



MULTNOMAH COUNTY AGENDA PLACEMENT REQUEST NOTICE OF INTENT

(revised 08/02/10)

Board Clerk Use Only

Meeting Date: 10/27/11
Agenda Item #: C.3
Est. Start Time: 9:30 am
Date Submitted: 10/18/11

Agenda Title: **NOTICE OF INTENT to submit an application for \$40,000 to the National Association of Chronic Disease Directors' Action Communities for Health, Innovation, and Environmental Change (ACHIEVE) Mentor Technical Assistance Program.**

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: November 3, 2011
Amount of Time: N/A
Department: Health
Division: Community Health Services, Community Wellness and Prevention
Contact(s): Rachael Banks, Program Supervisor, and Tom Waltz, Health Services Development Administrator
Phone: 988-3663 **Ext.** 22975/22670 **I/O Address:** 448/2, 160/9
Presenter Name(s) & Title(s): N/A

General Information

1. What action are you requesting from the Board?

Authorize the Director of the Health Department to submit an application for \$40,000 to the National Association of Chronic Disease Directors' ACHIEVE Mentor Technical Assistance 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 purpose of the ACHIEVE Mentor Technical Assistance Program is to provide guidance, support and technical assistance to new National Association of Chronic Disease Directors (NACDD) 2012 ACHIEVE communities to assist these communities in addressing chronic disease risk factors of physical inactivity, poor nutrition, and tobacco use at the policy, systems, and environmental change level to reduce the burden of chronic diseases such as obesity, diabetes, and cardiovascular disease. ACHIEVE is part of a broader Healthy Communities collaborative with the CDC, Y-USA, the National Association of County and City Health Officials (NACCHO), and the National Recreation and Parks Association (NRPA). The Multnomah County Health Department has been an ACHIEVE grantee since 2009, focusing its program on reducing behavioral risks for chronic disease among African Americans.

If selected, the Department will be matched with a new NACDD 2012 ACHIEVE community in order to serve in a mentor capacity. The mentor role will include assisting in supporting sustainability efforts for the new communities and also serving as a subject matter "expert" to any of the NACDD-funded ACHIEVE teams from 2008 - 2012.

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

This grant will provide the Department with \$40,000 over two years to fund staff time and travel to fulfill the mentor role.

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

None.

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

None.

ATTACHMENT A

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 the National Association of Chronic Disease Directors.

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

The goal of this grant is to provide new ACHIEVE grantees with the expertise of current grantees. No match is required. Bi-annual reporting is required through an online system.

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

The \$40,000 award will be distributed as \$20,000 each year for the two-year grant period.

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

The application is due on November 7, 2011.

• **If a grant, what period does the grant cover?**

The grant covers the two year period of January 2012 through December 2013.

• **When the grant expires, what are funding plans?**

The project will be over when the grant expires.

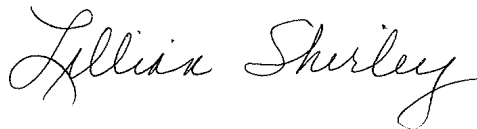
• **Is 100% of the central and departmental indirect recovered? If not, please explain why.**

Yes, the grant will cover 100% of indirect costs.

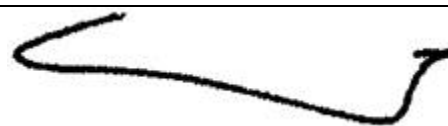
ATTACHMENT B

Required Signatures

Elected Official or
Department/
Agency Director:



Date: 10/19/2011



10/19/11

Budget Analyst:

Date: _____