Opioid Settlement Fund Application

OSF-43

Submitted On: Jul 31, 2024

Applicant

Matthew Watts
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Certification

PLEASE CERTIFY THAT YOU HAVE REVIEWED THE SCHEDULE A CORE STRATEGIES AND SCHEDULE B-APPROVED USES

Digital Signature

true

Click here for more information. (https://viewpointcloud.blob.core.windows.net/profile-pictures/Schedule_A-Core_Strategies_Mon_Mar_18_2024_14:56:43_GMT+0000_(Coordinated_Universal_Time).pdf)

Contact Information

Organization Name

HOPE Community Development Corporation

Website (if applicable)

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3043434673

Tax ID Type

TIN

Project Summary

Please provide a narrative overview or summary of your proposal, including but not limited to the following:

1. Brief description of the proposal

The HOPE Community Development Corporation (HOPE CDC) seeks $250,000 from the Kanawha County Commission Opioid Settlement Funds. This funding is needed to finish Phase II of the HOPE Community and Populations Health Public Policy and Poverty Solution Center (HOPE Center) at the HOPE building located at 1039 Central Avenue on the West Side of Charleston. The HOPE Center will be the home for all of HOPE's strategic projects, including the HOPE Workforce Development Connector Center (HOPE Connector) and the HOPE Youth and Family Services Clearinghouse (Clearinghouse). The Workforce Connector and Clearinghouse have been developed over the past 15 years through thorough research, study, analysis, and pilot program development and implementation. These programs are rooted in evidence-based research, which indicates that providing access to job training and employment opportunities, along with comprehensive wrap-around support services that bolster individuals, families and community resiliency, can serve as both a substance misuse prevention and recovery strategy for individuals battling substance misuse disorder.

This project will connect job training and employment and comprehensive wrap-around support services from a broad cross-sector of government, community, and business partners through a strategically aligned system that is strategically connected and aligned with the Kanawha County Workforce Development Board, American Job Center One-Stop. This

project will provide individuals with substance disorders and their families easy access to all the services offered at the American Job Center and their partners.

This project has strong support from the WV State Work for WV office, WV Adult Basic Education, WV Voc Rehabilitation Services, the City of Charleston, WV DHHR, WV Center for Rural Health Development (CRHD), Charleston Job Corps, and WV Community and Technical College Cabin Creek Health Systems, to name a few.

2. Purpose and key anticipated outcomes

The purpose of HOPE Workforce Connector and Clearinghouse is to eliminate barriers that individuals with substance misuse disorder and those at risk of substance misuse encounter to access job training, employment, and comprehensive wrap-around support services along with intensive case management services.
The HOPE Workforce Connector is a HOPE Strategic Project designed to address the economic and workforce development challenges confronting the West Side and its residents. This will be accomplished by fully implementing the 2014 federal and 2016 Workforce Innovation and Opportunity Act (WIOA) legislation for the West Side of Charleston youth and adults. The Workforce Connector will partner with Workforce WV, WIB-KC, WV Voc Rehab Services, WV Adult Basic Education (WVBE), and other partners.
Expected Outcomes: HOPE will support the performance measures established by the local Kanawha County Workforce Development Board. HOPE will keep track of all referrals and individuals and report the measures in accordance with pre-set standards based on the list below:

1. Recruit 250 residents into the HOPE WDC Connector Program
2. Support and train 150 residents in computer literacy and other applicable skills
3. Place 90 trainees into high skilled jobs
4. Permanently retain 59 trainees in their exiting job site
5. Produce and evaluate results of th eproject, lessons learned, and furthr improvements needed or gaps filled

The Clearinghouse aims to coordinate comprehensive wrap-around social services to address barriers that would keep individuals from participating in and successfully job training and entering and maintaining employment. Services to be coordinated will include but not be limited to stable housing, transportation, childcare, utility assistance, food security, domestic violence counseling, and mentoring for children. The Connector/Clearinghouse could be a game-changer for residents.

3. Individuals or communties served

HOPE will target individuals with substance use disorders. This will include individuals referred by Recovery Point, Partnership of African American Churches, Prestera Center for Mental Health Services, Cabin Creek Health Services, and other groups who provide substance misuse treatment and services to individuals with substance misuse disorders.

The HOPE Workforce Connector and Youth and Family Services Clearinghouse will also serve as a substance misuse prevention strategy by targeting individuals and families who are at risk for substance misuse. This will include adults, dislocated workers, low-income at-risk youth ages 14-24 years old, African Americans and other minorities, ex-offenders, single mothers, court-involved youth, youth aging out of foster care, welfare recipients, senior citizens, and other individuals with barriers to employment. This connector will target residents of the West Side and serve anyone who resides in Kanawha County.

4. Amount of funding requested

250000

5. Amount of any bids or cost estimates received to date, if applicable

314440

6. Amount of matching funds raised or committed by your organization

1600000

7. Source of matching funds raised or committed by your organization

DOL Grant to City of Charleston for Operation of HOPE Center -- $500,000 ARPA Funding from City of Charleston -- $500,000 WV Workforce WV In-Kind -- $100,000 Source of Matching funds raised or committed -- HOPE CDC Building and Parking Lot -- $500,000

8. How Opioid Settlement funds, if awarded, will be used

If awarded, the Kanawha County Commission Settlement Funds will be used to renovate/rehab/build out space to house the HOPE Workforce Center & Clearinghouse at 1039 Central Avenue and replace the roof on the HOPE Building located at 1100 Central Avenue in Charleston as outlined by the architecturally designed drawing provided by ZMM Architects and Engineers.

9. Which Core Strategies or approved uses will be met

E. Expansion of warm-hand-off programs and recovery services
4. Provide comprehensive wrap-around services to individuals in recovery, including housing, transportation, job placement/training, and childcare
Approved Uses
B. Support People in Treatment and Recovery
(1) Provide comprehensive wrap-around services to individuals with SUD and any co-occurring SUD/MMH conditions, including housing, transportation, education, job placement, job training, or child care (2) Provide the full continuum of care of treatment and recovery services for OUD and any co-occurring SUD/NfH conditions, including supportive housing, peer support services and counseling, case management, and community-based services. (4) Provide access to housing for people with OUD and any co-occuring SI.-JD/bÆI conditions, including supportive housing, recovery housing, housing assistance programs, training for housing providers, or recovery housing programs that allow or integrate FDA-approved mediation with other support services. (5) Provide community support services, including social and legal services, to assist in deinstitutionalizing' assist conditions for persons with OID and any co-occurring SUD/NfH conditions (8) Provide employment & training or educational services for persons in & treatment for or recovery from OUD and any co-occurring SUD/MH conditions. (10) Engage and support non-profits, faith-based communities, and community coalitions to support, house, and train people in recovery and to support family members in their efforts to support the person with OUD in the family. (14) Create and/or supportrecoery high schools.

C. Connect people who need help to the help they need connect to
12. Create or support school-based contacts that parents can engage with to seek immediate treatment and recovery programs focused on young people.

10. How long it will take you to complete the project if awarded funding

The renovation and rehab construction of the HOPE Workforce Clearinghouse space can be completed within 120 days of the grant award. HOPE CDC has two years of funding for the operational programming of the HOPE Workforce Connector/Services Clearinghouse.

Proposal Details

1. Please describe the problem or need which your project seeks to address

The condition of the West Side of Charleston outlined below makes it a magnet to attract illegal drug trafficking, substance misuse contributing to crime and violence, and unstable and unhealthy families, including children. For years, it has been the center of drug and illegal activity.
The West Side of Charleston's story is one of slavery, segregation, social disintegration, systematic disinvestment, and simple neglect. This has resulted in significant challenges for the community.
The West Side of Charleston story is one of slavery, segregation, social disintegration, systematic disinvestment, and simple neglect. This has resulted in the stunted growth of the West Side community economically, intellectually, educationally, socially, psychologically, and spiritually. This has resulted in a public health crisis on the West Side. The community's stunted growth and public health crisis is most acutely manifested in the lack of motivation and low academic performance of children who attend public schools. These children live in a community characterized by high rates of concentrated poverty, single female-headed households, substance abuse, domestic violence, crime, drug

