

Rodney A. Cook Director

November 14, 2024	BCC Agenda Date/Item:
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Board of County Commissioners Clackamas County

Approval of an Amendment to a Grant Agreement with the Oregon Housing and Community Services Department for administration of the Eviction Prevention and Diversion program. Amendment Value is \$1,321,619 for 1 year. Total Agreement Value is \$5,128,976 for 2 years. Funding is through the Oregon Housing and Community Services Department.

No County General Funds are involved.

Previous Board Action/Review	Original Agreement June 12, 2023, Agenda Item 20230612 I.C.2 Amendment #01 February 13, 2024, Agenda Item 20240213 I.D.1 Amendment #02 Briefed at Issues November 12, 2024		
Performance Clackamas	stabilization and si risk of becoming h housing.	es Division's strategic pricupportive services to peo omeless so they can obtained priority to ensure sa	ple who are homeless or at ain and maintain permanent
Counsel Review	Yes: Andrew Naylor	Procurement Review	No
Contact Person	Brenda Durbin	Contact Phone	(503) 655-8641

EXECUTIVE SUMMARY: The Social Services Division (SSD) of the Health, Housing and Human Services (H3S) Department requests the approval of Amendment 2 to our Grant Agreement with the State of Oregon, Housing and Community Services Department (OHCS) for the continued delivery of the Oregon Eviction Prevention and Diversion Program (ORE-DAP, also referred to as "Executive Order").

In 2024, Governor Kotek passed and signed the Oregon Senate Bill (SB) 1530, which appropriated additional funds for the ORE-DAP program. This followed prior appropriations made through SB 5511 and House Bill 5019. These funds support the Governor's Executive Orders 23-02 and 24-02 and are allocated by OHCS to the County. Amendment 2 adds the funds appropriated to Clackamas County under SB 1540 and restates the Agreement with updates.

Since its start in January 2023 through August 31, 2024, Clackamas County's ORE-DAP program has served 496 households. Continued funds would be used for rent arrearages, rent assistance, and energy assistance to prevent evictions.

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RECOMMENDATION: The staff respectfully requests that the Board of County Commissioners approve Amendment #02 to the grant agreement (11165) and authorize Chair Smith to sign on behalf of Clackamas County.

Respectfully submitted,

Rodney A. Cook

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Director of Health, Housing and Human Services

Financial Assistance Application Lifecycle Form

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

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

If renewal or direct appropriation, complete sections I, II, 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

Section I: Funding Opportunity Information - To Be Completed by Requester Award type: Award Renewal? Award Renewal? Direct Appropriation (no application) Award Renewal?					
Lead Fund # and Department: 24(240 Health, Housing and Human Services				
	Senate Bill 1530 Oregon Eviction, Diversion & Prevention (ORE-DAP) Program				
Name of Funding Opportunity: Sel	nate Bili 15	30 Oregon Eviction	, Diversion & Prevent	ion (ORE-DAP) Program	
Funding Source: Federal – Direct Federal – Pass through State Local					
Requestor Information: (Name of staff initiating	g form)	R.E. ("Ari") Szego			
Requestor Contact Information:		rszego@clackamas.us			
Department Fiscal Representative:		Doug Green			
Program Name & Prior Project #: (please specify)		SB1530 ORE-DAP (Ore	egon Eviction, Diversion & F	Prevention Program)	
Brief Description of Project:					
Current legislated funds under Senate Bill 1 an allocation / direct appropriation from Ore					
ORE-DAP provides short-term support so the assistance, rent arrearages, and utility assist wraparound support services and referral to	stance). Ideally, cli	ients who participate in the O			
Name of Funding Agency: Oregon Housing an	nd Community Ser	vices (OHCS)			
Notification of Funding Opportunity Web Addr	ess: n/a				
OR					
Application Packet Attached: Yes	√ No				
Completed By: R.E. Szego	Date: 0	9/16/24			
** NOW READY FOR SUBMISSION TO DEPARTMENT FISCAL REPRESENTATIVE **					
Section II: Funding Opportunity Information - To Be Completed by Department Fiscal Rep					
Competitive Application Non-Competing Application					
Assistance Listing Number (ALN), if applicable:	N/A		Funding Agency Award Notification D	ate: 05/24/24	
Announcement Date:	05/24/24		Announcement/Opportunity #:	SB1530 ORE-DAP	
Grant Category/Title	EO 24-02, SB1	530	Funding Amount Requested:	\$1,321,619.00	
Allows Indirect/Rate:	Yes		Match Requirement:	None	
Application Deadline:	N/A		Total Project Cost:	1,321,619.00	
Award Start Date:	July 1, 2024		Other Deadlines and Description:	nono	
Award End Date	June 30, 2025			none	
Completed By:	R.E. Szego		Program Income Requirements:	N/A	
Pre-Application Meeting Schedule:	N/A				

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

CCSSD braids these funds with Metro Supportive Housing Services, which are limited to use within the Urban Growth Boundary, to support rural households in the County.

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

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

none

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.)?

Collaboration
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. 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:
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

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Section IV: Approvals

DIVISION DIRECTOR (or designee, if applicable)

Brenda Durbin	9/23/24	Brenda Durbin			
Name (Typed/Printed)	Date	Signature			
DEPARTMENT DIRECTOR (or designee, if applicable) Denise Swanson	Sep 25, 2024	Denise Swanson (Sep 25, 2024 17:58 PDT)			
Name (Typed/Printed)	Date	Signature			
FINANCE ADMINISTRATION Elizabeth Comfort	Sep 26, 2024	Clizabeth Comfort			
Name (Typed/Printed)	Date	Signature			
EOC COMMAND APPROVAL (WHEN NEEDED FOR DISASTE	R OR EMERGENCY RELIEF APPLICATIONS ONLY				
Name (Typed/Printed)	Date	Signature			
Section V: Board of County Commissioners/C (Required for all grant applications. If your grant is awarded, all grant For applications \$150,000 and below: COUNTY ADMINISTRATOR		nsent agenda regardless of amount per local budget law 294.338.) Denied:			
Name (Typed/Printed)	Date	Signature			
For applications up to and including \$150,000 email form to BCC staff at CA-Financialteam@clackamas.us for Gary Schmidt's approval. For applications \$150,000.01 and above, email form with Staff Report to the Clerk to the Board at ClerktotheBoard@clackamas.us to be brought to the consent agenda. BCC Agenda item #: Date: D					
	County Administration Attestation				

SS-Lifecycle_Fund 240_Senate Bill 1530_OR EvDi&Prev A2 OHCS 7630-A2 ORE-DAP-Q

Final Audit Report 2024-09-26

Created: 2024-09-25

By: Qudsia Sediq (QSediq@dackamas.us)

Status: Signed

Transaction ID: CBJCHBCAABAAvOj266d6F01j9QJYCxQolaPrANFb6_4I

"SS-Lifecycle_Fund 240_Senate Bill 1530_OR EvDi&Prev A2 O HCS 7630-A2 ORE-DAP-Q" History

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