



# MULTNOMAH COUNTY AGENDA PLACEMENT REQUEST

(Revised: 8/18/11)

### Board Clerk Use Only

Meeting Date: 9-37-23  
 Agenda Item #: R.6  
 Est. Start Time: 9:55 am  
 Date Submitted: 9-12-12

**Agenda Title: Requesting Board Approval of SE Health Clinic FAC-1 Phase 2 Project Design & Construction for SEHC Primary Care Remodel**

*Note: If Ordinance, Resolution, Order or Proclamation, provide exact title. For all other submissions, provide a clearly written title sufficient to describe the action requested.*

**Requested Meeting Date:** September 27<sup>th</sup>, 2012      **Time Needed:** 10 minutes  
**Department:** County Assets/Health      **Division:** FPM/Health  
**Contact(s):** Greg Hockert / Wendy Lear  
**Phone:** 503-988-6975      **Ext.** 86975      **I/O Address:** 274/1  
**Presenter Name(s) & Title(s):** Greg Hockert and Wendy Lear

## General Information

### 1. What action are you requesting from the Board?

Request approval of Southeast Health Clinic (SEHC) FAC-1 Phase 2 Project Design and Project Construction for SEHC Primary Care Remodel.

### 2. Please provide sufficient background information for the Board and the public to understand this issue. Please note which Program Offer this action affects and how it impacts the results.

**FAC-1 Informational Packet Attached**

### 3. Explain the fiscal impact (current year and ongoing).

The total Southeast Health Center project cost is \$1,996,000. Multnomah County Health Department (MCHD) secured \$279,000 in the FY2013 budget for the relocation of Environmental Health and Regional Arts and Culture Council (RACC) fees.

Of the remaining \$1,717,000 in project costs, \$118,000 was expensed in FY2012. The Board of County Commissioners budgeted \$802,015 in contingency with MCHD to return to the Board when budget, financing, and construction plans are finalized through the FAC-1 process. CareOregon has committed \$500,000 toward this project and MCHD continues to reach out to other partners to fund the remaining \$296,985 for this project.

Budget Modification approval will be conducted through a separate board action.

4. Explain any legal and/or policy issues involved.

None

5. Explain any citizen and/or other government participation that has or will take place.

None

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**Required Signature**

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Elected  
Official or  
Department  
Director:

  
\_\_\_\_\_  
Sherry Swackhamer

Date: 9-12-12