trafficking, and child abuse and neglect. The high number of over-challenged and overwhelmed families has weakened the community's capacity to create a healthy, wholesome environment for children that would support and encourage high academic achievement. To put it bluntly, the West Side of Charleston community no longer has the family resiliency and strength or the community capacity to produce many high-achieving students. Many children conceived on the West Side began to fall behind at conception. Many are born to women who abuse drugs during their pregnancy, while other children experience adverse childhood experiences. Others have been victims of child abuse and neglect. Far too many of the children have been traumatized. Many of these children have emotional problems, which result in doctors prescribing them medication to control their behavior. Many West Side children lose their birthright of a childhood of innocence at an extremely early age. There is little time for innocence for children who live on the West Side. The public schools on the West Side of Charleston could do more to improve student school attendance and academic performance. However, schools alone cannot overcome the complex social pathology in the homes and community that discourages, de-motivates, and at times crushes the spirits of many of the children who reside on the West Side. The schools are often excoriated as the convenient scapegoats for the children's poor attendance and mediocre academic performance, when in fact, the public schools on the West Side serve as the community's most accurate "social pathological diagnostic centers." That is, the schools diagnose the most severe social pathologies that are most profoundly manifested in the group with the weakest social immune system, the children. For over 60 years, Charleston's primary response to challenges facing the West Side has been increased police presence and more law enforcement. Most would agree that policemen's presence and law enforcement are essential to confront the criminal element in a community, but they alone are not enough. The revitalization of the West Side will require a renewed commitment from each of the major institutions: the home, Church, public schools, city, county, and state governments, non-profit and civic organizations, and private businesses. Each must fulfill its moral, ethical, spiritual, and/or legal responsibilities to the children and the West Side residents. If there is a division of labor and everyone does their part, then the West Side can break and shed the chains that stunts its growth and become a model residential community of health and wellness. The questions that beg for responses are: are the political, social, economic and cultural leaders in Charleston prepared to admit that new ideas need to be tried. And are these leaders willing to sit down at the table of reason as equals with local grassroots leaders to work together to identify and implement the best ideas to move the West Side forward? If so, that would be the beginning of a much-needed New West Side story. Summary of West Side of Charleston, WV Demographics 1. Nearly 18,000 people, 35% of Charleston's population, live on the West Side 2. 27% of all individuals live in poverty 3. 24% of families live in poverty 4. There are nearly 4,000 children who live on the West Side of Charleston. 5. 62% (2,480) of the children are under the age of 12 6. 38% of all children on the West Side live in poverty 7. 52% of All West Side Children under age 5 live in poverty 8. 55% of All Black Children on the West Side live in poverty 9. 82% of All Black Children under 5 live in poverty 10. Annual Per Capita Income for Whites on the West Side is $30,190 11. Annual Per Capita Income for Blacks on the West Side is $13,166 12. 70 % of West Side Students are not reading at grade level 13. 38% (1,520) of all Charleston crimes is committed on the West Side 14. 800 vacant structures exist on the West Side 15. Only 14% of West Side Children live with both parents in the home

2. Please provide the details regarding the design and strategy of your proposal

HOPE Community Development Corporation (HOPE CDC), a 501c3 nonprofit corporation, with support from the Tuesday Morning Group (TMG) and Charleston Branch NAACP, has developed the West Side Revive Movement Model (WSRMM) to improve public health by addressing poverty, substance misuse and other social determinants of health, (i.e., education, job training, employment, housing, economic development, etc.) through comprehensive community development. The WSRMM has been developed over the last decade and a half through in-depth research, from developing, implementing, and executing specific pilot projects on the West Side of Charleston, West Virginia, and from gleaning the best practices from several government-developed initiatives. These initiatives include the federal government's Promise Neighborhood, Choice Neighborhood, Promise Zone, and Byrne Criminal Justice Initiatives, along with reviewing the place-based strategies to address poverty recommended by the National Governor's Association, research conducted by the Center for Disease Control and Harvard University on improving public health by addressing the social determinants of health and recommendations from the American Enterprise/Brookings report: Opportunity, Responsibility, and Security; A Consensus to Addressing Poverty. The 2014 Federal and 2016 State Work Innovation and Opportunities Act (WIOA) law. The unique feature of the WSRMM is that it has both a legislative and programmatic framework, which gives it the flexibility to be used in rural, suburban, and urban communities across West Virginia, which could be applied across the country.

The WSRMM was selected in 2017 by West Virginia Governor Jim Justice's office as the basis for the Governor's Bill -

House Bill 2724, passed by the 2017 West Virginia Legislature. This legislation established §5-26-3 - Creating a Pilot Project in the WV State Code under the direction of the Herb Henderson Office of Minority Affairs. The Pilot Project shall develop a model to promote public health through comprehensive community development in communities across West Virginia. This model shall address poverty, substance misuse, and other social determinants of health, improve housing, improve community and population health, improve labor force participation, and support economic development in rural, suburban, and urban communities across West Virginia. The pilot shall leverage existing resources, including housing and urban development services provided by the federal government and youth, education, and family services offered by the state government and local governments or other local organizations.

