



March 7, 2024

Board of County Commissioners Clackamas County

Approval to apply for an Emergency Response Grant from the Oregon Department of Human Services for Developmental Disabled Individuals. Grant value is \$563,000. Funding is through the Oregon Department of Human Services. No County General funds are involved.

Previous Board Action/Review	3/5/24 – Briefed at issues				
Performance Clackamas	 This funding aligns with the strategic priority to increase self-sufficiency for our clients. This funding aligns with the strategic priority to ensure safe, healthy, and secure communities by addressing the needs of older adults in the community. 				
Counsel Review	No	Procurement Review	No		
Contact Person	Brenda Durbin, Director	Contact Phone	503-655-8641		

EXECUTIVE SUMMARY: The Social Services Division of the Health, Housing and Human Services requests approval of a Financial Assistance Application for revenue appropriated by the State of Oregon, Department of Human Services, Office of Developmental Disability Services.

This appropriation from the State of Oregon provides ARPA grant funding for the Social Services Division's Developmental Disabilities program to purchase and distribute equipment and supplies to prepare for future emergencies among individuals with intellectual and/or developmental disabilities. The grant will support readiness and preparedness for everyone in the DD system, regardless of what setting they are in. Funding may be used to:

- 1) Purchase generators for residential homes or family homes where continuous access to power is necessary for ventilators and other critical medical equipment
- 2) Provide emergency kits for people in services
- 3) Foster connections between Intellectual/Developmental Disability providers and local Emergency Response units
- 4) Training in multiple languages for people with an Intellectual/Developmental Disability and families on emergency

No match is required, and no County General Funds are involved.

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Healthy Families. Strong Communities. 2051 Kaen Road, Oregon City, OR 97045 • Phone (503) 650-5697 • Fax (503) 655-8677 www.clackamas.us



RECOMMENDATION: Staff recommends the Board of County Commissioners approve the Financial Assistance Application and authorize the Chair to sign the application on behalf of the County.

Respectfully submitted,

Rodney A. Cook

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



Oregon Department of Human Services Office of Developmental Disabilities Services oddsarpa.funding@odhsoha.oregon.gov

> Oregon Department of Human Services DFFICE OF DEVELOPMENTAL DISABILITIES SERVI

ARPA FUNDS APPLICATION: Emergency Response for the ODDS

service system

The Oregon Department of Human Services' (ODHS) Office of Developmental Disabilities Services (ODDS) is making one-time American Rescue Plan Act (ARPA) funding available to Case Management Entities (CMEs) to prepare for future emergency situations. This is in response to the impact of the COVID-19 pandemic.

The anticipated total funding is \$10 million.

Applicant eligibility

All case management entities (CMEs) that have a current contract with ODDS are eligible to apply. ODDS plans to issue an award for every eligible application. Award amounts will be determined based on the number of participants and other factors as determined by ODDS. CMEs must ensure equitable distribution, taking into consideration all local community supports and needs.

Grant timeline

December 14, 2023
<u>Jan. 3, 2024, 11 a.m.</u>
<u>Jan. 17, 2024, 11 a.m.</u>
February 1, 2024
June 30, 2024
March 1, 2025

Emergency Response funding process

• **Apply:** CMEs must submit this <u>online application</u> no later than February 1, 2024.

• **Funding disbursement:** Grant funds will be disbursed in two equal payments. The first payment is expected to be disbursed after January 1, 2024, and the second payment is expected to be disbursed after review and acceptance of the progress expenditure report and future spending

plan. Both installments will be paid through eXPRS service element 57 Special Projects for CMEs.

• **Expenditure period:** Grant funds may be spent upon receipt of funds and must be spent no later than March 1, 2025.

Definitions

- **Emergency** means any occasion or instances such as a hurricane, tornado, storm, flood, tidal wave, tsunami, earthquake, volcanic eruption, landslide, mudslide, snowstorm, fire, explosion, nuclear accident, or any other natural or man-made catastrophe-that warrants action to save lives and to protect property, public health, and safety.
- **Emergency Hub** refers to a location at which a CME or ODDS Provider offers shelter or services to people during an emergency.
- Service Location refers to a location where people receive ODDS services.
- Emergency Supplies means critical supplies to prepare for emergency situations that a household or Service Location may need in the event of an emergency and includes, but is not limited to, automated external defibrillators (AEDs), cots, tents, portable or bucket toilets, communication cards, assistive listening system (pocket talkers, handset amplifiers), visual alerting systems, walkietalkies/two-way radios, evacuation chair/sled, fire escape ladder, smoke-detectors, carbon monoxide detectors, potable water, waterfiltration device or system, non-perishable food, battery-powered or hand-crank radios, flashlights/lanterns/battery-powered lighting, first aid kits, extra batteries, spare chargers for electronic devices, whistles, plastic sheeting, duct tape, moist towelettes, garbage bags, plastic ties, tools, manual can openers, local maps, masks, soap, hand sanitizer, non-prescription medications, baby formula, bottles, diapers, wipes, diaper rash cream, sleeping bags, warm blankets, fire extinguishers, matches, feminine hygiene supplies, personal hygiene supplies, paper cups, paper plates, paper towels, and plastic utensils, or other supplies approved by ODDS.

