



MULTNOMAH COUNTY AGENDA PLACEMENT REQUEST NOTICE OF INTENT

(Revised: 9-24-15)

Board Clerk Use Only

Meeting Date: 11/30/17
Agenda Item #: C.4
Est. Start Time: 9:30 am
Date Submitted: 11/16/17

Agenda NOTICE OF INTENT to Apply for the Canine Behavior Modification & Rehabilitation Program—Lazin Animal Foundation

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>November 30, 2017</u>	Time Needed:	<u>Consent Calendar</u>
Department:	<u>DCS</u>	Division:	<u>Animal Services</u>
Contact(s):	<u>Jackie Rose</u>		
Phone:	<u>503-988-6233</u>	Ext.	<u></u>
Presenter Name(s) & Title(s):	<u>N / A</u>		
		I/O Address:	<u>324/1</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	Lazin Animal Foundation
Proposal due date	November 28, 2017
Grant period	TBD by Foundation upon award
Approximate level of funding by year	\$75,000
Program Offer(s) potentially impacted	Animal Care
How do you expect to spend the majority of funds? (check all that apply)	<input checked="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.

This grant will fund a one-time pilot project to hire a temporary full-time canine behavior specialist specifically dedicated to implementing behavior modification plans for dogs within our shelter. The purpose of this activity is to increase adoptability and decrease the length of stay for program-targeted dogs. Through intensive behavior modification and rehabilitation activities, MCAS will be able to provide greater information to potential adopters regarding a specific dog's needs and will be able to offer support and guidance for integration into the adopter's home. These activities will increase ability to adopt some of the "more difficult" dogs as well as help to increase the adopter's ability to retain them in their home, thus not returning to the shelter.

This position will allow for greater consistent work with dogs in the shelter who are exhibiting fear-based and unsocial behaviors that constitute barriers to adoption. This program will impact an average of 120 dogs each year.

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

The Department of Community Services (DCS) and Multnomah County Animal Services (MCAS) are dedicated to providing the highest quality of care to the animals that we serve and offering each and every adopter the greatest opportunity to successfully integrate their new pet into their home. Our commitment to quality service and keeping people and pets safe is paramount to our daily programs. This grant will provide the opportunity to offer targeted, behavior modification programming to the more difficult dogs that we serve and support the citizens of Multnomah County who accept these animals into their homes.

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

MCAS consistently receives feedback from the community regarding the value of increased canine behavior modification and training programs. However, due to limited funding, MCAS is unable to provide a dedicated program to meet these needs. The requested funding will help to build this model of care for MCAS

4. What partners may be included in program activities?

MCAS currently works with over thirty (30) rescues/shelters as transfer partners and transfer animals to them for adoption services. However, the "more difficult" dogs are often either not accepted by these partners or are deemed not appropriate for transfer by MCAS due to their behaviors. It is anticipated that a greater number of these dogs will become eligible for transfer with enhanced behavior modification interventions.

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

Lazin Animal Foundation requires specific outcomes/deliverables to be developed for each grant with periodic reporting culminating in an End of Grant Cycle Report.

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:**

Kim Peoples /s/

Date: Nov. 16, 2017

Budget Analyst:

Chris Yager

Date: 11/16/2017

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