



MULTNOMAH COUNTY AGENDA PLACEMENT REQUEST NOTICE OF INTENT

(Revised: 9-24-15)

APPROVED: MULTNOMAH COUNTY
BOARD OF COMMISSIONERS

AGENDA # C.2 DATE 4/13/17
MARINA BAKER, ASST BOARD CLERK

Board Clerk Use Only

Meeting Date: 4/13/17
Agenda Item #: C.2
Est. Start Time: 9:30 am
Date Submitted: 4/3/17

Agenda NOTICE OF INTENT for submission of a grant application to the
Title: Portland Water Bureau's Lead Hazard Reduction Program

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:	<u>04/13/2017</u>	Time Needed:	<u>N/A; consent</u>
Department:	<u>Health</u>	Division:	<u>Public Health</u>
Contact(s):	<u>Andrea Hamberg, Marc Harris</u>		
Phone:	<u>503-988-9406</u>	<u>89406</u>	<u>231/3/350</u>
Presenter Name(s) & Title(s):	<u>503-988-8693</u>	Ext. <u>88693</u>	I/O Address: <u>160/9</u>
	<u>N/A</u>		

A Notice of Intent is required to obtain approval from the Board of County Commissioners to ensure a competitive grant proposal is in alignment with the County's mission; to receive an indication from the Board of its willingness to commit the necessary County resources to support the grant. A Budget Modification is required to appropriate funds received from a successful grant proposal.

Notice of Intent Specific Information

Department recommendation for consent agenda placement (*must meet all criteria*):

- Proposal is under \$500,000/ year.
- Proposal does not require cash match as part of the budget.
- Proposal does not commit County to on-going programming following award.
- Proposal adheres to the County's indirect guidelines.
- Proposal is within the Department's strategic direction.
- Proposal does not have policy and/or legal implications that warrant a public dialog.

☒ To the best of my knowledge, this proposal adheres to all of the above criteria and may be placed on the Board of County Commissioner's Consent Agenda. I understand the proposal can be moved to the regular Board Agenda for any reason by Commissioners or their staff.

☐ To the best of my knowledge, this proposal does not meet criteria for placement on the Consent Agenda and should be placed on the Regular Agenda.

Please complete for any NOI:

Granting Agency	Portland Water Bureau
Proposal due date	March 31, 2017
Grant period	July 1, 2017 – June 30, 2018
Approximate level of funding by year	\$225,000
Program Offer(s) potentially impacted	40037
How do you expect to spend the majority of funds? (check all that apply)	<input checked="" type="checkbox"/> Personnel <input type="checkbox"/> Sub-contracts <input type="checkbox"/> Capital (including equipment)
Does grant require match? If so, describe type (cash, FTE, etc) and %	No

1. Brief overview of grant's purpose and/or impact.

The purpose of the Portland Water Bureau Lead Hazard Reduction Program Community Education and Outreach Grants is to provide lead hazard education, outreach, testing, and remediation to high-risk populations. The Health Department has been a long-term grantee of this program. Funds are used to support the LeadLine, an informational and referral phone line that responds to over 3,000 calls each year, and associated outreach activities; the LeadLine website, which is designed to raise awareness of lead risk, prevention, testing, and resources; lead screening of around 1,000 children in community settings and 3,000 in MCHD health centers; and case management for 20-30 children, as indicated by lead screening.

2. Brief overview of how proposal is aligned with Department's strategic direction.

Program activities are aligned with the Health Department's mission *to assure, promote, and protect the health of the people of Multnomah County in partnership with the communities we serve*. The program also aligns with the Health Department Strategic Framework's broad goal to *Prioritize investments in programs and infrastructure that improve health outcomes and health equity*.

3. Describe any community and/or government input considered in planning for this grant.

None.

4. What partners may be included in program activities?

The program has numerous established partnerships with organizations for community education, outreach, testing, and referral. Partners include Community Energy Project, Growing Gardens, Oregon Health Authority, Community Alliance of Tenants, City of Portland, Portland Housing Bureau, Fair Housing Council, International Center for Traditional Childbearing, Department of Environmental Quality, Immigrant and Refugee Community Organization, Head Start programs, and other Health Department programs.

5. Generally, what are the grant's reporting requirements?

Grantees are expected to report on a quarterly basis on the progress towards meeting program objectives.

Please complete for NOIs on the Regular Board Agenda ONLY:

6. When the grant expires, will your Department continue to fund the program? If so, how?

7. Are 100% of the central and departmental indirect costs recovered? If not, please explain.

8. If the proposal is not aligned with your Department's strategic direction, explain why you are pursuing it at this time.

9. If the grant requires a cash match, how will you meet that requirement?

10. Are there policy issues and/or legal implications related to this proposal that may warrant a public dialog? If so, please explain.

Required Signatures

**Elected Official
or Department/
Agency Director:**

Joanne Fuller /s/

Date: 4/3/2017

Budget Analyst:

Jeff Renfro /s/

Date: 4/3/2017

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