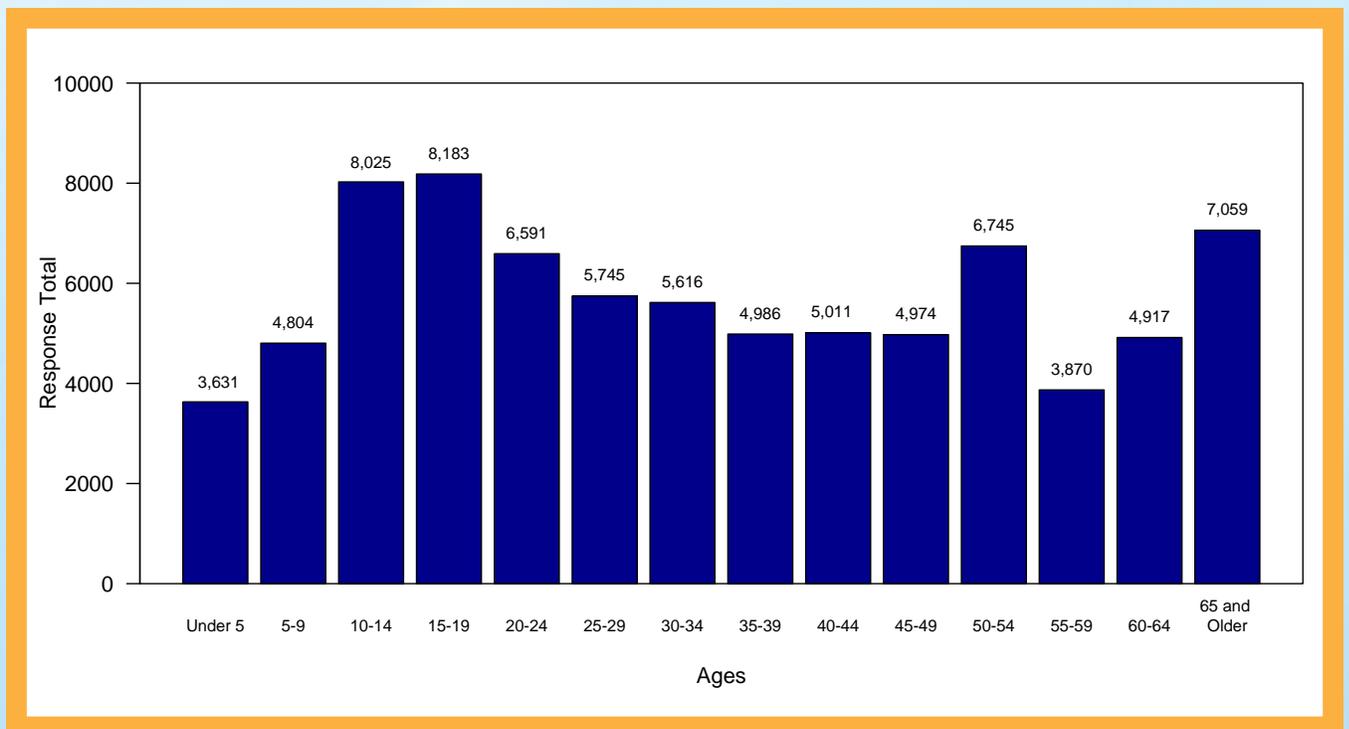
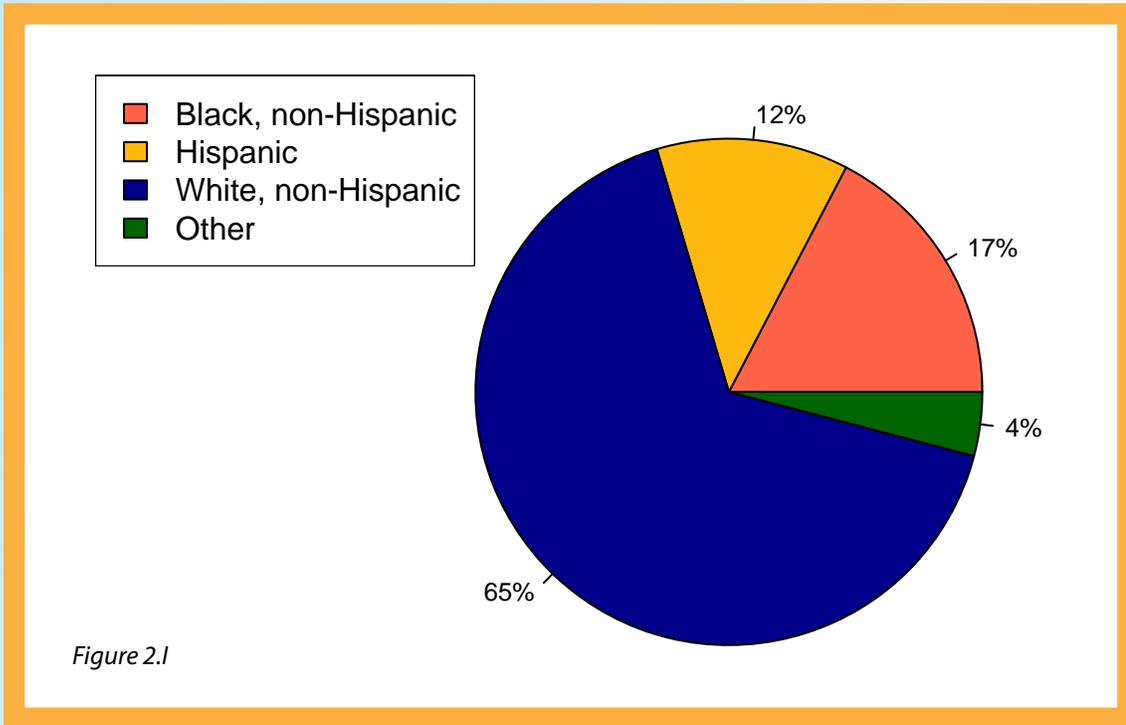
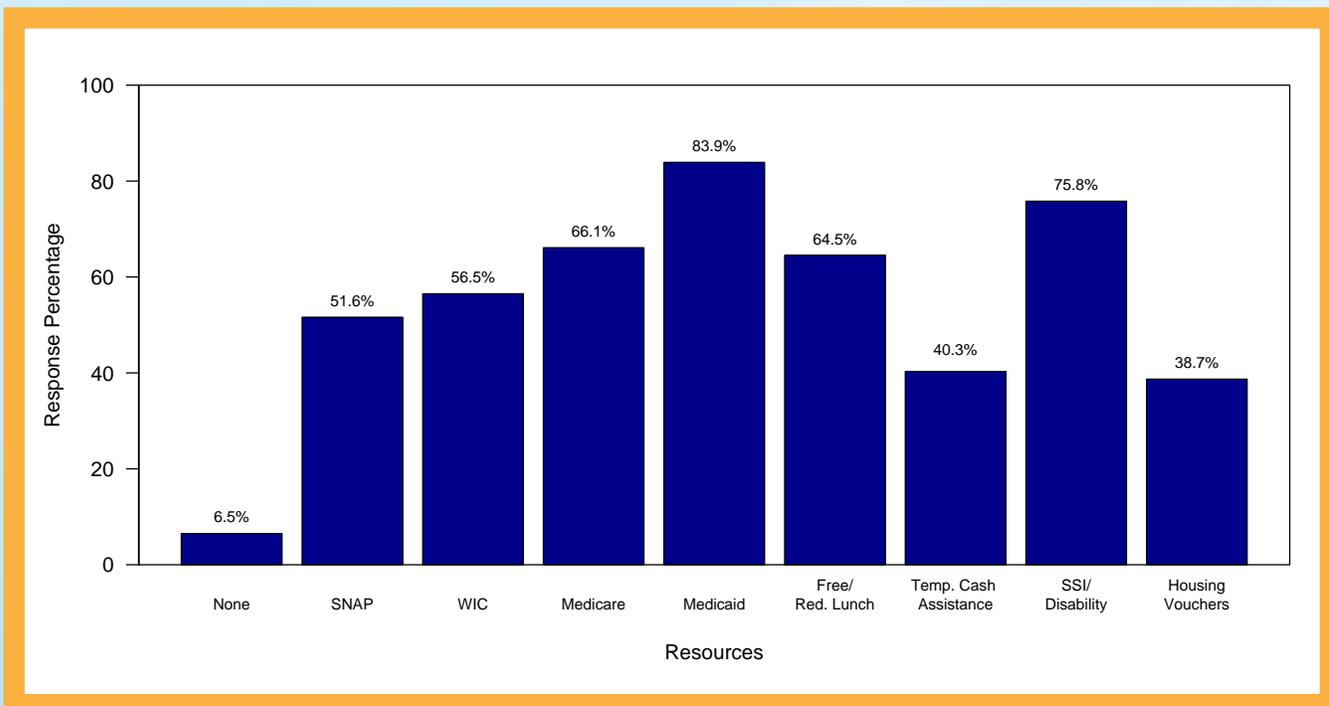


Figure 2.H

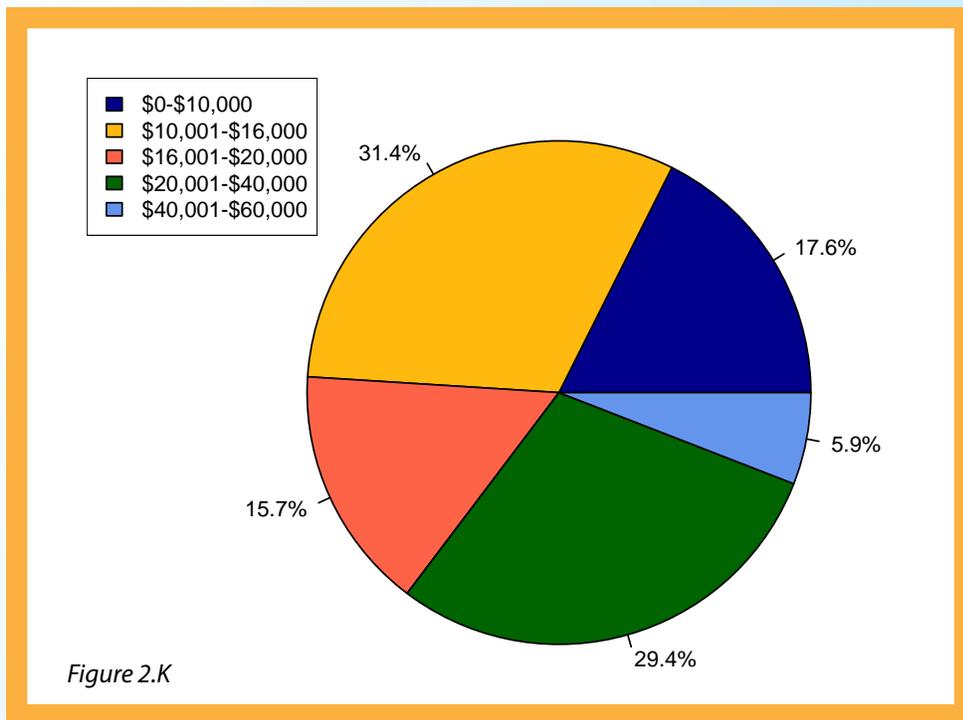
In the following year, how many of your organization's clients were members of the following racial/ethnic groups?



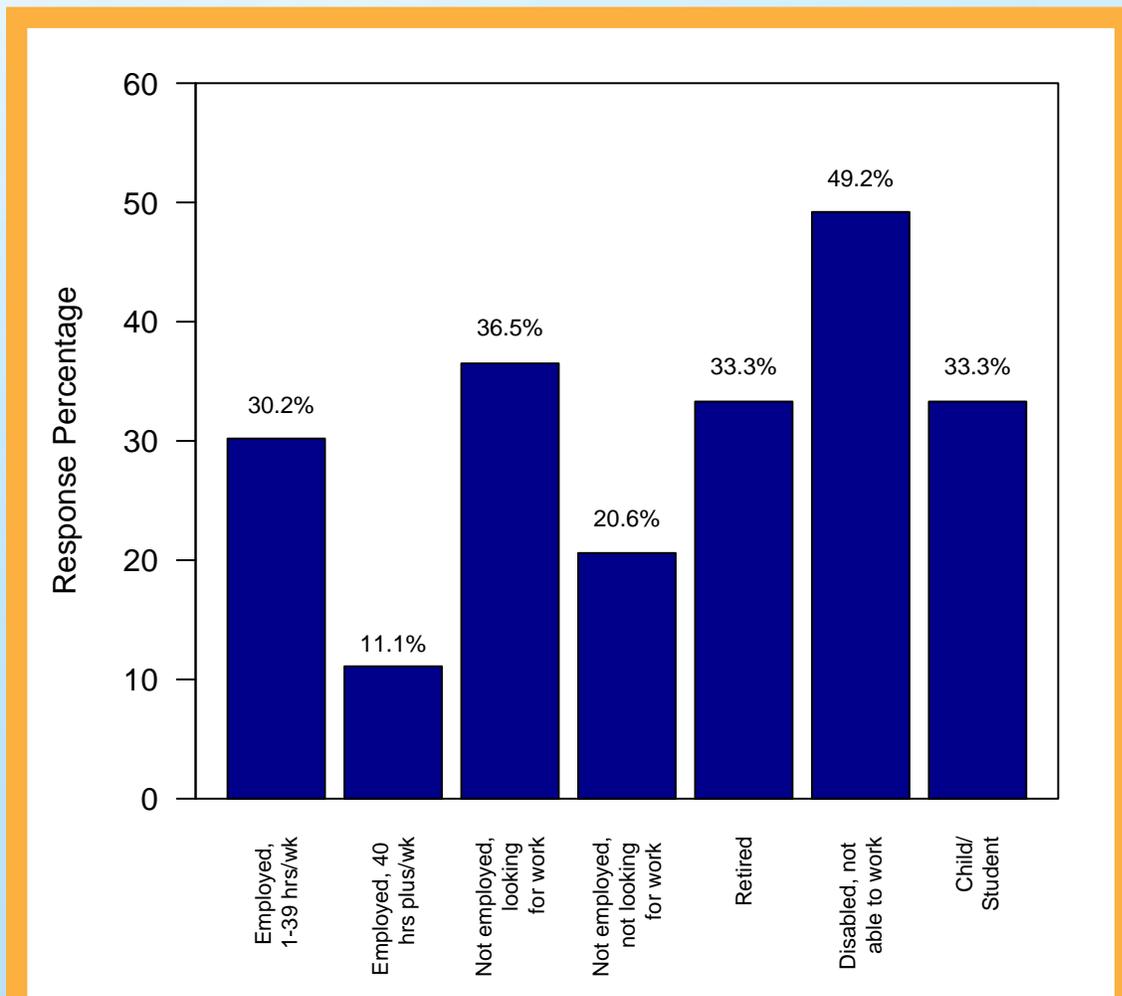
Do your clients utilize the following resources? (Select all that apply)



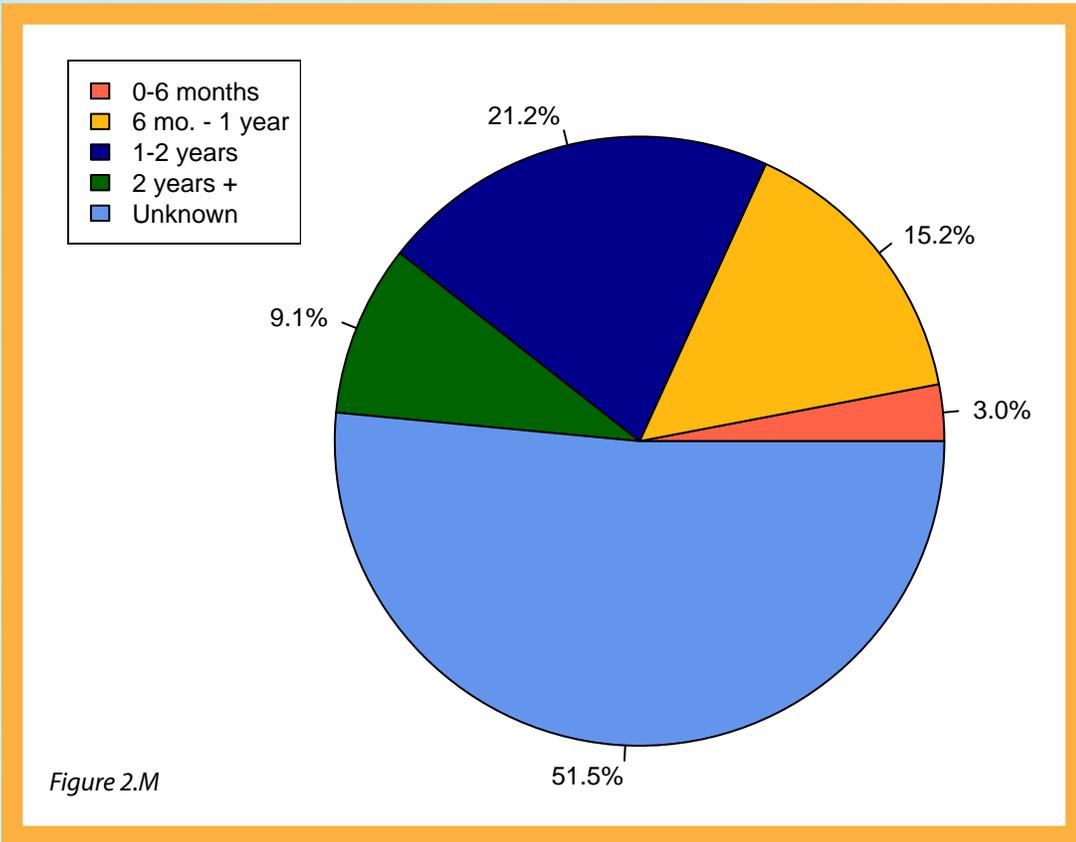
What is the average annual household income of your agency's clientele?



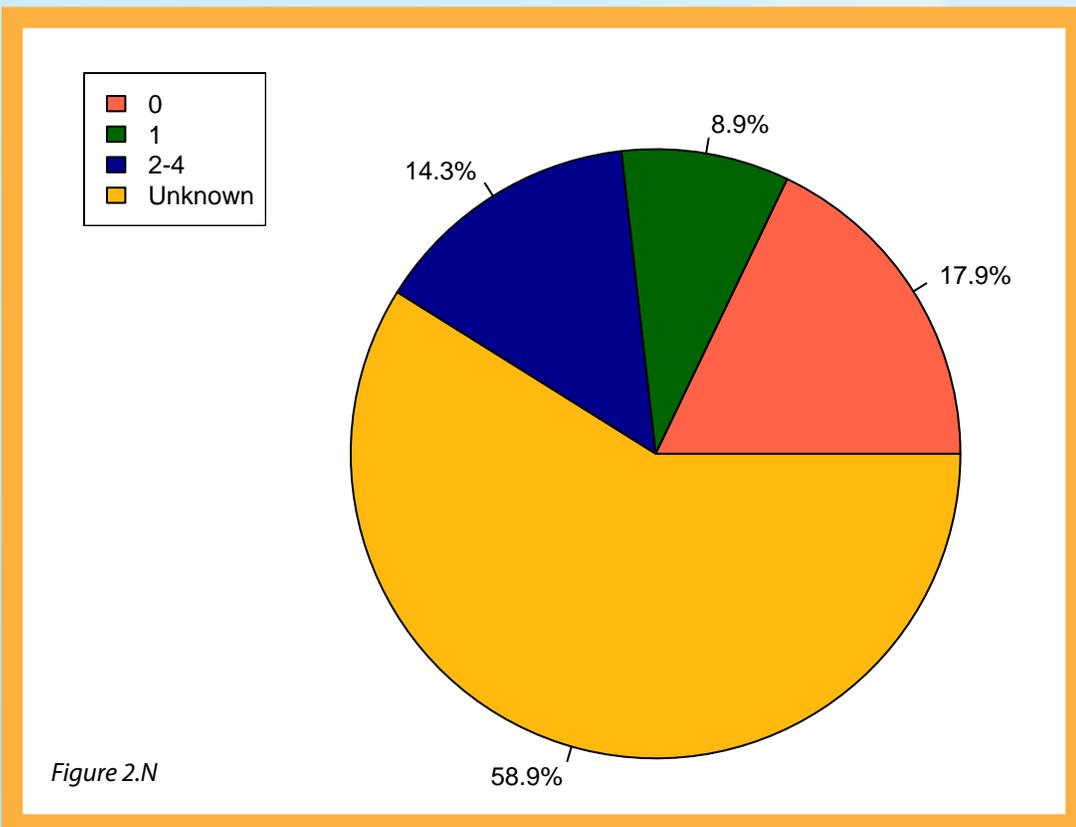
Which of the following best describes your typical client's employment status?



