



## QUAY COUNTY GOVERNMENT

300 South Third Street

P.O. Box 1246

Tucumcari, NM 88401

Phone: (575) 461-2112

Fax: (575) 461-6208

**AGENDA**  
**REGULAR SESSION**  
**QUAY COUNTY BOARD OF COMMISSIONERS**  
**February 23, 2015 (Postponed due to weather)**  
**Rescheduled for February 27, 2015**

**9:00 A.M. Call Meeting to Order**

Pledge of Allegiance

Approval of Minutes-Regular Session February 9, 2015

Approval/Amendment of Agenda

**Public Comment**

**Ongoing Business-None**

**New Business**

- I. Chris Tokarski, Mental Health Resources**
  - Discussion of 2015 Changes to Services and Funding
  
- II. Bryan Rinestine, Quay County DWI Coordinator**
  - Request Approval of FY16 DWI Grant Application and 2014-2015 Resolution No. 29
  
- III. Russell Shafer, Quay County Sheriff**
  - Request Approval of FY16 Law Enforcement Protection Funding Application
  
- IV. Larry Moore, Quay County Road Superintendent**
  - Road Update
  
- V. Richard Primrose, Quay County Manager**
  - Correspondence



**VI. INDIGENT CLAIMS BOARD**

- Call Meeting to Order
- Request Approval of Indigent Minutes for the January 26, 2015 Meeting
- Review February Claims Presented by Julie Lafferty
- Adjourn

**VII. Request Approval of Accounts Payable**

**VIII. Other Quay County Business That May Arise During the Commission Meeting and/or Comments from the Commissioners**

**Adjourn**

*Lunch- Time and Location to be Announced*

**REGULAR SESSION-BOARD OF QUAY COUNTY COMMISSIONERS**

**February 27, 2015**

**9:00 a.m.**

BE IT REMEMBERED THE HONORABLE BOARD OF QUAY COUNTY COMMISSIONERS met in regular session the 27th of February, 2015, at 9:00 a.m. at the Commission Chamber, Tucumcari, New Mexico for the purpose of taking care of any business that may come before them.

**PRESENT & PRESIDING:**

Sue Dowell, Member  
Mike Cherry, Member  
Richard Primrose, County Manager  
Veronica Marez, Quay County Clerk

**OTHERS PRESENT:**

Larry Moore, Quay County Road Supervisor  
Stephen Hansen, Quay County Sun  
Cheryl Simpson, Quay County Managers Office  
Russell Shafer, Quay County Sheriff  
Russell Braziel, KTNM Radio Station

The meeting was called to order by Commissioner Cherry. Russell Braziel led the Pledge of Allegiance.

A MOTION was made by Sue Dowell, SECONDED by Mike Cherry to approve the minutes from the February 9, 2015 regular commission meeting. MOTION carried. Copy of said minutes is attached and made a part of these minutes.

**Commissioners Voted:**

McCasland – “ABSENT”                      Dowell – “YES”                      Cherry – “YES”

Chris Tokarski rescheduled for March 9 and Richard Primrose will be requesting approval for Quay County DWI grant application for Bryan Rinestine.

A MOTION was made by Mike Cherry, SECONDED by Sue Dowell to approve the changes to agenda. MOTION carried. Copy of said agenda is attached and made a part of these minutes.

**Commissioners Voted:**

McCasland – “ABSENT”                      Dowell – “YES”                      Cherry – “YES”

PUBLIC COMMENT: None

ONGOING BUSINESS: None

OLD BUSINESS: None

NEW BUSINESS:

Richard Primrose, Quay County Manager requested approval of FY16 DWI Grant Application on behalf of Bryan Rinstine, Quay County DWI Coordinator. A MOTION was made by Sue Dowell, SECONDED by Mike Cherry to approve the FY16 DWI Grant Application. MOTION carried.

Commissioners Voted:

McCasland – “ABSENT”

Dowell – “YES”

Cherry – “YES”

Russell Shafer, Quay County Sheriff requested approval of FY16 Law Enforcement Protection Funding Application. A MOTION was made by Sue Dowell, SECONDED by Mike Cherry to approve the application. MOTION carried.

Shafer presented the February activity report. A copy of the report is attached and made a part of these minutes.

Commissioners Voted:

McCasland – “ABSENT”

Dowell – “YES”

Cherry – “YES”

Larry Moore, Quay County Road Superintendent presented the following report.

1. Crews are checking area in San Jon.
2. Blade men are checking roads in their assigned areas.
3. The CDBG project that Quay County submitted had a setback. NMDOT Environmental Development Section informed Moore, though the project is supported solely by state and local funding, the culvert will be placed in a Waters of the U.S. and falls under the authority of the U.S. Army Corps of Engineers requiring a 404 Clean Water Act permit. In all probability a Nationwide Permit will be applicable, however depending on how much fill will be placed within the Ordinary High Water Mark the County may need to file a Pre-Construction Notice with the Corps. The Corps will also require NEPA and NHPA compliance. The plan sheet also indicates that the existing tree line between the culverts will be demolished. Cultural and biological resource surveys will be required.
4. Moore will be using the 2015-2016 School Bus Project and Coop Project funds to finish Quay Rd 63 up to Quay Rd AR.

5. Crews fixed pot holes.
6. The LGRF RPO meeting that was scheduled today in Las Vegas was rescheduled for March 5.
7. Crews repaired and cleaned cattle guards on Quay Rd 46.
8. Moore asked Dave Gonzales, NM DOT if he could use caliche chips on top for chip sealer, waiting on answer.

Richard Primrose gave the following County Manager's Report:

CORRESPONDENCE:

1. Primrose received a letter from Harding County informing him they will not be signing the MOU trade agreement between the two counties due to the various objections from landowners in the Nara Visa area. They said do not hesitate to approach Harding County on other projects of this nature.
2. Commissioner Cherry gave the NMAC Board Report of Legislative priorities that are important to Quay County.
3. Received an email from Representative Dennis Roch informing him that HB468 and HM 74 are both scheduled to be heard in the House Ag, Water, and Wildlife Committee on Wednesday, February 25, at 8 a.m. and would appreciate any help.
4. Received a letter from James Chavez, NMCIA Loss Prevention on Quay County safety inspection informing him of safety hazards which were identified during this inspection.
5. El Llano Estacado will be having a meeting at Village Hall in Logan on March 4, 2015 at 10:00 a.m.
6. Presented the February Gross Receipt Tax Report
7. Danny Estrada tried getting additional quotes for handicap ramp on north side and received one more quote but no response from other requests.
8. Primrose sent Commissioners a draft copy of 40 year water plan, they are having a public hearing to get comments from the public on March 9<sup>th</sup>.
9. Received and recorded the final plat for changes to Ute Lake Ranch.
10. March 19 The New Mexico Department of Transportation Commission will be in Tucumcari. The EDC and Chamber will provide them with a dinner on March 18<sup>th</sup>. Hoping to do a presentation thanking them for money that received from LGRF, talk to them about bridges on route 66, and funding for bridge on 54
11. PDS will be showing a demo of the Electronic agendas on Wednesday March 4.

Commissioner Dowell said what she would like to put above electronic Agenda would be improvement to Quay County website. She would like them to consider putting up a Facebook page for the county.

12. Primrose attended a NEPA workshop that was attended by Soil and Water Conservation on February 20.
13. Jared Langenegger, City Manager will be having a joint city and county job fair on April 29 at the Convention Center.

14. Tuesday Homeland Security talked to Curtis Simpson about getting all his NIMS training done. He has been finishing a lot of his training.

Commissioner Cherry requested a 10 minute break. Time noted 10:00 a.m.

A MOTION was made by Mike Cherry, SECONDED by Sue Dowell to go into session as the Indigent Claim Board. MOTION carried. ROLL CALL; Cherry voting "aye", Dowell voting "aye", McCasland voting "absent". Time noted 10:15 a.m.

-----INDIGENT CLAIMS BOARD-----

Return to regular session. Time noted 10:20 a.m.

CHECKS WERE REVIEWED.

A MOTION was made by Sue Dowell, SECONDED by Mike Cherry to approve payments. MOTION carried. A copy of the expenditure report is attached and made a part of these minutes.

Commissioners Voted:

McCasland - "ABSENT"

Dowell - "YES"

Cherry - "YES"

Under Other Business That May Arise During the Commission Meeting and/or Comments from the Commissioners. Commissioner Dowell thanked Russell Braziel and Stephen Hansen for doing a great job at getting the information out to the public. Commissioner Cherry thanked Stephen Hansen for the great article about the Lesser Prairie Chicken.

There being no further business, a MOTION was made by Sue Dowell, SECONDED by Mike Cherry to adjourn the regular meeting of the Board of Quay County Commissioners until the next regular meeting set for March 9, 2015 unless sooner called. MOTION carried.

Commissioners Voted:

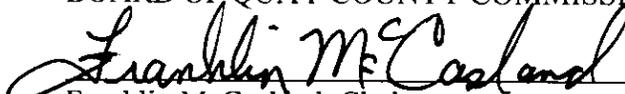
McCasland - "ABSENT"

Dowell - "YES"

Cherry - "YES"

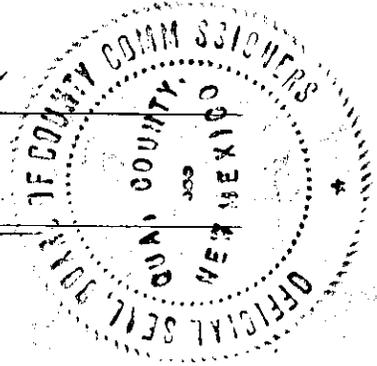
Time noted 10:25 p.m.

BOARD OF QUAY COUNTY COMMISSIONERS

  
Franklin McCasland, Chairman

*Sue Dowell*  
Sue Dowell, Member

*Mike Cherry*  
Mike Cherry, Member



ATTEST:

*Veronica Marez*  
Veronica Marez, Quay County Clerk

**Grant/Distribution Funding Application Cover Sheet  
Local DWI Grant Program  
Local Government Division - DFA**

County/Municipality: Quay Application Date: \_\_\_\_\_

**Project Contact Person:**

Name: Bryan Rinestone  
Address: PO Bx 1011  
City, Zip: Tucumcari, NM 88426  
Telephone: 575-461-6096  
E-Mail: quaydwi@plateautel.net  
Fax: 575-461-0645

**Fiscal Agent:**

Contact Person: Richard Primrose  
Mailing Address: PO Box 1246  
City, Zip: Tucumcari, NM 88401  
Telephone: 575-461-2112  
E-Mail: richard.primrose@quaycounty-nm.gov  
Fax: 575-461-6208

**Categories of Program Areas to be Addressed by Proposed Project**

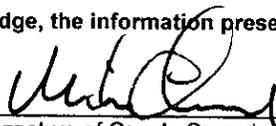
[Indicate amounts budgeted for each program area.]

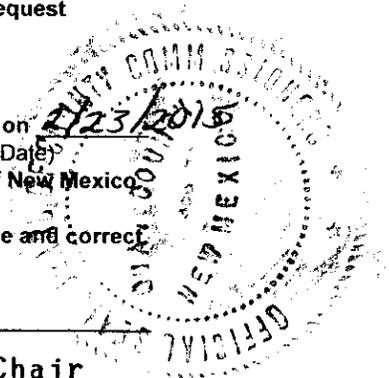
	<u>Grant</u>	<u>Distribution</u>	<u>Component Total</u>
Prevention	<u>17,264.00</u>	<u>18,581.00</u>	<u>35,845.00</u>
Enforcement	_____	_____	-
Screening	_____	_____	-
Domestic Abuse	_____	_____	-
Treatment	_____	_____	-
Compl. Mtr./track	_____	<u>41,531.00</u>	<u>41,531.00</u>
Coord/Plan& Eval.	_____	<u>15,888.00</u>	<u>15,888.00</u>
Alt. Sentencing	_____	_____	-
HB16 funding	_____	<u>9,500.00</u>	<u>9,500.00</u>
Total	<u>17,264.00</u>	<u>85,500.00</u>	<u>102,764.00</u>
	<b>Total Grant Request</b>	<b>Total Distrib. Request</b>	<b>Total Program Request</b>

**Certification:**

The attached resolution adopted by the governing body of Quay on 2/23/2015  
(Applicant) (Date)  
authorizes the applicant to file this application for assistance from the State of New Mexico

To the best of my knowledge, the information presented in this application is true and correct.

  
\_\_\_\_\_  
Signature of County Commission Chairperson or Mayor  
**Mike Cherry, Acting Commission Chair**



# TABLE OF CONTENTS

ADD PAGE NUMBER

## Section One: Signed Forms

Application Cover Sheet .....	1
Table of Contents .....	2
Resolution .....	3
Statement of Assurances .....	4-6
Memorandum of Understanding .....	7-8
DOH Assurances and Cooperative Agreement .....	9-10

## Section Two: Application Forms

Statewide Long Term Goals .....	12
Grant Funding Request .....	12
Statistical Analysis/Reason for Component Selection .....	12
Gaps, Needs, and Community Participation .....	13-14
Additional Program Narrative .....	15
HB16 funds .....	15-18
Budget Justifications:	
Prevention .....	20
Enforcement .....	21
Law Enforcement Funding Application .....	22
Screening .....	23
Domestic Violence .....	24
Outpatient/Jail-Based Treatment .....	25
Treatment Questionnaire .....	26
Compliance Monitoring/Tracking .....	27
Coordination, Planning, and Evaluation .....	28
Alternative Sentencing .....	29
Contingency Program/Capital Outlay Plan .....	30
Local DWI Program Personnel .....	31
County/City Personnel .....	32
Local DWI Planning Council Members .....	33-34

## Section Three: Budget and Appendices

Budgets (Exhibit C Roll-up and Component Pages) .....	35-40
County Logic Model .....	41-42
Letters of Support .....	43-
Additional Law Enforcement Applications (If Necessary) .....	
Additional Treatment Questionnaires (If Necessary) .....	

COUNTY OF QUAY  
Resolution No. 29

**A RESOLUTION  
AUTHORIZING THE COUNTY TO SUBMIT AN APPLICATION TO THE DEPARTMENT OF  
FINANCE AND ADMINISTRATION, LOCAL GOVERNMENT DIVISION TO PARTICIPATE IN  
THE LOCAL DWI GRANT AND DISTRIBUTION PROGRAM.**

**WHEREAS**, the Legislature enacted Section 11-6A-1 through 11-6A-6 NMSA 1978 as amended to address the serious problems of Driving While Intoxicated in the State; and

**WHEREAS**, a program is established to make grant and distribution funding available to counties and municipalities for new, innovative or model programs, services or activities to prevent or reduce the incidence domestic abuse related to DWI, DWI, alcoholism and alcohol abuse; and

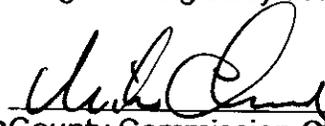
**WHEREAS**, the county DWI planning council and other governmental entities approval must be received in order to apply for grant and distribution funding; and

**WHEREAS**, the County along with participating agencies is making application to the Department of Finance and Administration, Local Government Division for program funding.

**NOW THEREFORE, BE IT RESOLVED** by the governing body of the Quay County that the County Chairperson on behalf of the County and all participating entities is authorized to submit an application for Distribution and Grant  
(DISTRIBUTION AND/OR GRANT)

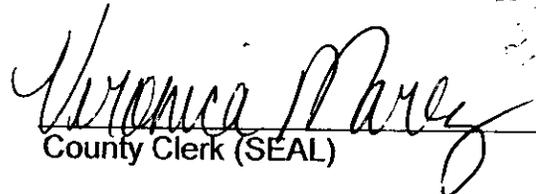
FY16 program funding under the regulations established by the Local Government Division.

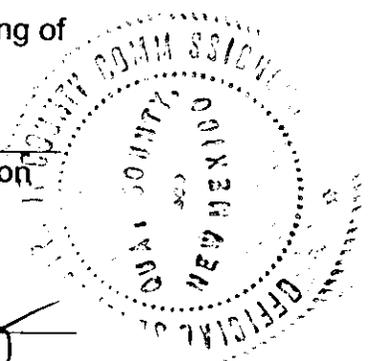
**APPROVED AND ADOPTED** by the governing body at its meeting of February 23, 2015.

  
ACTING County Commission Chairperson

Attest:

\_\_\_\_\_  
DWI Planning Council Representative

  
County Clerk (SEAL)



**STATEMENT OF ASSURANCES**  
**Local DWI Grant and Distribution Program**  
**Project Year 15: July 1, 2015 – June 30, 2016**

The applicant hereby assures and certifies compliance with the following statutes, rules, regulations, and guidelines associated with the acceptance and use of funds under the New Mexico Local DWI Grant and Distribution Program:

1. Compliance with the provisions of the New Mexico Local DWI Grant Program Act, Sections 11-6A-1 through 11-6A-6 NMSA 1978 as amended, the regulations, and the approved LDWI Guidelines.
2. The applicant has the responsibility and legal authority to receive and expend funds as described in the grant and distribution project description, as well as to finance the grantee share (if any) of costs of the project, including all project overruns.
3. Compliance with the State Procurement Code, with the exception of Home Ruled Governments, and submission of all related procurement documents to the Local Government Division for administrative review and approval, prior to execution, including, but not limited to: requests for professional services (RFPs); advertisements; minutes of pertinent meetings; contract selection and award criteria. All project-related services, activities or programs done through a service provider must be implemented through a professional services contract. Any project-related contract, subcontract, or agreement and related amendments, providing services to the grant or distribution program, must be submitted for administrative review by the Division prior to execution.
4. Adherence to all financial, accounting, and reporting requirements of the Department of Finance and Administration. Distribution programs will include with each quarterly narrative progress report the Grant Fund Agreement Exhibit F, The Local DWI Distribution Program Financial Status Report. Grant programs will include with each quarterly narrative progress report the Local DWI Program Request for Payment/Financial Status Report, Exhibit D. The said reports shall contain narrative and/or bulleted highlights of accomplishments and/or problems and delays encountered to date, a detailed budget breakdown of expenditures to date, a summary of any fees collected and/or expended, the Managerial Data Set, Planning Council meeting agendas and minutes, and such other information following the objectives of the county's evaluation as may be of assistance to the Division in its evaluation.
5. Compliance with the requirement to not budget, nor expend, any of the grant amount awarded or the amount distributed for **indirect administrative costs** incurred during the grant or distribution fiscal period. Requests for payment or financial status reports shall document all direct program administrative expenditures and in-kind/match administrative expenditures.

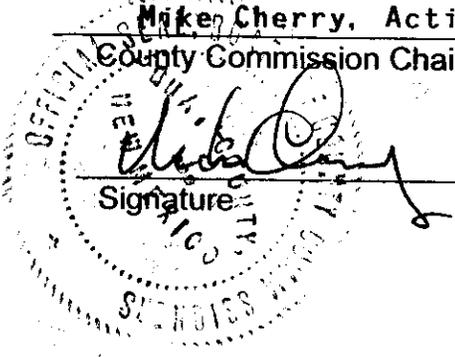
6. Compliance with the requirement to not budget, nor expend, greater than **ten percent** of the grant amount awarded or the amount distributed for **capital outlay** incurred during the grant or distribution fiscal period. Requests for payment or financial status reports shall specify all capital outlay expenditures. **The ten percent cap for capital outlay does not exist with detoxification funding grants.**
7. Compliance with all required reports, including but not limited to: the first quarter narrative and fiscal reports due on the last working day of October; the second quarter narrative and fiscal reports due on the last working day of January; and the third quarter narrative and fiscal reports due on the last working day of April; the fourth and the final quarter narrative and fiscal reports for the fiscal year due the 15<sup>th</sup> of July; required screening, treatment, and compliance monitoring protocols; required evaluation plans; required fiscal reports; required screening and tracking managerial data reports; and required annual reports.
8. Compliance with the current Local DWI Grant Program Screening Guidelines. To avoid any conflict of interest, or appearance of conflict of interest, screeners should not be affiliated with any contracted treatment agency. Clients will be given options for treatment and will not be *mandated* to treatment with the same agency that does the screening.
9. If applicable to the applicant, compliance with the requirements of the Health Insurance Portability and Accountability Act of 1996 (HIPAA) and the Department of Health and Human Services regulation entitled "Standards for Privacy of Individually Identifiable Health Information", 45 CFR Parts 160 and 164, applicable to entities covered by HIPAA; (the HIPAA Regulations).
10. Any distribution program under run amount for the fiscal year must be returned to the Local DWI Grant Fund by September 30 of the following fiscal year. Failure to remit an under run to the Local DWI Grant Fund will cause suspension of grant reimbursements and/or future distributions until the remittance is made.
11. Grant program under runs revert to the Local DWI Grant Fund.
12. Compliance with all applicable conditions and requirements prescribed by the Division in relation to receipt/accountability of state General Funds.
13. The grant applicant will follow the scope of work for the grant program, as negotiated with the Local Government Division, and in accordance with the local planning council's approved plan. The applicant will submit any proposed modifications/amendments to the scope of work to the Division for its approval, prior to execution.
14. The distribution program applicant will follow the local planning council's application as approved by DWI Grant Council in the application review process. The applicant Quay County

will submit any proposed modifications/amendments to this proposal to the Division for its written approval, prior to execution of changes to programs.

15. Compliance with conflict of interest prohibitions whereby no member, officer, or employee of the grant or the distribution program, or its designee or agents, no voting member of the local planning council or of the governing body of the locality in which the program is situated, and no other public official of such locality who exercises any functions or responsibilities with respect to the program during his/her tenure (or for one year thereafter) shall have any interest, direct or indirect, in any contract or subcontract for work to be performed in the program. The grant and/or the distribution program shall incorporate, in all such contracts or subcontracts, a provision prohibiting such interest pursuant to the purposes of these stated provisions.
16. Compliance with the maintenance of records as will fully disclose the amount and disposition of the total funds from all sources budgeted for the grant or distribution agreement period, the purpose of undertaking for which such funds were used and the amount and nature of all contributions from other sources, and such other records as the Division shall prescribe. Such records shall be preserved for a period of not less than six (6) years following completion of all the conditions of the grant agreement and the distribution program administrative guidelines.
17. The applicant will provide access to authorized State officials and representatives of all books, accounts, records, reports, files, and other papers, things, or property pertaining to the project in order to make audits, examinations, excerpts and transcripts.
18. The applicant will provide DFA's auditor and evaluator timely access to all program records and information. Additionally, the applicant will assure that records of subcontractors working for the applicant are retained and made available to DFA's auditor and evaluator.

Mike Cherry, Acting Commission Chairman  
County Commission Chairperson (or Municipal Mayor)

(Please Type)

  
Signature

February 23, 2015  
Date



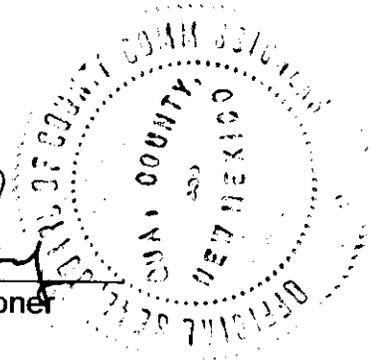
Division DWI Grant Program, for the purpose of conducting outcome monitoring research activities, and evaluation of LDWI Program interventions.

2. If applicable, comply with the requirements of the Health Insurance Portability and Accountability Act of 1996 (HIPAA), the Health Information Technology for Economic and Clinical Health Act of 2009 (HITECH Act) and the Department of Health and Human Services Regulation entitled "Standards for Privacy of Individually Identifiable Health Information", 45 CFR Parts 160 and 164, applicable to entities covered by HIPAA; (the HIPAA Regulations).
3. Report or transmit data to the Agency that deletes and contains no "individually identifiable health information" or "protected health information" as defined by the HIPAA Regulations and the Health Information Technology for Economic and Clinical Health Act of 2009 (HITECH Act).

Executed this \_\_\_\_\_ day of \_\_\_\_\_ 20\_\_\_\_\_.

\_\_\_\_\_  
Rick Lopez, Director  
Department of Finance & Administration  
Local Government Division  
DWI Program  
Bataan Memorial Building, Suite 203  
Santa Fe, New Mexico 87501

  
\_\_\_\_\_  
County Commissioner  
Action CARR



February 23, 2015  
Date

## DOH ASSURANCES AND COOPERATIVE AGREEMENT

The Quay County/City DWI Program referred to as the "Program" and the New Mexico Department of Health (DOH), Epidemiology and Response Division hereby receives the following assurances and enters into the following cooperative agreement, to carry out the requirements of the evaluation MOU between DOH and DFA:

The DOH:

1. Acknowledges that it is in full compliance with the provisions concerning research activities in Section 2.52 of Federal confidentiality regulations, 42 CFR Part 2, including:
  - a. That a research protocol is maintained in accordance with the security requirements of § 2.16 of 42 CFR Part 2; and
  - b. That client identifying information will not be re-disclosed except back to the Program from which the information was obtained; and no individual client will be identified in any report resulting from any epidemiologic research; and
  - c. That the Epidemiology and Response Division has provided a satisfactory written statement that a group of three or more individuals who are independent of the research project has reviewed the protocol and determined that:
    - (i) The rights and welfare of clients will be adequately protected; and
    - (ii) The risks in disclosing client identifying information are outweighed by the potential benefits of the research.
2. Acknowledges that in receiving, storing, processing, or otherwise dealing with any information from the Program about the clients in the Program, the Epidemiology and Response Division is fully bound by the provisions of the Federal regulations governing Confidentiality of Alcohol and Drug Abuse Patient Records, 42 CFR Part 2: and
3. Undertakes to resist in judicial proceedings any effort to obtain access to information pertaining to patients otherwise than as expressly provided for in the Federal confidentiality regulations, 42 CFR Part 2.

The Program:

1. Agrees to allow the Epidemiology and Response Division access to client records from the web based client screening and tracking system for those

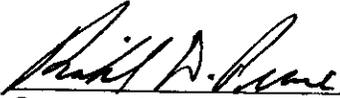
clients provided services through the Local Government Division DWI Grant Program, for the purpose of conducting outcome monitoring research activities.

This agreement will become effective on July 1, 2015.

This agreement will expire on June 30, 2016.

---

Michael Landen, MD, MPH,  
State Epidemiologist and  
Director Epidemiology and Response Division  
New Mexico Department of Health  
Harold Runnels Building  
1190 St. Francis Drive  
Santa Fe, NM 87502

---

County Manager or other  
authorized official

**FY16 LDWI Distribution/Grant Application**

**County: Quay**

## Statewide Long-Term Goals

**Goal 1: Reduce binge drinking and underage drinking in New Mexico by 5% by June 2017<sup>1</sup>**

**Goal 2: Reduce alcohol-related injury and death by 5% in New Mexico by June 2017**

**Goal 3: Reduce alcohol-related motor vehicle crashes and deaths by 5% in New Mexico by June 2017**

**Please describe how your program will contribute to achieving the statewide goals listed above. Using the form provided, attach a completed logic model, which outlines how your county program will assist in accomplishing these goals.** Goal 1: Delayed onset of substance use through increasing protective factors, decreasing risk factors, and decreasing 30 day ATOD use in Quay County youth. Quay County has dropped in current use percent, binge drinking percent, and first use of alcohol before 13 in each year since 2003.

Goal 2: The Compliance Component, by providing intensive probation supervision and requiring treatment for offenders, we will reduce the alcohol related injury and death in Quay County. Alcohol related crashes in Quay County have dropped dramatically from 2006-2007 to 2008-2010.

Goal 3: The Compliance Component, by providing intensive probation supervision and requiring treatment for offenders, we will reduce the alcohol related injury and death in Quay County. Although we rank near the top by county, notice that between 2010 and 2012, Quay County only had one alcohol related fatality in 19 fatal crashes. Our low population makes one crash appear to make a large swing when viewed as a percentage.

### Grant Funding Request (not including distribution funding)

**Grant funding allocated by the DWI Grant Council in April 2014 for FY16: \$17,264**

**Additional grant funding requested in this application: 0**

**If your grant funding request is higher than the amount allocated by the DWI Grant Council in April 2014 for your program in FY16, please explain in what ways and in what components you plan to use additional funding (limit to one page):**

### Statistical Analysis/Reason for Component Selection

**Using the statistical data provided by both the University of New Mexico Traffic Research Unit, (UNM/TRU) and the DOH Recidivism Report, please explain the DWI trends and the extent of the DWI problem in your county:**

UNM/TRU data shows that Quay County has had a steady drop in Alcohol Related Crashes (2007-19, 08-6, 09-8, 10-4, 11-7), in DWI Arrests (2007-103, 08-89, 09-81, 10-68, 11-65), and in DWI Convictions (2007-109, 08-67, 09-80, 10-54, 11-62).

Per DOH Recidivism Report, Quay County shows a steady decline in Convictions, from 94 in 2002 to 38 in 2012.

Quay County's numbers show that the DWI Program is working. Both crashes and arrests are down.

**Using other statistical data, such as the NM Substance Abuse Epidemiology Profile, the Community Reports, the 2013 DWI Court Disposition Report by AOC, ADE reports, etc., please elaborate on DWI trends and the extent of the DWI problem in your county:**

The NM Substance Abuse Epidemiology Profile shows Quay County as 14<sup>th</sup> in Alcohol Related Motor Vehicle Traffic Crash Deaths with 4 deaths, but at a rate of 8.8 per 100,000 population. The NM average was 5.4 per 100,000. Our Youth Drinking and Driving rate was 7.3 per 100,000, compared to the state rate of 8.9. Although Quay County's Alcohol Related Crash Rate is above the state average, it is dropping along with arrests and the Youth Drinking rate, showing that our program is working to reduce the number of DWI's in Quay County. The Crash data shows that we continue to have a problem worth working on.

<sup>1</sup> Goals are taken from the Five-Year Behavioral Health Promotion & Prevention Plan, November 2012

**How has the DWI data (explained above) influenced your local DWI program and component selection?**

Quay County is a small, rural county that is decreasing in Alcohol Related Deaths and DWI Arrests. We feel that using Prevention in the student population and Compliance for the convicted offender is the best use of limited DWI funds. By raising the age of first use of alcohol and reducing recidivism, we will combat DWI from both ends of the spectrum.

**Using the ADE database, please explain the demographic profile of the DWI offender in your county:**

In calendar year 2014, Quay County screened 41 clients. Quay County's average age was 43 years of age, and 56% were between 21 and 50 years old. 36% were between 36 and 50. 80% of clients were male, 48% were Hispanic and 39% were White. 28% had less than 11 years of education, but 46% have graduated high school. 46% of the clients earn less than \$10,000 and 21% earn between \$10,000 and \$20,000. 29% were not employed in the last year, and another 47% worked less than 9 months.

46% have a severe substance problem, and 29% have an established problem. 63% have no history of out patient treatment. 95% of the clients have used alcohol in their lifetime, and 14% state that they started using alcohol monthly between the ages of 16 and 18.

**How has the offender demographic profile from ADE (explained above) influenced your local DWI program and component selection?**

The demographic profile shows that most of the offenders are between 21 and 50 years old (56%). It also shows that many had a high school education (46%). The second largest group, less than a high school education (28%), convinced us that prevention needed to be done not just at high school, but also in middle school.

**Please explain how your program helps to reduce death and injury related to DWI:**

Prevention starts the process of reducing the onset of drinking, and statistics show the later the start of regular drinking, the less likely problem drinking occurs. We also have a strong compliance program, with required treatment, to reduce recidivism.

## **Gaps, Needs, and Community Participation**

**Please describe the process used to assess local gaps and needs. Please briefly describe the gaps and needs identified through that process and how the DWI Program is filling them.**

The only major gap in Quay County is the lack of a Spanish speaking therapist. Therefore, there is no therapy for Spanish speaking therapy within 80 miles.

**List any new activities/programs you plan to implement in FY16 to address the gaps and needs. Explain how this new activity/program will be evaluated.**

Quay County will not be implementing any new programs in FY 16, other than Evaluation of the Prevention Program.

**Please explain how your DWI program provides services to all areas of your county, including rural, and tribal areas.**

Quay County is a rural county consisting of three incorporated municipalities. The current census estimate (July 2013) is 8662. Prevention is done in Tucumcari, Logan, and San Jon Schools. This hits the largest three schools in Quay County. Compliance is county, state and nation wide, but only doing in-person checks-ins with clients in Quay County. Out of county and out of state clients report telephonically. This allows weekly contact with all clients. We have informational events in Logan, Nara Visa, Tucumcari, and a billboard on I40 just outside of San Jon.

**Please describe the involvement which your local DWI Planning Council had in developing your application and component selection.**

The Quay County DWI Planning Council discusses all aspects of the program monthly. We discuss the needs of the county/community and what resources are available, as many of the council work in other areas that are involved with DWI and substance abuse. The council believes Compliance and Prevention are the areas that are most needed in Quay County.

**Do you have tribal/pueblo representation on your planning council (either as a voting member or as an attendee)?** NA

**If "no", please explain why you do not have tribal/pueblo representation. If "yes", please describe their representation and the extent to which they are involved in funding recommendations.**

Quay County has no tribal lands.

**Please explain any collaboration efforts you have with other agencies/organizations in your county, including rural and tribal entities.**

We work with MCCH, Red Ribbon Committee, and Quay County School districts to reduce DWI and underage drinking in Quay County. We also are members of the NMAC DWI Affiliate.

**Please discuss the relationship you have with each of the Courts (District, Magistrate, Municipal or Tribal) in the county and the services that the DWI Program provides for the Court(s).**

The Quay County DWI Program works well with all of the courts in Quay County. Municipal Court does not handle DWIs. Magistrate Court handles most of the DWIs in the county. The DWI Program attends all DWI hearings, screens and supervises probation on all of those convicted. District Court handles felony DWI and DWI's that occur with other felonies. The QCDWI Program screens these clients. Childrens' Court handles juvenile cases, and QCDWI Program also screens these clients.

