



**Community Services Block Grant
Semiannual Program Report**

Due August 20 for July 1 – December 31

Please submit using the DOLA Grants Portal: https://dola.colorado.gov/grants_portal/

Grantee Agency Name: Arapahoe County Community Resources
Name and Title of Person Completing this Report: Linda Haley
Phone and e-mail address: 303-738-8089 lhaley@arapahoegov.com

Reporting Period: (Check which reporting period this report is applicable to)

- January 1 – June 30 Year x
- July 1 – December 31 Year

Period Reporting

1. On what date/s did your tripartite board meet during this reporting period? (Attach a copy of all meeting minutes that occurred during the reporting timeframe) 1/22/20 and 4/22/20
2. Were there updates or changes to the Tripartite Board during this reporting period? If so, please explain: One client representative resigned in May due to the health of a family member.
3. Is your tripartite board composition in compliance with the CSBG Act? Yes/ No Currently we are down two low income reps. While it is always difficult to recruit people, Covid 19 has made it more difficult than usual. We have been trying to recruit through current board members, two housing authorities have posted fliers for us and it is posted on the County Boards and Commissions website. We tend to receive a lot of non-low income interest from people who think they can “fix” the low income people in their community by their participation.
4. Please identify any problems encountered during the reporting period, and include what actions your organization has taken or plans to take to resolve the issue: We have had some challenges with our database. Our original plan was to use HMIS for our housing program and staff went to training and began using it in January. However, it became clear that the people we are serving, due not fit the HMIS model and it was very time consuming to use and didn't really provide what we needed or what they had indicated it would provide. We have been working with our IT Dept. to improve our internal database for the time being.
5. You may request training or technical assistance from DOLA at any time. If you would like to request assistance at this time, please indicate your needs here. Please be specific. Nothing at this time.
I hereby certify to the best of my knowledge and belief that the information in this report, including any supplemental information, is true and correct.
6. Signature and Date:
Name of Responsible Administrator (Please Print)