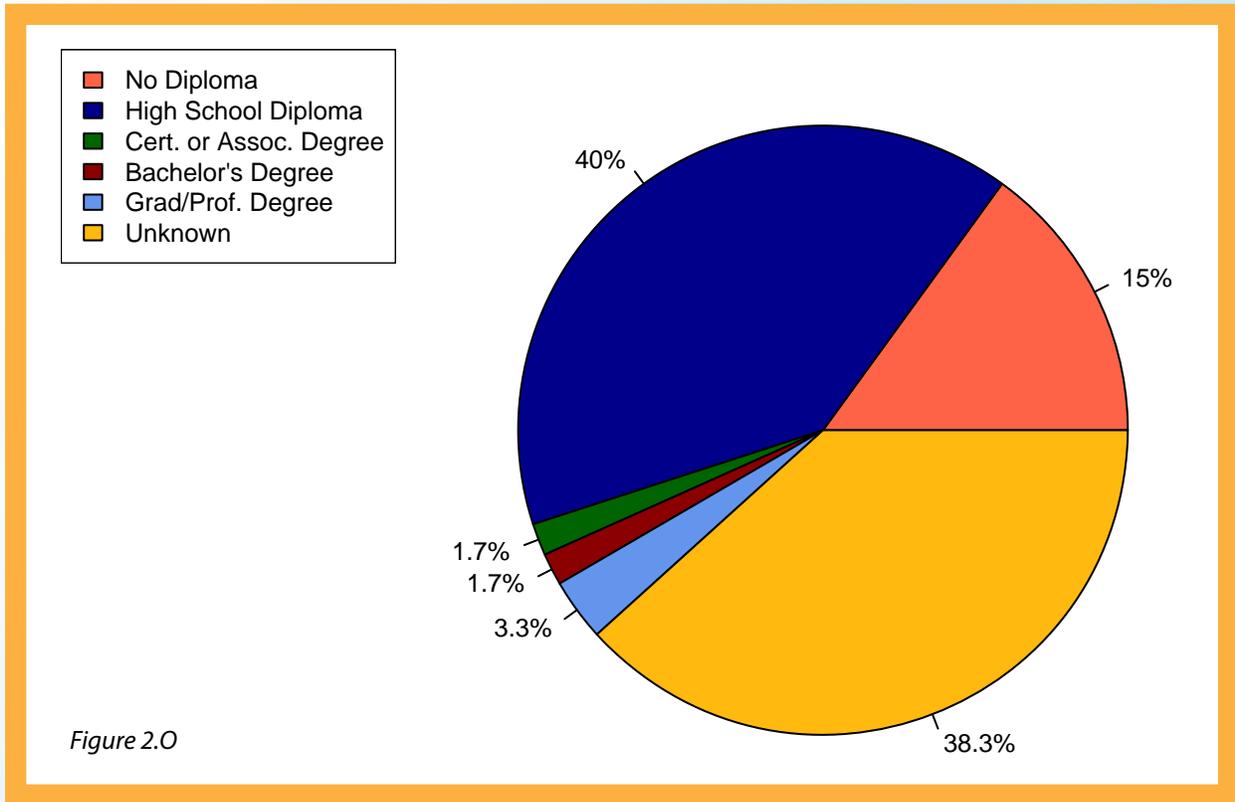
If you selected “Not employed, looking for work,” or “Not employed, NOT looking for work” in the previous question, on average, how long have your clients been unemployed?



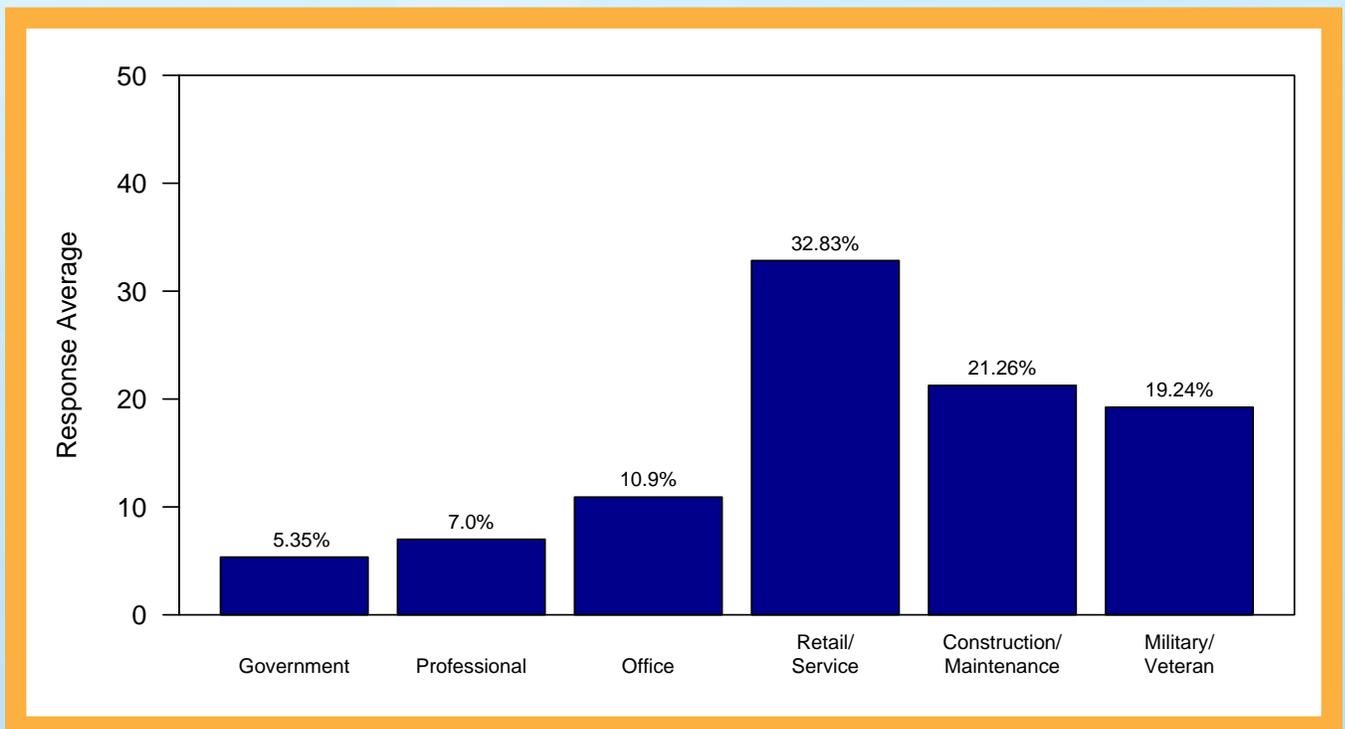
On average, how many jobs have your clientele held over the past 2 years?



On average, what is the highest level of education obtained by your clientele?



What percentage of your clientele possess the following skill sets/work experience?



What percentage of your clientele have the following living arrangements?

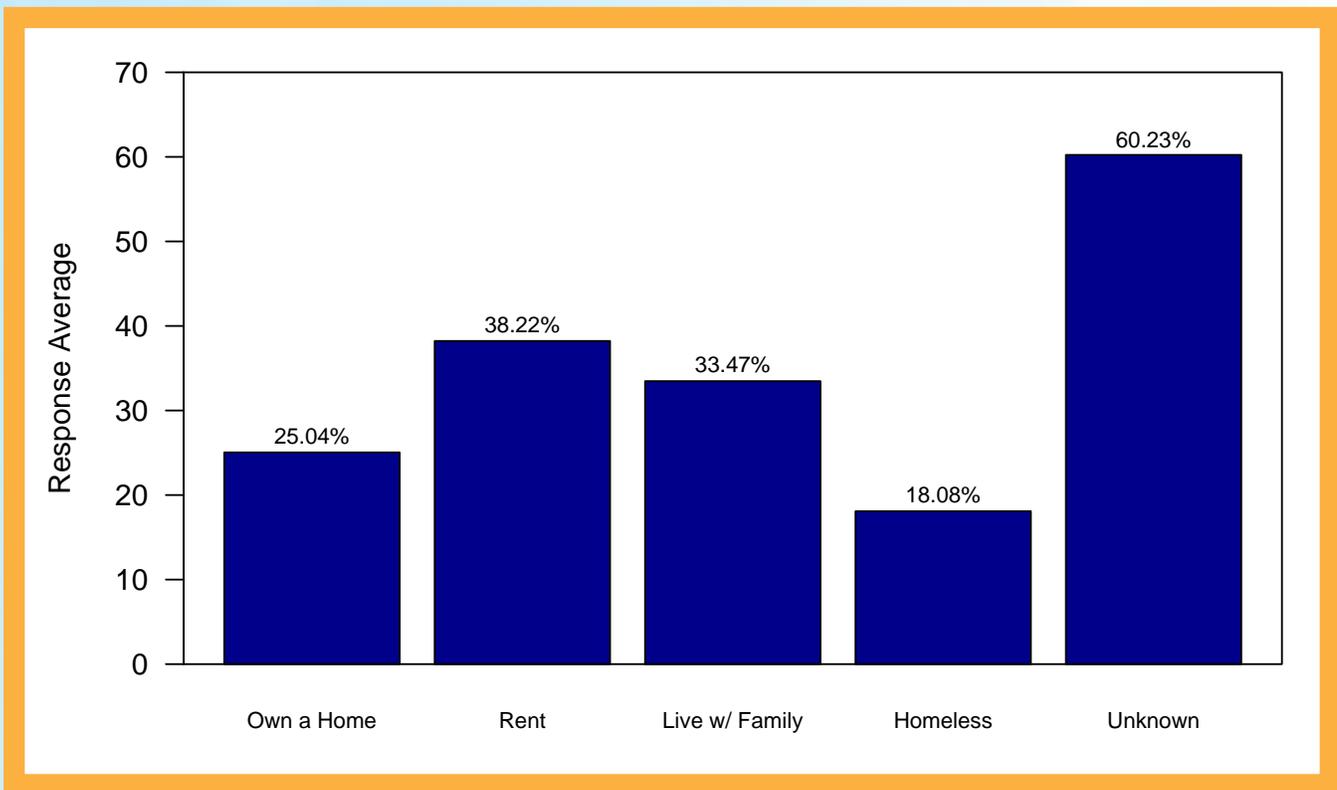


Figure 2.Q

What percentage of your clientele have access to the following means of transportation?

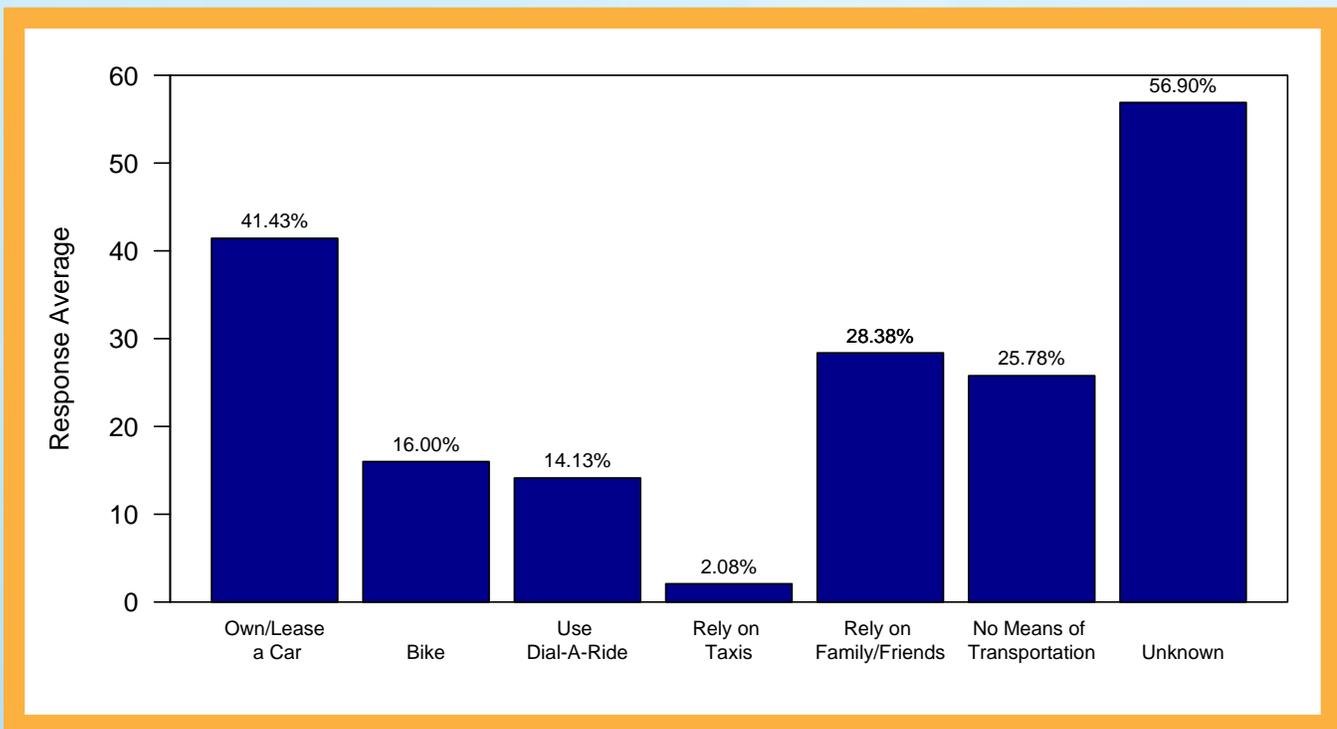


Figure 2.R

What percentage of your clientele have access to the following forms of healthcare?

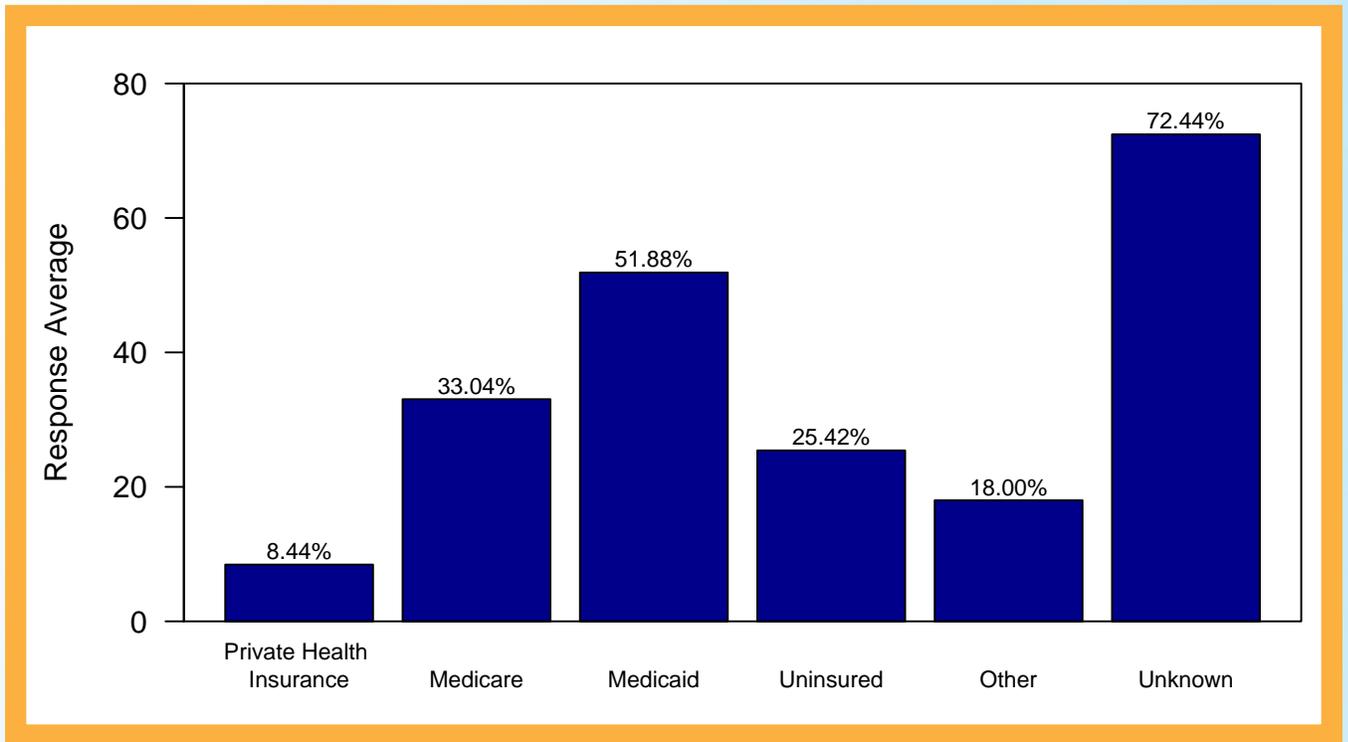


Figure 2.S

What percentage of your clientele have the following disabilities?

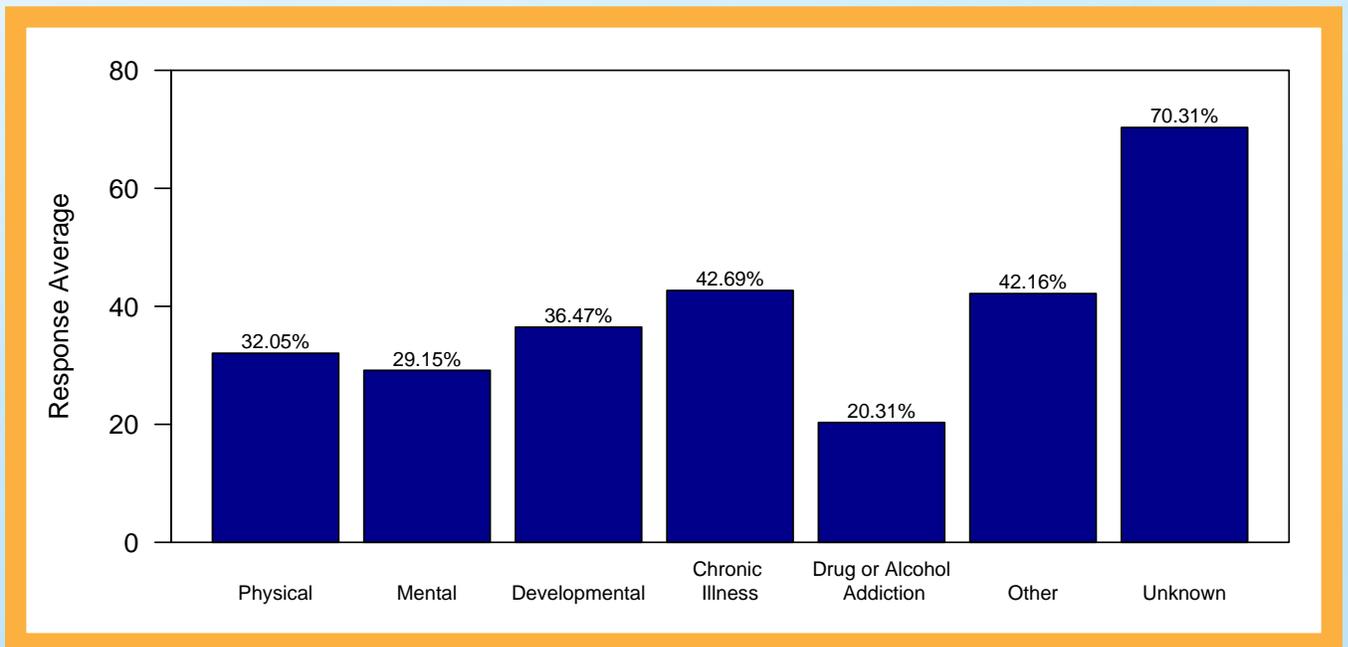


Figure 2.T

Which of the following sectors does your agency provide services? (Select all that apply)

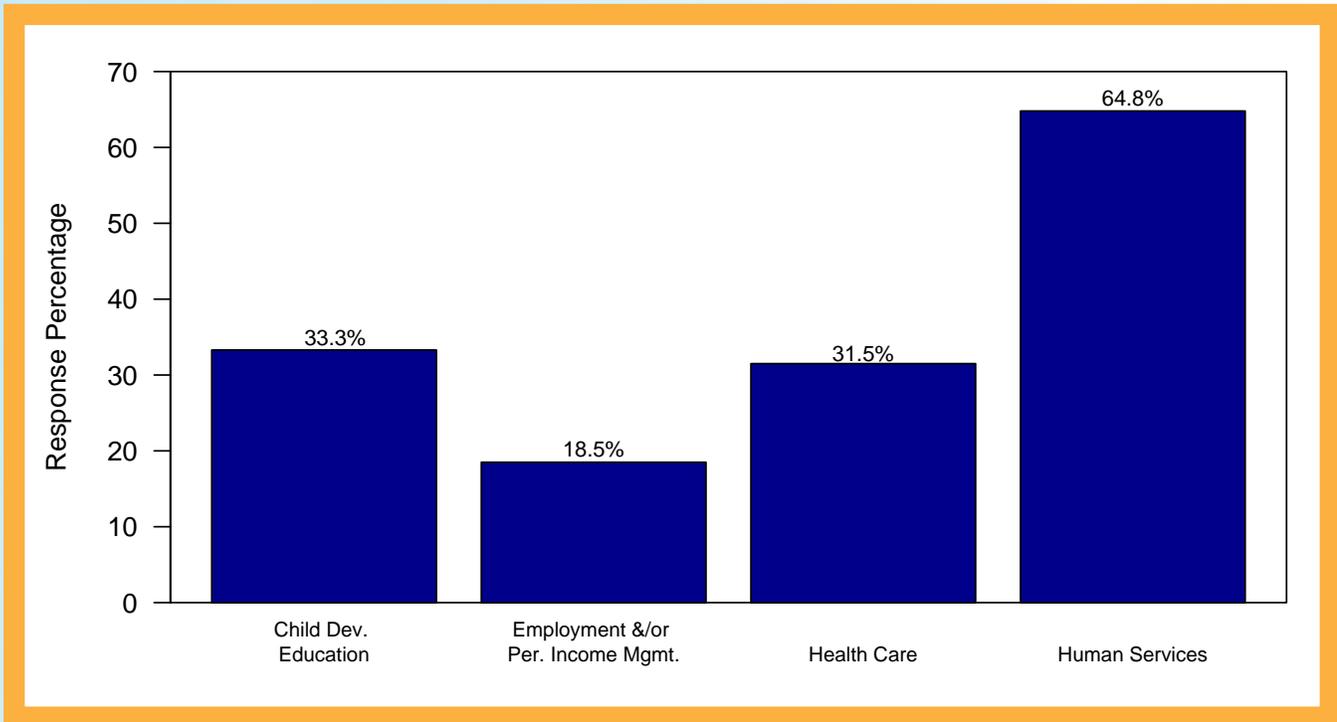


Figure 2.U

Describe your agency's targeted population(s). (Select all that apply)