**Please list the names of the relevant organizations/associations of which you, your program, or your program staff are paid or non-paid members (i.e. New Mexico Prevention Network, Behavioral Health Local Collaborative, Teen Court Association, etc.):**

Organizations/associations which we are members of include: NM DWI Affiliate, Quay County DWI Planning Council, Red Ribbon Committee, Maternal Child and Community Health Council.

**Please include three to five letters of support from local county entities, Native American communities, associations, consumers, etc. to show public participation in the planned implementation of the program's efforts.**

### **Additional Program Narrative**

**Please briefly describe the strategies that you use to educate, at a local level (county/city officials, legislators, stakeholders, etc.), the dangers of drinking and driving.**

We meet with the County Commissioners on at least quarterly basis and the Tucumcari City Commission several times per year. I meet with our local representative regularly. I am in Magistrate Court weekly and District about once a month.

**Provide a (one) specific example of a success story due to the efforts of your program.**

EK" is a 56 year old self employed man, convicted for DWI III. His last one was approximately ten years ago. At the time of his arrest, he was drinking a 1.75 liter of rum every 3 days and a 30 pack of beer every 5 days. After his conviction, he self detoxed at home, having a mini-stroke. He was placed on probation for three years and ordered to outpatient treatment. He completed the outpatient program, and has not drunk in two and a half years. He has an interlock, and there have been no violations. His family had pulled away from him, and recently, they have started including him in family activities again. He is sober and proud of it.

**Describe any barriers you may have had in the past to implement any of your programs/components and any plans you have to overcome them.**

We have two barriers in Quay County. The first is ongoing. Our District Judge is now ordering screening in Judgement and Sentence, but he does not require that it is completed. I have been working with the APO, and hopefully, we have developed a protocol that will get all DWI Offenders screened. A new form has been developed between the DWI Office and APO to track the needed information from the APO Office for ADE entry.

The second is a new barrier. We lost our Spanish speaking therapist. Currently, we have no Spanish speaking therapy. It is hoped that one of the local counseling services will add a Spanish speaking therapist soon.

**Discuss a specific prevention activity that was implemented which did or did not meet the intended outcome and what you learned from this. Discuss any changes to the prevention program as a result of this outcome.**

The Project Northland Curriculum for the middle school and high school program meets all the intended outcomes. The number of students served and prevention activities implemented went over that requested. The Quay County DWI is the only prevention program serving the Quay County school districts.

**HB16 funds - Evaluation (program evaluation): The systematic collection of information about the activities, characteristics, and outcomes of programs (which may include interventions, policies, and specific projects) to make judgments about that program, improve program effectiveness, and/or inform decisions about future program development. (Centers for Disease Control and Prevention)**

**Please describe the evaluation process you intend to use with the funds allocated from HB16 for the evaluation of the prevention, treatment and/or compliance monitoring components. If known, please identify the program evaluator:**

Concha Montaño, Educator and Evaluator with Montaño Education and Evaluation Consulting, has agreed to assist with the evaluation of the Project Northland curriculum, an evidence-based prevention program that will be implemented in the Quay County Schools. The evaluation team's roles and responsibilities are listed below:

Scope of Work-Evaluation Team's Tasks/Roles and Responsibilities: The Evaluation Team will:

1. Be responsible for designing, reviewing and carrying out process and outcome evaluation activities of the Quay County DWI Program's Project Northland curriculum, including designing evaluation instruments, gathering relevant base line and follow up data, tabulation and analysis of data, and producing evaluation reports.
2. Meet with all Quay County DWI staff to review program scope of work and develop evaluation processes for the prevention component of this grant.
3. Assist Program Coordinator and Preventionist(s) develop goals and objectives in order to logically design the evaluation plan, logic model, and outline outcomes for each program component.
4. Develop the Logic Models and Evaluation Plan and assist with the development of the Management Plan to structure evaluation process and ensure deadlines are met on a timely basis.
5. Design and carry out final project evaluation report and submit on a timely basis to the DWI Program, Coordinator, and LDWI (Prevention: Project Northland data analysis).
6. Assist with the development of the Needs Assessment that will inform of community needs and help prioritize strategies.
7. Conduct evaluation trainings and meetings as set forth by program requirements including attendance at State Trainings or meetings mandated by LDWI and/or Quay County DWI Program.
8. Assess pretests and posttests, surveys, and other evaluation assessments as implemented by project staff. The evaluator will be responsible for identifying and/or developing data entry files and syntax files for data entry and for analysis of indicators.
9. Attend trainings, meetings, and use specific core indicators and measures standardized process and outcome evaluation instruments and protocols and standardized data collection procedures as indicated by LDWI and/or Quay County DWI Program.
10. Provide feedback, technical assistance, and support staff in the evaluation and implementation of the goals and objectives on a monthly basis or as needed.
11. Provide on-site visits and/or telephone contact on a monthly basis.
12. Develop an evaluation documentation system that includes an Evaluation Manual consisting of 4 parts; Programmatic Information, Evaluation Tools, Program Documentation, and Administrative Information to ensure program staff have all the necessary tools to implement the program, ensure quality evaluation processes are maintained, and prepare for LDWI site visits, audits, and reports. Program staff will participate in Evaluation Training. Disks with all documents maintained in the Evaluation Manual will be provided to guarantee that program staff not only have hard copies of the information, but also have "ready to copy" access.
13. Assist in the Reapplication Process by developing an updated Evaluation Plan and a Logic Model when needed.

The Quay County DWI Program evaluation plan/design outlines goals, objectives, and activities with related risk and protective factors, immediate and long term outcomes, and data management processes including data collection and data analysis procedures for each objective. The plan describes how the program will measure success at attaining the goals and objectives as well as data collection and analysis processes (See Evaluation Matrix Below).

#### Evaluation Plan Summary-Process and Outcome:

The primary goal of evaluation is to assess whether the implementation of the evidence-based Curriculum and the environmental strategies developed and initiated between Quay County DWI Program and the relationships and work between collaborative entities in the County created a reduction in underage drinking, underage binge-drinking and drinking and driving. It will determine if there is a reduction in the availability and access of alcohol by minors, reduced alcohol related crash deaths among youth and young adults, increased community awareness of the laws related to the consequences associated with providing alcohol to underage youth and intoxicated patrons, and increased enforcement efforts regarding underage drinking laws. Evaluation will assess whether the efforts and initiatives implemented will increase perceived risk of harm associated with binge drinking and underage drinking, whether there is a reduction in DWI arrests, and whether there is an increase in knowledge about the negative effects of alcohol.

The project evaluator and the Quay County DWI Program Coordinator are committed to cooperate with the evaluation standards and guidelines set forth by FDA. These individuals will attend meetings and trainings implemented by LDWI and the New Mexico DWI Affiliates, will utilize specific core indicators and measures, standardized process and outcome evaluation instruments and protocols, including the uniform framework that consists of qualitative and quantitative measures for process and immediate indicators, short and long-term indicators, and for impact indicators.

The extent of program implementation and the accomplishments of the stated goals and objectives will be assessed. This evaluation model provides information on the status of the project, allowing for appropriate modification and continuous refinement. It summarizes accomplishment of each objective at the end of the program period, providing staff with data on the extent of final and actual program implementation. This model identifies the gaps existing between what was proposed and what was actually accomplished and identifies reasons for any discrepancy. It provides feedback on the appropriateness of the overall program model, including its strengths and weaknesses. The design consists of five distinct components:

- Program Design-This component describes the programs in process. It examines program substance, structure, and related assumptions to insure that the program design has theoretical validity, external compatibility, and face validity.
- Installation/Input-This component assesses the extent to which the programs were installed as planned, ensuring that projected resources are identified, acquired, and implemented.
- Process-This component allows for the continuous monitoring of the accomplishment of all enabling activities leading to the overall program goal. We will monitor what activities were undertaken, by whom, over what period, in which neighborhoods of the city or what populations, and in what ways. It will also document the ways in which the overall efforts developed, how these changed over time in response to specific conditions, and how project staff and participants interacted with each other.
- Product-Output-This component measures the extent to which stated goals and objectives have been accomplished. It addresses effort, effectiveness, and efficiency questions. The data collected at this stage may allow for quasi-experimental analysis relating outcomes or effects to program treatment.
- Outcomes and Impact- The evaluation will assess the results of program implementation in terms of immediate and intermediate outcomes.

#### Methodology: Evaluation Plan for the Prevention and Compliance Check Components

The following tables outline a process by which evaluation will be completed for the implementation of Project Northland. The evaluation plan identifies the strategy being evaluated, the target population reached by this strategy, the intervening variable this strategy corresponds with, the risk factors that will be measured for increase, and the protective factors that will be measured for an increase. The design also outlines measures (tools and instruments) by which short term outcomes and the long term outcomes will be assessed. Long term outcome and short term outcome indicators have also been identified for this strategy.

Prevention Strategy: Information Dissemination Through Red Ribbon, Media Campaign and Health Fairs

Target Population: Communitywide

Intervening Variable: Low Perceived Risk of Alcohol and Legal Consequences for Breaking ATOD Laws

Data Analysis: Software SPSS will be used to tabulate findings for Community Survey; MDS for demographic; Qualitative/Quantitative Data; Quasi-experimental; Media Tracking Form (tracks implementation of multiple media strategies)

Risk Factors That will be Decreased and Protective Factors That Will Be Increased      How The Anticipated Short-Term Outcomes Will Be Measured (Measure and Indicators)      How The Anticipated Long-Term Outcomes Will Be Measured

Risk Factors:

- Easy access to alcohol
- Favorable attitudes toward alcohol use
- Community laws and norms favorable to alcohol
- Community unaware of the 4th Degree Felony Law regarding the service of alcohol to minors

Protective Factors:

- Clear norms that set high standards of behavior for young people
- Opportunities for youth to participate in alcohol prevention efforts
- Healthy beliefs regarding dangers of underage alcohol use, underage binge drinking and DWI.

Measure for Media Literacy and Alternative Activities: Community-wide Survey (Develop Baseline)

Indicators- Assess Perception:

- Increase the perception of likelihood of someone being convicted if stopped and charged with DWI (create baseline).
- Increase the perception of likelihood of being stopped by police for drinking after drinking too much (create baseline).

Indicators-Assess Behavior:

- Decrease adult past 30 days DWI (create baseline).

Measure for Media Literacy, Alternative Activities and Health Fairs: YRRS

Indicators- Assess Attitude:

- Decrease easy access of alcohol by minors in social settings, perception of risk of alcohol, and where accessed alcohol.

Measure for Alternative Activities-Focus Groups:

Indicators:

- De-emphasize the use of alcohol during holidays/community events.
- Promotion of meaningful involvement in pro-social activities.

Measure: NM SA Epidemiology Profile

Indicators:

- Reduce alcohol related deaths in Quay County from the rate of 80.5 to 78.5 (per 100,000) by 2017. Quay County ranks 3rd in the state.
- Reduce alcohol-related motor vehicle traffic crash deaths from the rate of 8.8 to 6.8 (per 100,000) by 2017. Quay County ranks 14th in the state-higher than the state as well.
- Develop baseline data for adult DWI in Quay County.
- Reduce alcohol related injury death from a rate of 44.1% (per 100,000) to 39.1%.

