

Rodney A. Cook Director

August 15, 2024	BCC Agenda Date/Item:	
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Board of County Commissioners Clackamas County

Approval of a grant agreement with the US Department of Housing and Urban Development for Continuum of Care Planning Activities. Total grant value is \$234,704 for one year. Funding through the US Department of Housing and Urban Development. The 25% match requirement is met through Supportive Housing Services Fund investments.

No County General Funds are involved.

Previous Board	9/21/23 – Approval to Apply for grant funding - 20230921 IV.E.3			
Action/Review	8/13/24 – Item briefed at	8/13/24 – Item briefed at Issues		
Performance	This funding aligns w	This funding aligns with H3S's Strategic Business Plan goal to increase		
Clackamas	self-sufficiency for our clients.			
	This funding helps to ensure a safe, healthy and secure community by coordinating federally funded housing access and services throughout Clackamas County.			
Counsel Review	Yes	Procurement Review	No	
Contact Person	Vahid Brown, HCDD Deputy Director	Contact Phone	(971)334-9870	

EXECUTIVE SUMMARY: On behalf of The Housing and Community Development Division, Health, Housing and Human Services requests approval of a grant agreement with the US Department of Housing and Urban Development (HUD) for Continuum of Care (CoC) planning activities, valued at \$234,704 for one year, October 1, 2024-September 30, 2025. The CoC is a HUD-mandated administrative and organizational local response to homelessness.

CoC planning activities include preparing, planning and designing the continuum's annual application to HUD for homeless services, participating in the Consolidated Plan process, evaluating the outcomes of CoC projects and monitoring recipients of CoC funds for compliance with program requirements. This agreement is identical in terms of our last award; however, the award amount was increased from \$119,935 to \$234,704 for this program year. The 25% match requirement is met by Supportive Housing Services fund investments. The application for this grant was submitted to HUD as part of the annual CoC NOFO application last fall.

RECOMMENDATION: Staff recommends the Board approve grant agreement #11778 with HUD to fund CoC planning activities.

Respectfully submitted, Rodney A. Cook Rodney A Cook Director of Health Housing and Human Services	For Filing Use Only



U.S. Department of Housing and Urban Development Office of Community Planning and Development 1220 SW 3rd Avenue Suite 400 Portland, OR 97204-2830

Grant Number: OR0383L0E072300

Recipient's Name: Clackamas County Department of Health, Housing and Human Services

Tax ID Number: 93-6002286

Unique Entity Identifier [SAM]: NVWKAVB8JND6

Federal Award Date: 7/18/2024

CONTINUUM OF CARE PROGRAM (CDFA# 14.267) GRANT AGREEMENT

This Grant Agreement ("this Agreement") is made by and between the United States Department of Housing and Urban Development ("HUD") and Clackamas County Department of Health, Housing and Human Services (the "Recipient").

This Agreement, the Recipient's use of funds provided under this Agreement (the "Grant" or "Grant Funds"), and the Recipient's operation of projects assisted with Grant Funds are governed by

- 1. The Consolidated Appropriations Act, 2023 (Pub. L. 117-328, approved December 29, 2022)
- 2. title IV of the McKinney-Vento Homeless Assistance Act 42 U.S.C. 11301 et seq. (the "Act");
- 3. the Continuum of Care Program rule at 24 CFR part 578 (the "Rule"), as amended from time to time;
- 4. and the Notice of Funding Opportunity for the fiscal year in which the funds were awarded; and
- 5. the Recipient's application submissions on the basis of which these Grant Funds were approved by HUD, including the certifications, assurances, technical submission documents, and any information or documentation required to meet any grant award condition (collectively, the "Application").

The Application is incorporated herein as part of this Agreement, except that only the project (those projects) listed below are funded by this Agreement. In the event of any conflict between any application provision and any provision contained in this Agreement, this Agreement shall control. Capitalized terms that are not defined in this agreement shall have the meanings given in the Rule.

HUD's total funding obligation authorized by this grant agreement is \$234,704, allocated between the project(s) listed below (each identified by a separate grant number) and, within those projects, between budget line items, as shown below. The Grant Funds an individual project will receive are as shown in the Application on the final HUD-approved Summary Budget for the project. Recipient shall use the Grant Funds provided for the projects listed below, during the budget period(s) period stated below.