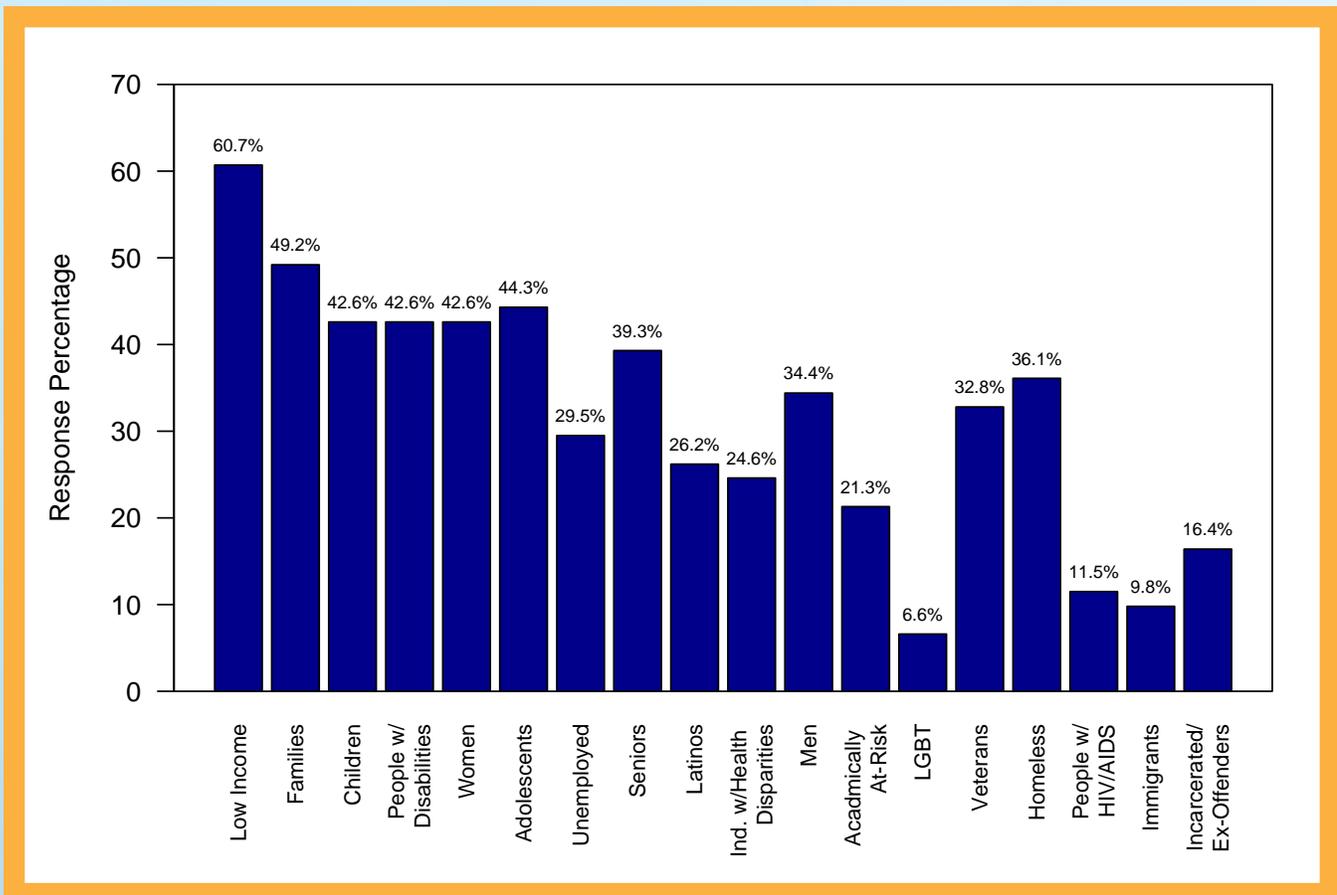


Figure 2.V

What eligibility requirements must clients meet to receive services? (Select all that apply)

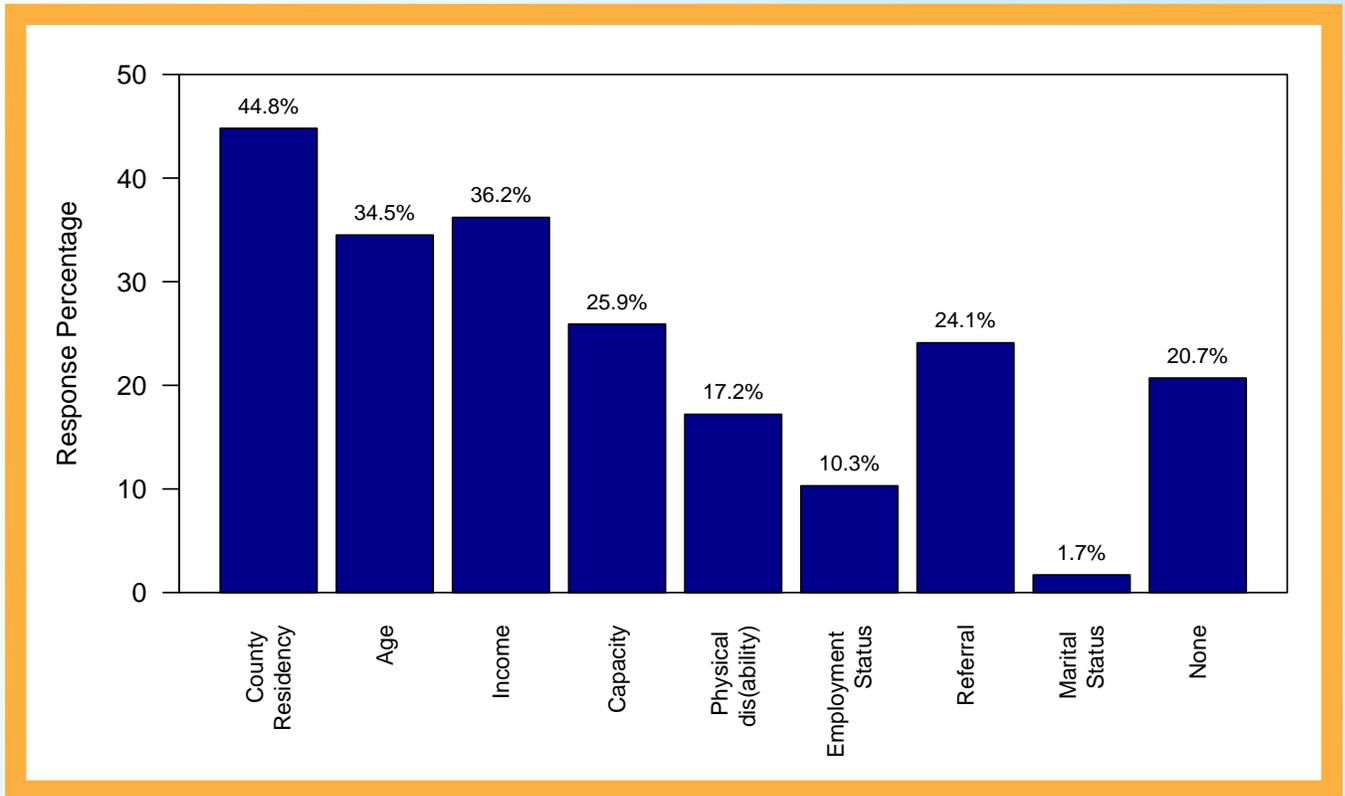


Figure 2.W

What is the maximum number of clients your agency currently has the capacity to directly serve on an annual basis?

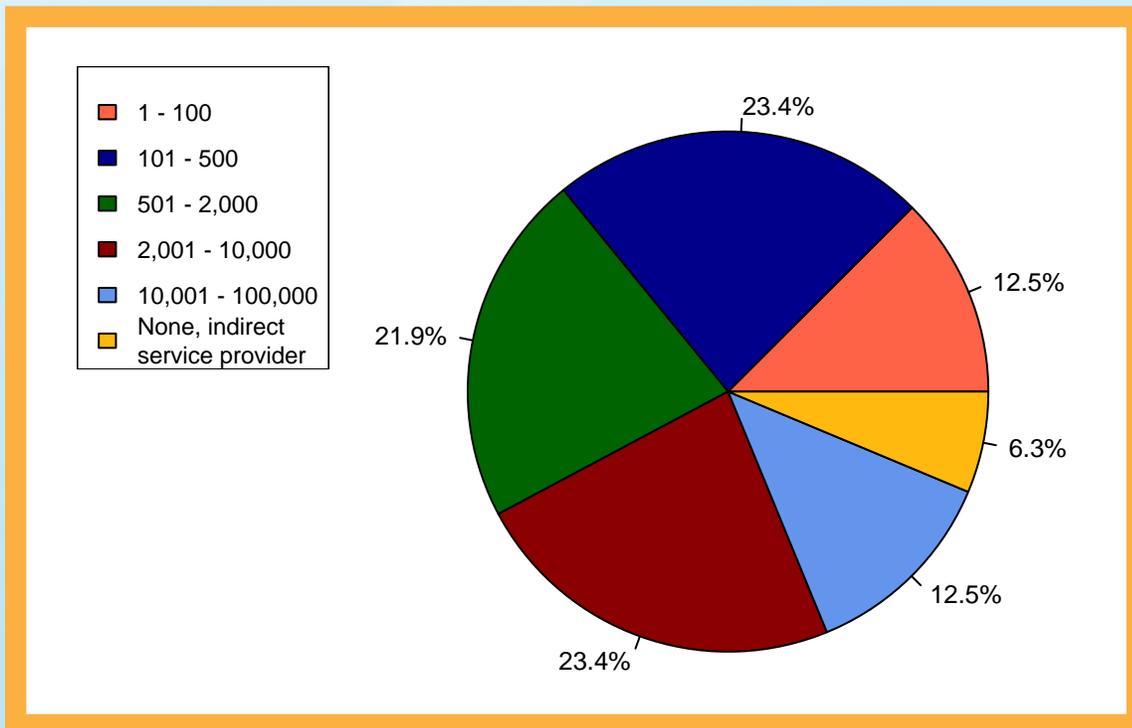
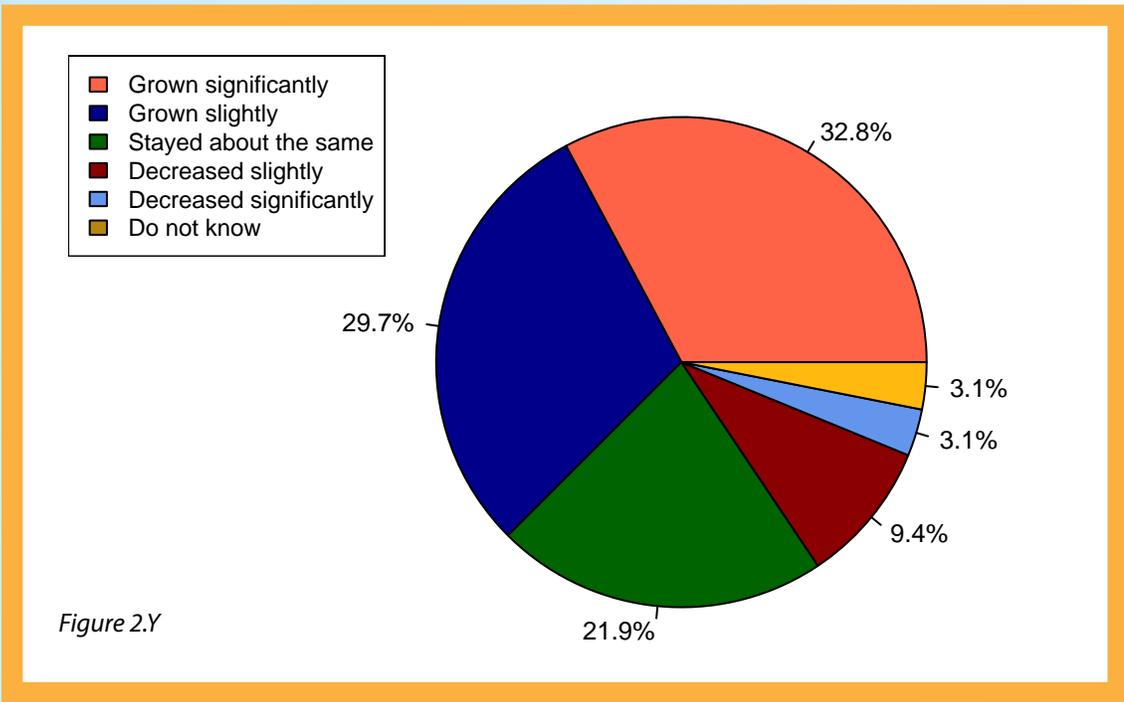


Figure 2.X

Over the past year, how has your number of clients changed?



Indicate the direct services that your organization (or department) provides, where at least 20% of budget resources are used: HUMAN SERVICES.

SERVICE PROVIDED	NUMBER OF AGENCIES
Referral Services	13
Advocacy	17
Food bank/pantry/soup kitchen/holiday meal program	13
Rent/mortgage/utilities/crisis payment assistance	7
Subsidized housing	4
Transitional housing (60+ days)	4
Transitional housing/emergency shelter (<60 days)	2
Home ownership counseling	1
Legal assistance/counseling	3
Crisis counseling	7
Benefits assistance	6
Sex offender treatment	0
Household supplies/ furniture assistance	2
Car care	0
Hair cuts/personal care/toiletries/ clothing Assistance/laundry service	5
Mail service	1
Home repair	3
Child protection	4
Child financial assistance	2
Case management	23
Self sufficiency	8
Care management	6
Autism services	5
Child care resource and referral	3
Child safety seats	2
Parenting education/ classes	4
Foster care	2
Adoption counseling	2
Transportation services	6
Burial expenses	3
Smoke detector installation/inspection	1
Speakers' bureau	4
Thrift store	5
Cell phone/ computer donation	0
Cooking programs	0
Bicycle ministry	1
Faith-based ministry	3
Disaster relief	2
Wrap-around services for the chronically Homeless	0
Senior companionship (phone/in person)	4
Elder care abuse investigation	1
Home-bound services	6
Independent living	3
Adult day programs	5
Senior shopping assistance	2

Figure 2.Z
157

Indicate the direct services that your organization (or department) provides, where at least 20% of budget resources are used: EDUCATION.

SERVICE PROVIDED	NUMBER OF AGENCIES
Referral services	12
Advocacy	11
After school/ summer enrichment programs	4
Tutoring/Homework/Literacy assistance	8
Juvenile Crime/Gang/Dropout prevention	8
Early education (ages 0 – 5)	1
Youth employment assistance	1
Athletic programs/ swimming lessons	3
Mentoring	10
ACT/SAT test preparation	2
Youth clubs/scouting programs	3
Early intervention	5

Figure 2.AA

Indicate the direct services that your organization (or department) provides, where at least 20% of budget resources are used: EMPLOYMENT/VOCATIONAL TRAINING.

SERVICE PROVIDED	NUMBER OF AGENCIES
Adult literacy/ remedial education services	3
Life-skills/ Social/Communication Skills training	12
Computer literacy	6
GED preparation	2
ESL courses	0
Citizenship preparation	0
Technical/skills training	5
Career counseling	5
Job placement	7
Credit counseling/ financial education/Literacy	4
Senior employment services	1
Asset development	0
Resume assistance	8
Self employment/ small business development	4
Counseling for existing businesses	2
Job training	10
Tax assistance	1
Supported employment	4

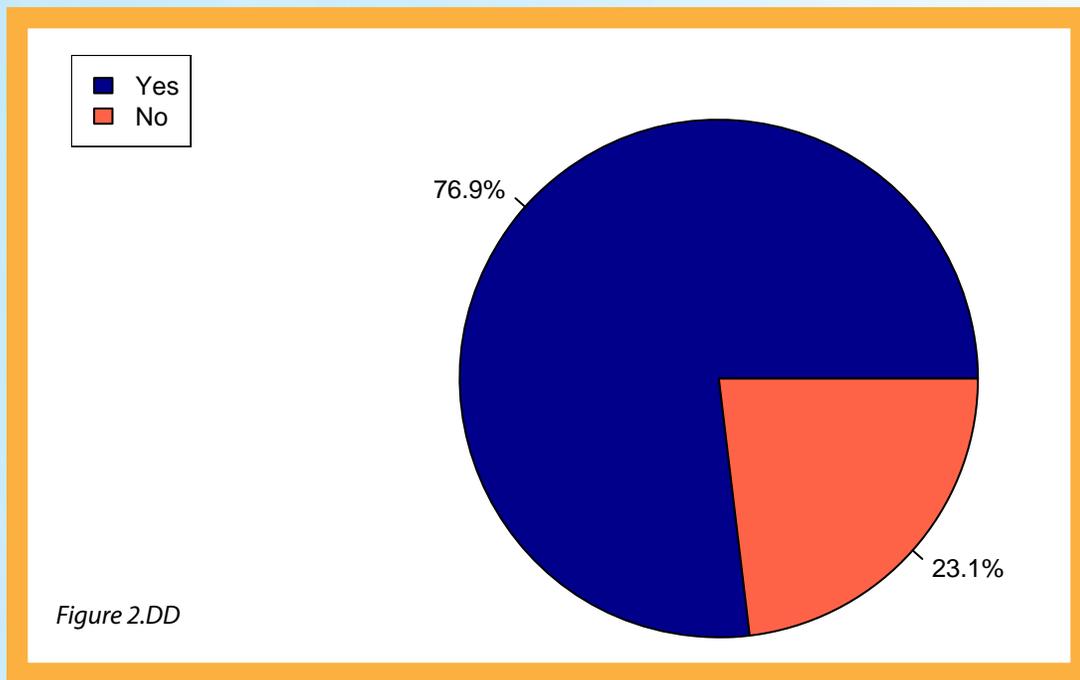
Figure 2.BB

Indicate the direct services that your organization (or department) provides, where at least 20% of budget resources are used: HEALTH.

SERVICE PROVIDED	NUMBER OF AGENCIES
Information/Referral	9
Advocacy	10
Access to health care	7
Primary medical services/ medical screenings	4
Pediatric medical services	1
Dental services	3
Vision screenings	5
Sign language classes	1
Hearing impaired services	3
Vaccinations/Immunizations	2
Emergency health care	0
Prevention services	4
Wellness programs	4
In-patient mental health programs	2
Out-patient mental health programs	4
Nutrition education	7
Eating disorders/ obesity services	0
Fitness programs	3
Medical research	2
Poison control	0
Smoking cessation	3
Safety/Health/CPR/First Aid training	2
Domestic violence services/counseling	5
Services for the disabled	7
Sports training for the disabled	1
Respite care	3
Substance abuse treatment/ counseling/Detoxification	2
AA/Al-anon	1
Drug awareness	1
Family planning/pregnancy counseling/Teen pregnancy prevention	2
STD testing/treatment	2
HIV/AIDS services	2
Home Health	0
Assisted living	0
Hospice/palliative care	1
Medical equipment/supplies	3
Free/reduced cost prescriptions	2
Grief support	1
Blood donation	0

Figure 2.CC

Does your agency track the outcomes of clients?