The issues of poverty and substance misuse are arguably the two most daunting social challenges facing the State of West Virginia. These two issues are closely related and should be addressed in tandem. Systemic poverty is a major contributor to several of West Virginia's greatest woes, which include substance misuse, poor health, destabilization of families, domestic violence, child misuse and neglect, truancy, poor school performance, school drop-outs, juvenile delinquency, teen pregnancy, crime, prison over-crowding, etc. Despite the well-documented research (compiled by the West Virginia Justice Re-Investment Initiative with support from the Council of State Governments and the Juvenile Justice Reform Commission with support from Pew Charitable Trust), which showed the correlation between poverty, substance misuse criminal activity, and the aforementioned challenges, West Virginia still does not have a well-conceived and developed plan to reduce child and family poverty and to address substance misuse in the context of community. Nor does the State of West Virginia have until the WSRMM a legislative framework and programmatic structure that would facilitate the coordination and effective and efficient execution of all of the federal, state, and local funded programs and services that target low-income children and families and that is designed to address poverty and substance misuse. This lack of a legislative framework and a programmatic structure that would facilitate the coordination and effective and efficient delivery of social services is well documented in West Virginia's Big Picture Spending Summary Report, compiled in 2003 by an inner-governmental taskforce and last updated in 2007. (See attached Big Picture). The Big Picture Spending Summary maps over 252 different funding streams totaling over 6.5 billion dollars in six functional categories: Education, Health Care, Economic Support, Safety and Family Stability, Economic Development, and Community Capacity Building.

It was the premise of this interagency group that many youths in West Virginia were under or over-served by federal, state, local, and private agencies due to the lack of a coordinated, comprehensive planning process that would provide adequate and appropriate resources where they were most needed. This premise was based on the lack of agreed-upon statewide goals for improving service delivery and child well-being, the lack of accountability for reaching programmatic goals, the lack of information about family service needs, and the lack of information about the availability and use of child/family services in West Virginia. State government officials took no specific actions due to the Big Picture Spending Report.

Over the last 15 years, the HOPE CDC has conducted a thorough analysis and in-depth study of the Big Picture Spending Report Summary, the numerous governmental agencies, and the programs and services they provide. In this study and analysis, HOPE CDC discovered that there was a plethora of well-designed and well-funded programs that, for the most part, were being administered by well-trained and well-meaning individuals. However, these efforts did not accomplish the desired outcomes. In many instances, it was difficult even to measure the outcomes. HOPE CDC discovered that everything appeared to break down at the point of service delivery. HOPE CDC likened it to having a computer with all the latest hardware and software but without an operating system to provide the intelligence to connect the various programs to allow them to interact. HOPE CDC concluded that a legislative structure that functioned at the local point of service delivery could serve as the operating system to align, coordinate, and manage programs and services in particular domains and that the legislative structure could coordinate and manage programs and services across domains or functional areas. HOPE CDC, with support from the TMG and the NACCP, has worked with the West Virginia Legislation to develop several pieces of legislation that have been passed and codified into law that could provide a framework to address poverty, substance misuse, and other social determinants of health in both rural, suburban, and urban communities across West Virginia.

3. Please provide your project timeline

Obtain New Competitive Bids - September 2024
Grant Awarded - October 1, 2024

Construction Begin - October 2024
Construction Completed - December 31, 2024
On-going Programming in current space
Expansion of Computer Lab - Q4 2024
Provide Counseling and Placement - Ongoing through 2026