Grant No.	Grant Term	Performance Period	Total Amount
OR0383L0E072300		10/01/2024 - 09/30/2025	\$234,704
a. Continuum of Care plann	ing activities		\$234,704
b. Acquisition			\$0
c. Rehabilitation			\$0
d. New construction			\$0
e. Leasing			\$0
f. Rental assistance			\$0
g. Supportive services			\$0
h. Operating costs			\$0
i. Homeless Management In	nformation System	m	\$0
j. VAWA			\$0
k. Rural			\$0
1. Admin Costs			\$0
m. Relocation Costs			\$0
n. HPC homelessness preven	ntion activities:		
Housing relocation and st	abilization servic	ees	\$0
Short-term and medium-t	erm rental assista	nnce	\$0

Pre-award Costs for Continuum of Care Planning

The Recipient may, at its own risk, incur pre-award costs for continuum of care planning awards, after the date of the HUD selection notice and prior to the effective date of this Agreement, if such costs: a) are consistent with 2 CFR 200.458; and b) would be allowable as a post-award cost; and c) do not exceed 10 percent of the total funds obligated to this award. The incurrence of pre-award costs in anticipation of an award imposes no obligation on HUD either to make the award, or to increase the amount of the approved budget, if the award is made for less than the amount anticipated and is inadequate to cover the pre-award costs incurred.

These provisions apply to all Recipients:

If any new projects funded under this Agreement are for project-based rental assistance for a term of fifteen (15) years, the funding provided under this Agreement is for the performance period stated herein only. Additional funding is subject to the availability of annual appropriations.

The budget period and performance period of renewal projects funded by this Agreement will begin immediately at the end of the budget period and performance period of the grant being renewed. Eligible costs incurred between the end of Recipient's budget period and performance period under the grant being renewed and the date this Agreement is executed by both parties may be reimbursed with Grants Funds from this Agreement. No Grant Funds for renewal projects may be drawn down by Recipient before the end date of the project's budget period and performance period under the grant that has been renewed.

For any transition project funded under this Agreement the budget period and performance period of the transition project(s) will begin immediately at the end of the Recipient's final operating year under the grant being transitioned. Eligible costs, as defined by the Act and the Rule incurred between the end of Recipient's final operating year under the grant being transitioned and the execution of this Agreement may be paid with funds from the first operating year of this Agreement.

HUD designations of Continuums of Care as High-performing Communities (HPCS) are published on HUD.gov in the appropriate Fiscal Years' CoC Program Competition Funding Availability page. Notwithstanding anything to the contrary in the Application or this Agreement, Recipient may only use grant funds for HPC Homelessness Prevention Activities if the Continuum that designated the Recipient to apply for the grant was designated an HPC for the applicable fiscal year.

The Recipient must complete the attached "Indirect Cost Rate Schedule" and return it to HUD with this Agreement. The Recipient must provide HUD with a revised schedule when any change is made to the rate(s) included in the schedule. The schedule and any revisions HUD receives from the Recipient will be incorporated into and made part of this Agreement, provided that each rate included satisfies the applicable requirements under 2 CFR part 200 (including appendices).

This Agreement shall remain in effect until the earlier of 1) written agreement by the parties; 2) by HUD alone, acting under the authority of 24 CFR 578.107; 3) upon expiration of the budget period and performance period for all projects funded under this Agreement; or 4) upon the expiration of the period of availability of Grant Funds for all projects funded under this Agreement.

HUD notifications to the Recipient shall be to the address of the Recipient as stated in the Recipient's applicant profile in e-snaps. Recipient notifications to HUD shall be to the HUD Field Office executing the Agreement. No right, benefit, or advantage of the Recipient hereunder may be assigned without prior written approval of HUD.

Build America, Buy America Act. The Grantee must comply with the requirements of the Build America, Buy America (BABA) Act, 41 USC 8301 note, and all applicable rules and notices, as may be amended, if applicable to the Grantee's infrastructure project. Pursuant to HUD's Notice, "Public Interest Phased Implementation Waiver for FY 2022 and 2023 of Build America, Buy America Provisions as Applied to Recipients of HUD Federal Financial Assistance" (88 FR 17001), any funds obligated by HUD on or after the applicable listed effective dates, are subject to BABA requirements, unless excepted by a waiver.

The Agreement constitutes the entire agreement between the parties and may be amended only in writing executed by HUD and the Recipient.

By signing below, Recipients that are states and units of local government certify that they are following a current HUD approved CHAS (Consolidated Plan).

This agreement is hereby executed on behalf of the parties as follows:

UNITED STATES OF AMERICA, Secretary of Housing and Urban Development

By:
(Signature)
Mark Mitchell, Director
(Typed Name and Title)
July 18, 2024
(Date)
RECIPIENT
Clackamas Dept.Health, Housing & Human Srvs
(Name of Organization)
By:
(Signature of Authorized Official)
Rodney Cook, Director
(Typed Name and Title of Authorized Official)
(Date)

Indirect Cost Schedule

Agency/Dept./Major Function	Indirect Cost Rate	Direct Cost Base

This schedule must include each indirect cost rate that will be used to calculate the Recipient's indirect costs under the grant. The schedule must also specify the type of direct cost base to which each included rate applies (for example, Modified Total Direct Costs (MTDC)). Do not include indirect cost rate information for subrecipients.

For government entities, enter each agency or department that will carry out activities under the grant, the indirect cost rate applicable to each department/agency (including if the de minimis rate is used per 2 CFR §200.414), and the type of direct cost base to which the rate will be applied.

For nonprofit organizations that use the Simplified Allocation Method for indirect costs or elects to use the de minimis rate of 10% of Modified Total Direct Costs in accordance with 2 CFR §200.414, enter the applicable indirect cost rate and type of direct cost base in the first row of the table.

For nonprofit organizations that use the Multiple Base Allocation Method, enter each major function of the organization for which a rate was developed and will be used under the grant, the indirect cost rate applicable to that major function, and the type of direct cost base to which the rate will be applied.

To learn more about the indirect cost requirements, see 24 CFR 578.63; 2 CFR part 200, subpart E; Appendix IV to Part 200 (for nonprofit organizations); and Appendix VII to Part 200 (for state and local governments).

Financial Assistance Application Lifecycle Form

Use this form to track your potential award from conception to submission.

Sections of this form are designed to be completed in collaboration between department program and fiscal staff.

If renewal or direct appropriation, complete sections I, II, III IV & V only. Section III is not required.

If Disaster or Emergency Relief Funding, EOC will need to approve prior to being sent to the BCC

CONCEPTION					
Section I: Funding Opportunity	Information - To Be Completed b	y Requester	Award type: Award Renewal?	Direct App Subrecipie	oropriation (no application) ent Award
	040 1110. 111.				
Lead Fund # and Department:	240 Health Housing a	ind Huma	n Services		
Name of Funding Opportunity:	FY 2023 Continuum of Care Competition and R	enewal or Replacem	ent of Youth Homeless Demonstra	tion Program Gran	tsDepartment of Housing and Urban Development
_					
Funding Source: Federal – Direc	t Federal – Pass thr	ough	State	Local	
Requestor Information: (Name of staff in	Raina Smit	hRoller			
Requestor Contact Information:	rsmithroller	@clackamas	s.us		
Department Fiscal Representative:	Darren Chil	ton			
Program Name & Prior Project #: (please	c specify) Continuum	of Care (Co	C) Consolidated App	lication for	2023
Brief Description of Project:	<u>.</u>				
Management Information System for cinvolved. Some programs are compe	ration for all CoC project funding(internal Clackamas County. Grants awarded thr tative and others are non-competative. "	ough this applcia There is a 25% ir	tion will come via individual g	rant agreemen	ts for each program to the organization
Notification of Funding Opposituation Mal	Address: https://www.grants.gov/web/g	grante/view-onno	rtunity html?oppld=349091		
Notification of Funding Opportunity Wei	o Address: Inttps://www.grants.gov/web/g	grants/view-oppo	rturity.html:oppid=349091		
OR					
Application Packet Attached: Y	es 🔽 No				
Completed By:	Date:				
	** NOW READY FOR SUBMIS	SSION TO DEPART	MENT FISCAL REPRESENTATIV	/E **	
Section II: Funding Opportunity	Information - To Be Completed by D	Onartmont Eice	al Pan		
Competitive Application		•	итер		
	Non-Competing Application Other				
Assistance Listing Number (ALN), if applicab	01 B/ (14.20)		ding Agency Award Notification Da	ate: ui	nknown
Announcement Date:	July 5, 2023		ouncement/Opportunity #:		R-6700-N-25
Grant Category/Title	FY23 CoC Consolidated Competion	i d i teriewai	ding Amount Requested:	\$	5,481,184.00
Allows Indirect/Rate:	Yes depending on award	Mat	ch Requirement:	259	% cash or in-kind (\$107,455 in general fund used for matching)
Application Deadline:	September 28, 2023		al Project Cost:	un	known since many are not county run programs
Award Start Date:	varies based on each awar		er Deadlines and Description:	No	n profit and inhouse project competition is part of this application
Award End Date	varies based on each awa		gram Income Pequiroments:		
Completed By: Pre-Application Meeting Schedule:	Raina SmithRoller		gram Income Requirements:		epends on program
Fre-Application Meeting Schedule.	pre-application meetings o	the application	on committee are compl	eted via tear	ns weekly
Additional funding sources available to fund this program? Please describe:					

Supportive Housing Services, other Federal, State and local funds for matching. Each applicant for the consolidated application must specify their match.

How much General Fund will be used to cover costs in this program, including indirect expenses?

HUD funds this application through last years application - CoC planning grant. Additional funds for indirect expenses in H3S will be covered through Supportive Housing Services or other available funds. Social Services is proposing to use budgeted General Funds in the amount of \$107,455 to meet their match obligations.

How much Fund Balance will be used to cover costs in this program, including indirect expenses?

No prior fund balance will be used. Each grant resulting will have its own program associated with it which may or may not include indirect expenses. Some grant awards include indirect rates and others do not depending on the type of award.

In the next section, limit answers to space available.

Section III: Funding Opportunity Information - To Be Completed at Pre-Application Meeting by Dept Program and Fiscal Staff

Mission/Purpose: 1. How does the grant/funding opportunity support the Department and/or Division's Mission/Purpose/Goals?
2. Who, if any, are the community partners who might be better suited to perform this work?
3. What are the objectives of this funding opportunity? How will we meet these objectives?
4. Does the grant/financial assistance fund an existing program? If yes, which program? If no, what is the purpose of the program?
Organizational Capacity: 1. Does the organization have adequate and qualified staff? If no, can staff be hired within the grant/financial assistance funding opportunity timeframe?
2. Are there partnership efforts required? If yes, who are we partnering with and what are their roles and responsibilities?
3. If this is a pilot project, what is the plan for sun setting the project and/or staff if it does not continue (e.g. making staff positions temporary or limited duration, etc.)?
4. If funded, would this grant/financial assistance create a new program, does the department intend for the program to continue after initial funding is exhausted? If yes, how will the department ensure funding (e.g. request new funding during the budget process, supplanted by a different program, etc.)?

C	ollaboration
1.	List County d

1. List County departments that will collaborate on this award, if any.

Reporting Requirements

 $1. \ What are the program reporting requirements for this grant/funding opportunity?$

2. How will performance be evaluated? Are we using existing data sources? If yes, what are they and where are they housed? If not, is it feasible to develop a data source within the grant timeframe?

3. What are the fiscal reporting requirements for this funding?

Fiscal

1. Are there other revenue sources required, available, or will be used to fund the program? Have they already been secured? Please list all funding sources and amounts.

2. For applications with a match requirement, how much is required (in dollars) and what type of funding will be used to meet it (CGF, In-kind, local grant, etc.)?

3. Does this grant/financial assistance cover indirect costs? If yes, is there a rate cap? If no, can additional funds be obtained to support indirect expenses and what are those sources?

Other information necessary to understand this award, if any.

Program Approval:

Raina SmithRoller

Sep 4, 2023

Raina Smith-Roller
Raina Smith-Roller (Sep 4, 2023 12:12 PDT)

Name (Typed/Printed)

Date

Signature

** NOW READY FOR PROGRAM MANAGER SUBMISSION TO DIVISION DIRECTOR**

ATTACH ANY CERTIFICATIONS REQUIRED BY THE FUNDING AGENCY. COUNTY FINANCE OR ADMIN WILL SIGN

Section IV: Approvals

DIVISION DIRECTOR (or designee, if applicable)

Department: keep original with your grant file.

Vahid Brown	Sep 5, 2023	Tonu Karter for
Name (Typed/Printed)	Date	Toni Karter for (Sep 5, 2023 14:27 PDT) Signature
Name (Typed)Timed)	Date	Signature
		h a
DEPARTMENT DIRECTOR (or designee, if applicable)	2 5 0000	Cany Salmon
Adam Brown	Sep 5, 2023	Denise Swanson (Sep 5, 2023 17:13 PDT)
Name (Typed/Printed)	Date	Signature
FINANCE ADMINISTRATION		
Elizabeth Comfort	Sep 7, 2023	Clizabeth Comfort
Name (Typed/Printed)	Date	Signature
EOC COMMAND APPROVAL (WHEN NEEDED FOR DISASTE	R OR EMERGENCY RELIEF APPLICATIONS <u>ONLY</u>)	
Name (Typed/Printed)	Date	Signature
Section V: Board of County Commissioners/C	ounty Administration	
(Description of the all annual and limiting of the support is accorded all annual and all annual annu	and the second by the Country of the second	and a second second less of second and less had at less 204, 220 less
(Required for all grant applications. If your grant is awarded, all grant For applications less than \$150,000:	<u>awaras</u> must be approvea by tne Boara on their weekiy co.	nsent agenaa regaraiess oj amount per iocai buaget iaw 294.338.)
To approach the state of the st		
COUNTY ADMINISTRATOR	Approved:	Denied:
Name (Typed/Printed)	Date	Signature
- " "		
For applications up to and including \$150,000	email form to Tracy Moreland at <u>Tracy</u>	Mor@clackamas.us for Gary Schmidt's approval.
	orm with Staff Report to the Clerk to t	he Board at <u>ClerktotheBoard@clackamas.us</u> to be
brought to the consent agenda.		
BCC Agenda item #: 20230921 IV.E.3	Date: 09/21/2023	
OR		Jatu Smil
Policy Session Date:		Jam Or Mite
	Country Administration Attachetics	
	County Administration Attestation	
County Administration: re-route to department at		
and		
Grants Manager at financegrants@clackamas.us when fully approved.		

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