



## MULTNOMAH COUNTY AGENDA PLACEMENT REQUEST NOTICE OF INTENT

(Revised: 5/24/13)

### Board Clerk Use Only

Meeting Date: 8/1/13  
Agenda Item #: C.1  
Est. Start Time: 9:30 am  
Date Submitted: 7/22/13

**NOTICE OF INTENT for the Health Department to submit an application for up to \$30,000 to the CDC STRYVE Understanding Adaptations to**  
**Agenda YES grant to advance the Multnomah County Health Department**  
**Title: STRYVE Initiative**

*Note: This APR is for NOI's only. APRs are available for other types of submittals. Title should not be more than 2 lines but be sufficient to describe the action requested.*

**Requested Meeting Date:** August 1, 2013 **Time Needed:** N/A – Consent Only  
**Department:** Health **Division:** Community Capacitation Center  
**Contact(s):** Rebecca Stavenjord; Laurel Bentley  
**Phone:** 503-927-1823; (na); 503-988-3663 **Ext.** x25343 **I/O Address:** 488/2; 160/9  
**Presenter Name(s) & Title(s):** N/A – CONSENT ONLY

### General Information

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

Authorization for the Health Department Director to submit an application for up to \$30,000 from the Center for Disease Control and Prevention (CDC) to advance the Multnomah County Health Department (MCHD) Community Capacitation Center (CCC) Striving To Reduce Youth Violence Everywhere (STRYVE) Initiative implementation phase.

#### 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.

The MCHD Community Capacitation Center (CCC) works to build capacity in communities to identify and implement solutions to local public health problems, including youth violence. In 2011, the MCHD CCC was awarded a STRYVE grant from the Centers for Disease Control and Prevention to build off its current violence prevention work and address youth violence in North and Northeast Portland. The STRYVE initiative helps

communities take a public health approach to preventing youth violence before it starts. The STRYVE Program activities are being implemented in two phases. Phase 1 (planning phase) will be successfully completed in by September 1, and the CCC STRYVE Program has selected two evidence-based prevention strategies to implement during this second phase: Crime Prevention Through Environmental Design (CPTED, community level), and Youth Empowerment Solutions (YES!, school level). During the first year of Phase 2 (September 2013-August 2014) STRYVE will focus on implementing and evaluating YES and CPTED in N/NE Portland. Phase 2 will begin in September, 2013.

The CDC Adaptation project aims to advance the STRYVE Initiative's work related to successful program implementation, in particular, implementation of the YES program. Building on STRYVE's existing implementation evaluation, the Adaptation project will provide additional resources to eligible and interested grantees for one full year to systematically track the adaptations of YES. Grantees will also receive technical assistance and resources to enhance their capacity to track this information. The project will explore the implementation and adaptation of YES with the goal of developing guidance, tools, and other adaptation resources for individuals involved in the dissemination and implementation of this and other evidence-based interventions. The project is designed to enhance the capacity of grantees to systematically track the adaptation of the Youth Empowerment Solutions program.

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

The grant will provide the Health Department with up to \$30,000 for one year from September 1, 2013 to August 30, 2014.

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

The project includes no legal or policy issues.

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

The STRYVE Coalition is currently comprised of over 50 members from various Multnomah County departments (including the Chair's Office, Health Department, Department of County Human Services, and Department of Community Justice), Multnomah Youth Commission, the local community, local community based organizations, faith based organizations, Portland State University, Portland Police Bureau, and Gresham Police Department. This Coalition has been actively engaged in planning, evaluating, and implementing the Phase 1 strategic plan, including assessment, coordination with data analysis, and youth engagement activities. During the project period, the Coalition will continue to advise and provide input on activities for Phase 2 implementation, including activities funded by this CDC grant.

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## Grant Application/Notice of Intent

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If the request is a Grant Application or Notice of Intent, please answer all of the following in detail:

- **Who is the granting agency?**  
The Centers for Disease Control and Prevention (CDC).
- **Specify grant (matching, reporting and other) requirements and goals.**  
There are no matching requirements for this grant.
- **Explain grant funding detail – is this a one time only or long term commitment?**  
This is a one time award that will expand grant activities for one year.
- **What are the estimated filing timelines?**  
The application is due July 31, 2013. Should the board not approve this intention to apply, MCHD will immediately withdraw it's application.
- **If a grant, what period does the grant cover?**  
The grant will cover the period from September 1, 2013 to August 30, 2014.
- **When the grant expires, what are funding plans?**  
When the grant expires the project will be complete. Other funding sources will be identified to continue project activities as needed.
- **Is 100% of the central and departmental indirect recovered? If not, please explain why.**  
Yes, 100% of indirect costs are covered by grant funds.

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## Required Signatures

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<b>Elected Official or Department/ Agency Director:</b>	KaRin Johnson for Lillian Shirley/s/	<b>7/22/2013</b>
<b>Name/Title:</b>	_____	<b>Date:</b> _____
	Jennifer Unruh /s/	<b>7/22/13</b>
<b>Budget Analyst:</b>	_____	<b>Date:</b> _____
<b>Name/Title:</b>		

*Note: Please submit electronically. We are no longer using actual signatures. Insert names of your approvers followed by /s/. Please insert date approved*