4. Please provide your project's total proposed budget.

Total Project Budget - $750,000

5. Please list any partners in this proposal, and the partner's role and your relationship with them.

The Center for Rural Health Development (CRHD) commits to do the following to support the West Side Revive Movement Initiative (WSRMI) and the HOPE Community and Populations Health and Poverty Solutions and Economic Development Project:
1. Continue to provide consultation and technical assistance in the development of the West Side comprehensive Community Health Improvement Plan CHIP and the HOPE Center.
2. Continue to identify potential resources to support the plan.
3. Other agreed mutually agreed upon projects.
4. Serve as HOPE CDC's fiscal agent as required.
5. Serve on the WSRMI Advisory Board
The Charleston Black Ministerial Alliance (CBMA) is a collaborative of over 40 African American ministers and over 40 local Church Congregations. The CBMA was established over 51 years by local African American ministers to promote racial economic justice and equity. Rev. Matthew J. Watts is a member of the CBMA and serves as the chair-person of the Community Affairs Committee. (CBMA) commits to do the following:
1. Promote the center through the Alliance Churches;
2. Serve on the Center Advisory Team; participate in convening and hosting community meetings at the center.
3. Consider having an office at the center as long as it is affordable.
Cabin Creek Health Systems (CCHS) is the original Federally Qualified Community Health Center established by some local Coal Miners. Cabin Creek Health Systems is one of the most respected Community Health Centers in WV. They are making plans to establish CCHC on the West of Charleston in 2022. Dr. Craig Robinson, CCHS Executive Director, has reached out to HOPE CDC and Rev. Watts and has contracted with HOPE CDC to assist CCHS in connecting their propose planned Center to the West Side of Charleston. Commits to do the CCHS commits to the following:
1. Partner with HOPE CDC to apply for grants to help fund the HOPE Center.
2. Provide HOPE CDC with technical assistance and consultation in developing the Center.
3. To refer clinic patients to the HOPE Center that will benefit from services.
4. Designate a CCHS employee to serve as a member of the West Side Revive Movement Advisory Council.
Community Works of West Virginia is one office Certified Development Financial Institution in WV. Community Works primary focus is the development of safe, affordable single and multi-family housing for low to moderate individuals and families. Community Works also provides homeowner financing and housing rehab financing. commits to do the following:
1. To provide homeownership and financial literacy, counseling and education to West Side residents at the HOPE Center and CWWV Crede Housing Center.
2. To have a satellite office presence at the HOPE Center on the West Side.
3. To assist West Side residents in finding homeownership financing.
4. To purchase lots from HOPE CDC to construct new houses.
5. To serve on the WSRMI Advisory Board.

6. Please identify the anticipated leadership of the proposal and upload/attach their resume(s) or CVs

Reverend Matthew J. Watts
5409 Morning Dove Lane
Cross Lanes, West Virginia 25313
304 776-7223 (Home)
304 342-3249 (Work)

EDUCATION

West Virginia Institute of Technology
Montgomery, West Virginia
Degree: BS. In Civil Engineering – July, 1977

Moody Bible Institute – Chicago Illinois
Correspondence Study and Annual Pastors Conferences

Christian Research and Developing Training Center
Philadelphia, Pennsylvania
Developing the Urban Family Training

Leadership Challenge for Corporate Managers and Advanced Leadership Training for Black Professionals
Union Carbide Corporate Training Center, Danbury Connecticut

WORK EXPERIENCE

September, 1994 – Present Senior Pastor - Grace Bible Church, Charleston, West Virginia
Responsible for all Pastoral duties – Preaching, Teaching, Marriage and Family Counseling, Officiating Marriages and Funerals.

September, 1998 – Present Founded HOPE Community Development Corporation
President/CEO
Faith-Based Organization Working with under privileged and at-risk youth and young adults to overcome some adversities of society.

December , 1988 – September 1994 Ministered at various churches in local and surrounding communities.
Responsibilities included Preaching, Teaching, Visitations, Marriage and Family Counseling, Officiating Marriages and Funerals.

November, 1978 – June, 1993 Union Carbide Corporation – South Charleston, West Virginia.
Senior Cost Engineer
Responsible for preparing cost estimates for projects from 10,000 to 100 million dollars.

Manager, Union Carbide Kanawha Valley Purchasing Dept.
Responsible for 23 member staff in purchasing 120 million dollars of materials for Union Carbide Kanawha Valley locations.

July, 1977 – November, 1978 United States Tennessee Valley Authority – Knoxville, Tennessee
Civil Design Engineer
Design of Cable Tray Support Systems for Nuclear Power Plants.

Highlights of Special Accomplishments

August, 2002 Selected by Congresswoman Shelly Moore Capito to host a luncheon featuring Mr. Jim Towey, Director of the White House Office of Faith and Community Initiatives.

July, 2002 Selected by the Workforce Investment Board-Kanawha County (WIB-KC) to be the sole in-school service provider for the Workforce Investment Act Youth Initiative.

June, 2002 Selected by WV State Secretary of DHHR to serve on the WV State Team to develop a

Comprehensive Youth Development System.

January, 2002 Appointed by Governor Bob Wise to serve on the State Workforce Investment Board.

July, 2001 Selected by the WIB-KC to be the sole service provider for in-school and out-of-school youth in Kanawha County.

April, 2001 Chosen by Congresswoman Shelly Moore Capito to represent West Virginia at the National Faith Based Summit in Washington D.C.

May, 2000 HOPE was awarded the prestigious Washington Times Foundation – "Faith Based Organization of the Year" in West Virginia.

June, 2000 Awarded a grant by the Governor's Workforce Investment Office to work with the local One Stop to assist hard to place individuals in employment.

May, 2000 The HOPE Job Referral Program was recognized by Governor Cecil Underwood at the Governor's Emerging Workforce Summit.

