

August 11, 2022

Board of County Commissioners
Clackamas County

Members of the Board:

Approval to Apply for Funding Opportunity: Workforce Ready Grants, Round One: Building Capacity for Workforce Programs through the State of Oregon Higher Education Coordinating Commission (HECC) to Increase the Capacity of the County’s Workforce Unit. Amount requested up to \$350,000.
No County General Funds Involved.

Purpose/Outcome	The Children, Family and Community Connections (CFCC) Division of Clackamas County requests approval to apply for a one-time grant to increase the capacity of the County’s Workforce Services Unit. The opportunity is funded through the Governor’s Future Ready Oregon initiative.
Dollar Amount and Fiscal Impact	Grant Application requesting up to \$350,000. No County General Funds are involved.
Funding Source	State of Oregon, acting by and through the Higher Education Coordinating Commission (HECC): Future Ready Oregon
Duration	Grant would fund capacity building July 1, 2022 to June 30, 2023
Previous Board Action/Review	BCC Issues: 8/9/2022
Strategic Plan Alignment	1. Ensure safe, healthy and secure communities 2. Grow a vibrant economy
Counsel Review	Reviewed and signed by Finance: Date: 7/26/2022 by Elizabeth Comfort
Procurement Review	Was the item processed through Procurement? No. Approval to Apply – Revenue Lifecycle Form
Contact Person	Adam Freer 971-533-4929
Contract No.	H3S #10767

BACKGROUND:

The Children, Family & Community Connections (CFCC) Division of the Health, Housing and Human Services Department requests approval to apply for funding Workforce Ready Grants, Round One: Building Capacity for Workforce Programs through the State of Oregon Higher Education Coordinating Commission (HECC) to Increase the Capacity of the County’s Workforce Unit. The funding would allow CFCC to increase its capacity to meet the high demand for employment services working through a variety of supports, including purchase of new technology (computers, iPads, copier), client tracking software and consultation services that will strengthen the unit’s ability to place residents in newly prioritized sectors – healthcare, technology and manufacturing.

RECOMMENDATION:

Staff recommends the Board approval of this request to apply and authorization for Tootie Smith, Board Chair, to sign the Application Certification (Attachment D) on behalf of Clackamas County.

Respectfully submitted,

Rodney A. Cook

Rodney A. Cook, Director
Health, Housing & Human Services

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.

** CONCEPTION **

Section I: Funding Opportunity Information - To be completed by Requester

Award type: Direct Appropriation (no application)
 Subrecipient Award Direct Award
 Award Renewal? Yes No

Lead Department & Fund #: H3S - CFCC CLACK 240

If renewal, complete sections 1, 2, & 4 only. If Direct Appropriation, complete page 1 and Dept/Finance signatures only.

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

Name of Funding Opportunity: _____

Funding Source: Federal State Local

Requestor Information (Name of staff person initiating form): Jennifer Harvey

Requestor Contact Information: jharvey@clackamas.us; 503.867.7500

Department Fiscal Representative: Scott Vandecoevering

Program Name and prior project # (please specify): Workforce - 400303

Brief Description of Project:

These capacity-building grants are intended to broaden the type, number, and capacity of organizations that comprise Oregon's workforce system. By expanding representation in the workforce system, HECC hopes to increase the availability and usage of culturally and linguistically appropriate workforce services.

Name of Funding Agency: State of Oregon Higher Education Coordinating Commission (HECC)

Notification of Funding Opportunity Web Address:

<http://www.oregon.gov/highered/about/Documents/Grants-contracts/RFA/21-142A%20RFA%20for%20OWI%20Workforce%20Ready%20Grants/21-142A%20RFA%20for%20OWI%20Workforce%20Ready%20Grants%20Final2.pdf>

OR

Application Packet Attached: Yes No

Completed By: Adam Freer 7.25.22
Date

** NOW READY FOR SUBMISSION TO DEPARTMENT FISCAL REPRESENTATIVE **

Section II: Funding Opportunity Information - To be completed by Department Fiscal Rep

Competitive Application <input checked="" type="checkbox"/>	Non-Competing Application <input type="checkbox"/>	Other <input type="checkbox"/>	
CFDA(s), if applicable: <u>N/A</u>		Funding Agency Award Notification Date: <u>Sept 9, 2022</u>	
Announcement Date: <u>June 29, 2022</u>		Announcement/Opportunity #: <u>HECC# 21-142; OregonBuys# S-52500-00003513</u>	
Grant Category/Title: <u>Workforce Ready Grants, Round One</u>		Funding Amount Requested: <u>\$350,000</u>	
Allows Indirect/Rate: <u>Yes/ no limit</u>		Match Requirement: <u>None</u>	
Application Deadline: <u>August 13, 2022</u>		Other Deadlines: <u>None</u>	
Award Start Date: <u>July 1, 2022</u>		Other Deadline Description: <u>N/A</u>	
Award End Date: <u>June 30, 2023</u>			
Completed By: <u>Adam Freer</u>		Program Income Requirement: <u>None</u>	
Pre-Application Meeting Schedule: <u>July 12, 2022</u>			

Additional funding sources available to fund this program? Please describe: None needed

How much General Fund will be used to cover costs in this program, including indirect expenses? None

How much Fund Balance will be used to cover costs in this program, including indirect expenses? None

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?

The grant opportunity would fund critical capacity building activities and equipment that would otherwise not be possible. They would benefit existing programming and strengthen the team's ability to place people in target sectors (health care, technology, manufacturing).

2. What, if any, are the community partners who might be better suited to perform this work?

This is not a service program. All workforce providers are eligible to apply.

3. What are the objectives of this funding opportunity? How will we meet these objectives?

The objectives of the funding are very broad - meeting the specific capacity building needs identified by applicants. The funder will select and fund the items as it sees fit.

4. Does the grant/financial assistance fund an existing program? If yes, which program? If no, what is the purpose of the program?

Yes. The County's Workforce Unit housed in CFCC.

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?

Yes.

2. Are there partnership efforts required? If yes, who are we partnering with and what are their roles and responsibilities?

No.

3. If this is a pilot project, what is the plan for sunseting the project and/or staff if it does not continue (e.g. making staff positions temporary or limited duration, etc.)?

Not a pilot project.

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.)?

Would not create a new program.

Collaboration

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

Finance (Procurement), Technology Services (purchases)

Reporting Requirements

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

Progress and final reports (timeline to be described in Grant Agreement).

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?

Each objective will have a clear indicator of completion. For example, funding could be used to purchase equipment, which would be completed when the equipment was obtained and payment made

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

Quarterly and final

Fiscal

1. Will we realize more benefit than this financial assistance will cost to administer?

Yes. It will strengthen our entire Workforce team and its capacity to meet the needs of clients and businesses.

2. Are other revenue sources required, available or will be used to fund the program? Have they already been secured? Please name other sources, including General Fund or Fund Balance and amounts.

None needed.

3. 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.)?

None match required.

4. 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?

Yes. No rate cap.

Program Approval:

Acam Freer

7.25.22



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)		
Adam S. Freer	7.25.22	
Name (Typed/Printed)	Date	Signature

DEPARTMENT DIRECTOR (or designee, if applicable)		
Rodney A. Cook	7/25/22	<i>Adam Brown for Rodney Cook</i>
Name (Typed/Printed)	Date	Signature

FINANCE ADMINISTRATION		
Elizabeth Comfort	7.26.2022	
Name (Typed/Printed)	Date	Signature

EOC COMMAND APPROVAL (DISASTER OR EMERGENCY RELIEF APPLICATIONS ONLY)		
Name (Typed/Printed)	Date	Signature

Section V: Board of County Commissioners/County Administration

(Required for all grant applications. If your grant is awarded, all grant awards must be approved by the Board on their weekly consent agenda regardless of amount per local budget law 294.338.)

For applications less than \$150,000:

COUNTY ADMINISTRATOR	Approved: <input type="checkbox"/>	Denied: <input type="checkbox"/>
Name (Typed/Printed)	Date	Signature

For applications greater than \$150,000 or which otherwise require BCC approval:

BCC Agenda item #: Date:

OR

Policy Session Date:

County Administration Attestation

**County Administration: re-route to department contact when fully approved.
Department: keep original with your grant file.**

COVER SHEET

- New Agreement/Contract
- Amendment/Change/Extension to _____
- Other _____

Originating County Department: _____

Other party to contract/agreement: _____

Description:

After recording please return to: _____

- County Admin
- Procurement

If applicable, complete the following: _____

Board Agenda Date/Item Number: _____