



MULTNOMAH COUNTY AGENDA PLACEMENT REQUEST BUDGET MODIFICATION

(Revised: 09/23/13)

APPROVED: MULTNOMAH COUNTY
BOARD OF COMMISSIONERS
AGENDA # R.6 DATE 1-9-14
LYNDA GROW, BOARD CLERK

Board Clerk Use Only

Meeting Date: 1/9/14
Agenda Item #: R.6
Est. Start Time: 10:20 am
Date Submitted: 12/13/13

Agenda Title: BUDGET MODIFICATION: DCHS14-27 Increasing DCHS' Community Services
Local/Other Fund Appropriation by \$700,000

Note: if Contingency, use that form. If item other than a BudMod, please use different APR. : Title should not be more than 2 lines but sufficient to describe the action requested.

Requested Meeting Date: 1/9/14 Time Needed: 10 Minutes
Department: DCHS Division: Community Services
Contact(s): Mary Li
Phone: 503-988-7497 Ext. 87497 I/O Address: 167/240
Presenter Name(s) & Title(s): Mary Li, Manager Sr.- Community Services Division

General Information

1. What action are you requesting from the Board?

The Department of County Human Services (DCHS), Community Services Division is requesting approval of budget modification DCHS14-27, which increases the Community Services Division FY2014 budget by \$700,000 in new one-time-only funds for the Home Start for Family Program.

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 City of Portland allocated additional funding to Contract #30003459 for the "Home Start for Families" program, inspired by the vision that "No one should be homeless – everyone needs a safe, stable place to call home." (A Home for Everyone: A United Community Plan to End Homelessness for Portland/ Multnomah County).

The program will assist families with children who are currently experiencing homelessness, in shelter, on shelter waiting lists, in unsafe or unstable living situations, or as identified through culturally specific providers, who meet specific vulnerability factors. The program will prioritize serving families from communities of color, as well as families who are vulnerable from being harmed on the streets, including but not limited to, survivors

of sexual assault or domestic violence, and those with serious mental illnesses or health conditions. The households will be placed into permanent housing and eighty percent of the households placed in permanent housing will remain in housing twelve months after the end of rent subsidy.

This one-time-only funding will provide Homeless Family Shelter Rent Assistance & Services for approximately 200 additional families for the remainder of FY2014. Any unexpended funding will be carried forward to continue these services into FY2015.

This funding will be included in the Community Services Homeless Family Shelter and Emergency Services Program Offer 25111A.

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

The FY2014 fiscal year budget for the Community Services Division will increase by \$700,000 in Contracted Pass-Through expenses. Any unexpended funds at the end of FY2014 will be carried forward to provide these services in FY2015.

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

N/A

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

N/A

Budget Modification

If the request is a Budget Modification, please answer all of the following in detail:

- **What revenue is being changed and why? If the revenue is from a federal source, please list the Catalog of Federal Assistance Number (CFDA).**

Funding from the City of Portland general fund will increase by \$700,000. There is no CFDA number.

- **What budgets are increased/decreased?**

The FY2014 budget for Community Services Division Homeless Family Shelter and Emergency Services Program Offer # 25111A, will increase by \$700,000.

- **What do the changes accomplish?**

The added funding will provide Homeless Family Shelter Rent Assistance & Services for approximately 200 additional families.

- **Do any personnel actions result from this budget modification? Explain.**

No

- **If a grant, is 100% of the central and department indirect recovered? If not, please explain why.**

No. This grant does not pay County indirect charges.

- **Is the revenue one-time-only in nature? Will the function be ongoing? What plans are in place to identify a sufficient ongoing funding stream?**

This funding is one-time-only. After the funding is exhausted, program will return to prior service levels.

- **If a grant, what period does the grant cover? When the grant expires, what are funding plans? Are there any particular stipulations required by the grant (i.e. cash match, in kind match, reporting requirements etc)?**

This is one-time only revenue. The grant period ends December 31, 2014
There are no cash match or in kind match requirements.

NOTE: Attach a Budget Modification Expense & Revenues Worksheet and/or a Budget Modification Personnel Worksheet.

Required Signatures

Elected Official or Dept Director: Kathy Tinkle for Susan Myers /s/ **Date:** 12/13/13

Budget Analyst: Jennifer Unruh /s/ **Date:** 12/13/2013

Department HR: N/A **Date:** _____

Countywide HR: N/A **Date:** _____

Note: Please submit electronically. Insert names of your approvers followed by /s/ - we no longer use actual signatures. Please date each signature. Use "n/a" when signature not applicable.

DCHS14-27

EXPENDITURES & REVENUES

Please show an increase in revenue as a negative value and a decrease as a positive value for consistency with SAP.

Budget/Fiscal Year: 2014

Line No.	Fund Center	Fund Code	Program #	Func. Area	Accounting Unit			Cost Element	Current Amount	Revised Amount	Change Increase/ (Decrease)	Description
					Internal Order	Cost Center	WBS Element					
1	22-10	27190	25111A	40			SCPCHFSS.PDXGF	50200	0	(700,000)	(700,000)	IG-OP-Other
2	22-10	27190	25111A	40			SCPCHFSS.PDXGF	60160	0	700,000	700,000	Pass Through
3										0		
4										0		
5										0		
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