June, 2000 Recognized by the Federal Office for Contractors Compliance for assisting One Valley Bank of WV (now BB&T) with an award for Best Practices.

August, 1999 Selected by Senator Robert C. Byrd to represent the Faith Community at the Building Healthy Communities Symposium held at the West Virginia University Law School.

AWARDS LISTING

1. Concerned Black Men Award

1. Martin Luther King, Jr., award presented by Ebenezer Baptist Church for Stop the Violence Campaign

1. Washington Times Award as the WV Faith Based Initiative

1. Alpha Human Rights Award presented by Alpha Phi Alpha Fraternity, Inc., District of West Virginia

2003 The Gregory Loebach Award for the Support of Education presented by St. Anthony's Parish Charleston, West Virginia

2008	Board of Directors of the National Christian Community Development Association (CCDA)
2010	Team Leader CCDA National Education Advocacy Initiative
2008	Selected by Charleston Urban Renewal Authority (CURA) to Serve As Lead Housing Advocacy Group
2011	Selected by Mayor of Charleston to Head and Develop the Draft Plan for the West Side Comprehensive Housing Plan
2011	Selected by the City of Charleston, CURA and Charleston-Kanawha Housing Authority to Take the Lead and Write the Choice Neighborhood Grant For the West Side of Charleston
2008	Selected by the West Side Community Group to Assume Lead and to Write the West Side Revitalization Plan for the West Side of Charleston
2009	Assisted the West Virginia Legislation in Writing House Bill 2950 to Establish the Neighborhood Housing and Economic Stabilization Program Initiative to Use Housing Rehab Construction and Weatherization as an Economic Development Driver in Low Income Neighborhoods

2010	Assisted the West Virginia Legislature in Writing Senate Bill 2009 Which Established the Community Development School Pilot Demonstration Project on the West Side of Charleston
2011 - 2012	Assisted Delegate Barbara Hatfield and Senate President Jeff Kessler in Drafting Proposed House Bill 2399/Senate Bill 202 - Improving Outcomes for At-Risk Youth Proposed Legislation
2011	Selected by Supreme Court Chief Justice Margaret Workman to Serve on the Adjudicated Juvenile Delinquent Rehabilitation Review Commission

7. Please describe your plan for sustainability of the project or initiative after the grant award has been exhausted

If this grant is awarded, it will provide HOPE CDC with the funds to complete the renovation of the HOPE Workforce Connection Clearinghouse space. HOPE CDC has a $500,000 grant from the City of Charleston to cover staffing programming and operational costs for the next 2.5 years.
The State Workforce WV office has indicated that if the Workforce Connector is successful, the State will continue to provide support. The State Workforce views the HOPE Workforce Connection/Service Clearinghouse as a pilot project that could be replicated in other places. If the Connector is successful in helping place individuals in employment, then HOPE would be able to approach the private sector for funds.

Organization Information

1. Please provide your organization's mission statement.

Mission of HOPE Community Development Corporation
To equip, strengthen and empower families on the West Side of Charleston to lead the culture of health revitalization of the West Side community by executing the West Side Revive Movement Plan (WSRM) a comprehensive plan for the revitalization of the West Side flats area of Charleston.

2. Describe the history of your organization, tell us about your current programs and activities

Organizational History

HOPE Community Development Corporation (HOPE CDC) is a 501 (c) 3 organization that began operating programs in 1994 and was formally established in 1997 by its current President and CEO, Rev. Matthew J. Watts. HOPE is governed by a five (5) member board of directors. HOPE CDC has had consistency in its leadership since its inception. HOPE has a combined staff of 5 people with over 100 years of combined experience of leading comprehensive community development efforts and providing services to low income youth and families. HOPE CDC has an annual budget of roughly $300,000 and assets over $2.5 million dollars. HOPE CDC has become one of the most recognized and respected non-profit organizations in West Virginia that addresses reducing child and adult poverty through comprehensive family and community development by focusing on education, employment and training, economic development, housing, and support services coordination to low income individuals and families.

Overview of HOPE CDC Major Accomplishments 2001 - 2017

2001 - 2004 HOPE designed, developed, and implemented the HOPE Youth Development Movement Initiative. The HOPE Youth Movement is a comprehensive, holistic, integrated model that provides services to youth through a continuum of care. In July 2001, the Kanawha County Region III Workforce Investment Board (WIB-KC) selected HOPE CDC as its largest youth service provider for WIA-eligible youth ages 14-21. HOPE met all the WIA performance goals for literacy, numeracy, graduation, and job placement for over 400 youth from 2001-2004.