Allowable expenses

- Administrative expenses: CMEs may use up to 10% of emergency response funds for administrative costs.
- Emergency hub: CMEs may use emergency response funds for providers and CME locations that will serve as an emergency hub.

- Power equipment:
 - Portable generators: powered by gas or diesel fuel to create usable electricity.
 - Note: whole house generators, equipment installation, maintenance and ongoing subscriptions for fuel are disallowed expenses.
 - Power stations: portable batteries for backup emergency power storage.
 - Funds for portable generators and power stations are limited to:
 - up to \$2,000 per person
 - up to \$5,000 per service location or emergency hub
 - Any combination of equipment can be purchased within these limits
- Emergency supplies are supplies to prepare for emergency situations that a household or service location may need in the event of an emergency. Funds for emergency supplies are limited to:
 - up to \$300 per person
 - up to \$3,000 per service location
 - up to \$5,000 per emergency hub

Disallowable expenses

- ARPA funds cannot supplant existing funding and services that can be billed to Medicaid or other insurance.
- ARPA funds are not allowed to fund retroactive expenses incurred prior to the disbursement of funds.
- Whole house generators, equipment installation, maintenance and ongoing subscriptions for fuel.

Grant reporting schedule

Progress and expenditure report due no later than:June 30, 2024Final expenditure report due:March 1, 2025

Funding requirements

Every CME awarded funds will be required to:

- Maintain records for audits
- Spend grant funds by March 1, 2025
- Report on grant expenditures by March 1, 2025
- Return to ODHS any unspent grant funds at the time of final reporting

Emergency Response funds - application questions

To apply for this funding, please complete this <u>online application</u>. For your reference, the application questions are listed below.

1. CME applying for funding: Clackamas County

2. CME representative (first and last name): Georgeta Vandermeer

4. CME representative title or position: <u>ARPA Grants Coordinator</u>

5. CME representative email: gvandermeer@clackamas.us

6. CME representative phone number: 9715010093

7. This application is a collaborative request to support more than one case management entity (if yes, list all collaborative partners):

I, representing the CME stated in this application, the following statement:

This CME is contracted with the Office of Developmental Services (ODDS). This CME is applying for ARPA emergency response funding due to the negative impact caused by the COVID-19 pandemic. I understand that the amount of funding the CME receives will be determined by ODDS.

The statements contained in this application are true and complete to the best of my knowledge.

I accept as a condition of receiving the Emergency Response funds, the obligation to comply with the applicable state and federal requirements, policies, standards, regulations, 2023-25 ODDS contract requirements and Emergency Response funds limitations as outlined in this application. I recognize that this is a public document and open to public inspection.

I will submit reports of the items purchased with this funding by the required due dates. I understand that I may need to return funding if any reports are not submitted by the required due dates.

I agree to return any funding to ODDS that is not used for the purpose of this funding at the time of final reporting.

Furthermore, I acknowledge that the Emergency Response funds cannot supplant existing funding and services that can be billed to Medicaid or other insurance and that Emergency Response funds must be spent no later than March 1, 2025.

I agree to the above statement

Please type your name as a digital signature for this application.

If you have questions regarding this grant, including timeline concerns, eligibility, or eligible activities and expenses please contact the ODDS Special Projects Unit at oddsarpa.funding@odhsoha.oregon.gov .

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		-	plication Lifecycle For		
			award from conception to submissio		
			laboration between department pr	-	-
If			ions I, II, IV & V only. Section II		
	If Disaster or Emerge		Il need to approve prior to being	sent to the BCC	
		CONCL	EPTION		
Section I: Funding Opportunity Information - To Be Completed by Request			Award type:	Direct Appropriation (Subrecipient Award	no application)
	040 1100		Award Renewal?	Yes 🖌 No	
Lead Fund # and Department:		Social Services			
Name of Funding Opportunity:	ODHS- Offic	ce of Developme	ental Disability Serv	vices	
Funding Source: Federal – Direct		Federal – Pass through	State	Local	
Requestor Information: (Name of staff in	itiating form)	Terri Schmelling			
Requestor Contact Information:		D: 503-742-5323 C	: 503-522-6609 E: terriso	ch@clackamas.us	
Department Fiscal Representative:		Teresa Christopherse	Teresa Christopherson, Admin Services Manager and Doug Green, Management Analyst		
Program Name & Prior Project #: (please	specify)	Developmental Disa	abilities Program		
Brief Description of Project:					
2023-2025 ARPA Grant with the State setting they are in. This funding will be 1) Purchase generators for residential continuous access to power is necess medical equipment 2) Provide emergency kits for people in	made available to all homes or family home ary for ventilators and	partners and providers to ass s where			
Name of Funding Agency State of Orego	on. Dept. of Human Se	rvices, Office of Developmer	tal Disability Services		
			·		
Notification of Funding Opportunity Web	Address: https://www	.oregon.gov/odhs/idd/pages/	arpa.aspx#:~:text=%E2%80%8B%	%E2%80%8BThis%20is%2	0%2410,meet%20individual%2
OR					
UN					
Application Packet Attached: Ye	es No				
Completed By: Terri Schmelling	Date: 2	2/29/2024			
			PARTMENT FISCAL REPRESENTATI	VE **	
Castion III Funding Opportunity	e de la companya de l				
Section II: Funding Opportunity			г ізсаї кер		
Competitive Application	Non-Competing Applica	tion Other			
Assistance Listing Number (ALN), if applicable	^{le:} N/A		Funding Agency Award Notification D	^{pate:} NA	
Announcement Date:	3/1/2023		Announcement/Opportunity #:	NA	
Grant Category/Title	Emergency I	Response Grant	Funding Amount Requested:	\$563,000	
Allows Indirect/Rate:	Yes/17.15%		Match Requirement:	NA	
Application Deadline:	Deadline exten	sion granted by DHS-ODHS	Total Project Cost:	\$563,000	
Award Start Date:	upon approv	al	Other Deadlines and Description:	NA	
Award End Date	March 2025				
Completed By:	Doug Green		Program Income Requirements:	NA	
Pre-Application Meeting Schedule:	NA				

Additional funding sources available to fund this program? Please describe:

Other than the funds described below, there are no additional funding sources available to fund this program.

How much General Fund will be used to cover costs in this program, including indirect expenses? NA $% \left({{{\rm{NA}}} \right)$

How much Fund Balance will be used to cover costs in this program, including indirect expenses? $\ensuremath{\mathsf{NA}}$

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?

This ARPA grant funding from the State of Oregon will all Social Services Division's Developmental Disabilities program to purchase and distribute equipment and supplies to prepare for future emergencies among individuals with intellectual and/or developmental disabilities. The grant will support readiness and preparedness for everyone in the DD system, regardless of what community setting they are in.

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

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

To prepare for future emergencies. The grant will support readiness and preparedness individuals with intellectual and/or developmental disabilities. The grant will support readiness and preparedness for everyone in the DD system, regardless of what community setting they live in.

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

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. If awarded the grant Clackamas County DD Program would be allowed to use up to 10% for administrative expenses.

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 sun setting the project and/or staff if it does not continue (e.g. making staff positions temporary or limited duration, etc.)? NA

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.)? No

Collaboration

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

NA

Reporting Requirements

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

Progress Expenditure report Due no later than June 30, 2024

Final Expenditure report Due March 1, 2025

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?

Awarded funds will be required to:

Maintain records for audits

- Spend grant funds by March 1, 2025
- Report on grant expenditures by March 1, 2025
 Return to ODHS any unspent grant funds at the time of final reporting

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

Progress Expenditure report Due no later than June 30, 2024 Final Expenditure report Due March 1, 2025

Fiscal

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

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.)? NA

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? Yes/17.15%

Other information necessary to understand this award, if any. NA

Program Approval:

Kim Cota

2/29/24

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)

Teresa D Christopherson, Administrative Services N	Vlanager 2/29/24	Teresa Christopherson
Name (Typed/Printed)	Date	Signature
DEPARTMENT DIRECTOR (or designee, if applicable)		$()_{\alpha,\alpha} \leq 1$
Denise Swanson	Feb 29, 2024	Denise Swanson (Feb 29, 2024 11:26 PST)
Name (Typed/Printed)	Date	Signature
FINANCE ADMINISTRATION		
Elizabeth Comfort	Feb 29, 2024	Clizabeth Comfort
Name (Typed/Printed)	Date	Signature
Name (Typed/Printed)	Date	Signature
Name (Typed/Printed)	Date	Signature
Section V: Board of County Commissioners/C	ounty Administration	
Required for all grant applications. If your grant is awarded, all grant	awards must be approved by the Board on their weekly conse	ent agenda regardless of amount per local budget law 294.338.)
For applications \$150,000 and below:		
COUNTY ADMINISTRATOR	Approved:	Denied:
Name (Typed/Printed)	Date	Signature
() () () () () () () () () () () () () (
For applications up to and including \$150,000 approval.	email form to BCC staff at <u>CA-Financialte</u>	am@clackamas.us for Gary Schmidt's
For applications \$150,000.01 and above, emains to be brought to the consent agenda.	il form with Staff Report to the Clerk to	the Board at <u>ClerktotheBoard@clackamas.us</u>

BCC Agenda item #:

Date:

OR

Policy Session Date:

County Administration Attestation

County Administration: re-route to department at

and

Grants Manager at financegrants@clackamas.us

when fully approved.

Department:	keen	original	with	vour	grant	file
Department.	veeh	Ungilial	with	your	grant	me.