



CHRISTINA L. McMAHAN
DIRECTOR

JUVENILE DEPARTMENT
JUVENILE INTAKE AND ASSESSMENT CENTER
2121 KAEN ROAD | OREGON CITY, OR 97045

December 4, 2025

BCC Agenda Date/Item: _____

Board of County Commissioners

Approval of an Amendment to an Intergovernmental Agreement with the Oregon Youth Authority to lower liability insurance. Agreement Value is \$82,094 for 2 years. Funding is through the Oregon Youth Authority. No County General Funds are involved.

Previous Board Action/Review	The previous Intergovernmental Agreements (IGA) for this revenue was IGA number 13191 signed by John Ludlow, Chair, on 7/16/15, IGA number 13736 was signed by Jim Bernard, Chair, on 6/29/17, IGA number 14318 was signed by Jim Bernard, Chair, on 10/31/19, and IGA number 14719 was signed by Tootie Smith, Chair, on 12/2/2021, 20231026 I.C.1., 20250724 II.C.2.		
Performance Clackamas	1. The Court Supervision Services Program is to provide intervention, accountability, compliance monitoring, and support services to youth referred to the Department so they can understand the impact of their actions, repair harm, successfully complete court supervision, and stop committing offenses. 2. Ensure safe, secure, and livable communities.		
Counsel Review	Yes	Procurement Review	No
Contact Person	Danielle Valdez	Contact Phone	503-655-8788

EXECUTIVE SUMMARY: The mission of the Clackamas County Juvenile Department ("CCJD") is to provide equitable juvenile justice, family support, intervention, and reformation services to youth so they can repair harm to victims, experience positive change, and contribute to a safe, healthy, and secure community. Amendment No. 1 to Agreement 15358, lowers the Commercial General Liability Insurance; Coverage shall be written on an occurrence basis in an amount of not less than \$1,000,000.00 per occurrence.

RECOMMENDATION: Staff recommends the Board of County Commissioners approve the attached Intergovernmental Agreement

Respectfully submitted,

Christina L. McMahan, Director
Juvenile Department

For Filing Use Only

**AMENDMENT TO
INTERGOVERNMENTAL AGREEMENT
INDIVIDUALIZED SERVICES**



Agreement #15358a

1. This is Amendment No. 1 to Agreement 15358 dated July 1, 2025, between the State of Oregon, acting by and through its **Oregon Youth Authority** ("OYA" or "Agency"), and **Clackamas County** ("County"), each a "Party" and, collectively, the "Parties."
2. The Agreement is hereby amended as follows effective **July 1, 2025**, upon receipt of all required approvals and execution by all Parties ("Amendment Effective Date"). New Language is indicated by **bolding and underlining** and deleted language is indicated by ~~**bolding and striking**~~ unless a section is replaced in its entirety.
 - a. Amend Exhibit B, titled Subcontractor Requirements, Section 2, titled Subcontractor Insurance Requirements, Subsection 2.B, titled Types and Amounts, Section titled Commercial General Liability only, as follows:

COMMERCIAL GENERAL LIABILITY:

☒ **Required** ☐ **Not required**

Contractor shall provide Commercial General Liability Insurance covering bodily injury and property damage in a form and with coverage that are satisfactory to the State. This insurance shall include personal and advertising injury liability, products and completed operations, contractual liability coverage for the indemnity provided under this Agreement, and have no limitation of coverage to designated premises, project, or operation. Coverage shall be written on an occurrence basis in an amount of not less than ~~\$5,000,000.00~~ **\$1,000,000.00** per occurrence and not less than \$2,000,000.00 annual aggregate limit.

3. Except as expressly amended above, all other terms and conditions of the Agreement are still in full force and effect. County certifies that the representations, warranties, and certifications contained in the Agreement are true and correct as of the effective date of this Amendment and with the same effect as though made at the time of this Amendment.

The Parties, by execution of this Agreement, hereby acknowledge that their signing representatives have read this Agreement, understand it, and agree to be bound by its terms and conditions.

Signatures on Next Page

COUNTY: Clackamas County

By: _____ Date: _____

Print Name and Title: _____

AGENCY: State of Oregon, acting by and through its Oregon Youth Authority

By: _____ Date: _____

Name: Susanna Bare, Procurement Manager/DPO

ATTORNEY GENERAL: Approved for legal sufficiency

By: Exempt per OAR 137-045-0050 Date: _____

AGREEMENT ADMINISTRATOR: Reviewed and approved

By: Laura Ward via email Date: 10302025

Name: Laura Ward

PROCUREMENT UNIT: Reviewed by Contract Specialist

By: _____ Date: _____

Name: James Owens



Oregon

Tina Kotek, Governor

Oregon Youth Authority

Procurement Unit

530 Center Street NE, Suite 500

Salem, OR 97301-3765

Phone: 503-373-7371

Fax: 503-373-7921

www.oregon.gov/OYA



Document Return Statement

November 13, 2025

Re: Agreement Amendment #15358a hereafter referred to as "Amendment"

Please complete and return the following documents:

- This Document Return Statement
- Completed Signature Page

If you have any questions or concerns with the above-referenced Amendment, please feel free to contact James Owens, Procurement and Contract Specialist, at (971) 493-8827.

Please complete the below:

I _____, _____
(Name) (Title)

received a copy of the above-referenced Amendment, consisting of 2 pages between the State of Oregon, acting by and through its **Oregon Youth Authority** and **Clackamas County** by email from OYA Procurement Unit on the date listed above.

On _____, I signed the electronically transmitted Amendment without change.

Authorized Signature

Date

COUNTY COUNSEL DOCUMENT REVIEW
TRANSMITTAL FORM

DATE: November 13, 2025

TO: COUNTY COUNSEL
ATTORNEY: Jeff Munns

FROM: Danielle Valdez

EXTENSION: 8788

DEPARTMENT/DIVISION: Juvenile

BILL TO: Juvenile

(Department/Division to be billed)

TYPE OF DOCUMENT: IGA

NAME OF DOCUMENT: Amendment No. 1 to Agreement 15358 dated July 1, 2025, between State of Oregon, acting by and through its Oregon Youth Authority (OYA), and Clackamas County for Individualized Services.

REQUESTED RETURN DATE: As soon as reasonably possible.

APPROVED AS TO FORM:

County Counsel:



Date: 11/13/2025

Counsel Comments:
