

## MaryRumbaugh Director

July 31, 2025	BCC Agenda Date/Item:	

Board of County Commissioners Clackamas County

Approval of an Application for a Direct Award from the US Department of Health and Human Services to promote responsible fatherhood and healthy marriages. Grant Value is \$3,749,995 for 5 years. Funding is through the US Department of Health and Human Services, Administration on Children and Families. No County General Funds are involved.

Previous Board Action/Review	Briefed at Issues July 29,	2025	
Performance Clackamas	Ensure safe, healthy, and	secure communities.	
Financial Review	Yes, Elizabeth Comfort	Procurement Review	NA
Contact Person	Jessica Duke	Contact Phone	971-291-8569

**EXECUTIVE SUMMARY**: The Children, Family & Community Connections (CFCC) Division of the Health, Housing and Human Services Department requests approval of a Financial Assistance Application Lifecycle Form for a Federal Grant application for the Family, Opportunity, Resilience, Grit, Engagement (FORGE) Fatherhood program.

FORGE will provide funding for projects that promote fatherhood under three broad categories:

- Promote responsible parenting
- Foster economic stability
- Promote or sustain marriage

All fathers/father figures over 18 years of age with children under 24 will be eligible for services which include case management with a focus on family relationships and employment, parenting education classes, healthy relationship classes, and referrals to services that support fathers and families.

The grant application has a maximum value of \$3,749,995 over a five-year period, supporting the addition of three new positions. Program services are scheduled to begin on September 30, 2025, and will continue through September 30, 2030. No County General Funds will be used to support this grant.

**RECOMMENDATION:** Staff respectfully requests that the Board of County Commissioners approve this grant and authorize Chair Roberts or his designee to sign on behalf of Clackamas County.

Respectfully submitted,

Mary Rumbaugh
Mary Rumbaugh

Director of Health, Housing and Human Services

For Filing Use Only

## **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

**CONCEPTION**						
Section I: Funding Opportunity I	nformation - To Be C	Completed by Requester	Award type: Award Renewal?	Subrecipie	oropriation (n ent Award	o application)  Direct Award
Lead Fund # and Department:	H3S Fund 240	CECC	Award Renewal?	ies		
·					<b>/</b> 5050	
Name of Funding Opportunity:	Family, Opport	unity, Resilience, G	rit, Engagement - Fa	atherhood	(FORGI	E Fatherhood)
Funding Source: Federal – Direct	F	ederal – Pass through	State	Local		
Requestor Information: (Name of staff ini	itiating form)	Jessica Duke				
Requestor Contact Information:		971-291-8596				
Department Fiscal Representative:		Cade Windell				
Program Name & Prior Project #: (please	specify)	New				
Brief Description of Project:						
The FORGE Fatherhood—Family, Opticategories:  Promoting responsible parenting Fostering Economic Stability Promoting or sustaining marriage	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,, -, 5-5	g			
Name of Funding Agency: Dept of Health	n and Human Services (I	HHS), Admin for Children and	Families, Office of Family Assis	stance		
Notification of Funding Opportunity Web	Address: https://www.g	grants.gov/search-results-deta	il/355696			
OR	_					
Application Packet Attached:	es 🗸 No					
Completed By: Jessica Duke	Date: 7/2	21/2025				
completed by. Session Dake			RTMENT FISCAL REPRESENTATIV	r **		
Section II: Funding Opportunity I  Competitive Application	<b>nformation - To Be C</b> Non-Competing Application	. —	scal Rep			
Assistance Listing Number (ALN), if applicable	e: 93.086		Funding Agency Award Notification D	ate: 7	7/15/25	
Announcement Date:	7/15/2025		Announcement/Opportunity #:			CF-OFA-ZJ-0014
Grant Category/Title	FORGE		Funding Amount Requested:		3,749,995	
Allows Indirect/Rate:		ate option or 15%	Match Requirement:		lo	
Application Deadline:	7/29/25		Total Project Cost:		3,749,995	
Award Start Date:	9/30/25		Other Deadlines and Description:			
Award End Date	9/30/30					
Completed By:	Stephanie Radfo	ord	Program Income Requirements:	n	/as	
Pre-Application Meeting Schedule:	N/A	·				

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

None

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

No General Fund.