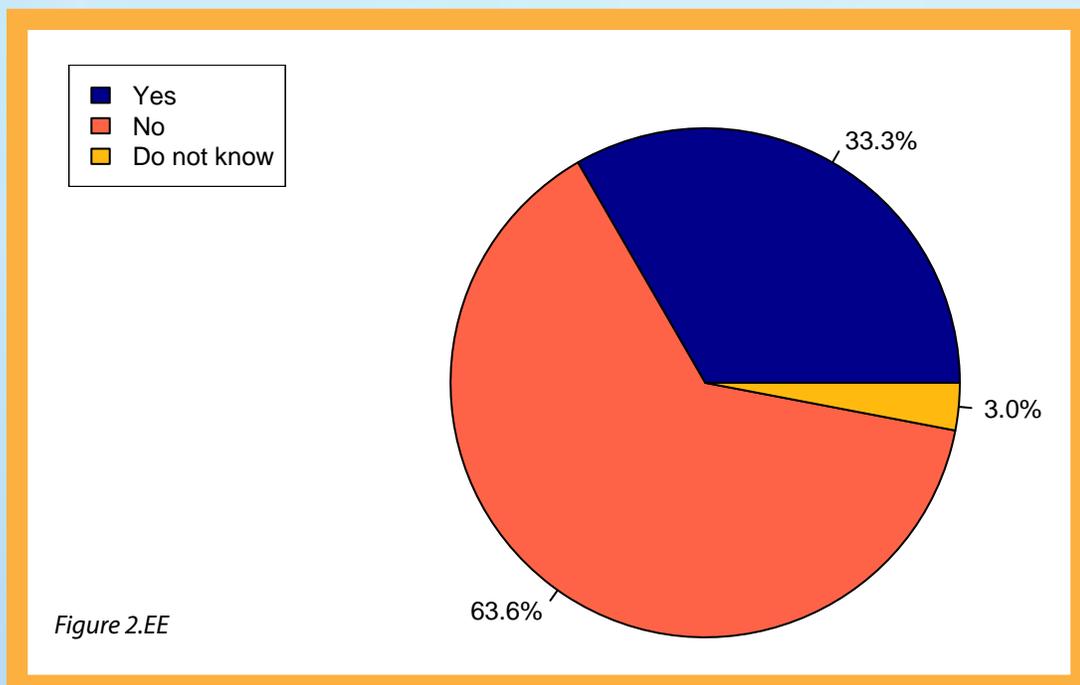


If "yes," how does your agency track your clients? (Open ended response)

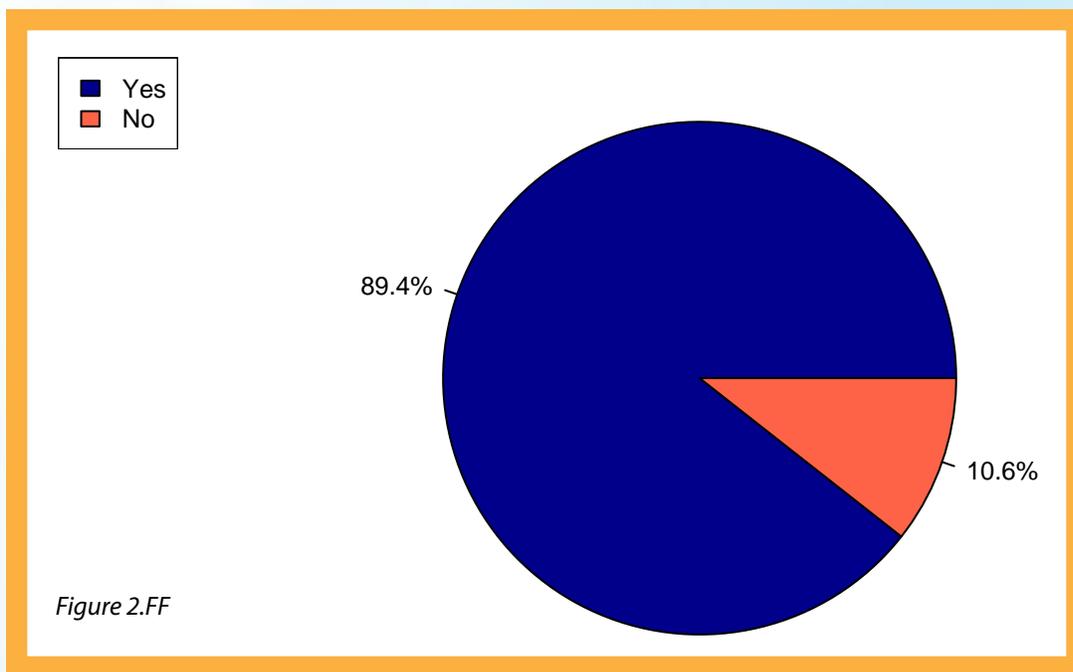
The most common responses included:

- ◆ Client surveys
- ◆ Reports submitted monthly, quarterly or annually
- ◆ Personal contact with the client
- ◆ Data tracking with programs such as HMIS (Homeless Management Information System)

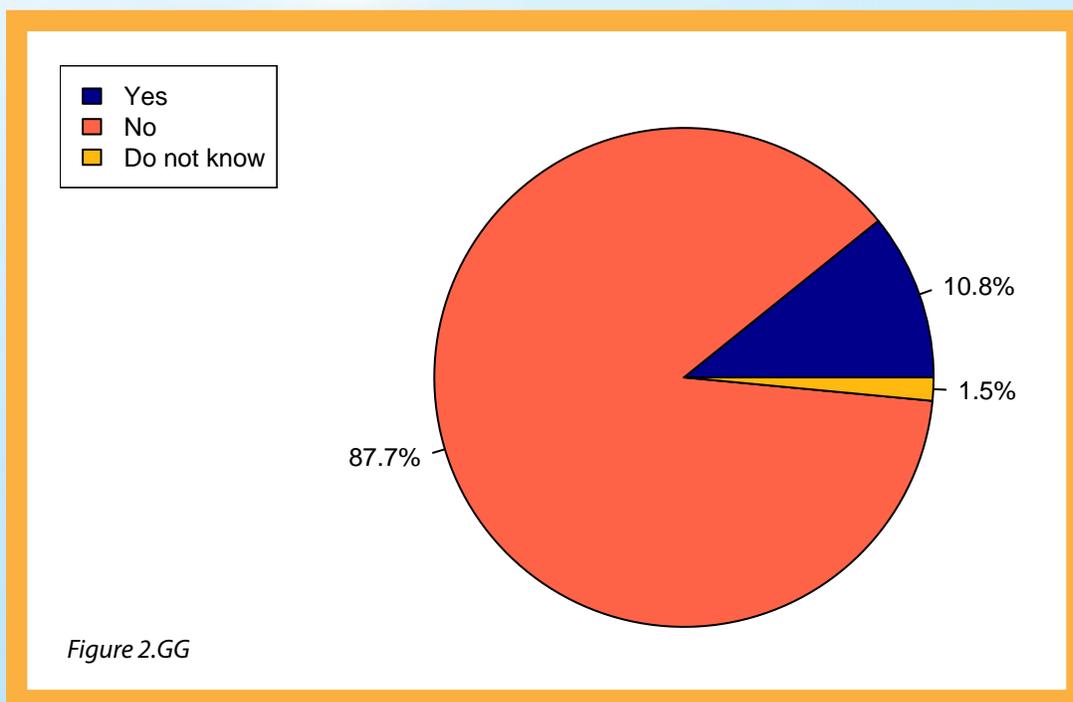
Do you feel your organization is able to serve all who seek assistance?



Do you feel your organization is referring those individuals you cannot serve to other agencies?



Do you feel your organization is turning people away in need of services without referring individuals to other agencies?



If “yes” what is preventing you from making a referral? Ex: no local service providers. (Open ended response)

Responses included:

- ◆ “Sometimes there is no other agency we can refer clients to.”
- ◆ “No local service providers that are free or low-cost.”
- ◆ “Need is greater than the number of providers.”
- ◆ “No capacity.”

**If “yes” approximately how many have been turned away within the last 12 months?
(Open ended response)**

Numerical responses ranged from 8 to 1200 plus, but many respondents reported that the actual number of clients turned away was unknown.

Does your organization maintain a waiting list?

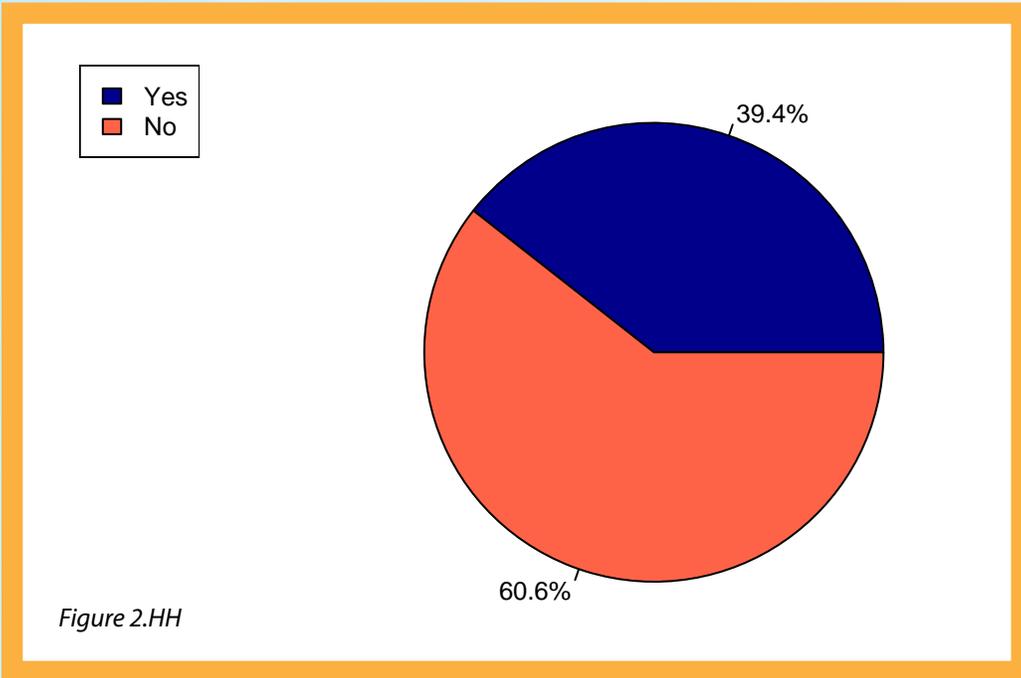


Figure 2.HH

If “yes” how many have been on the list within the last 12 months?

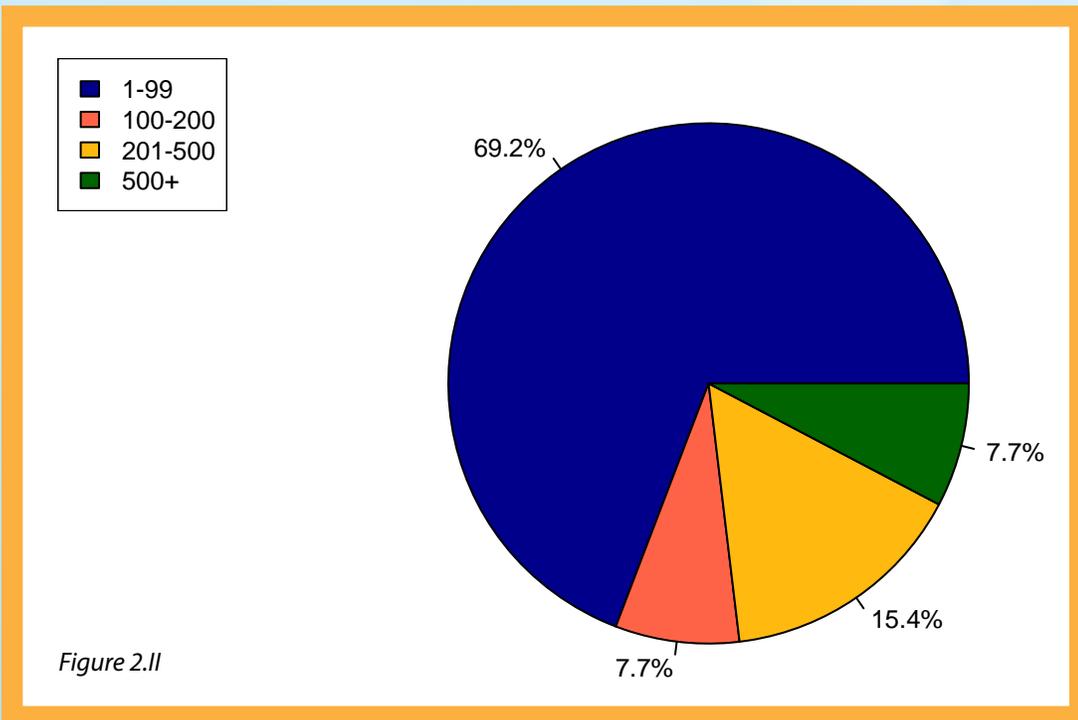


Figure 2.II

If you do not maintain a waiting list, does your agency have a different strategy to address the unmet demand? Please elaborate.

Responses included:

- ◆ “Yes, regional offices throughout the 17 counties we serve pick up a client case in the event the local program specialist is unavailable to meet the immediate needs.”
- ◆ “We flex our staffing to meet the demand.”
- ◆ “We have clients who do not qualify immediately so we refer them to other agencies and as they progress we monitor them until they qualify.”
- ◆ “Some that we are unable to serve are referred to agencies outside the county, as no other similar resource is available locally.”

Which of the following statements best matches your organization’s situation right now?

	RESPONSE %
We are currently in the process of expanding our operations.	18.8%
We are interested in expanding our operations and have plans in place to do so.	15.6%
We are interested in expanding our operations, but have no current plans to do so due to lack of funding.	54.7%
We are interested in expanding our operations, but have no current plans to do so for reasons other than funding.	4.7%
We are not interested in expanding our operations.	6.3%

Figure 2.JJ

What types of funding resources does your agency use?

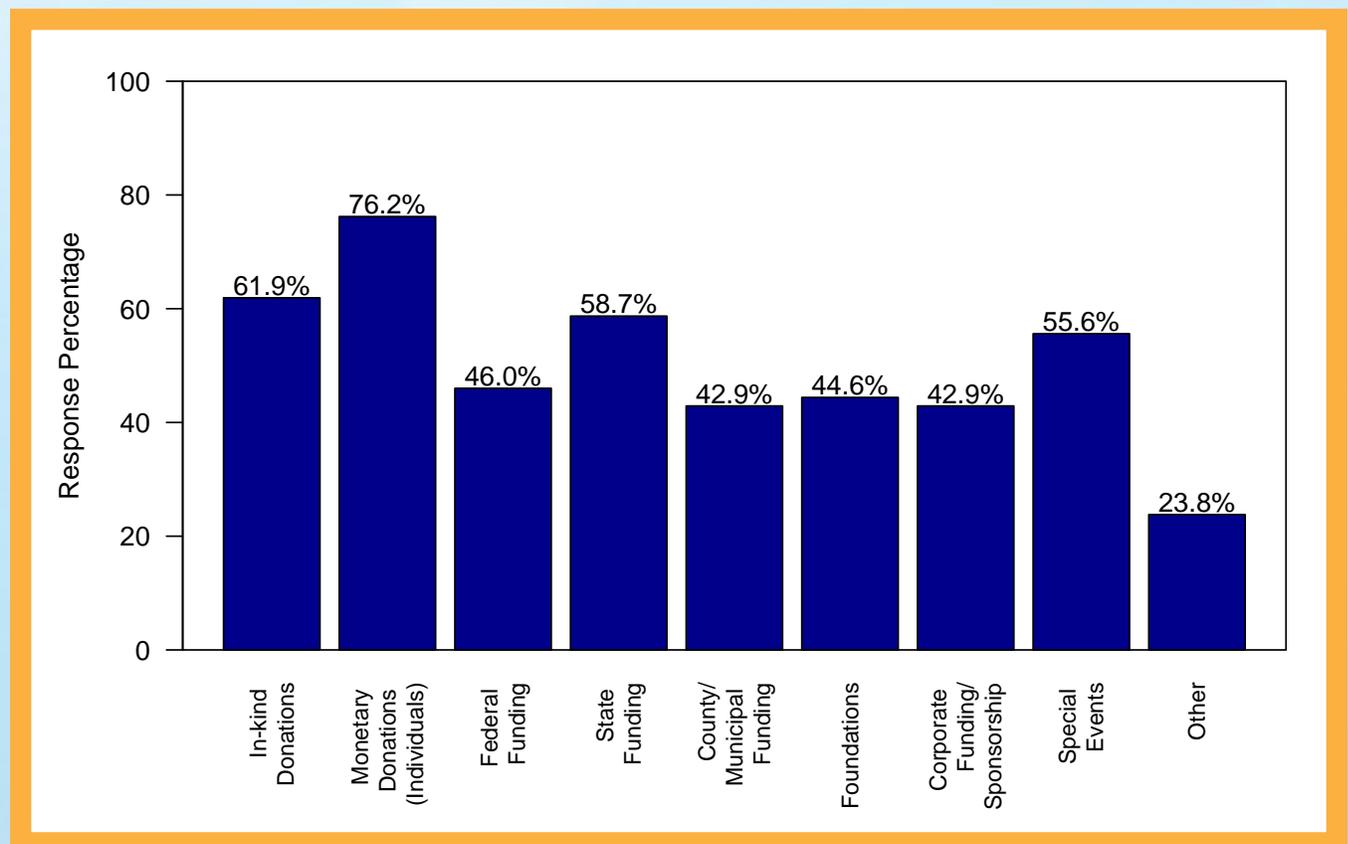


Figure 2.KK
Charlotte County, Florida Community Action Plan

Based on your agency's annual budget, what percentage of the total budget comes from the following?

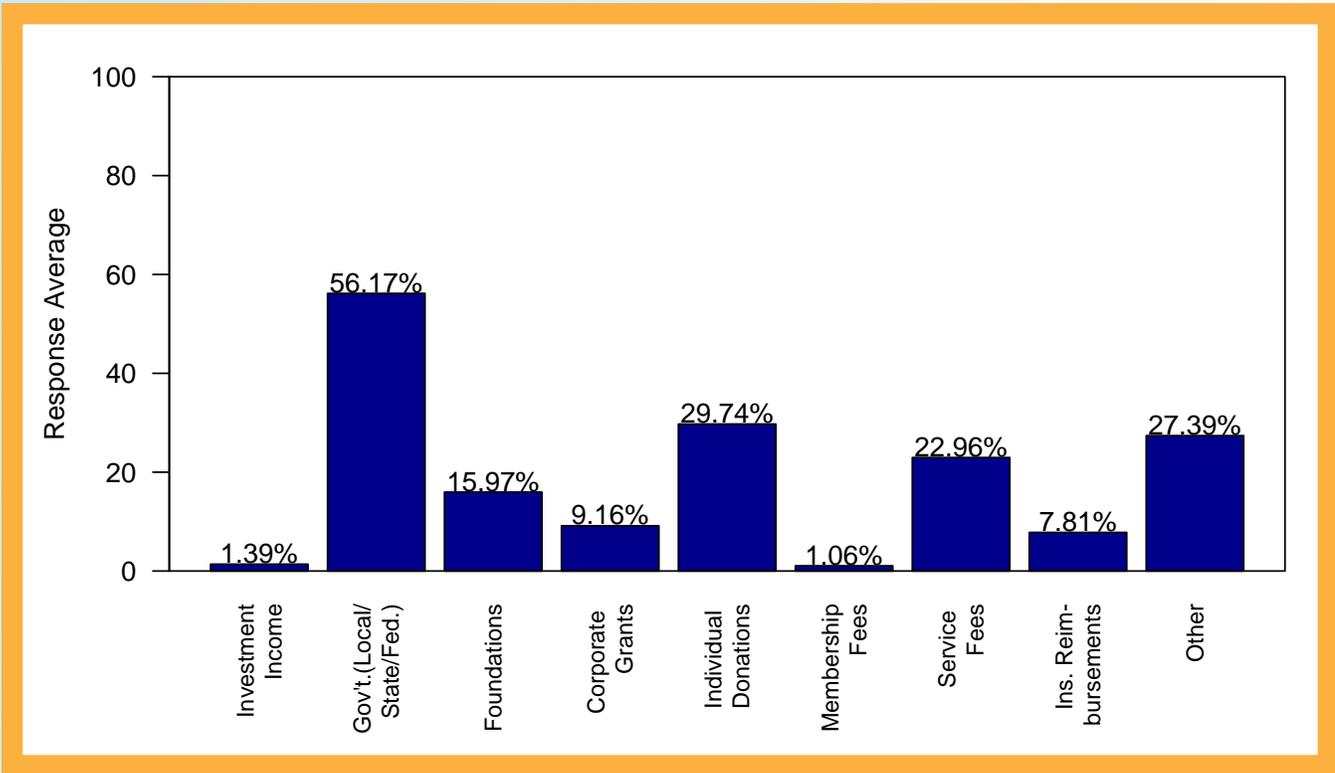


Figure 2.LL

Approximately what percent of your organization's budget resources are used in the following categories?

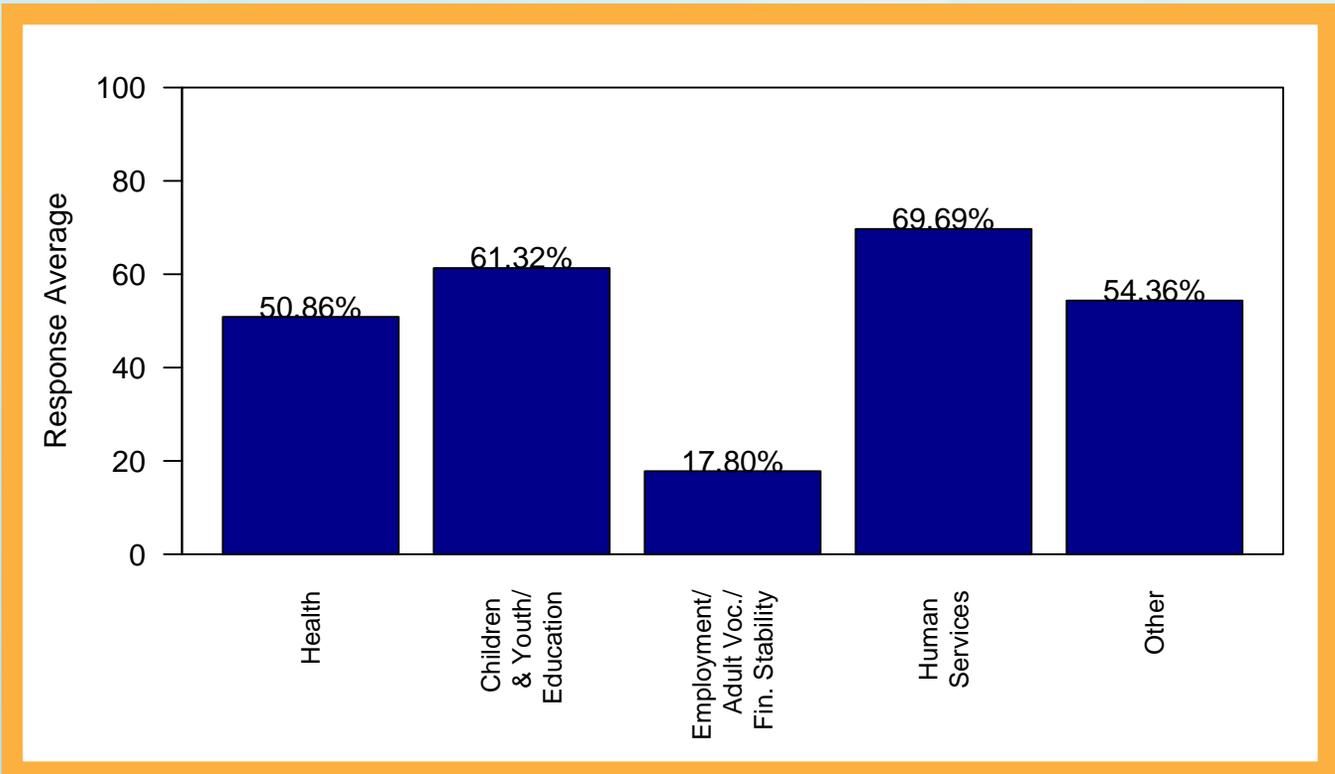


Figure 2.MM

What is the extent of your organization’s involvement with each of the following service providers/organizations within the last 12 months?

