



**MULTNOMAH COUNTY
AGENDA PLACEMENT REQUEST
NOTICE OF INTENT**

(Revised: 8/18/11)

APPROVED: MULTNOMAH COUNTY
BOARD OF COMMISSIONERS
AGENDA # R.8 DATE 6-27-13
YVONDA GROW, BOARD CLERK

Board Clerk Use Only

Meeting Date: 6/27/13
Agenda Item #: R.8
Est. Start Time: 10:35 am
Date Submitted: 6/12/13

Agenda Title: NOTICE OF INTENT to submit an application for up to \$250,000 over up to a 3 year period to Providence/OCF at-risk youth funding opportunity

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: 6/27/13 **Time Needed:** 5 min.

Department: Health **Division:** Integrated Clinical Services

Contact(s): Alison Frye, Jill Daniels, Tom Eby
27029;
29751;

Phone: 503-988-3663 **Ext.** 29749 **I/O Address:** 160/9; 439;439

Presenter Name(s) & Title(s): Jill Daniels, Tom Eby, Alison Frye

General Information

1. What action are you requesting from the Board?

Authorization for the Director of the Health Department to submit an application for up to \$250,000 over up to 3 years to the Providence Health Plan Community Benefit Fund of the Oregon Community Foundation to address risks in young people related to suicide and substance abuse.

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.

For children and youth, the area of mental health poses unique concerns. More than 14 million children in the United States – or one in five – have a diagnosable mental health disorder that requires intervention or monitoring and interferes with daily functioning. An estimated two-thirds of these children do not get the help they need. (American Academy of

Pediatrics^{www.aap.org}). In Oregon, 39,000 children live with a serious mental health condition. Suicide is the second leading cause of death among youth and young adults. (^{www.nami.org}, 2012); the number of reported suicide attempts resulting in hospitalization or death per 100,000 children in Oregon is 192 and increases to 241 in Multnomah County. Results of screenings of Oregon youths age 10 to 17 indicate 10 percent have suffered a major depressive incident. (Substance Abuse and Mental Health Services Administration (SAMHSA) 2010). Substance abuse is also concerning with 5 percent of Oregon youth reporting illicit drug abuse and 6 percent experiencing alcohol abuse or dependence (SAMHSA 2010)

Multnomah County Health Department (MCHD) intends to submit a proposal supporting targeted mental health and substance abuse screening, prevention and education within our School-Based Health Center (SBHC) Program, with a focus on the new SBHC at Centennial High School. Project staff will work to build partnerships within the Centennial school community including school faculty and staff, area SUN schools, parent organizations, school clubs and groups, and community organizations. Activities will include nursing screening and intervention around depression and substance abuse; facilitated small group work; outreach; working with the Youth Advisory Council (YAC) to implement peer-led activities within the school; and using technology to support these activities and enhance client experience.

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

The grant will provide the Health Department with up to \$250,000 over up to a 3 year period.

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

No legal or policy issues involved.

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

Participation will include members of the Centennial school community (parents, students, community members, teachers, administrators, etc.)

Grant Application/Notice of Intent

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 granting agency is Oregon Community Foundation in Partnership with Providence Health Plan.

• **Specify grant (matching, reporting and other) requirements and goals.**

The goal of the grant is to improve the health of youth through improvements in education, prevention and access to services for depression, suicide and substance abuse. Reports are required annually. No matching funds are required.

• **Explain grant funding detail – is this a one time only or long term commitment?**

Funds are one time only for up to 3 years.

• **What are the estimated filing timelines?**

The application is due on July 1st, 2013.

- **If a grant, what period does the grant cover?**
The grant period begins November 1, 2013 and is for up to 36 months.
- **When the grant expires, what are funding plans?**
MCHD will pursue additional funding for the project after the grant period and will rely on SBHC revenue after Centennial is running.
- **Is 100% of the central and departmental indirect recovered? If not, please explain why.**
Yes.

Required Signatures

Elected Official or Department/ Agency Director: KaRin Johnson for **06-11-13**
Date:

Lillian Shirley

 (signature)

Name/Title:

Budget Analyst: Althea Gregory /s/ **Date: 6-12-13**
 (signature)

Name/Title: