



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

(Revised: 9-24-15)

**Board Clerk Use Only**

Meeting Date: 1/7/16  
 Agenda Item #: C.8  
 Est. Start Time: 9:30 am  
 Date Submitted: 12/21/15

**Agenda NOTICE OF INTENT: to apply for Office of Violence Against Women  
 Title: OVW, Justice for Families, Supervised Visitation and Exchange Grant**

*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:** 1/7/2015 **Time Needed:** N/A  
**Department:** Department of Community Justice **Division:** Juvenile Services  
**Contact(s):** Karen Rhein  
**Phone:** 503 988-5819 **Ext.** 85819 **I/O Address:** 503-250  
**Presenter Name(s) & Title(s):** Consent Calendar

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:**

<b>Granting Agency</b>	U.S. Department of Justice, Office of Violence Against Women
<b>Proposal due date</b>	January 20, 2016
<b>Grant period</b>	10/1/2016 to 9/30/2019
<b>Approximate level of funding by year</b>	\$150,000 to \$200,000
<b>Program Offer(s) potentially impacted</b>	50053 – FCS – Justice for Families – Supervised Parenting Time
<b>How do you expect to spend the majority of funds? (check all that apply)</b>	<input checked="" type="checkbox"/> Personnel <input checked="" type="checkbox"/> Sub-contracts <input type="checkbox"/> Capital (including equipment)
<b>Does grant require match? If so, describe type (cash, FTE, etc) and %</b>	No

1. **Brief overview of grant’s purpose and/or impact.**  
This is a three year solicitation to continue support of an existing grant funded program. The program provides safe supervised parenting time to families that have experienced domestic violence. The program also provides safe exchange options for families no longer needing supervised parenting time but still in need of safety at exchanges.
  
2. **Brief overview of how proposal is aligned with Department’s strategic direction.**  
Provision of public safety options is a priority for DCJ. This extends to children and survivors of domestic violence. The intent includes continuation of the parent/child relationship in a safe and controlled environment
  
3. **Describe any community and/or government input considered in planning for this grant.**  
This program has a Core group of community partners that meets quarterly. This core group includes domestic violence program providers, judges, county social service professional and domestic relations attorneys. The core group was integrally involved in program development. OVW provides ongoing technical assistance and training.
  
4. **What partners may be included in program activities?**  
Legal Aide Services of Oregon receives limited funding to provide legal assistance to victims of Domestic Violence. Services are delivered to referrals from Washington and Clackamas Counties in this tri-county coordinated program. DV, social service, legal aid and representatives from Washington and Clackamas Counties are partners in the planning and implementation of this program.
  
5. **Generally, what are the grant’s reporting requirements?**  
Bi-annual reports to OVW, monthly service level reports to core group members.

**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.

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## Required Signatures

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Elected Official  
or Department/  
Agency Director: \_\_\_\_\_

Scott Taylor, Director /s/

Date: 12/21/15