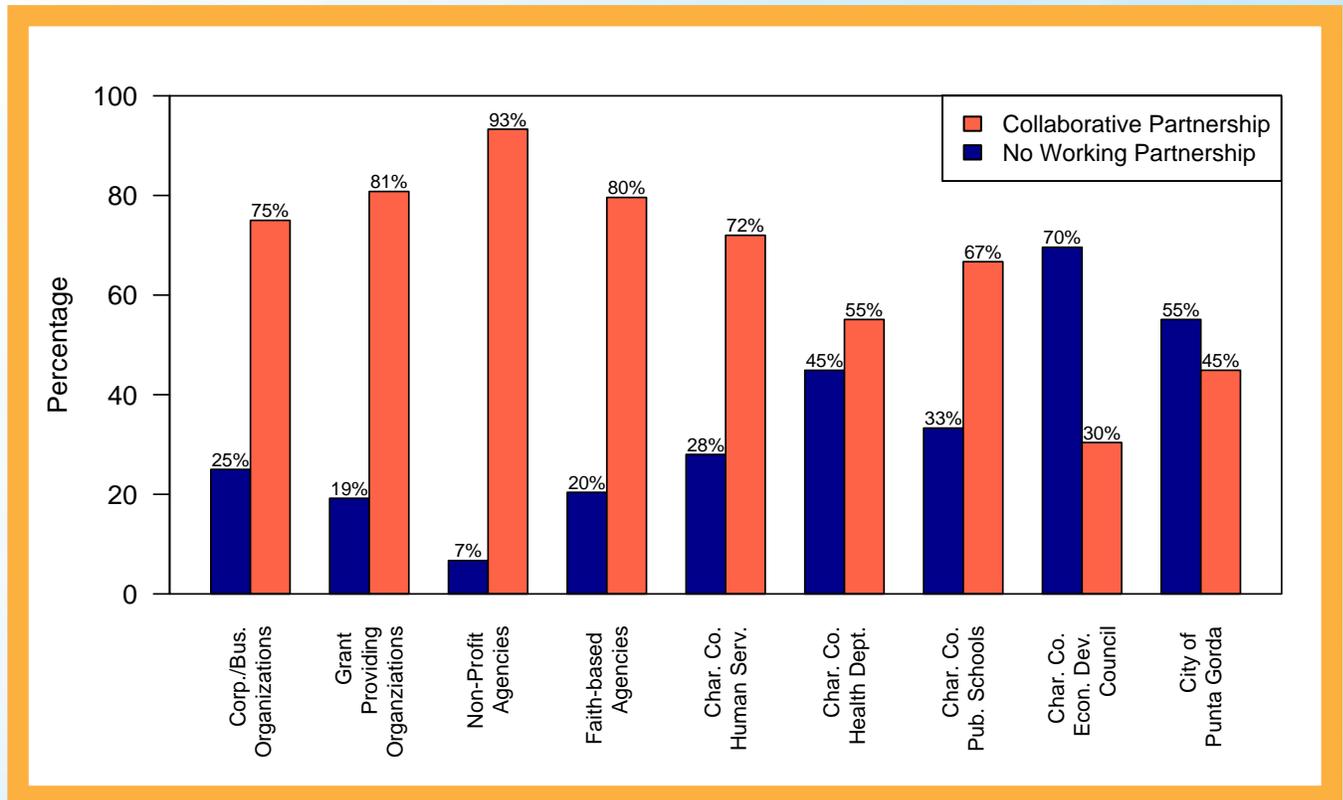


Figure 2.NN

Of the service providers your agency has a collaborative partnership with, please list the top three that you work with. (Open ended response).

The top three responses were:

- ◆ Charlotte County Public Schools
- ◆ Charlotte County Human Services
- ◆ Other local non-profits

In general, what barriers do your clients face in accessing services within your organization?

The responses included:

- ◆ “Lack of personal organization (record keeping, appointment setting, personal accountability). Some clients are too far in crisis for our agency to feasibly assist through case management.”
- ◆ “Visibility of our organization.”
- ◆ “Transportation to our agency.”
- ◆ “Not enough working hours.”

Does your organization provide the following support services to help clients better access your services?

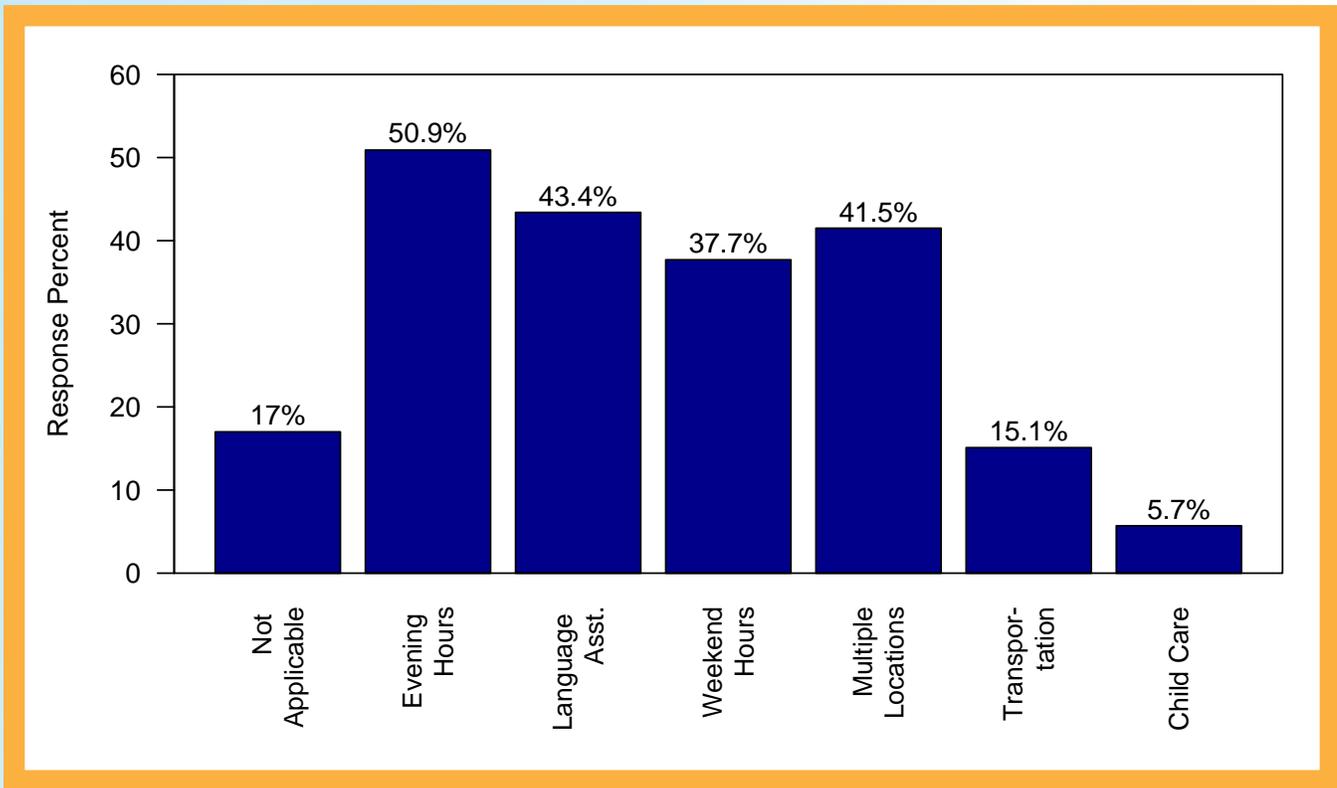


Figure 2.00

What changes within the community need to take place in order to improve the overall quality of life for Charlotte County residents?

The responses included:

- ◆ "Better understanding of other agencies and the services they provide."
- ◆ "Political commitment to improving the quality of life for LOW INCOME. Advocacy for the needs of the working poor, not just specific target populations (i.e. children, elderly homeless, etc.). Better understanding of the continuum of care."
- ◆ "Public transportation, courting of light industry and businesses to provide/support well paying jobs, increased support to service and non-profit organizations that provide services."
- ◆ "Closer collaboration with community partners. Stronger focus on preventative health services."
- ◆ "EVERYONE in the community needs to actively participate in solving community problems."

In your opinion, how can unmet needs in the community best be resolved?

	RESPONSE %
Greater funding from government	17.3%
Greater funding from grants (non-profits and/or foundations)	11.5%
Increase private donations from citizens	11.5%
Eliminating duplication of services among agencies with similar objectives	23.1%
Increased preventative programs/services before needs arise.	23.1%
Increased efforts by service organizations to fill current gaps in services.	13.5%

Figure 2.PP

Where does your agency see gaps in direct services provided to clients THROUGHOUT THE ENTIRE COMMUNITY?

The responses included:

- ◆ "Affordable housing, food, affordable child care, affordable medical care, employment."
- ◆ "Adult preventative care."
- ◆ "Transportation to services."
- ◆ "Communication between agencies to provide services as a community on a case by case basis. This allows us to help people reach their goals individually."
- ◆ "Inability to get programs started in Englewood."
- ◆ "Case management with supportive wrap-around services."
- ◆ "Working individuals in need are not able to access the services."

In your professional opinion, what are the root causes for gaps in services?

The responses included:

- ◆ "Poor communication between service providers."
- ◆ "No funding. Lack of knowledge in prevention."
- ◆ "Agency heads should be encouraged to share successes and even willing to coach and support collaborative partners. At times, I even believe that funding sources should pair agencies together for the good of the community."
- ◆ "Unwillingness of taxpayers to pay for services. General apathy and (sometimes reasonable) distrust and lack of support towards elected decision makers."
- ◆ "No one wants to know about this problem. Ignorance is bliss."

What would you recommend to create systemic change for the most impact regarding direct services provided throughout the entire community? (Select up to three)

	RESPONSE %
Shared intake and referral process	9.4%
Prioritize critical needs	18.9%
Clarity	3.8%
Health care reform	11.3%
Measure solutions	5.7%
Expansion of programs	18.9%
Transportation	39.6%
Early prevention/intervention	13.2%
De-privatization of system	1.9%
Initiative to address the issue	1.9%
Technologies	3.8%
Training and support to agencies	9.4%
Provide housing	9.4%
Provide easier access to programs	9.4%
Increased funding	58.5%
Focus on long term solutions, not “band aids.”	41.5%
Continuity of care	5.7%
Awareness and education	24.5%
Consolidation of services	5.7%
Communication/collaboration	43.4%

Figure 2.QQ

If you have additional comments you would like to share, please provide them now.

The responses included:

- ◆ “Charlotte County as a whole needs more advocacy for low-income, not just target populations. We need to start getting real about the numbers of working poor in our community.”
- ◆ “It is important to focus on population health interventions as these improve health outcomes to a greater extent than individual health care initiatives.”
- ◆ “Improve screening and offer benefits on a sliding scale versus all or nothing entitlement. With centralized gate-keeping there is less opportunity for fraud.”

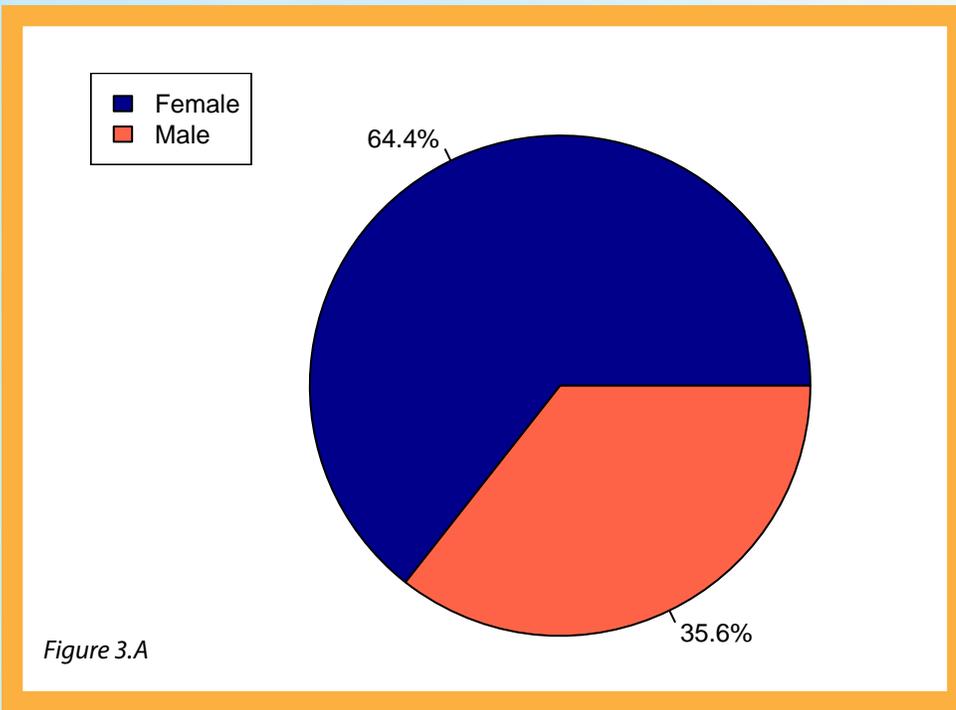
APPENDIX 3 CLIENTELE SURVEY



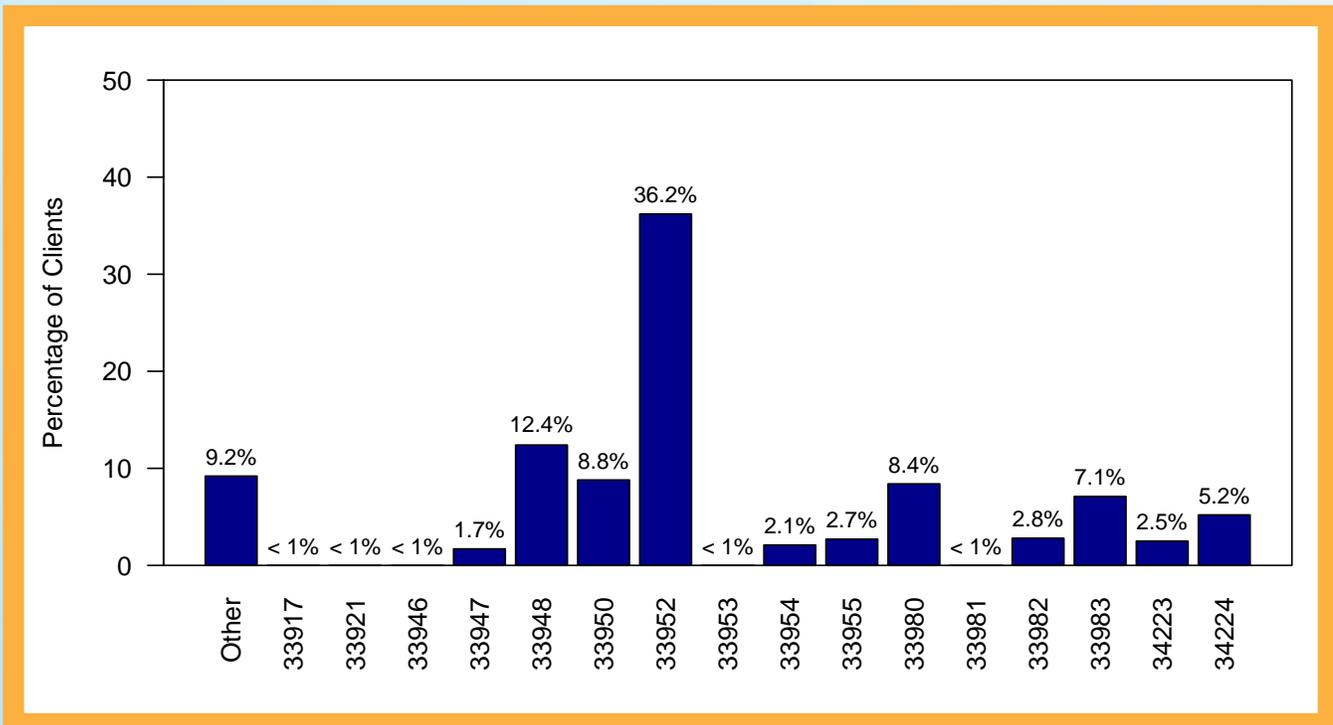
Photo provided by Charlotte Harbor Visitor & Convention Bureau

Over 2000 surveys were distributed to local non-profit and government human service agencies for completion by their clients. 869 respondents provided information on their demographics and their current needs.

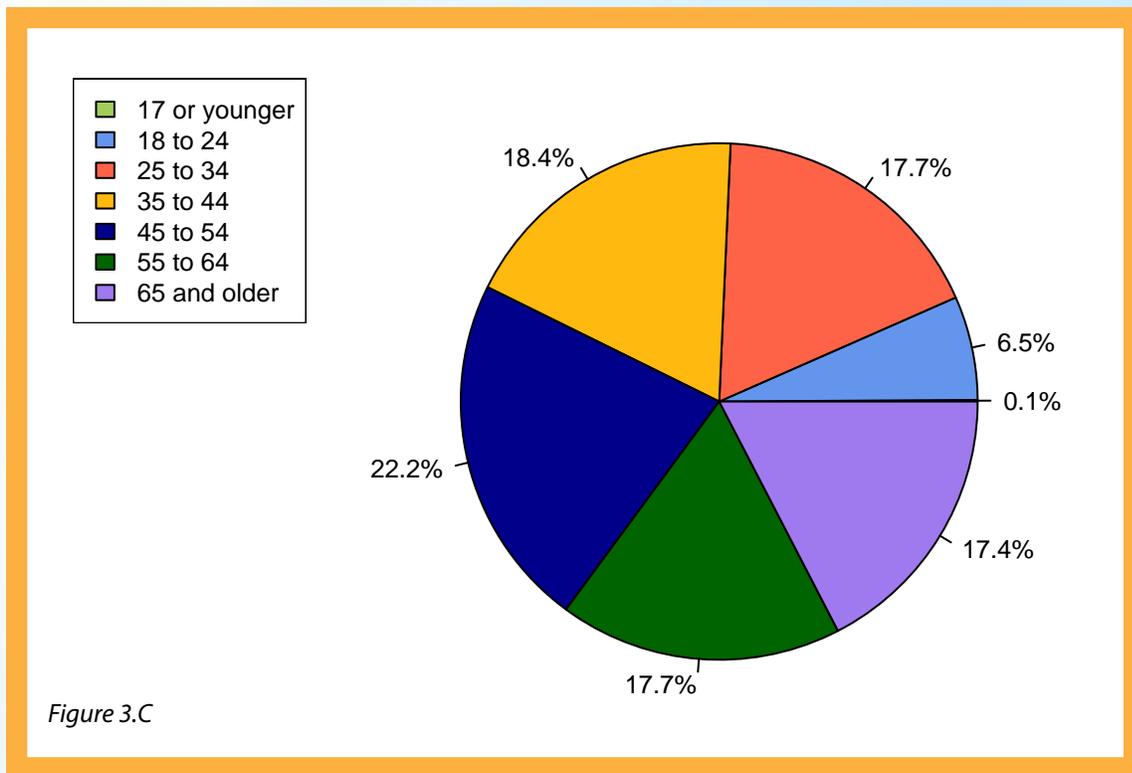
Are you...?



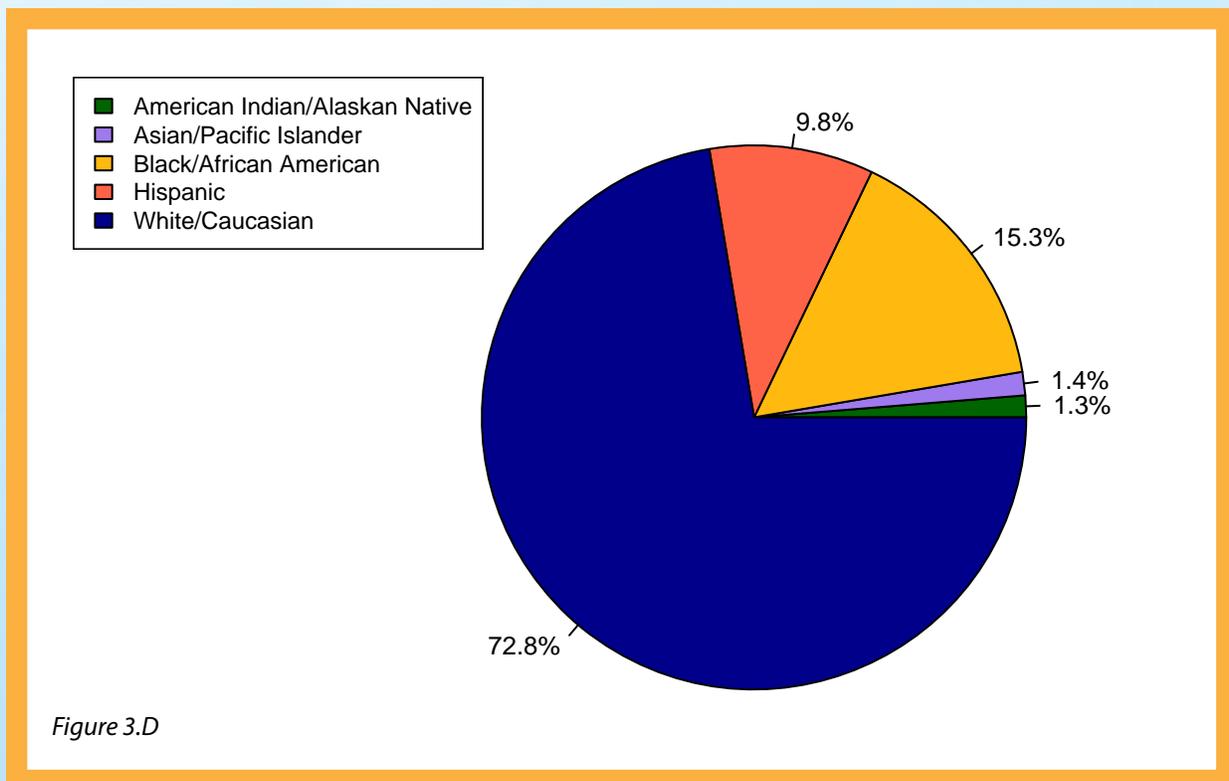
Where do you live?