2003 - 2004 HOPE CDC was selected as one of eight grantees out of 444 applicants by the US Department of Labor Employment and Training Administration to receive a $350,000 grant to serve as a Grantee Intermediary. This demonstration project enabled HOPE to establish the HOPE Workforce Development Center to serve as a One Stop Satellite Affiliate to coordinate and to connect

the target populations to training, employment, and supportive services. HOPE CDC also met or exceeded all the fiscal goals and performance measures for this grant and was recognized as a best practices program by the U.S. Department of Labor.

2004 - 2009, HOPE CDC partnered with Prestera Mental Health Services to submit. It was awarded a 4-year, 1.7-million-dollar grant from the US Department of Health and Human Services (DHHS) SAMHA Division to establish the "Re-Entering Our Communities Successfully" (ROCS) initiative for incarcerated youth. The goal of ROCS was to improve the success of juveniles returning to the community by providing them with intense case management. HOPE CDC served over 125 youth, met all the performance measures for this grant, and ranked among the top three of the thirty-five (35) grant recipients nationwide.

2009 to present, HOPE established the HOPE Neighborhood Housing and Economic Stabilization Program Initiative (NHESPI) to use housing rehab, upgrades, and weatherization as a job training, employment, and economic development driver for the West Side of Charleston. HOPE has an attractive investment of over $5 million for this project. HOPE CDC has purchased over 60 properties, rehabbed 25 houses, demolished 12 structures, provided classroom and paid on-the-job training experiences for over 110 low-income individuals, and provided over 35 low-income families with safe, affordable housing.

From 2011 to the present, HOPE CDC has assumed the lead role in developing the West Side Revitalization and Transformation Movement Plan (West Side Revive Movement) for the West Side Flats area. This Movement provides a template for the comprehensive redevelopment of Charleston's West Side.

2012 - Reverend Matthew J. Watts and HOPE CDC assisted Delegate Bobbi Hatfield and Senate President Jeff Kessler in getting the WV Legislature to pass and Governor Earl Ray Tomblin to sign into law Senate Bill 611 -- Special Community-Based Pilot Demonstration Project to Improve At-Risk Youth (§18-21-1 through §18-21-4. This legislation called for a comprehensive Youth and Family Services Clearinghouse to coordinate extensive wrap-around services for youth and their families. HOPE CDC was selected as the lead community-based organization by the WV DHHR Secretary.

From 2013 to present, HOPE CDC worked with Governor Earl Ray Tomblin and the WV Legislature to include a Special Community Development School Pilot Project on the West Side of Charleston as a component of Senate Bill 359-18-3-12, education reform legislation passed by the WV legislature. HOPE CDC was selected as the lead CBO.

2015 - HOPE CDC led an effort to get the WV Legislature to pass Senate Bill 582 - The West Side Revive Movement Comprehensive Plan that would have established the West Side Revive Movement as a Demonstration Pilot Project to address child and adult poverty and other social determinants of health in the context of comprehensive community development. Both houses of the WV Legislature voted unanimously to pass the bill. However, Governor Earl Ray Tomblin vetoed the bill because of a minor philosophical difference.

2015 - HOPE CDC submitted the West Side Revive Movement Comprehensive Plan to the West Virginia Center for Big Ideas, located in the WVU President's office, as a possible Big Idea for the center's consideration. WVU President E. Gordon Gee selected the West Side Revive Movement as one of four community revitalization ideas for which the Center would provide consultation and technical assistance.

2016 - HOPE CDC worked with Dr. Rahul Gupta, Commissioner of the West Virginia Bureau of Public Health and members of the West Virginia legislature to draft a bill that would establish the West Side of Charleston as a demonstration community to develop a Minority Healthy Advisory Team (MYHAT) as a structure to improve community and populations health and address, health disparities by addressing the social determinants of health including poverty and substance abuse.

2016 - HOPE CDC was awarded a $60,000 grant from the West Virginia Division of Justice and Community Services to support the establishment of the HOPE Youth and Family Services Disproportionate Minority Contact Project (DMC) as a strategy to reduce the number of minority youth with contact with the Kanawha County Juvenile Justice System.