Strategy: Collaboration and Coordination with Community members, agencies, organizations, law enforcement, government, and other entities

Target Population: Communitywide (All Ages)

Intervening Variable: Community-Based Process

Data Analysis: Software SPSS will be used to tabulate findings for Coalition Effectiveness Tool; MDS for demographic; Qualitative and Quantitative Data will be collected; Quasi-experimental Evaluation Design will be used

Risk Factors That will be Decreased	Protective Factors That Will Be Increased	How The Anticipated Short-Term Outcomes Will Be Measured	How The Anticipated Long-Term Outcomes Will Be Measured
-------------------------------------	---	--	---

Risk Factors:

- Availability of alcohol
- Community laws and norms favorable to alcohol use
- Low neighborhood attachment

Protective Factors:

- Organized Community
- Commitment to community
- Community networking
- Leveraging of services Measure: Coalition Effectiveness Tool

Indicators:

- Increase Community collaboration and coordination efforts.
- Improve and enhance communication between collaborative partners.
- Enhance and share leadership among community partners.
- Improve decision making processes.
- Enhance conflict resolution skills.
- Reflection of collaborative partners with community membership at large will be enhanced Measure:

Community Collaboration Internal and External Assessment Tools

Indicators:

- Increase Community Support
- Increase Agency's Positive Visibility
- Increased Leveraging of Services
- Improved Community Networking
- Enhance Leadership Within The Community
- Increase Community Resources

**If you plan to use the HB16 funds for new/model or innovative programs, please explain the program and the evaluation process to be implemented here:**

We will not be adding in new programs with HB 16 funds.

## **Budget Justification**

The budget forms below provide you with the opportunity to justify the appropriate use of LDWI funds. Please provide detailed information on the budgetary categories by component so that DFA can ascertain your plan for spending LDWI funds and ensure that expenditures will be reasonable and allowable.

**Be sure to list the HB16 funds in the component(s) that you intend to evaluate; ie. Prevention, Treatment and/or Compliance Monitoring. If applicable, list the new/innovative program(s) that can be evaluated, you intend to fund with HB 16 in the appropriate component.**

In the narrative section please discuss your ability to leverage other resources to support your program. If you do not use LDWI funds for a particular component please complete the narrative section with how the local gap is being filled.

**PREVENTION**

<b>Prevention Budget Justification:</b>		
LDWI Funds: Both		
Personnel	Number of FTE: 1	\$ 23723
Employee benefits	Number of FTE: 1	\$ 12122
<b>Please describe roles and responsibilities of prevention personnel:</b>		
Travel (in-state)	Purpose of travel:	\$
Travel (out-of-state)	Purpose of travel:	\$
Supplies	Type of expenses:	\$
Operating costs	Type of expenses:	\$
Contractual services	Type of expenses:	\$
<b>Provide a list of contracts and services to be provided:</b>		
Minor equipment	Type of expenses:	\$
Capital outlay	Type of expenses:	\$
<b>TOTAL DOLLAR AMOUNT:</b>		<b>\$ 35045</b>
<b>Prevention Budget Justification:</b>		
In-Kind Funds (check all that apply): County <input checked="" type="checkbox"/> City <input type="checkbox"/> Fees <input type="checkbox"/> Other <input type="checkbox"/> List:		
Administrative	Type of expenses:	\$
Personnel	Number of FTE:	\$
Employee benefits	Number of FTE:	\$
Travel (in-state)	Purpose of travel:	\$
Travel (out-of-state)	Purpose of travel:	\$
Supplies	Type of expenses: office supplies	\$ 1726
Operating costs	Type of expenses:	\$
Contractual services	Type of expenses:	\$
Minor equipment	Type of expenses:	\$
Capital outlay	Type of expenses:	\$
<b>TOTAL DOLLAR AMOUNT:</b>		<b>\$ 1726</b>
<p><b>Budget Justification Narrative: Attach the FY16 goals report from the MDS (report in the ADE Database). If not funding, explain how this need is met in your county. (The goals are the start of your process evaluation for the prevention component).</b></p> <p>Budget Justification: The Quay County LDWI currently funds the prevention program part-time employees to provide prevention education to Quay County School Districts. It is imperative for Quay County DWI Program to receive this funding to secure services to the schools. The DWI Program is the only agency that delivers and provides Prevention education in Quay County schools. We are seeking other funding from Department of Transportation and Underage Drinking Prevention Program to fully supplement the Drug Prevention education in Quay County. The staff who facilitates this program travels 50 miles round trip to Logan and San Jon Municipal schools to implement this program, and 20 miles round trip to Tucumcari Public schools.</p>		

Primary prevention activities are those directed at individuals who do not require treatment for substance abuse. In implementing the comprehensive primary prevention program, the Quay County DWI Program will use a two (2) strategies listed below.

(1) **Information Dissemination:** This strategy provides awareness and knowledge of the nature and extent of alcohol, tobacco and drug use, abuse and addiction and their effects on individuals, families and communities. It also provides knowledge and awareness of available prevention programs and services. Information dissemination is characterized by one-way communication from the source to the audience, with limited contact between the two.

Examples of activities conducted and methods used for this strategy include (but are not limited to) the following:

- Clearinghouse/information resource center(s);
- Resource directories;
- Media campaigns;
- Brochures;
- Radio/TV public service announcements;
- Speaking engagements;
- Health fairs/health promotion; and
- Information

(2) **Community-Based Process:** This strategy aims to enhance the ability of the community to more effectively provide prevention and treatment services for alcohol, tobacco and drug abuse disorders. Activities in this strategy include organizing, planning, enhancing efficiency and effectiveness of services implementation, interagency collaboration, coalition building and networking.

Examples of activities conducted and methods used for this strategy include (but are not limited to) the following:

- Community and volunteer training, e.g., neighborhood action training, training of key people in the system, staff/officials training;
- Systematic planning;
- Multi-agency coordination and collaboration;
- Accessing services and funding; and
- Community team-building.

## ENFORCEMENT

<b>Enforcement Budget Justification:</b>		
LDWI Funds: Distribution		
Personnel	Number of FTE:	\$
Employee benefits	Number of FTE:	\$
<b>Please describe roles and responsibilities of enforcement personnel:</b>		
Travel (in-state)	Purpose of travel:	\$
Travel (out-of-state)	Purpose of travel:	\$
Supplies	Type of expenses:	\$
Operating costs	Type of expenses:	\$
Contractual services	Type of expenses:	\$
<b>Provide a list of contracts and services to be provided:</b>		
Minor equipment	Type of expenses:	\$
Capital outlay	Type of expenses:	\$
<b>TOTAL DOLLAR AMOUNT:</b>		\$
<b>Enforcement Budget Justification:</b>		
In-Kind Funds (check all that apply): County <input type="checkbox"/> City <input type="checkbox"/> Fees <input type="checkbox"/> Other <input type="checkbox"/> List:		
Administrative	Type of expenses:	\$
Personnel	Number of FTE:	\$
Employee benefits	Number of FTE:	\$
Travel (in-state)	Purpose of travel:	\$
Travel (out-of-state)	Purpose of travel:	\$
Supplies	Type of expenses:	\$
Operating costs	Type of expenses:	\$
Contractual services	Type of expenses:	\$
Minor equipment	Type of expenses:	\$
Capital outlay	Type of expenses:	\$
<b>TOTAL DOLLAR AMOUNT:</b>		\$
<b>Budget Justification Narrative: If not funding, explain how this need is met in your county.</b>		
The City of Tucumcari applies for CDWI funds for Enforcement. They then fund roadblocks and saturation patrols in conjunction with NMSP, QC Sheriffs Office, and Logan PD.		

### CDWI/LDWI Coordination

<b>If eligible, do you plan to request CDWI funds from the Traffic Safety Division (TSD)? Yes</b>
<b>If so, please describe how you plan to use those funds, and how they would supplement LDWI enforcement funding.</b>
We use CDWI funds to supplement LDWI funds in Prevention. With the funds combined, we are able to fund a full time preventionist and provide prevention in three of the four schools in Quay County.

--

**Law Enforcement Funding Application**  
**PLEASE COMPLETE ONE FORM FOR EACH PARTICIPATING AGENCY – additional forms on website**

<b>Law Enforcement Agency:</b>							
Activity	Check all that apply	Number of planned activities	Number of anticipated arrests	Number of officers required for activity	Estimated cost per officer	Estimated number of hours	Total cost
Checkpoints	<input type="checkbox"/>						\$
Saturation patrols	<input type="checkbox"/>						\$
Shoulder taps	<input type="checkbox"/>						\$
Underage drinking	<input type="checkbox"/>						\$
Super blitz	<input type="checkbox"/>						\$
		Type of Equipment – Please include name and description			Cost per unit	Number of units	Total cost
Equipment	<input type="checkbox"/>						\$
							\$
							\$
							\$
<b>TOTAL COSTS:</b>							\$

By signing below, agencies agree that participating enforcement officers will have and maintain law enforcement certifications in all areas necessary to conduct checkpoint and saturation patrol activities.

**Signatures:**

Authorized signature of Law Enforcement Agency: \_\_\_\_\_ Date: \_\_\_\_\_

Title: \_\_\_\_\_

**Other information (optional):**

--

**SCREENING – should be self-funded to the fullest extent possible**

<b>Screening Budget Justification:</b>		
<b>LDWI Funds: Distribution</b>		
Personnel	Number of FTE:	\$
Employee benefits	Number of FTE:	\$
<b>Please describe roles and responsibilities of screening personnel:</b>		
Travel (in-state)	Purpose of travel:	\$
Travel (out-of-state)	Purpose of travel:	\$
Supplies	Type of expenses:	\$
Operating costs	Type of expenses:	\$
Contractual services	Type of expenses:	\$
<b>Provide a list of contracts and services to be provided:</b>		
Minor equipment	Type of expenses:	\$
Capital outlay	Type of expenses:	\$
<b>TOTAL DOLLAR AMOUNT:</b>		\$
<b>Screening Budget Justification:</b>		
<b>In-Kind Funds</b> (check all that apply): County <input type="checkbox"/> City <input type="checkbox"/> Fees <input type="checkbox"/> Other <input type="checkbox"/> List:		
Administrative	Type of expenses:	\$
Personnel	Number of FTE:	\$
Employee benefits	Number of FTE:	\$
Travel (in-state)	Purpose of travel:	\$
Travel (out-of-state)	Purpose of travel:	\$
Supplies	Type of expenses:	\$
Operating costs	Type of expenses:	\$
Contractual services	Type of expenses:	\$
Minor equipment	Type of expenses:	\$
Capital outlay	Type of expenses:	\$
<b>TOTAL DOLLAR AMOUNT:</b>		\$
<p><b>Budget Justification Narrative: Include the percentage of convicted DWI Offenders you will screen in FY16, based on history. (This percentage is the start point for the process evaluation for this component). In the annual report, you will show if you met this goal).</b></p> <p>It is our goal to screen 90% of convicted offenders. In FY 14, we screened 90% and in FY 15, so far, we have screened 100% of offenders. Problems continue out of District and Childrens' Court, as to not getting notification that an offender has been ordered to screening and getting both the District Judge and the APO to send the client to this office for screening. Screening is self-funded.</p>		