How old are you?



Which race/ethnicity best describes you?



What is the highest level of education you have completed?

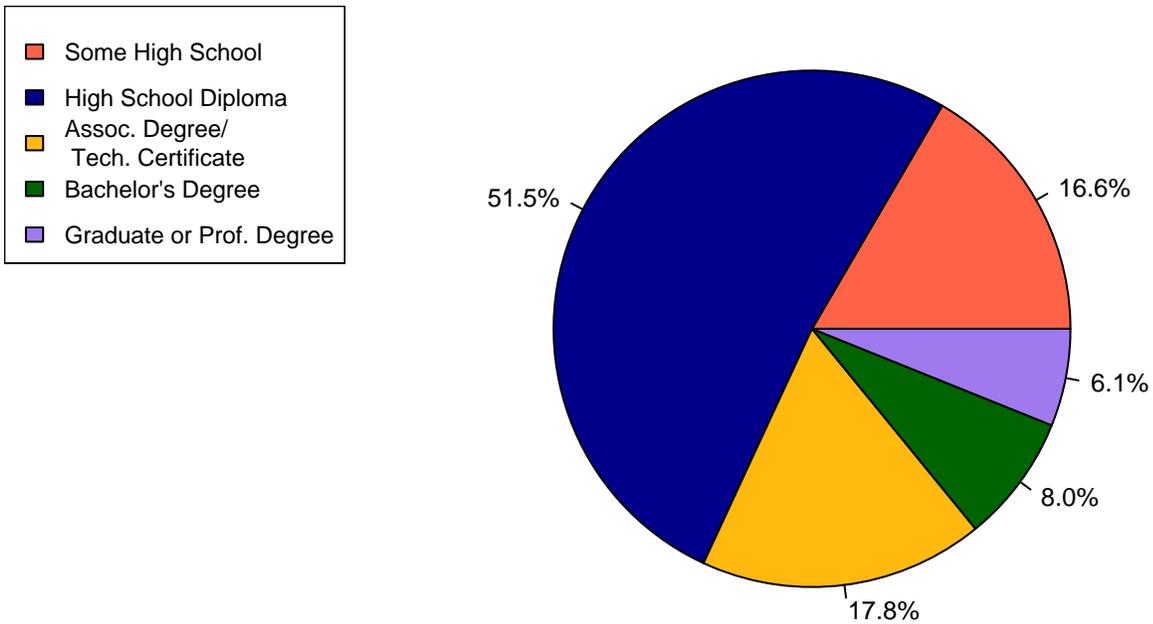


Figure 3.E

Which of the following best describes your employment status?

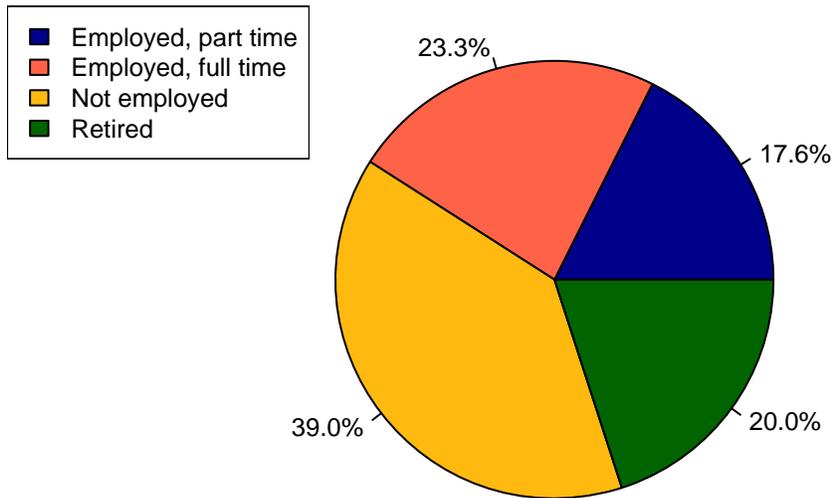
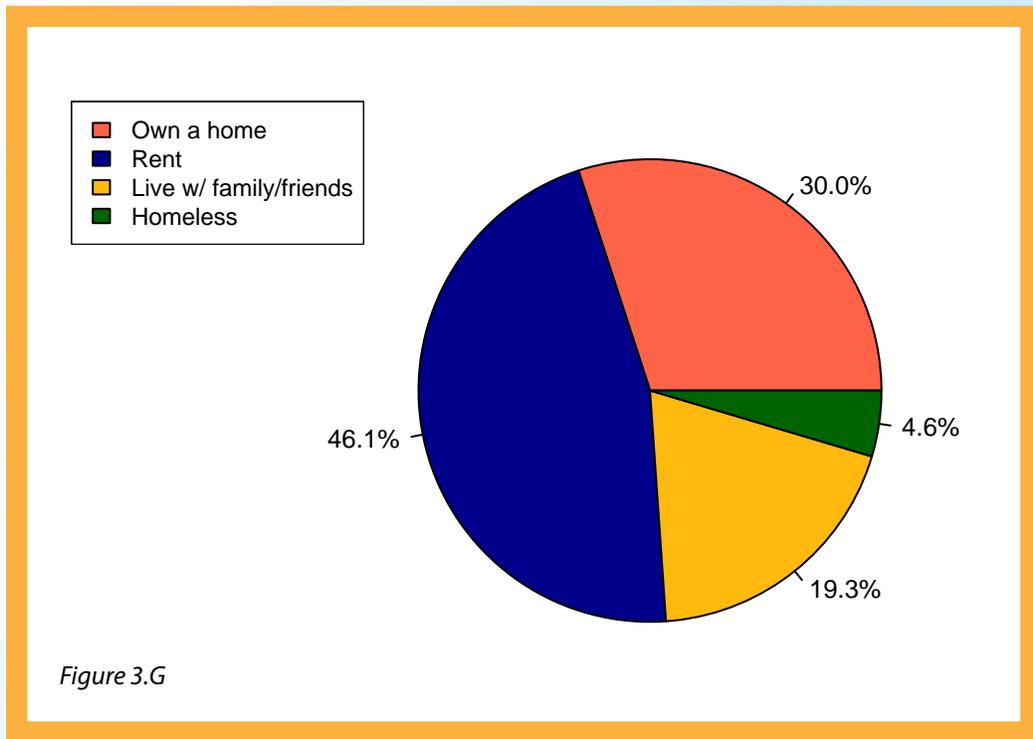
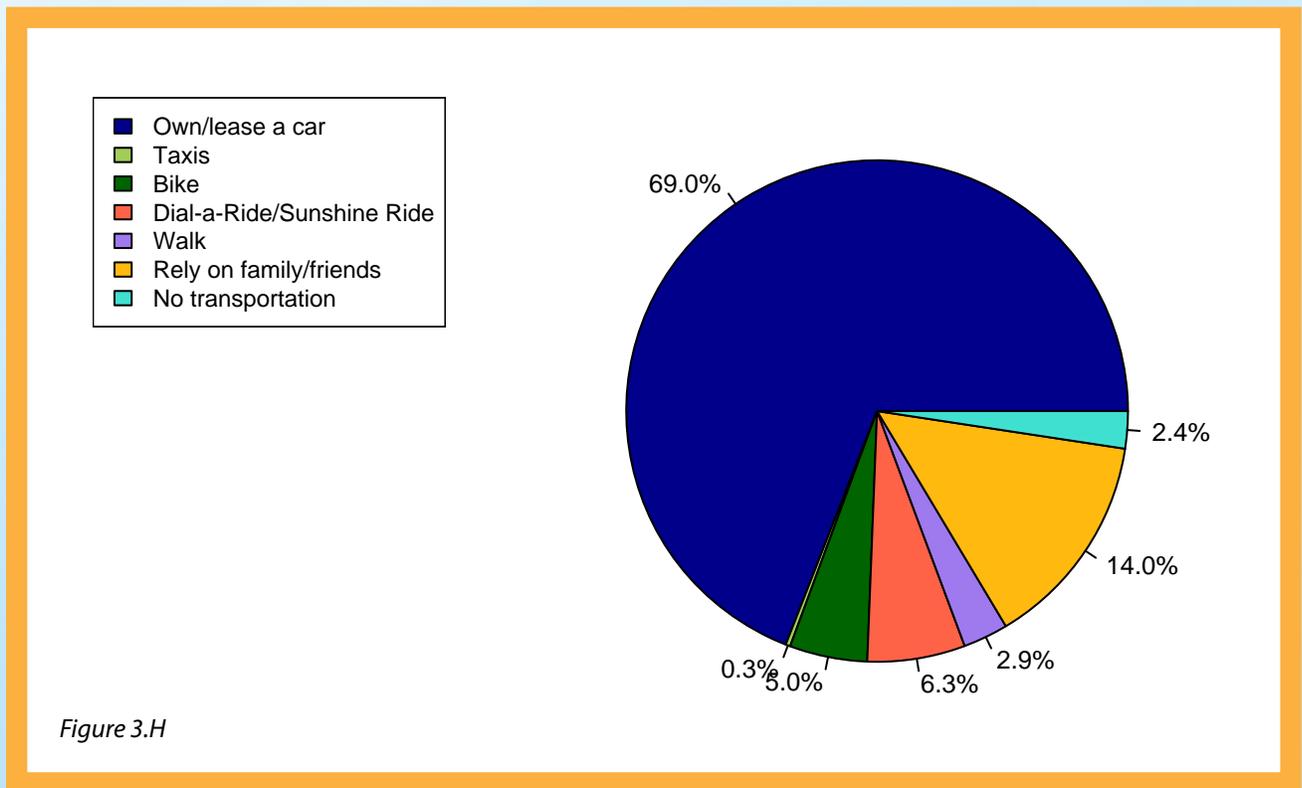


Figure 3.F

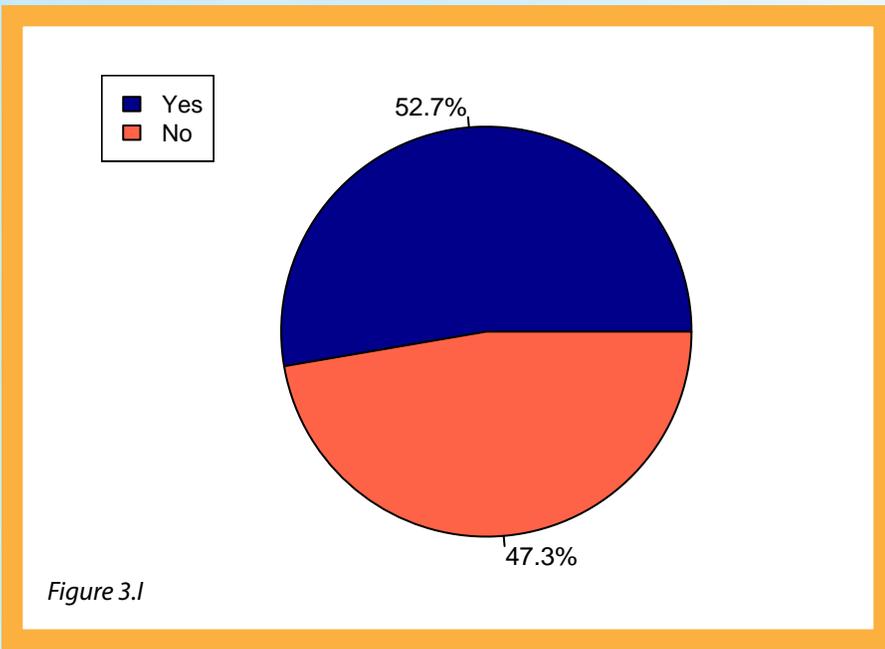
Which of the following best describes your current living arrangement?



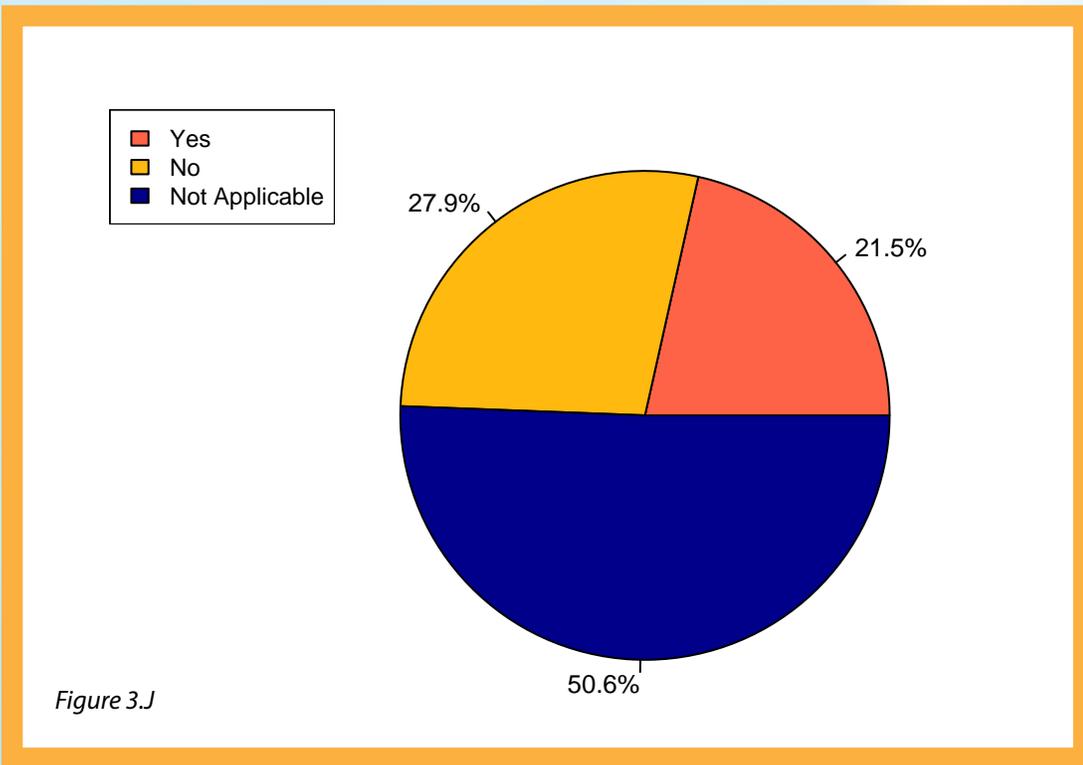
Which of the following best describes your mode of transportation?



Do you have health insurance?



If you have children under the age of 18, do you have access to affordable childcare?



Please tell us, in your opinion, which services are needed the most by assigning each one a score of 1 to 5, where 1 is the lowest priority and 5 is the highest.: HUMAN SERVICES

Service	Percentage of Respondents				
	Lowest Priority		3	Highest Priority	
	1	2		4	5
Disaster Relief	18.4%	7.9%	22.7%	19.4%	31.6%
Elder Abuse	19.9%	7.4%	19.9%	21.4%	31.5%
Domestic Violence/abuse prevention/treatment	15.5%	5.3%	20.6%	21.9%	37.1%
In-home elder care	15.5%	5.8%	20.5%	25.6%	32.6%
Food Assistance	6.8%	3.7%	15.1%	20.6%	53.8%
Emergency Shelter	12.3%	6.4%	20.2%	25.1%	35.9%
Transitional Housing	12.3%	8.1%	24.0%	21.3%	34.3%
Homelessness Prevention	12.6%	6.6%	17.0%	23.5%	40.4%
Financial Assistance	7.4%	6.1%	19.1%	18.6%	48.8%
Benefits Assistance	7.6%	2.7%	17.1%	18.0%	54.5%
Crisis Counseling	12.2%	6.4%	28.3%	23.1%	30.0%
Affordable Housing	9.3%	3.9%	15.4%	21.7%	49.7%
Transportation – normal Business hours	10.7%	2.8%	21.1%	18.2%	47.2%
Transportation – after Hours	12.7%	6.2%	20.9%	19.2%	40.9%
Veteran Services	14.0%	5.9%	21.9%	23.0%	35.3%
Assisted Living	13.3%	6.0%	22.4%	27.4%	30.9%
Affordable home/ Car repair	12.2%	5.2%	19.9%	21.3%	41.3%
Free legal services	12.3%	7.6%	20.0%	19.6%	40.5%
Home Ownership Counseling	13.4%	10.9%	29.7%	17.9%	28.1%

Figure 3.K

Please tell us, in your opinion, which services are needed the most by assigning each one a score of 1 to 5, where 1 is the lowest priority and 5 is the highest.: CHILD/YOUTH DEVELOPMENT

Service	Percentage of Respondents				
	Lowest Priority		3	Highest Priority	
	1	2		4	5
Adoption/Foster Care	18.6%	8.3%	25.9%	20.8%	26.4%
Affordable child care	17.4%	3.7%	15.3%	19.0%	47.3%
Enrichment/Clubs/ Scouting programs	16.3%	6.5%	27.1%	17.5%	32.5%
Tutoring/Homework/ Literacy Assistance	13.3%	5.0%	22.1%	20.4%	39.1%
Juvenile crime/ gang/ Dropout prevention	15.4%	4.9%	17.9%	20.5%	41.4%
Early education/ School readiness	14.0%	5.3%	17.5%	19.5%	43.7%
Developmental/ Behav. Counseling	13.9%	5.2%	20.2%	21.6%	39.0%
Family Counseling	14.3%	4.1%	21.1%	23.4%	37.0%
Parent ed/training	13.8%	4.4%	21.3%	21.0%	39.4%
GLBT support	20.3%	7.6%	21.9%	20.6%	29.6%
College prep (ACT/ SAT test prep)	14.6%	6.6%	26.9%	18.8%	33.2%
Teen pregnancy/ sex Ed/ prevention	14.5%	4.7%	17.7%	19.5%	43.6%
Family Violence/child Abuse/prevention/ Treatment	14.4%	4.6%	15.4%	19.0%	46.5%
Recreation/sports	13.3%	6.3%	24.3%	21.2%	34.9%
Drug/alcohol prevention	14.3%	5.5%	17.6%	18.0%	44.5%
Suicide prevention	14.2%	5.5%	19.6%	18.6%	42.1%
Youth employment Assistance	13.5%	6.8%	19.1%	24.0%	36.5%
Mentoring programs	14.3%	6.0%	19.9%	23.0%	36.8%
Early intervention	13.5%	7.8%	19.3%	21.3%	38.1%

Figure 3.L

Please tell us, in your opinion, which services are needed the most by assigning each one a score of 1 to 5, where 1 is the lowest priority and 5 is the highest: **EMPLOYMENT/PERSONAL FINANCE**

Service	Percentage of Respondents				
	Lowest Priority 1	2	3	4	Highest Priority 5
Resume assistance/career Counseling	11.8%	6.8%	27.9%	23.9%	29.6%
Job training	9.6%	3.7%	19.4%	25.5%	41.8%
Technical/skills Training	9.6%	3.0%	20.5%	26.6%	40.2%
Self employment/small Business development	12.8%	8.4%	27.8%	21.3%	29.7%
English as a 2nd Lang./ Citizenship prep	18.9%	8.5%	23.4%	20.2%	28.9%
Skills training for Special needs	12.2%	5.2%	22.2%	23.0%	37.5%
Job placement	9.6%	3.1%	16.1%	26.3%	44.8%
Adult literacy/remedial Ed. Programs	11.7%	7.4%	24.1%	21.9%	34.9%
Life skills/ social Skills training	11.2%	6.9%	22.6%	24.5%	34.8%
Computer literacy	10.0%	5.3%	22.8%	27.9%	34.1%
Credit counseling/ Finan. Literacy/budgeting	2.3%	7.1%	28.4%	23.7%	28.5%
Senior employment Services	17.4%	6.5%	24.8%	23.5%	27.7%
Tax assistance	18.1%	8.8%	29.0%	18.4%	25.7%
GED preparation	15.9%	6.9%	22.4%	22.3%	32.5%

Figure 3.M

Please tell us, in your opinion, which services are needed the most by assigning each one a score of 1 to 5, where 1 is the lowest priority and 5 is the highest: **HEALTH**

Service	Percentage of Respondents				
	Lowest Priority 1	2	3	4	Highest Priority 5
Health prevention/nutrition Education/advocacy	10.1%	5.0%	25.0%	23.8%	36.1%
Counseling/mental Health care	10.6%	4.7%	19.6%	23.5%	41.6%
Emergency health care	8.9%	2.8%	13.9%	21.1%	53.5%
Substance abuse prev/ Treatment	14.2%	4.4%	18.8%	21.3%	41.3%
Chronic illness mgmt/ Services	12.2%	4.5%	17.8%	25.3%	40.2%
Health information/ Referral	10.5%	4.0%	21.9%	28.5%	35.1%
Affordable primary Medical services	7.7%	2.9%	11.2%	18.3%	59.9%
Affordable children's Medical services	12.6%	2.8%	11.0%	17.6%	56.1%
Affordable dental	6.3%	1.8%	11.6%	19.9%	60.4%
Affordable vision	6.9%	2.0%	11.2%	20.0%	59.9%
Services for the Hearing impaired	13.1%	5.0%	22.5%	21.5%	38.0%
Vaccinations/ Immunizations	11.7%	3.0%	18.5%	21.3%	45.5%
Services for the disabled	9.9%	3.7%	19.0%	18.7%	48.6%
Family planning	15.3%	6.6%	24.6%	18.9%	34.6%
HIV/AIDS/STD Services	14.5%	4.8%	19.0%	18.1%	43.6%
Hospice/Palliative Care	13.9%	3.8%	18.5%	23.0%	40.9%
Free/reduced cost Prescriptions/medical Supplies	9.5%	2.3%	13.6%	15.6%	59.0%
Grief support	14.1%	4.6%	20.7%	27.9%	32.8%
Eating disorders/obesity/ Fitness programs	14.0%	7.4%	24.5%	20.6%	33.4%
Safety/CPR/First aid Education/Training	14.2%	4.9%	22.8%	18.7%	39.4%

Figure 3.N

Are there additional services/needs within the community that have not been identified in one of the categories above? If yes, please list.