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?
This grant overlaps with H3S's Goals in these areas through the scope of work outlined: To assist individuals and families in need to be healthy and safe To increase self-sufficiency To increase community safety and health To continually improve the efficiency and effectiveness of services
2. Who, if any, are the community partners who might be better suited to perform this work?
Many community partners can do portions of the work - but none are as suited as CFCC to fulfill both the parenting education and workforce components of this grant.
3. What are the objectives of this funding opportunity? How will we meet these objectives?
Awards under this funding must develop program designs that incorporate activities in all three of the following areas, and offer them to all eligible fathers and/or father figures: Promoting responsible parenting; Fostering economic stability; Promoting or sustaining healthy marriage. While each area is required, each has a list of activities that we are allowed to chose from to best fit our needs and that of the community. CFCC has extensive history of parenting education, including healthy family relationships, and workforce development
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?  Up to three new staff positions will be required and the funding source provides funding and planning time to hire this team.
2. Are there partnership efforts required? If yes, who are we partnering with and what are their roles and responsibilities?  Yes, MOUs will be required from at least two organizations. Further, less formal, partnership will be sought from local DHS offices, TANF Agencies, Housing resources,
Clackamas Women's Services, Head Start programs, local substance and mental health agencies, and OHP navigators. MOU agrrements will focus on these agencies referring fathers to this program.
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.)?
N/A
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.)?
Yes. This grant creates a new program area under the Prevention Unit within CFCC. This funding has a 5-year-cycle with noncompetitive renewals every year of the project and the possibility of reapplying after the 5-year-cycle is complete. A sustainability plan will be incorporated into the grant. At the end of the grant period, while specific services may not be able to continue, CFCC programs will be better able to serve fathers in the community and father-focused activities will be incorporated into the work.

### Collaboration

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

CFCC will be the host division. We will collaborate with other divisions within H3S in their capacity as community resources. Connections with other departments will be informing them of the program and services available.

### **Reporting Requirements**

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

As a recipient, CFCC will submit performance and financial reports two times per year.

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?

Performance will be evaluated based on meeting the stated objectives of the grant and the number of fathers served each year. The funder will train staff to collect performance measurement data in the Information, Family Outcomes, Reporting, and Management (nFORM) system.

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

Twice annually fiscal reporting.

#### 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. No match fund required, grant will be only funding.

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.)?

N/A

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?

As Clackamas County does not have an approved indirect rate with the federal government, we may use up to 15% as a de minimus rate.

Other information necessary to understand this award, if any.

Program Approval:

Jessica Duke

7/21/2025

Jessica E.A. Duke

Signature

Name (Typed/Printed)

Date

\*\* 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 Freer	7.21.25	Adam 1 2
Name (Typed/Printed)	Date	Signature
DEPARTMENT DIRECTOR (or designee, if applicable) Philip Mason-Joyner	07/21/2025	Phim-g
Name (Typed/Printed)	Date	Signature
FINANCE ADMINISTRATION Elizabeth Comfort	07/22/2025	Clizabeth Comfort
Name (Typed/Printed)	Date	Signature
EOC COMMAND APPROVAL (WHEN NEEDED FOR DISAST.	ER OR EMERGENCY RELIEF APPLICATIONS <u>ONLY</u> )	
Name (Typed/Printed)	Date	Signature
For applications \$150,000 and below:  COUNTY ADMINISTRATOR	Approved:	Denied:
Name (Typed/Printed)	Date	Signature
approval.		lteam@clackamas.us for Gary Schmidt's to the Board at <u>ClerktotheBoard@clackamas.us</u>
to be brought to the consent agenda.  BCC Agenda item #:  OR	ail form with Staff Report to the Clerk	to the Board at <u>ClerktotheBoard@clackamas.us</u>