# DOMESTIC VIOLENCE

<b>Domestic Violence Budget Justification:</b>		
LDWI Funds: Distribution		
Personnel	Number of FTE:	\$
Employee benefits	Number of FTE:	\$
<b>Please describe roles and responsibilities of domestic violence personnel:</b>		
Travel (in-state)	Purpose of travel:	\$
Travel (out-of-state)	Purpose of travel:	\$
Supplies	Type of expenses:	\$
Operating costs	Type of expenses:	\$
Contractual services	Type of expenses:	\$
<b>Provide a list of contracts and services to be provided:</b>		
Minor equipment	Type of expenses:	\$
Capital outlay	Type of expenses:	\$
<b>TOTAL DOLLAR AMOUNT:</b>		\$
<b>Domestic Violence Budget Justification:</b>		
In-Kind Funds (check all that apply): County <input type="checkbox"/> City <input type="checkbox"/> Fees <input type="checkbox"/> Other <input type="checkbox"/> List:		
Administrative	Type of expenses:	\$
Personnel	Number of FTE:	\$
Employee benefits	Number of FTE:	\$
Travel (in-state)	Purpose of travel:	\$
Travel (out-of-state)	Purpose of travel:	\$
Supplies	Type of expenses:	\$
Operating costs	Type of expenses:	\$
Contractual services	Type of expenses:	\$
<b>Provide a list of contracts and services to be provided:</b>		
Minor equipment	Type of expenses:	\$
Capital outlay	Type of expenses:	\$
<b>TOTAL DOLLAR AMOUNT:</b>		\$
<p><b>Budget Justification Narrative: If not funding, explain how this need is met in your county. How many domestic violence offenders will you treat? How many that begin treatment will complete treatment successfully? This is your baseline for the process evaluation.</b></p> <p>LDWI funds are not used for Domestic Violence offenders in Quay County. Hartley House in Clovis, NM, funds the Batters' Intervention Program, and the Quay County Misdemeanor Court Compliance Officer supervises their probation.</p>		

## OUTPATIENT/JAIL-BASED TREATMENT

<b>Treatment Budget Justification:</b>		
LDWI Funds: Distribution		
Personnel	Number of FTE:	\$
Employee benefits	Number of FTE:	\$
<b>Please describe roles and responsibilities of treatment personnel:</b>		
Travel (in-state)	Purpose of travel:	\$
Travel (out-of-state)	Purpose of travel:	\$
Supplies	Type of expenses:	\$
Operating costs	Type of expenses:	\$
Contractual services	Type of expenses:	\$
<b>Provide a list of contracts and services to be provided:</b>		
Minor equipment	Type of expenses:	\$
Capital outlay	Type of expenses:	\$
<b>TOTAL DOLLAR AMOUNT:</b>		\$
<b>Treatment Budget Justification:</b>		
In-Kind Funds (check all that apply): County <input type="checkbox"/> City <input type="checkbox"/> Fees <input type="checkbox"/> Other <input type="checkbox"/> List:		
Administrative	Type of expenses:	\$
Personnel	Number of FTE:	\$
Employee benefits	Number of FTE:	\$
Travel (in-state)	Purpose of travel:	\$
Travel (out-of-state)	Purpose of travel:	\$
Supplies	Type of expenses:	\$
Operating costs	Type of expenses:	\$
Contractual services	Type of expenses:	\$
Minor equipment	Type of expenses:	\$
Capital outlay	Type of expenses:	\$
<b>TOTAL DOLLAR AMOUNT:</b>		\$
<p><b>Budget Justification Narrative: If not funding, explain how this need is met in your county. How many offenders will you treat? How many that begin outpatient treatment will complete treatment successfully? How many that attend jail-based treatment will complete jail-based treatment successfully? This is your baseline for the process evaluation.</b></p> <p>Quay County does not fund treatment. We have a strong AA group, which meets three (3) times per week. We have two (2) local agencies that provide substance abuse counseling. One is state funded and provides services on a sliding scale fee system. Our gap is that we currently do not have anyone who can provide treatment for non -English speaking clients.</p>		

**Treatment Questionnaire –Complete one form for in-house treatment. Complete one per contractor, if they provide additional services outside of in-house treatment.**

Date:

<b>Questions for LDWI treatment applicants: Provider Name:</b> If your behavioral health agency is licensed by the State of NM, please list your level of licensure:	
<input checked="" type="checkbox"/>	Community Mental Health Center (CMHC).
<input checked="" type="checkbox"/>	Federally Qualified Health Center (FQHC).
<input type="checkbox"/>	PL.93-638 Tribal Facility.
<input type="checkbox"/>	Rural Health Clinic (RHC)
<input type="checkbox"/>	Indian Health Services (IHS) Facility
<input type="checkbox"/>	Agency approved by MAD after demonstrating that the agency meets all requirements of an intensive outpatient program services and supervision requirements
1	Please describe what treatment you will provide: <input type="checkbox"/> Intensive Outpatient Services (IOP) <input type="checkbox"/> Outpatient treatment/therapy <input type="checkbox"/> Other treatment/therapy. Please describe:
2	Will you use an *evidence-based program or practice (EBP) for IOP (see #4)? <input type="checkbox"/> Yes <input type="checkbox"/> No Please explain:
3	Will you use an evidence-based program or practice (EBP) for outpatient treatment/therapy (see #5)? <input type="checkbox"/> Yes <input type="checkbox"/> No. Please explain:
4	What EBP will be used in the IOP, such as MRT, Stages of Change, CRAFT, etc? Please list all:
5	What EBP will be used for outpatient treatment/therapy such as MRT, Stages of Change, CRAFT, etc? Please list all:
6	a. Briefly describe how your IOP functions, from intake to discharge, including intensity and duration of services:  b. Briefly describe how your outpatient treatment/therapy functions, including group or individual sessions from intake to discharge:
7	Will you refer to a less intensive level of care when the individual completes the IOP? <input type="checkbox"/> Yes <input type="checkbox"/> No
8	a. How often will you report attendance and treatment progress for clients served to the DWI Coordinator?  b. Please describe how you plan to report progress:
9	a. Please list credentials and licenses held for all service staff.  b. If the license held requires supervision by an independently licensed clinician, please list the person providing supervision:
10	List cost per client per program component with justification: <input type="checkbox"/> Intensive Outpatient Services (IOP): <input type="checkbox"/> Outpatient treatment/therapy: <input type="checkbox"/> Other treatment/therapy. Please describe:

## COMPLIANCE MONITORING/TRACKING

<b>Compliance Monitoring/Tracking Budget Justification:</b>		
<b>LDWI Funds: Distribution</b>		
Personnel	Number of FTE: .53	\$ 27476
Employee benefits	Number of FTE: .53	\$ 4719
<b>Please describe roles and responsibilities of compliance monitoring/tracking personnel:</b>		
Travel (in-state)	Purpose of travel: training/DFA meetings	\$ 1600
Travel (out-of-state)	Purpose of travel:	\$
Supplies	Type of expenses: office supplies	\$ 700
Operating costs	Type of expenses: utilities, rent	\$ 4450
Contractual services	Type of expenses:	\$
<b>Provide a list of contracts and services to be provided:</b>		
Minor equipment	Type of expenses: computers, ect	\$ 2586
Capital outlay	Type of expenses:	\$
<b>TOTAL DOLLAR AMOUNT:</b>		<b>\$ 41531</b>
<b>Compliance Monitoring and Tracking Budget Justification:</b>		
<b>In-Kind Funds (check all that apply):</b> County <input checked="" type="checkbox"/> City <input type="checkbox"/> Fees <input checked="" type="checkbox"/> Other <input type="checkbox"/> List:		
Administrative	Type of expenses:	\$ 2645
Personnel	Number of FTE:	\$ 5066
Employee benefits	Number of FTE:	\$
Travel (in-state)	Purpose of travel:	\$
Travel (out-of-state)	Purpose of travel:	\$
Supplies	Type of expenses:	\$
Operating costs	Type of expenses: utilities, rent	\$ 11389
Contractual services	Type of expenses: billboard	\$ 3600
Minor equipment	Type of expenses:	\$
Capital outlay	Type of expenses:	\$
<b>TOTAL DOLLAR AMOUNT:</b>		<b>\$ 22700</b>
<b>Budget Justification Narrative: If not funding, explain how this need is met in your county. How many convicted offenders will receive compliance monitoring services? How many of these offenders will complete compliance monitoring services successfully? This is your baseline for the process evaluation.</b>		
<p>Compliance is funded with LDWI funds. We provide probation supervision for all misdemeanor offenders in Quay County, and we provide screening and tracking for felony and juvenile offenders.</p> <p>Tracking begins at arrest. The compliance officer attends each court hearing for a DWI offender. Convicted offenders are screened immediately after court, and intake probation paperwork is completed. This includes signing probation agreements, restitution plans, community service referrals, and DWI School referrals. Screenings are entered and treatment referrals are sent to the judge. All offenders report weekly; in county report in person, and out of county/state clients report telephonically. ADE is updated. Probation Violation reports are filed as needed to the District Attorney's office. MCCO testifies at Probation Violation hearings and makes recommendations for sentencing of probation violations.</p>		

**COORDINATION, PLANNING AND EVALUATION**

<b>Coordination, Planning and Evaluation Budget Justification:</b>		
<b>LDWI Funds: Distribution</b>		
Personnel	Number of FTE: .23	\$ 11775
Employee benefits	Number of FTE: .23	\$ 2023
<b>Please describe roles and responsibilities of CPE personnel:</b>		
Travel (in-state)	Purpose of travel:	\$ 400
Travel (out-of-state)	Purpose of travel:	\$
Supplies	Type of expenses:	\$ 300
Operating costs	Type of expenses:	\$ 1390
Contractual services	Type of expenses:	\$
<b>Provide a list of contracts and services to be provided:</b>		
Minor equipment	Type of expenses:	\$
Capital outlay	Type of expenses:	\$
<b>TOTAL DOLLAR AMOUNT:</b>		<b>\$ 15888</b>
<b>Coordination, Planning and Evaluation Budget Justification:</b>		
<b>In-Kind Funds (check all that apply):</b> County <input type="checkbox"/> City <input type="checkbox"/> Fees <input type="checkbox"/> Other <input type="checkbox"/> List:		
Administrative	Type of expenses:	\$
Personnel	Number of FTE:	\$
Employee benefits	Number of FTE:	\$
Travel (in-state)	Purpose of travel:	\$
Travel (out-of-state)	Purpose of travel:	\$
Supplies	Type of expenses:	\$
Operating costs	Type of expenses:	\$
Contractual services	Type of expenses:	\$
Minor equipment	Type of expenses:	\$
Capital outlay	Type of expenses:	\$
<b>TOTAL DOLLAR AMOUNT:</b>		<b>\$</b>
<b>Budget Justification Narrative: If not funding, explain how this need is met in your county.</b>		
<p>As coordinator, I coordinate all aspects of the DWI program. I submit all quarterly and annual reports. We work with all courts and local law enforcement agencies to reduce DWI in Quay County. We also provide Prevention to grades 6-9 in the three largest schools in Quay County.</p>		

**ALTERNATIVE SENTENCING**

<b>Alternative Sentencing Budget Justification:</b>		
<b>LDWI Funds: Distribution</b>		
Personnel	Number of FTE:	\$
Employee benefits	Number of FTE:	\$
<b>Please describe roles and responsibilities of alternative sentencing personnel:</b>		
Travel (in-state)	Purpose of travel:	\$
Travel (out-of-state)	Purpose of travel:	\$
Supplies	Type of expenses:	\$
Operating costs	Type of expenses:	\$
Contractual services	Type of expenses:	\$
<b>Provide a list of contracts and services to be provided:</b>		
Minor equipment	Type of expenses:	\$
Capital outlay	Type of expenses:	\$
<b>TOTAL DOLLAR AMOUNT:</b>		\$
<b>Alternative Sentencing Budget Justification:</b>		
<b>In-Kind Funds (check all that apply):</b> County <input type="checkbox"/> City <input type="checkbox"/> Fees <input type="checkbox"/> Other <input type="checkbox"/> List:		
Administrative	Type of expenses:	\$
Personnel	Number of FTE:	\$
Employee benefits	Number of FTE:	\$
Travel (in-state)	Purpose of travel:	\$
Travel (out-of-state)	Purpose of travel:	\$
Supplies	Type of expenses:	\$
Operating costs	Type of expenses:	\$
Contractual services	Type of expenses:	\$
Minor equipment	Type of expenses:	\$
Capital outlay	Type of expenses:	\$
<b>TOTAL DOLLAR AMOUNT:</b>		\$
<b>Budget Justification Narrative: If not funding, explain how this need is met in your county. How many teens will be served by Teen Court? How many of those served will complete successfully? How many clients will be placed on Electronic Monitoring devices? How many will complete successfully?</b>		
Quay County does not request funding for Alternative Sentencing. MCCO supervises Community Service, and Quay County Detention Center supervises any Electronic Monitoring.		