The responses included:

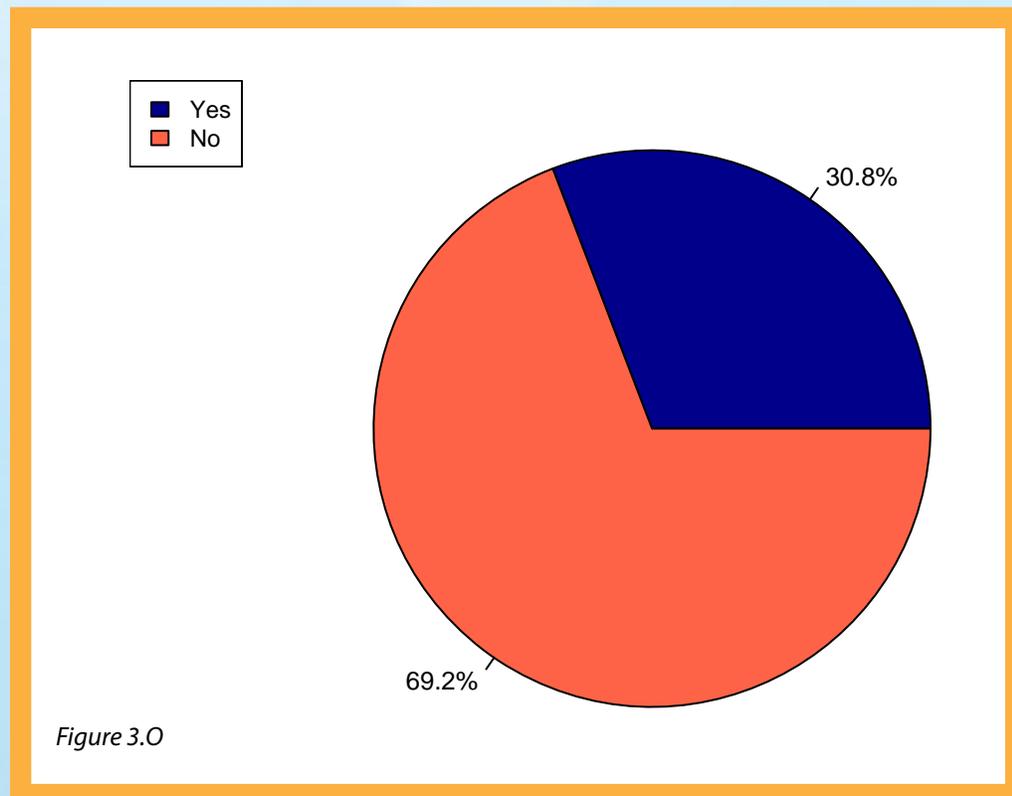
- ◆ "Respite care for parents and caregivers."
- ◆ "Help with housework for elderly that live alone."
- ◆ "More sidewalks (pedestrian) and more encouragement for people to walk and bike."
- ◆ "Teaching computer skills to elderly."
- ◆ "Overlapping public transportation between Sarasota and Charlotte County."

In your opinion, what are the top three issues facing the Charlotte County community?

The top ten issues identified were:

1. **Jobs/training and placement**
2. **Transportation**
3. **Affordable medical care and insurance**
4. Drugs, alcohol and prescription abuse
5. Homelessness
6. Affordable housing
7. Education
8. Senior services
9. Financial and/or benefits assistance
10. Youth programs

Have you ever used 2-1-1 to find a local human service provider?



(this page intentionally left blank for two-sided reproduction)

APPENDIX 4 COMMUNITY CONVERSATION

March 12, 2013 at Charlotte Harbor Yacht Club



Photo provided by Charlotte Harbor Visitor & Convention Bureau

On March 12th, the United Way of Charlotte County, Charlotte County Human Services and the Charlotte Community Foundation hosted a Community Conversation about the human service needs in Charlotte County. Approximately 70 members of the community participated in an exercise to identify the top Strengths, Weaknesses, Opportunities and Threats to the community.

Each small group was given an opportunity to discuss each category and present their lists to the entire group. Each individual then had the opportunity to mark their top 2 priorities for each category. Below are the top 10 priorities, in order from highest to lowest, that emerged in each category.

STRENGTHS:

- ◆ **Willing network of providers**
- ◆ **Good volunteers**
- ◆ **2-1-1 database**
- ◆ **Good school system**
- ◆ **Giving community**
- ◆ **Referrals among agencies**
- ◆ **Homeless coalition/C-3**
- ◆ **Food pantries**
- ◆ **Churches**
- ◆ **Hospitals and doctors who work with Virginia B. Andes community clinic.**

WEAKNESSES:

- ◆ **Transportation**
- ◆ **Economic development – lack of jobs**
- ◆ **Mental health services**
- ◆ **Senior services**
- ◆ **Affordable childcare**
- ◆ **One-stop – case management**
- ◆ **Financial stability services**
- ◆ **Training for jobs**
- ◆ **Access to affordable housing – tie**
- ◆ **Funding cuts – tie**
- ◆ **Lack of communication from agencies to the public - tie**

OPPORTUNITIES:

- ◆ **Economic development**
- ◆ **Community wide grants**
- ◆ **Increase access**
- ◆ **Legal aid**
- ◆ **Use parks/libraries to promote services**
- ◆ **Attract universities**
- ◆ **Public transportation – model like Sarasota’s or combine w/ other counties**
- ◆ **One-stop services**
- ◆ **Use empty buildings for services**
- ◆ **Family Health Center’s partnership with Health Department**

THREATS:

- ◆ **Funding availability/ budget cuts**
- ◆ **Lack of ready work force (High School graduation rates)**
- ◆ **Communication**
- ◆ **Apathy towards change (ex: Increasing taxes)**
- ◆ **Mental health (lack of services)**
- ◆ **Population flight – how to keep younger generation here**
- ◆ **Changing economy and its effect on retirement**
- ◆ **Drugs**
- ◆ **Weather/natural disaster services/response**
- ◆ **Can an aging community still be vibrant? Dwindling “hometown pride” – tie**
- ◆ **Lack of understanding/cultural diversity – tie**

NOTES

NOTES

NOTES



17831 Murdock Circle
Suite A
Port Charlotte, FL 33948
941.627.3539

**United Way
of Charlotte County**

www.unitedwayccfl.org



**CHARLOTTE
COMMUNITY
FOUNDATION**

227 Sullivan Street
Punta Gorda, FL 33950
941.637.0077

www.charlottecommunityfoundation.org



Human Services Dept.
1050 Loveland Blvd.,
Port Charlotte, FL 33980
941.833.6500

www.charlottecountyfl.gov/dept/humanservices

Appendix C: Community Partners

Organization	Category	CSBG-ARRA Program(s)	Total # of Partnerships
Habitat for Humanity	Non-Profit	<ul style="list-style-type: none"> • Financial Education & Referrals • Housing Referrals • Resale Store • Revitalization Efforts • Youth Volunteer Placement 	5
Area Agency on Aging	Non-Profit	<ul style="list-style-type: none"> • EHEAP services • Referrals 	2
Homeless Coalition of Charlotte County	Non-Profit	<ul style="list-style-type: none"> • Shared Referrals 	1
Virginia B Andes Community Healthcare	Non-Profit	<ul style="list-style-type: none"> • Shared Referrals 	1
Florida Center for Early Childhood	Non-Profit	<ul style="list-style-type: none"> • Shared Referrals • Parenting programs 	2
Punta Gorda Elks	Non-Profit	<ul style="list-style-type: none"> • Food for Food Pantry 	1
Charlotte County Classic Cars and Cruisers	Non-Profit	<ul style="list-style-type: none"> • Donations to Food Pantry 	1
Boys & Girls Clubs of Charlotte County, Inc.	Non-Profit	<ul style="list-style-type: none"> • Afterschool Programs • Youth Development Presentations 	2
Charlotte County YMCA	Non-Profit	<ul style="list-style-type: none"> • Child Care • Youth Development Volunteer Site 	2
Manatee County Community Action Agency	Non-Profit	<ul style="list-style-type: none"> • Weatherization Referrals 	1

Appendix C: Community Partners

Organization	Category	CSBG-ARRA Program(s)	Total # of Partnerships
Senior Friendship Centers (RSVP)	Non-Profit	<ul style="list-style-type: none"> • Community Revitalization • Volunteer Recruitment & Engagement 	2
Charlotte Behavioral Healthcare, Inc	Non-Profit	<ul style="list-style-type: none"> • Substance Abuse Counseling • TBOSS Services • Mental Health Counseling • Healthy Start Care Coordination 	4
Big Brothers Big Sisters, Inc	Non-Profit	<ul style="list-style-type: none"> • Youth Development and Mentoring 	1
Keep Charlotte Beautiful, Inc.	Non-Profit	<ul style="list-style-type: none"> • Community Revitalization 	1
Career Source Southwest Florida	Non-Profit	<ul style="list-style-type: none"> • Job Coaching/Counseling • Work Readiness Assessments • Educational Supports • Job Search & Placement • Federal Bonding 	5
Early Learning Coalition of Florida's Heartland, Inc.	Non-Profit	<ul style="list-style-type: none"> • Child Care 	1
Punta Gorda Housing Authority	Non-Profit	<ul style="list-style-type: none"> • Coordination with LIHEAP for Subsidized Housing • Referrals to FSSP • Referrals for Emergency Services • Provides space for Punta Gorda Outreach Office 	4

Appendix C: Community Partners

Organization	Category	CSBG-ARRA Program(s)	Total # of Partnerships
Team Parkside	Non-Profit	<ul style="list-style-type: none"> • Neighborhood Revitalization 	1
Center for Abuse and Rape Emergencies (CARE)	Non-Profit	<ul style="list-style-type: none"> • Referrals to/from FSSP • Referrals for Emergency Services • Youth Volunteer Placement 	3
Charlotte County Healthy Start Coalition	Non-Profit	<ul style="list-style-type: none"> • Referrals to/from FSSP • Referrals for Emergency Services 	2
Englewood Helping Hand	Non-Profit	<ul style="list-style-type: none"> • Referrals to FSSP • Referrals for Emergency Services • Provides space for Englewood Outreach Office 	3
Yah Yah Girls of Southwest Florida	Non-Profit	<ul style="list-style-type: none"> • Backpack Kids Program 	1
Comprehensive Housing Resources	Non-Profit	<ul style="list-style-type: none"> • Financial Literacy Classes • Individual Counseling • Credit Repair • Housing Counseling 	4
AARP Foundation, SCSEP	Non-Profit	<ul style="list-style-type: none"> • Education and Employment Supports 	1
Hearing Impaired Persons	Non-Profit	<ul style="list-style-type: none"> • Literacy • Equipment 	2

Appendix C: Community Partners

Organization	Category	CSBG-ARRA Program(s)	Total # of Partnerships
United Way	Non-Profit	<ul style="list-style-type: none"> • Community Needs Assessment • United Charlotte County Government One Charlotte County Government Health & Human Services Funding 	4
Drug Free Charlotte County	Non-Profit	<ul style="list-style-type: none"> • Reducing Substance Use with Youth • Reducing Substance Use with Adults • Community Initiatives 	3
Parents in Action	Non-Profit	<ul style="list-style-type: none"> • Family Services • Community Involvement • Behavior Assistance • Childcare Assistance • Social Development 	5
Salvation Army	Faith-Based	<ul style="list-style-type: none"> • Care to Share Program 	1
St. Vincent De Paul Society	Faith-Based	<ul style="list-style-type: none"> • Referrals to/from for services 	1
Lutheran Church of the Cross	Faith-Based	<ul style="list-style-type: none"> • Food donations 	1
Genesis Christian School	Faith-Based	<ul style="list-style-type: none"> • Child Care 	1

Appendix C: Community Partners

Organization	Category	CSBG-ARRA Program(s)	Total # of Partnerships
Charlotte County Board of County Commissioners	Local Government	<ul style="list-style-type: none"> • LIHEAP • CSBG • Senior Services • Housing • Transit • Veteran Services • Community Revitalization 	7
20 th Circuit Judicial Court, Charlotte County Clerk of Courts	Local Government	<ul style="list-style-type: none"> • Youth Development • Community Revitalization 	2
Charlotte County Property Appraiser	Local Government	<ul style="list-style-type: none"> • Property Search for eligibility • Serves on CAAAB 	2
Florida Department of Juvenile Justice	State Government	<ul style="list-style-type: none"> • Youth Development 	1
Department of Transportation	State Government	<ul style="list-style-type: none"> • Public Transportation • Transportation for the Disadvantaged 	2
Department of Economic Opportunity	State Government	<ul style="list-style-type: none"> • CSBG • LIHEAP • Education and Employment Supports 	3
Department of Elder Affairs	State Government	<ul style="list-style-type: none"> • OAA • CCE • HCE • Lead Agency • Family Caregiver 	5
Department of Children and Families	State Government	<ul style="list-style-type: none"> • SNAP • TANF • Medicaid 	3
Governor's Office of Appointments	State Government	<ul style="list-style-type: none"> • Appointments to councils 	1
Agency For Healthcare Administration	State Government	<ul style="list-style-type: none"> • Medicaid 	1

Appendix C: Community Partners

Organization	Category	CSBG-ARRA Program(s)	Total # of Partnerships
Guardian Ad Litem	State Government	<ul style="list-style-type: none"> Child Advocates 	1
HUD	Federal Government	<ul style="list-style-type: none"> NSP CDBG 	2
Department of Justice	Federal Government	<ul style="list-style-type: none"> JAG 	1
Health & Human Services	Federal Government	<ul style="list-style-type: none"> CSBG LIHEAP 	2
Henkes & McCoy Youth Connections, Inc.	For-Profit Business	<ul style="list-style-type: none"> Youth Development Employment Supports 	2
Rainbow Painting, LLC	For-Profit business	<ul style="list-style-type: none"> Community Revitalization 	1
Ice Cold Auto Repair	For-Profit Business	<ul style="list-style-type: none"> Transportation 	1
Jim Goff's Garage, Inc.	For-Profit Business	<ul style="list-style-type: none"> Transportation 	1
Coral Ridge Auto & RV, Inc.	For-Profit Business	<ul style="list-style-type: none"> Transportation 	1
Charlotte County Collective (C3)	Housing	<ul style="list-style-type: none"> Education and Employment Supports, Transportation 	3
Affordable Housing Advisory Council	Housing	<ul style="list-style-type: none"> Affordable Housing Transitional Housing 	2
Gulf Coast Partnership	Housing	<ul style="list-style-type: none"> 10 year Plan to end Homelessness 	1
Children's Services Council	Consortium/Collaboration	<ul style="list-style-type: none"> Childcare Youth Development 	2
Community Based Care Alliance	Consortium/Collaboration	<ul style="list-style-type: none"> Childcare 	1
Circuit 20 Juvenile Justice Council	Consortium/Collaboration	<ul style="list-style-type: none"> Youth Development 	1

Appendix C: Community Partners

Organization	Category	CSBG-ARRA Program(s)	Total # of Partnerships
Employment & Human Services Council	Consortium/Collaboration	<ul style="list-style-type: none"> • Employment • Human Services Needs Analysis 	2
One Charlotte	Consortium/Collaboration	<ul style="list-style-type: none"> • 2-1-1 Integration • GIS Resource Mapping 	2
Community Health Improvement Partnership (CHIP)	Consortium/Collaboration	<ul style="list-style-type: none"> • Chronic Disease Prevention • Maternal and Child Health • Mental Health • Access to Care 	1
Charlotte County Public Schools	School Districts	<ul style="list-style-type: none"> • ABE/GED Programs • ESOL Program • TABE Testing • Vocational Programs • Youth Development • Homeless Education Program • Life Skills for Mentally Challenged 	7
Florida Southwestern State College	Institutions of Post Secondary Education/training	<ul style="list-style-type: none"> • Education and Employment Supports 	1
Charlotte Technical Center	Institutions of Post Secondary Education/training	<ul style="list-style-type: none"> • Education and Employment Supports 	1
Calusa National Bank	Financial/Banking Institutions	<ul style="list-style-type: none"> • Financial Education 	1
SunTrust	Financial/Banking Institutions	<ul style="list-style-type: none"> • Income Tax Prep for Low-Income People 	1

Appendix C: Community Partners

Organization	Category	CSBG-ARRA Program(s)	Total # of Partnerships
Florida Prosperity Partnership	State-wide Associations or collaborations	<ul style="list-style-type: none"> • Financial Education 	1
Florida Association Of County Human Services Administration	State-wide Associations or collaborations	<ul style="list-style-type: none"> • Legislative Activity • Professional Development 	2
Florida Association of Community Action Agencies	State-wide Associations or collaborations	<ul style="list-style-type: none"> • CSBG Training 	1
Family Health Centers	Health Care Service provider	<ul style="list-style-type: none"> • Primary Care • Dental Care • Immunizations • Well-Visits • Pharmacy 	5

Community Action Agency Advisory Board (CAAAB) Roster

As of January 2016

Sector: Public

Name	Entity Represented	Mailing Address and E-mail Address	Telephone Number(s)	Date when originally seated on Board	Date when seated for current term	Expiration date of current term
Phil Wickstrom, City Manager's Office	City of Punta Gorda	326 W. Marion Ave. Punta Gorda, FL 33950 pwickstrom@ ci.punta-gorda.fl.us	P: 941-575-3371 F: 941-575-3300	12/2009	01/2016	n/a
Paul Polk, County Property Appraiser	Charlotte County	18500 Murdock Cir. Port Charlotte, FL 33948 paul.polk@ charlottecountyfl. gov	P: 941-743-1470 F: 941-743-1499	12/2012	01/2016	n/a
Stephen R. Deutsch, County Commissioner	Charlotte County	18500 Murdock Cir. Port Charlotte, FL 33948 stephenr.deutsch@ charlottecountyfl. gov	P: 941-743-1300 F: 941-743-1310	12/2010	01/2016	n/a
Alleen Miller, District 4 Charlotte County School Board	CC School Board	1445 Education Way Port Charlotte, FL 33948 alleen.miller@your charlotteschools. net	P: 941-255-0808 F: 941-255-7564	03/2004	01/2016	n/a

Community Action Agency Advisory Board (CAAAB) Roster

As of January 2016

Sector: Private

Name	Entity Represented	Mailing Address and E-mail Address	Telephone Number(s)	Date when originally seated on Board	Date when seated for current term	Expiration date of current term
Angela Solomon, CareerSource of SW Florida	Community-At-Large	1032 Tamiami Trail, Unit 9 Port Charlotte, FL 33953 asolomon@ careersourcesouthwest florida.com	P: 941-235-5900 F: 941-235-5926	12/2015	01/2016	12/2019
Paula Wilman, Punta Gorda Housing Authority	Community-At-Large	340 Gulf Breeze Ave. Punta Gorda, FL 33950 paula@puntagordaaha.org	P: 941-639-4344 F: 941-639-1753	10/2015	01/2016	10/2019
Dianne Munson, Community Advocate and Volunteer	Community-At-Large	3907 Madrid Court Punta Gorda, FL 33950 distan@ comcast.net	P: 941-639-0760	07/2013	01/2016	07/2017
Paul Froeschle, Small Business Owner	Community-At-Large	2548 Baltic Ave. Port Charlotte, FL 33952 pfroeschle@ suncoastvacuum.com	P: 941-979-2891	12/2010	01/2016	12/2018

Community Action Agency Advisory Board (CAAAB) Roster

As of January 2016

Sector: Low Income

Name	Neighborhood Represented	Mailing Address and E-mail Address	Telephone Number(s)	Date when originally seated on Board	Date when seated for current term	Expiration date of current term
Rev. Brian Armen, Faith-Based Leader	East Englewood Zip Code: 34223	551 Rotunda Blvd. Rotunda West, FL 33947 pastor@alivingfaith.org	P: 941-697-3313	07/2015	01/2016	07/2019
Lynn Dorler, Boys and Girls Club	Mid County Zip Code: 33952	21450 Gibraltar Ave. Port Charlotte, FL 33952 ldorler@bgcofcc.org	P: 941-235-2472	09/2015	01/2016	09/2019
Carrie Blackwell-Hussey, United Way	Punta Gorda Zip Code: 33950	17831 Murdock Circle, Suite A Port Charlotte, FL 33948 carrie.hussey@unitedwayccfl.org	P: 941-627-3539	03/2013	01/2016	03/2017
Michael Haymans, Attorney-At-Law	Charlotte Harbor Zip Code: 33980	215 West Olympia Ave. Punta Gorda, FL 33950 michael@mphaymans.com	P: 941-575-0007	01/2012	01/2016	01/2016

CURRENT OFFICER

Name	Position	Date Elected
Michael P. Haymans, P.A.	Chairman	01/2012

**CHARLOTTE COUNTY
COMMUNITY ACTION AGENCY BYLAWS**

ARTICLE I

THE COMMUNITY ACTION AGENCY OF CHARLOTTE COUNTY

SECTION 1. NAME AND POWERS.

A. The Name of this Agency:

The name of this agency will be The Community Action Agency of Charlotte County, a public agency comprised of the Charlotte County Board of County Commissioners, Charlotte County, Florida, and recognized by 42 U.S. C., 9902, *et. seq.*, and Rule 9B-22.001, FAC, as the governing body to carry out the purpose and functions set forth in these bylaws.

B. Delegation of Powers:

The Community Action Agency Board has been delegated such powers as specified by the Board of County Commissioners of Charlotte County. **County Resolution 980570A0** has requested the establishment of the Charlotte County Community Action Agency and Community Action Agency Board. Hereinafter, "County Commission" will mean the Board of County Commissioners of Charlotte County, and "CAAAB" will mean the Community Action Agency Advisory Board.

SECTION 2. PURPOSES OF THE COMMUNITY ACTION PROGRAM AND THE CHARLOTTE COUNTY COMMUNITY ACTION AGENCY.