2017 - HOPE CDC developed the draft for what would become the Governor's Bill (House Bill 2724) that the House Speaker and Senate President would introduce in the WV Legislature. The Bill passed both houses with overwhelming support. House Bill 2724 authorized the Director of the Herbert Henderson Office of Minority Affairs to establish a Pilot Project to serve as a model to promote public health in communities across West Virginia. The model shall address poverty, substance abuse, and other social determinants of health, improve community and population health, improve labor force participation, and support economic development through comprehensive community development in rural, suburban, and urban communities. The Governor's Bill (House Bill 2724) is based on the West Side Revive Movement developed by HOPE CDC with support from the Tuesday Morning Group.

2018 – 2019 – HOPE CDC conducted research and analysis of West Virginia School Discipline data, which brought school discipline to the public's attention.

2020 – HOPE CDC worked with the WV Legislature to develop the draft of SB 723, the Relation to School Discipline bill, which passed into law.

2021 – 2022 -HOPE CDC was awarded ARPA funding from the City of Charleston to renovate office space for HOPE Workforce Connection along with funding to staff the Center

2023 – 2024 – HOPE CDC assumed the lead role with the Center for Rural Health Development in coordinating the development of Wild Wonderful Healthy West Side Revive Comprehensive Health Improvement Plan

3. List any federal, state, local or private grant awards or funding received in the last three years and the current status of those funds. If your organization has previously received funds from Kanawha County, please list the amount, nature of the project(s) and current status of the funding and project(s).

1. American Rescue Plan Act Funds for the City of Charleston – Active
2. U.S. Department of Labor Grant through City of Charleston – Active
3. Connector for Clearinghouse Bridge (Center for Rural Health Development) – Active
4. The Greater Kanawha Valley Foundation (Youth Grant) - Active

4. Please list your Owner(s), Board of Directors, senior staff members, or other key members of your organization:

Board of Directors
2022 - 2024

Mr. Ricardo Martin - President
Term Dates: 2017 - Present

Mr. Kenneth Hale -- Board Vice President
Term Dates: 2015 - Present

Mr. Orlando Craighead -- Secretary
Term Dates: 2018 – Present

Mr. James Rollins -- Treasure
Term Dates: 2018 – Present

Mr. Robert Hardy – Member
Term Dates: 2023

Senior Staff
Reverend Matthew J. Watts, President & CEO
Edward Gordon, Project Manager

5. Please list the staff involved with this project and describe their roles and responsibilities:

Reverend Matthew J. Watts, President & CEO will work with the support organizations and agencies to refine and customize a curriculum for the develoopment of employability skills to be utilized for our project participants. Supervison of other staff.

Edward Gordon, Project Manager will work to provide oversite of the construction projects and review competitive bids for accuracy for completion of the project as per the architectual design,

Traci Phillips, Case Manager will work along side residents to assist in their efforts for landing employment. This includes providing support to residents and redirecting them to appropriate resources that will help remove barriers to achieving employment. The Case Manager will also coordinate with the Job Developer to help place residents in jobs appropriate to their applicable skills.

Justin Phillips, Job Developer will work to help place West Side Residents in longstanding positions of emmployment. SPecifically, the Job Developer wil work alongside the Case Manager and Project Partners to identify employer needs and fit residents withh jobs that tailor to ther applicable skills and advocate for their placement.

6. Please upload/attach the following financial documents, if applicable:

Cash flow statement for applicant's most recent fiscal year

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Two years of audited financial statements

3689

Current operating budget

3690

If the applicant has not been audited, please include an unaudited balance sheet and income statement as prepared by the applicant

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7. If you have made an application for funding for this project from other sources (city, state, private or non-profit organizations) please list the same here.

No other applications are pending

8. Please describe three significant accomplishments of your organization within the last three years

HOPE CDC lead and coordinated the development of the Wild Wonderful Healthy West Side Comprehensive Community Health Improvement
Assisrted over 15 low-income residents successfully complete their renters' assistance application
Assigned 25 individuals complete theirt Homeowner Rescue Application
Assisted the WV Legislature in developing the Relating to School Discipline law which brought the issue of student school disciple to the attention of the public
Assisted West Side Together compile a comprehensive list of needs and gaps in resource for West Side residents through a door-to-door survey

Supplementary Information

1. Please enter contact information (name, email, and phone) for at least one third-party reference.

Ms. Elaine Darling, MDH, Co-CEO Director of Program
elaine.darling@WVRuralHealth.org (mailto:elaine.darling@WVRuralHealth.org)
304-397-4071

Mr. Robert Dearing, MBA, Co-CEO/CFO
robert.dearing@WVRuralHealth.org (mailto:robert.dearing@WVRuralHealth.org)
304-397-4071

2. Please include any supplementary information or documentation (such as letters of support, newspaper articles, etc) which you feel will be essential to the County's review.

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