## Contingency Program/Capital Outlay Plan

**If distribution funding is higher than the amount requested in the application, please explain how you plan to use the funds. Please include details on which component areas, the purpose of the funding, and the approximate dollar amount.**

If funding were higher, we would add Prevention program to the school in Quay County (House Schools) that we currently are not able to serve.

**Please describe any capital outlay purchases you wish to make during fiscal year 2016. Please include a description and approximate dollar amount (capital outlay purchases are limited to 10% of the total fiscal year budget).**

None

## Local DWI Program Personnel

<p><b>Coordination, Planning and Evaluation:</b>  Name: Bryan Rinestine  Title: Quay County DWI Coordinator  Address: PO Box 1011, Tucumcari, NM 88401  Phone: 575.461.6096 Cell #:  Fax: 575.461-0645  Email: quaydwi@plateautel.net</p>	<p><b>Court Monitoring:</b>  Name: Bryan Rinestine  Title/Organization: Quay County DWI Coordinator  Address: PO Box 1011, Tucumcari, NM 88401  Phone: 575.461.6096  Fax: 575.461-0645  Email: quaydwi@plateautel.net</p>
<p><b>Prevention:</b>  Name: Susan Lease  Title: Preventionist  Address: PO Box 1011, Tucumcari, NM 88401  Phone: 575.461.6096  Fax: 575.461-0645  Email:</p>	<p><b>Other (Identify Component):</b>  Name:  Title/Organization:  Address:  Phone:  Fax:  Email:</p>
<p><b>Enforcement:</b>  Name:  Title/Organization:  Address:  Phone:  Fax:  Email:</p>	<p><b>Other (Identify Component):</b>  Name:  Title/Organization:  Address:  Phone:  Fax:  Email:</p>
<p><b>Screening:</b>  Name: Bryan Rinestine  Title/Organization: Quay County DWI Coordinator  Address: PO Box 1011, Tucumcari, NM 88401  Phone: 575.461.6096  Fax: 575.461-0645  Email: quaydwi@plateautel.net</p>	<p><b>Other (Identify Component):</b>  Name:  Title/Organization:  Address:  Phone:  Fax:  Email:</p>
<p><b>Treatment:</b>  Name:  Title/Organization:  Address:  Phone:  Fax:  Email:</p>	<p><b>Other (Identify Component):</b>  Name:  Title/Organization:  Address:  Phone:  Fax:  Email:</p>
<p><b>Compliance Monitor:</b>  Name: Bryan Rinestine  Title/Organization: Quay County DWI Coordinator  Address: PO Box 1011, Tucumcari, NM 88401  Phone: 575.461.6096  Fax: 575.461-0645  Email: quaydwi@plateautel.net</p>	<p><b>Other (Identify Component):</b>  Name:  Title/Organization:  Address:  Phone:  Fax:  Email:</p>
<p><b>Alternative Sentencing:</b>  Name: Bryan Rinestine  Title/Organization: Quay County DWI Coordinator  Address: PO Box 1011, Tucumcari, NM 88401  Phone: 575.461.6096  Fax: 575.461-0645  Email: quaydwi@plateautel.net</p>	<p><b>Other (Identify Component):</b>  Name:  Title/Organization:  Address:  Phone:  Fax:  Email:</p>

## County/City Personnel

<p><b>County/City Manager:</b>  Name: Richard Primrose  Title: Quay County Manager  Address: PO Box 1246, Tucumcari, NM 88401  Phone: 575.461.2112 Cell #:  Fax: 575.461.8208  Email:</p>	<p><b>Other (Identify):</b>  Name:  Title/Organization:  Address:  Phone:  Fax:  Email:</p>
<p><b>Finance:</b>  Name: Cheryl Simpson  Title:  Address: PO Box 1246, Tucumcari, NM 88401  Phone: 575.461.2112  Fax: 575.461.8208  Email:</p>	<p><b>Other (Identify):</b>  Name:  Title/Organization:  Address:  Phone:  Fax:  Email:</p>
<p><b>County/City Treasurer:</b>  Name: Nadine Angel  Title: Quay County Treasurer  Address: PO Box 1226, Tucumcari, NM 88401  Phone: 575.461.0470  Fax: 575.461.8208  Email:</p>	<p><b>Other (Identify):</b>  Name:  Title/Organization:  Address:  Phone:  Fax:  Email:</p>
<p><b>County Commission Chair:</b>  Name: Franklin McCausland  Title: Chair, Quay County Commission  Address: PO Box 1246, Tucumcari, NM 88401  Phone: 575.461.2112  Fax: 575.461.8208  Email:</p>	<p><b>Other (Identify):</b>  Name:  Title/Organization:  Address:  Phone:  Fax:  Email:</p>
<p><b>Other (Identify):</b>  Name:  Title:  Address:  Phone:  Fax:  Email:</p>	<p><b>Other (Identify):</b>  Name:  Title:  Address:  Phone:  Fax:  Email:</p>
<p><b>Other (Identify):</b>  Name:  Title:  Address:  Phone:  Fax:  Email:</p>	<p><b>Other (Identify):</b>  Name:  Title:  Address:  Phone:  Fax:  Email:</p>

**Local DWI Planning Council Members – Voting Members**

<p><b>Chair:</b>                  Name: Keith Barreras                  Organization: Adult Probation                  Address: PO Box 1223, Tucumcari, NM 88401                  Phone: 575.461.2475                  Email:</p>	<p><b>Voting Member:</b>                  Name: Kacee Benford                  Organization: Mesalands Community College                  Address: 911 S 10th, Tucumcari, NM 88401                  Phone: 575.461.7842                  Email:</p>
<p><b>Voting Member:</b>                  Name: Paula Chacon                  Organization: Magistrate Court                  Address: PO Box 1301, Tucumcari, NM 88401                  Phone: 575.461.1700                  Email:</p>	<p><b>Voting Member:</b>                  Name: Judy Roybal                  Organization: CYFD                  Address: 615 S 2<sup>nd</sup>, Tucumcari, NM 88401                  Phone: 575.461.0110                  Email:</p>
<p><b>Voting Member:</b>                  Name: Chris Birch                  Organization: Quay County Detention Center                  Address: 223 W High, Tucumcari, NM 88401                  Phone: 575.461.4664                  Email:</p>	<p><b>Voting Member:</b>                  Name:                  Organization:                  Address:                  Phone:                  Email:</p>
<p><b>Voting Member:</b>                  Name:                  Organization:                  Address:                  Phone:                  Email:</p>	<p><b>Voting Member:</b>                  Name:                  Organization:                  Address:                  Phone:                  Email:</p>
<p><b>Voting Member:</b>                  Name:                  Organization:                  Address:                  Phone:                  Email:</p>	<p><b>Voting Member:</b>                  Name:                  Organization:                  Address:                  Phone:                  Email:</p>
<p><b>Voting Member:</b>                  Name:                  Organization:                  Address:                  Phone:                  Email:</p>	<p><b>Voting Member:</b>                  Name:                  Organization:                  Address:                  Phone:                  Email:</p>
<p><b>Voting Member:</b>                  Name:                  Organization:                  Address:                  Phone:                  Email:</p>	<p><b>Voting Member:</b>                  Name:                  Organization:                  Address:                  Phone:                  Email:</p>

**Local DWI Planning Council Members – Non-Voting Members**

<p><b>Non-Voting Member:</b>          Name: Bryan Rinestine          Organization: QCDWI          Address: PO Box 1011, Tucumcari, NM 88401          Phone: 575.461.6096          Email: quaydwi@plateautel.net</p>	<p><b>Non-Voting Member:</b>          Name: Susan Lease          Organization: QCASAP          Address: PO Box 1011, Tucumcari, NM 88401          Phone: 575.461.6096          Email:</p>
<p><b>Non-Voting Member:</b>          Name: Richard Primrose          Organization: Quay County Manager          Address: PO Box 1246, Tucumcari, NM 88401          Phone: 575.461.2112          Email:</p>	<p><b>Non-Voting Member:</b>          Name:          Organization:          Address:          Phone:          Email:</p>
<p><b>Non-Voting Member:</b>          Name:          Organization:          Address:          Phone:          Email:</p>	<p><b>Non-Voting Member:</b>          Name:          Organization:          Address:          Phone:          Email:</p>
<p><b>Non-Voting Member:</b>          Name:          Organization:          Address:          Phone:          Email:</p>	<p><b>Non-Voting Member:</b>          Name:          Organization:          Address:          Phone:          Email:</p>
<p><b>Non-Voting Member:</b>          Name:          Organization:          Address:          Phone:          Email:</p>	<p><b>Non-Voting Member:</b>          Name:          Organization:          Address:          Phone:          Email:</p>
<p><b>Non-Voting Member:</b>          Name:          Organization:          Address:          Phone:          Email:</p>	<p><b>Non-Voting Member:</b>          Name:          Organization:          Address:          Phone:          Email:</p>
<p><b>Non-Voting Member:</b>          Name:          Organization:          Address:          Phone:          Email:</p>	<p><b>Non-Voting Member:</b>          Name:          Organization:          Address:          Phone:          Email:</p>

**LOCAL DWI GRANT AND DISTRIBUTION PROGRAM  
REVENUE/EXPENDITURE SUMMARY**

Applicant/Grantee

Quay County

Project Funding: Distribution

Total Funds By Category

76,000.00

REVENUES BY SOURCE	EXPENDITURE BY CATEGORY	GRANT EXPENDITURES	IN-KIND/MATCH FUNDS	TOTAL BUDGET
Local DWI Program Grant	ADMINISTRATIVE*			
Program Generated Fees	Personal Services		2,645.00	2,645.00
	Employee Benefits		-	-
	Travel (In-State)		-	-
	Contractual Services		-	-
	Operating Expenses		-	-
Local Match (Cash or In-Kind)	PROGRAM			
County	Personnel Services	51,524.00	5,066.00	56,590.00
City	Employee Benefits	13,050.00	-	13,050.00
Judicial/Courts	Travel (In-State)	2,000.00	-	2,000.00
Other (list):	Travel (Out-of-State)	-	-	-
	Supplies	1,000.00	-	1,000.00
	Operating Costs	5,840.00	11,389.00	17,229.00
	Contractual Services	-	3,600.00	3,600.00
	Minor Equipment	2,586.00	-	2,586.00
	Capital Outlay*	-	-	-
	TOTALS:	76,000.00	22,700.00	98,700.00
TOTAL REVENUES			TOTAL EXPENDITURES	98,700.00

\*(1) Capital Outlay cannot exceed 10% of total grant or distribution funds.