The Purposes of the Community Action Program and the Charlotte County Community Action Agency are as follows:

- A. To serve eligible residents of Charlotte County, Florida, with Community Services Block Grant-funded programs and programs funded from other sources.
- B. To collaboratively organize all community resources with other agencies to enable low-income persons to become self-sufficient.
- C. To advise the County Commission regarding Community Services Block Grant funded and related programs.

- D. To significantly and meaningfully involve the low-income in developing and carrying out anti-poverty programs as follows:
1. Mobilize public and private resources in support of self-sufficiency programs.
 2. Coordinate efforts throughout the community to avoid duplication, improve service delivery, and relate programs to each other.
 3. Strengthen community planning capabilities by coordinating aid related to poverty elimination, so the different types of aid (through local officials', organizations', and interested and affected citizens' efforts) are more responsive to local needs and conditions.
 4. Better organize the range of services related to low-income needs so that these services are more effective and efficient in helping families and individuals overcome basic problems of poverty, and economic and social deprivation.
 5. Develop and tool programs and projects designed to serve low-income groups with maximum feasible participation of low-income area residents, to best stimulate and take advantage of capabilities for self-advancement.
 6. Involve all segments of the community to eliminate poverty.
 7. Insure maximum feasible participation of the low-income residents in all activities mentioned in this section and all other activities related to eliminating poverty.
 8. Ensure non-discrimination in the provision of all programs, services and activities according to law, including, but not limited to, the Florida Statutes; Section 678(F)(c)(1) of Public Law 97-35, as amended; Titles VI and VII of the Civil Rights Act of 1964; and 45 C.F.R. Parts 84, 86 and 90.

SECTION 3. OFFICE OF THE CAAAB.

The CAAAB's office will be within the Charlotte County Government, as designated by the Community Action Agency of Charlotte County.

SECTION 4. RELATIONSHIP AND POWERS OF THE COUNTY COMMISSION AND THE CAAAB.

A. Relationship:

The CAAAB will be advisory in its relationship to the County Commission, and the County Commission will have the authority to make the final decisions with respect to Community Services Block Grant-funded programs.

B. County Commission Role:

1. Determines (subject to Community Services Block Grant regulations) fiscal, personnel, organization, and program policies.
2. Determines (subject to Community Services Block Grant regulations) overall program plans and priorities for the Community Action Program, including provisions for evaluating progress against performance.
3. Recommends all program proposals and budgets to the Florida Department of Economic Opportunity for final approval.

C. CAAAB ROLE:

1. Oversee the extent and quality of low-income residents' participation in Community Action Programs.
2. Determine (subject to Community Services Block Grant policies) rules and procedures for the CAAAB.
3. Select the officers of the CAAAB.
4. Further, the CAAAB will deliberate upon the following matters pertaining to the Community Services Block Grant and submit written recommendations to the County Commission or County Administrator (as authorized in County Resolution 2001-051) before the County renders a final decision (subject to Community Services Block Grant regulations):
 - a. Major fiscal and program policies.
 - b. Overall program plans and priorities.
 - c. All program proposals and budgets.

- d. All evaluation and assessment studies and reports.
- e. All arrangements for delegating the planning of, conducting, or evaluating a component of the work program.
- f. Requirements that uniform quarterly fiscal and programmatic reports be submitted.

ARTICLE II

COMMUNITY ACTION AGENCY ADVISORY_BOARD MEMBERSHIP

SECTION 1. CAAAB COMPOSITION.

A. Tripartite Nature:

- 1. CAAAB membership will be not less than nine (9) nor more than fifteen (15) and will always be divisible by three (3) except when resignations occur or due to other sudden departures of CAAAB members.
- 2. One-third (1/3) of the members of the CAAAB shall be elected municipal or County government officials, currently holding office, or their representatives. CAAAB members shall be chosen by a majority vote of the County Commission in December of each year. Letters reaffirming the appointment, signed by the elected officials, shall be submitted each year despite the number of years the term runs.
- 3. At least one-third (1/3) of the members of the CAAAB shall be persons chosen in accordance with democratic selection procedures adequate to assure that they are representative of the low-income residents in the area served. Low-income representatives of the CAAAB will be elected at meetings conducted to select low-income representatives.
 - a. These meetings will be announced through two (2) methods:
 - i. At least two (2) public notices in general circulation newspapers and those newspapers serving the low-income community; and
 - ii. Critically placed posters announcing the meeting.
 - b. These meetings will be coordinated with the following:

- i. Community or neighborhood groups whose focus is the betterment of a low-income neighborhood or whose membership is composed primarily of low-income persons;
 - ii. Councils or organizations whose members represent neighborhoods or communities of low-income residents; and
 - iii. County government.
- c. Definition of geographic areas selected for representation.
- i. Representatives of the low-income residents shall be selected from geographic areas defined by the County.
 - ii. The County shall use data collected by the Federal Bureau of the Census and other data that establishes population income levels to identify no more than five (5) geographic areas that contain the highest number of residents eligible for CSBG funding. The County will review the Census data no less than every 10 years to identify and designate geographic areas of lower income populations.
- The Current 2010 Census has identified East Englewood (34223); Punta Gorda (33950); Charlotte Harbor (33980); El Jobean (33953) and Mid-County (33952) with areas of low-income residents.
- d. Method of Election.
- i. A County government staff member or a representative from a group defined in Article II, Section 1.A., 3.b. above shall chair a meeting in the designated geographic area and call the meeting to order.
 - ii. The Chair shall call for nominations for CAAAB representatives.
 - a) Nominees shall not require a second.
 - b) All nominees' names shall be listed in a conspicuous location.

- iii. Each person in attendance shall have only one vote for a representative to fill each vacancy from the defined geographic area.
 - iv. Voters must be at least 18 years of age and be residents of Charlotte County.
 - v. The Chair of the meeting shall call a vote by secret ballot, and the candidate(s) with the highest number of votes shall be the representative(s).
- e. The elected representative(s) of the-low-income residents need not be a member of the entity(ies) listed in Article II, Section 1.A.3.b.i. and ii.
 - f. Such representative(s) need not be low-income themselves.
4. The remainder of the members of the CAAAB shall be members of business, industry, labor, religious, human services, education, or other major groups and interests in the community, appointed by majority vote of the County Commission in December of each year. Interest groups shall be of non-profit status and shall be incorporated and registered with the office of the Florida Secretary of State.
5. Low income individuals, community organizations and religious organizations who feel inadequately represented may petition the CAAAB for membership on the Board by sending a written request to the Chairperson. The Chairperson shall submit all petitions for membership, and any recommendations thereon, to the County Commission, who shall consider such petitions and recommendations and make appointments in accordance with the process outlined in paragraph 4, above.

B. Residency Requirement:

Members of the CAAAB shall be Charlotte County residents. Members shall be selected from the various geographic areas of the County.

- C.** All members will be vetted prior to being seated to ensure they comply with the Community Action Agency's bylaws and that they have not been excluded from doing business with the federal government.

SECTION 2. TERM.

Each member shall be appointed or elected to serve for a term of four (4) years, except that at the inception of the CAAAB, terms shall have different end dates, so that all members will not depart the CAAAB at the same time. Members representing the low-income sector or the private sector shall serve only two (2) consecutive terms; however, members appointed to fill less than a full, four (4) year term may serve two (2) full terms in addition to the initial term.

SECTION 3. REMOVAL OF MEMBERS.

A. County Commission Discretion:

Representatives may be removed from the CAAAB by the County Commission. The CAAAB can petition the County Commission to remove representatives for any reasonable and legitimate cause.

B. Removal Due to Absenteeism:

Any member of the CAAAB who attends less than seventy-five percent (75%) of the CAAAB meetings within a one (1) year period may be removed by the County Commission upon recommendation of the CAAAB.

C. Change in the Representation of Outside Groups:

Any member of the CAAAB who ceases to be a member of the target area group or private community organization that he represents on the CAAAB or any public official who ceases to hold the office which entitles him to sit on the CAAAB shall no longer be a member of the CAAAB.

ARTICLE III

OFFICERS

SECTION 1. OFFICERS.

The officers of the CAAAB shall be a Chairperson, a Vice-Chairperson, and a Secretary.

SECTION 2. CHAIRPERSON.

The Chairperson shall preside at all meetings of the CAAAB. At each meeting, the Chairperson shall submit such recommendations and information as she/he may consider proper concerning the business affairs and policies of the CAAAB.

SECTION 3. VICE-CHAIRPERSONS.

The Vice-Chairperson shall perform the duties of the Chairperson in the absence or incapacity of the Chairperson, and in case of the resignation or death of the Chairperson, the Vice-Chairperson shall perform such duties as imposed on the Chairperson until such time as the CAAAB shall elect a new Chairperson.

SECTION 4. SECRETARY.

The Secretary shall keep the records of the CAAAB, shall act as the Secretary of the meetings of the CAAAB and record all votes, shall keep a record of the proceedings of the CAAAB in a journal to be kept for such purposes, and shall perform all duties incident to this office. County staff may be designated to perform the duties of the Secretary.

SECTION 5. ADDITIONAL DUTIES.

The officers of the CAAAB shall perform such other duties and functions as may from time to time be required by the CAAAB.

SECTION 6. VACANCIES.

The Chairperson may appoint replacements to fill officers' vacancies, with approval of the full CAAAB. Such appointments, if possible, should reflect the composition of the full CAAAB in terms of representation of the public, low-income, and private sectors based on the nominee's availability and willingness to serve.

SECTION 7. ELECTION OF OFFICERS.

If no more than one (1) candidate is nominated for each office, the candidate may be elected by acclamation. If more than one (1) candidate is nominated for an office, then the election for that office must be by ballot.

SECTION 8. TERMS OF OFFICE.

The term of the office for all officers of the CAAAB shall be for one (1) year. Any officer may be re-elected for a second year term by a vote of the full CAAAB.

SECTION 9. REMOVAL OF OFFICERS.

The CAAAB shall have the power to remove an officer upon a two thirds (2/3) majority vote based on ten (10) days prior written notification to the affected officer.

SECTION 10. COMMITTEES

The Chairperson may form such ad hoc committees as s/he may consider proper to carry out the business of the CAAAB.

ARTICLE IV

MEETINGS AND AMENDMENTS TO BYLAWS

SECTION 1. REGULAR MEETINGS.

A. Place and Time:

Regular meetings shall be held on the appointed day of each month or each quarter at such place and hour as the CAAAB may designate. At a minimum, meetings will occur at least once every quarter.

B. Public Notification:

All meetings will be open public meetings. Local media will be notified of meeting time and place, and adequate notice will be provided prior to the scheduled meeting date.

C. Member Notification:

All members shall be notified of the time and place at least seven (7) days, but not more than fourteen (14) days, in advance of each meeting.

D. Minutes:

Written minutes shall be recorded and kept of all CAAAB meetings. A copy of the minutes shall be provided to each CAAAB member before each CAAAB meeting, with the notice and agenda.

E. Quorum:

A CAAAB meeting may not officially take place until the required quorum is present. A quorum shall exist when a simple majority of fifty percent (50%) plus one of the seated CAAAB is present. Only when a quorum of the seated CAAAB is present may a motion be acted upon. Absentee votes shall not count.

F. ROBERT'S RULES OF ORDER:

The conduct and order of the meetings shall be determined by the rules and regulations of ROBERT'S RULES OF ORDER, revised edition.

SECTION 2. SPECIAL MEETINGS.

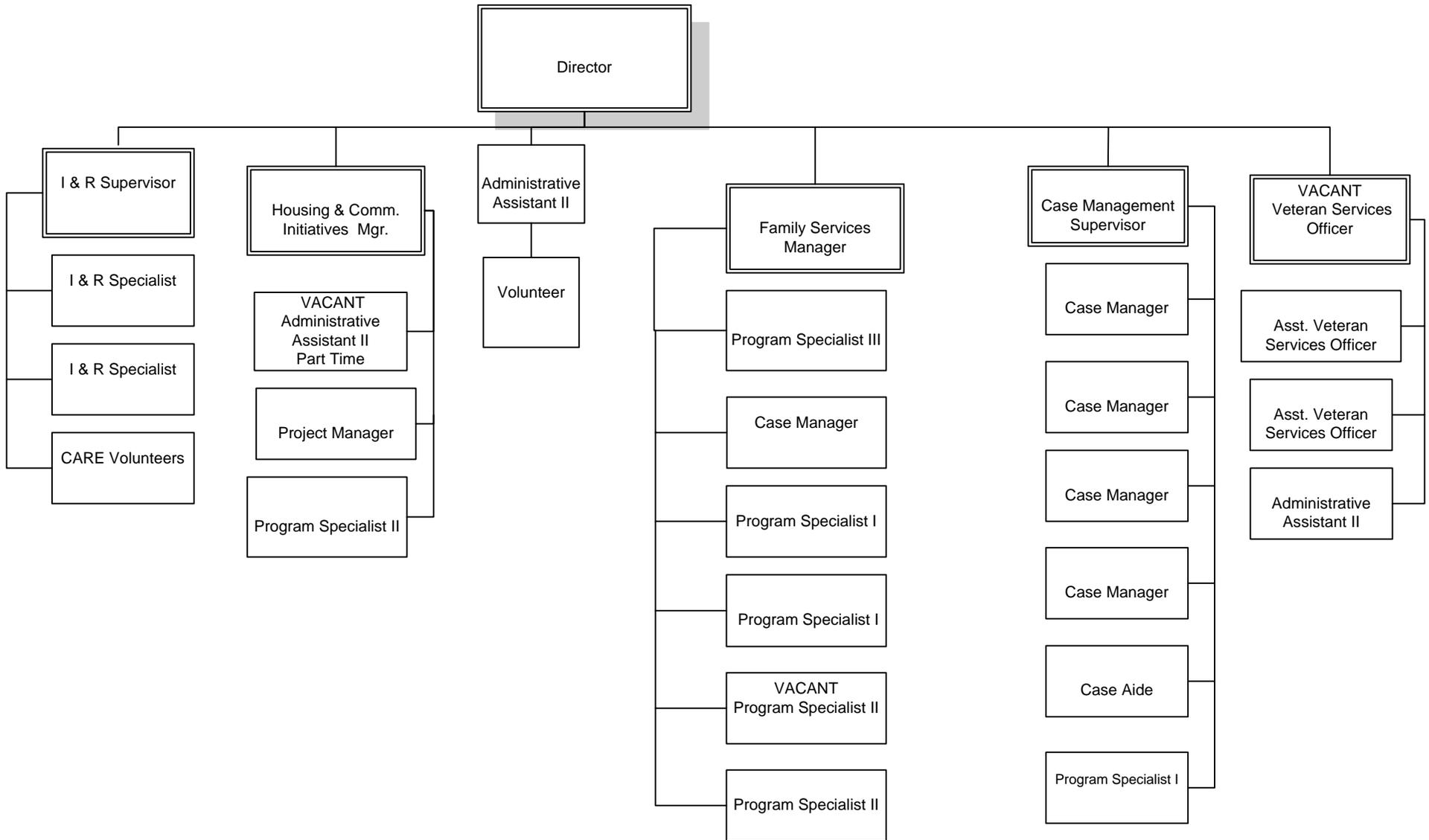
The Chairperson of the CAAAB may call special meetings on her/his own initiative or, upon the written request of five (5) members of the CAAAB. The call for a special meeting shall be received by each member of the CAAB at least five (5) days prior to the date of such special meeting.

SECTION 3. AMENDMENTS.

The Bylaws of the CAAAB shall be amended in the following manner:

- A. Any member desiring a change in the Bylaws shall present such changes in writing to the CAAAB for its review and recommendation.
- B. Said Bylaws shall be amended with approval of two-thirds (2/3) of the CAAAB membership when a quorum is present.
- C. Amended Bylaws shall be submitted to each member of the CAAAB five (5) days in advance of the next regularly scheduled or special call CAAAB meeting.
- D. Amendments must have County Commission approval before they are effective.

Appendix F: Agency Organizational Chart
 Charlotte County Department of Human Services
 12/29/2015



Appendix G: Agency Budget

Human Services

Mission

Human Services---The mission of Charlotte County Human Services is to improve the quality of life by connecting Charlotte County residents with supportive programs and services through community partnerships, advocacy and information.

Linkage to Strategic Goals

Strategic Focus Area: Efficient and Effective Government: Facilitate the organization's capacity to govern and manage effectively in the rapidly changing and challenging environment. **Fiscal/Financial Planning:** Continue to increase the effectiveness of local government and maintain a strong financial condition. **Human Services:** Pursue available funding sources to facilitate providing services to meet community needs.

Core Functions / Current Workload Indicators

FY 15/16 - First Year

Veteran Services:

Provide benefits information and claims assistance to veterans, their dependents, and their survivors through outreach and one-on-one counseling. 1.) Provide regular office hours M-F at two locations: Englewood Annex and Loveland Blvd. Office hours are 7:30 am - 4:30 pm. Provide in-home counseling to disabled and home-bound veterans at their places of residence, including nursing homes and adult living facilities. 2.) Conduct interviews with veterans and their families in person or on the phone and assist in processing veteran claims to bring in new revenue to Charlotte County. In FY 2013/2014, Veteran Services assisted with 18,126 separate claims. In FY 2013, total benefits paid by the Veterans Administration to veterans of Charlotte County was \$112,140 million. 3.) Give presentations to community groups and organizations to provide information on claims and benefits for veterans and their families.

Critical	4.0%	\$254,022
Discretionary	0.2%	\$12,701

Family Services:

Supervise and coordinate activities and compliance with grant funded programs. Ensure program goals and objectives are met and agency is compliant with grant contract, reporting and audit requirements. Currently managing 6 contracts. Provide financial assistance to low-income families. 1,074 households were assisted in FY 2013/2014. In addition to County funds and match, the Dept. receives the federally funded Low Income Home Energy Assistance Program grant, customer donations for water bill assistance through CCU, food pantry donations from the community, and the federally funded Community Services Block Grant Program for family self-sufficiency development.

Critical	33.0%	\$2,095,678
Fed/State Mandat	5.5%	\$349,280
Discretionary	16.5%	\$1,047,839

Senior Services:

Provide ongoing case management services including depression screening and home and community based services to approximately 200 frail or socially isolated seniors monthly. Case Management Services are generally provided Monday through Friday from 8 am to 5 pm. After hours services are provided by arrangement. Emergency Services are provided 24/7 as required by the State for Adult Protected Services' clients.

Critical	19.9%	\$1,263,757
----------	-------	-------------

Housing:

Implement, monitor and evaluate all housing grant programs. 1.) Conduct and fulfill plans for the Neighborhood Stabilization Programs. 2.) Continue to coordinate activities with other county departments and community partners. 3.) Provide support and leadership for the Affordable Housing Advisory Committee.

Critical	16.9%	\$1,073,241
----------	-------	-------------

211

Provides 24 hours 7 days a week information and referral assistance through the 211 call center. Coordinates after regular business hours, weekend and holiday service with volunteer nonprofit agency, Center for Abuse and Rape Emergencies (C.A.R.E.). 6,657 volunteer hours were provided in FY 2014 at a value of \$141,395. Service is provided 24/7 as required by Florida's Agency for Health Care Administration and Florida Statutes.

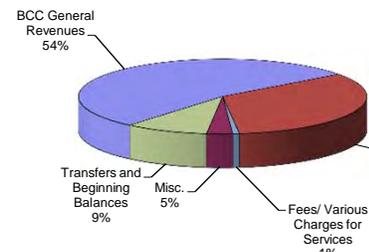
Critical	3.2%	\$203,217
Discretionary	0.8%	\$50,804

Total	100.0%	\$6,350,538
--------------	---------------	--------------------

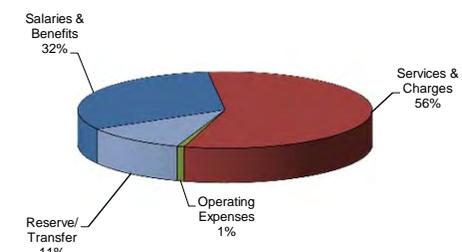
Revenues by Category	FY 13/14 Actual	FY 14/15	FY 15/16	FY 16/17
BCC General Revenues	\$ 3,028,244	\$ 3,151,397	\$ 3,413,275	\$ 3,453,565
Taxes	-	-	-	-
Fees and Assessments	-	-	-	-
State and Federal Revenue	2,162,316	2,047,932	2,113,793	2,077,657
Fees/ Various Charges for Services	47,005	43,983	47,005	47,005
Misc	206,356	270,426	183,996	184,001
Transfers and Beginning Balances	374,356	524,689	592,469	636,567
Total	\$ 5,818,276	\$ 6,038,427	\$ 6,350,538	\$ 6,398,795

FY15/16 Revenues & Expenses

2015/16 Estimated Revenues



2015/16 Budgeted Expenditures



Expenses by Category	FY 13/14 Actual	FY 14/15	FY 15/16	FY 16/17
Salaries & Benefits	\$ 1,796,223	\$ 1,770,751	\$ 1,999,597	\$ 2,081,829
Services & Charges	3,244,936	3,360,782	3,576,362	3,578,035
Operating Expenses	41,141	55,998	50,721	51,209
Capital	-	-	-	-
Other	-	-	-	-
Debt	-	-	-	-
Reserves/Transfers	770,142	854,374	723,858	687,722
Total	\$ 5,852,442	\$ 6,041,905	\$ 6,350,538	\$ 6,398,795

Positions	FY 13/14 Actual	FY 14/15	FY 15/16	FY 16/17
Full Time	28.23	28.23	28.23	28.23
Part Time	1	1	1	1
Seasonal	-	-	-	-
Contract	1	1	-	-
Total	30.23	30.23	29.23	29.23

Notes:

Change in organizational structure in FY 13/14. Transit moved from Human Services and 211 moved into Human Services. The uneven number of positions reflect funding splits between Fiscal and Human Services Grants.