10%=

7,600.00

\*(2) Administrative is allowed only as In-Kind Match

**LOCAL DWI GRANT AND DISTRIBUTION PROGRAM  
REVENUE/EXPENDITURE SUMMARY**

Applicant/Grantee  
Quay County

Project Funding      Distribution

Prevention  
18,581.00

REVENUES BY SOURCE	EXPENDITURE BY CATEGORY	GRANT EXPENDITURES	IN-KIND/MATCH FUNDS	TOTAL BUDGET
Local DWI Program Grant	ADMINISTRATIVE*			
Program Generated Fees	Personal Services			
	Employee Benefits			
Local Match (Cash or In-Kind)	Travel (In-State)			
County	Contractual Services			
City	Operating Expenses			
Judicial/Courts	PROGRAM			
Other (list):	Personnel Services	12,273.00		12,273.00
	Employee Benefits	6,308.00		6,308.00
	Travel (In-State)	-		-
	Travel (Out-of-State)	-		-
	Supplies	-		-
	Operating Costs	-		-
	Contractual Services	-		-
	Minor Equipment	-		-
	Capital Outlay*	-		-
	<b>TOTALS:</b>	<b>18,581.00</b>		
<b>TOTAL REVENUES</b>			<b>TOTAL EXPENDITURES</b>	<b>18,581.00</b>

\* Administrative is allowed only as In-Kind Match

62

**LOCAL DWI GRANT AND DISTRIBUTION PROGRAM  
REVENUE/EXPENDITURE SUMMARY**

Applicant/Grantee

Quay County

Project Funding Distribution

Compliance Monitoring/Tracking

41,531.00

REVENUES BY SOURCE	EXPENDITURE BY CATEGORY	GRANT EXPENDITURES	IN-KIND/MATCH FUNDS	TOTAL BUDGET
Local DWI Program Grant	ADMINISTRATIVE*			
Program Generated Fees	Personal Services		2,645.00	2,645.00
	Employee Benefits		-	-
	Travel (In-State)		-	-
	Contractual Services		-	-
	Operating Expenses		-	-
Local Match (Cash or In-Kind)				
County				
City				
Judicial/Courts	PROGRAM			
Other (list):	Personnel Services	27,476.00	5,066.00	32,542.00
	Employee Benefits	4,719.00	-	4,719.00
	Travel (In-State)	1,600.00	-	1,600.00
	Travel (Out-of-State)	-	-	-
	Supplies	700.00	-	700.00
	Operating Costs	4,450.00	11,389.00	15,839.00
	Contractual Services		3,600.00	3,600.00
	Minor Equipment	2,586.00	-	2,586.00
	Capital Outlay*		-	-
	TOTALS:	41,531.00	22,700.00	
TOTAL REVENUES				64,231.00
				TOTAL EXPENDITURES
				64,231.00

\*Administrative is allowed only as In-Kind Match

89

Exhibit C  
Consolidated Roll-up

**LOCAL DWI GRANT AND DISTRIBUTION PROGRAM  
REVENUE/EXPENDITURE SUMMARY**

Applicant/Grantee

Quay County      Project Funding      Distribution

Coordination, Planning and Evaluation  
15,888.00

REVENUES BY SOURCE	EXPENDITURE BY CATEGORY	GRANT EXPENDITURES	IN-KIND/MATCH FUNDS	TOTAL BUDGET
Local DWI Program Grant	ADMINISTRATIVE*			
Program Generated Fees	Personal Services			-
	Employee Benefits			-
	Travel (In-State)			-
	Contractual Services			-
	Operating Expenses			-
	PROGRAM			
	Personnel Services	11,775.00		11,775.00
	Employee Benefits	2,023.00		2,023.00
	Travel (In-State)	400.00		400.00
	Travel (Out-of-State)			-
	Supplies	300.00		300.00
	Operating Costs	1,390.00		1,390.00
	Contractual Services			-
	Minor Equipment			-
	Capital Outlay*			-
	TOTALS:	15,888.00		
TOTAL REVENUES			TOTAL EXPENDITURES	15,888.00

\*Administrative is allowed only as In-Kind Match

**LOCAL DWI GRANT AND DISTRIBUTION PROGRAM  
REVENUE/EXPENDITURE SUMMARY**

Applicant/Grantee: Quay County      Project Funding: Grant      Total Funds By Category: 17,264.00

REVENUES BY SOURCE	EXPENDITURE BY CATEGORY	GRANT EXPENDITURES	IN-KIND/MATCH FUNDS	TOTAL BUDGET
	ADMINISTRATIVE*			
Local DWI Program Grant	Personal Services		-	-
Program Generated Fees	Employee Benefits		-	-
	Travel (In-State)		-	-
Local Match (Cash or In-Kind)	Contractual Services		-	-
County	Operating Expenses		-	-
City				
Judicial/Courts				
Other (list):	PROGRAM			
	Personnel Services	11,450.00	-	11,450.00
	Employee Benefits	5,814.00	-	5,814.00
	Travel (In-State)	-	-	-
	Travel (Out-of-State)	-	-	-
	Supplies	-	1,726.00	1,726.00
	Operating Costs	-	-	-
	Contractual Services	-	-	-
	Minor Equipment	-	-	-
	Capital Outlay*	-	-	-
	<b>TOTALS:</b>	<b>17,264.00</b>	<b>1,726.00</b>	
<b>TOTAL REVENUES</b>				<b>18,990.00</b>
			<b>TOTAL EXPENDITURES</b>	<b>18,990.00</b>

\*(1) Capital Outlay cannot exceed 10% of total grant or distribution funds.

10%=

1,726.40

\*(2) Administrative is allowed only as In-Kind Match

**LOCAL DWI GRANT AND DISTRIBUTION PROGRAM  
REVENUE/EXPENDITURE SUMMARY**

Applicant/Grantee

Quay County      Project Funding      Grant      Prevention      17,264.00

REVENUES BY SOURCE	EXPENDITURE BY CATEGORY	GRANT EXPENDITURES	IN-KIND/MATCH FUNDS	TOTAL BUDGET
	ADMINISTRATIVE*			
Local DWI Program Grant	Personal Services		-	-
Program Generated Fees	Employee Benefits		-	-
	Travel (In-State)			
Local Match (Cash or In-Kind)	Contractual Services			
County	Operating Expenses			
City				
Judicial/Courts	PROGRAM			
Other (list):	Personnel Services	11,450.00	-	11,450.00
	Employee Benefits	5,814.00	-	5,814.00
	Travel (In-State)			
	Travel (Out-of-State)			
	Supplies		1,726.00	1,726.00
	Operating Costs			
	Contractual Services			
	Minor Equipment			
	Capital Outlay*			
	<b>TOTALS:</b>	<b>17,264.00</b>	<b>1,726.00</b>	
<b>TOTAL REVENUES</b>			<b>TOTAL EXPENDITURES</b>	<b>18,980.00</b>

\* Administrative is allowed only as In-Kind Match

**APPLICATION FOR LAW ENFORCEMENT PROTECTION FUNDS  
FOR CLASS 1 MUNICIPALITIES AND COUNTIES  
PURSUANT TO CHAPTER 29, ARTICLE 13 NMSA 1978  
FOR THE JULY 1, 2015 - JUNE 30, 2016 FISCAL YEAR**

I. Municipality or County: QUAY COUNTY

II. Computation of Proposed Distribution:

A. Class 1 (Population per 2010 Census = 0 to 20,000) \$20,000

B. Total Number of Full-Time Certified Police Officers or Sheriff Deputies (\*) multiplied by \$600:  
\* 7 X \$600 = \$4,200

(\*) Each officer or Deputy must be certified by the New Mexico Law Enforcement Academy pursuant to Section 29-7-8 NMSA or authorized as a New Mexico peace Officer pursuant to Section 29-1-11 NMSA. Certification status must be current on the registry at the Law Enforcement Academy.

C. Total Proposed Distribution\*\* (A + B) \$24,200

III. Amounts distributed from the Law Enforcement Protection Fund must be expended only for the purposes allowed by Section 29-13-7 NMSA 1978. Please itemize the proposed use of these funds below:

A. Repair and purchase of law enforcement apparatus and equipment (itemized schedule, page 3, must be completed) which meet minimum nationally recognized standards. (Please Note: regular maintenance on vehicles and police equipment; office furniture and supplies; or operating expenses are not allowable expenses) Rule 2 NMAC 110.3	\$ 24,200
B. Expenses associated with advanced law enforcement planning and training.	
C. Complying with match or contribution requirements for the receipt of federal funds relating to criminal justice programs.	
D. No more than fifty percent (50%) of the replacement salaries of law enforcement personnel participating in basic law enforcement training.	
E. New Mexico Finance Authority Intercept Agreement.	
F. <b>TOTAL ESTIMATED EXPENDITURES**</b> (must equal total distribution)	\$ 24,200

\*\* Total Estimated Expenditures from Section III B must equal the amount of Total Proposed Distribution in Section II.

IV. **CERTIFICATION:** Under penalty of law, we hereby certify that to the best of our knowledge and belief, the information contained in this application is correct, and that all expenditures of Law Enforcement Protection Fund monies will be made in accordance with Sections 29-13-7 and 29-13-9 NMSA 1978, as well as Rule 2 NMAC 110.3.



*[Signature]*  
Mayor/Chairman

*[Signature]*  
Police Chief or Sheriff

2/9/2015  
Date

Applies only to municipalities with a population of 1500 or less and universities.

Municipality/County: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Phone Number: \_\_\_\_\_

**APPLICATION FOR LAW ENFORCEMENT PROTECTION FUNDS  
FOR MUNICIPALITIES AND COUNTIES  
PURSUANT TO CHAPTER 29, ARTICLE 13 NMSA 1978  
FOR THE JULY 1, 2015 - JUNE 30, 2016 FISCAL YEAR**

**SUPPLEMENTAL SCHEDULE**

Instructions: List the name, certificate number, and date of certification of all full-time police officers and sheriff deputies certified by the New Mexico Law Enforcement Academy pursuant to Section 29-7-8 NMSA 1978 or authorized to act as a New Mexico peace officer pursuant to Section 29-1-11 NMSA 1978. Please photocopy this form if additional space is needed.

Name of Full-Time Certified Police Officers and Sheriff Deputies	Certificate Number	Cert. Date
1) Russell Shafer	05-0077-P	05/19/2005
2) Dennis Garcia	04-0246-P	09/17/2004
3) Larry Cooksey	88-0195-P	09/15/1988
4) Dennis Smart	08/27/75	08/27/1975
5) Darvan Shane Strand	02-0195-P	08/22/2002
6) Charles Ben Gates	97-0318-P	11/20/1997
7) Reyes E Gonzales	09-0271-P	12/11/2009
8)		
9)		
10)		
11)		
12)		
13)		
14)		
15)		
16)		
17)		
18)		
19)		
20)		
21)		
22)		

NOTE: Please use name that has been reported to The Department of Public Safety (DPS), e.g. if female officer has married/divorced and has changed last name and has not been reported to DPS.



# QUAY COUNTY SHERIFF'S OFFICE

*SHERIFF RUSSELL SHAFER*  
*CHIEF DEPUTY DENNIS GARCIA*



## Quay County Sheriff's Office Monthly Activity Report

**Month of February 2015:**

Total Calls for Service Responded to: **118**

Total Civil Process: **204**

Total Transports: **15**

Total Citations: **6**

Total Arrests: **4**