



Grants Report

DRAFT

County Executive Office/Legislative Affairs

January 26, 2021

Item No : 28

County of Orange Report on Grant Applications/Awards

The Grants Report is a condensed list of grant requests by County Agencies/Departments that allows the Board of Supervisors to discuss and approve grant submittals in one motion at a Board meeting. County policy dictates that the Board of Supervisors must approve all grant applications prior to submittal to the grantor. This applies to grants of all amounts, as well as to new grants and those that have been received by the County for many years as part of an ongoing grant. Receipt of grants \$50,000 or less is delegated to the County Executive Officer. Grant awards greater than \$50,000 must be presented to the Board of Supervisors for receipt of funds. This report allows for better tracking of county grant requests, the success rate of our grants, and monitoring of County's grants activities. It also serves to inform Orange County's Sacramento and Washington, D.C. advocates of County grant activities involving the State or Federal Governments.

On January 26, 2021 the Board of Supervisors will consider the following actions:

RECOMMENDED ACTIONS

Approve grant applications/awards as proposed and other actions as recommended.

ACTION ITEMS:

1. Approve Grant Award – Health Care Agency – Immunization Local Assistance Grant-Amendment – \$754,451.
2. Approve Grant Application and Adopt Resolution – OC Community Resources – Public Beach Restoration Grant-\$3,000,000.
3. Approve Grant Application – Orange County Sheriff-Coroner Department – Traffic Reporting Improvement Program (TRIP) Grant – \$60,000.
4. Approve Grant Application – District Attorney's Office – Alcohol and Drug Impaired Driver Grant – \$1,944,928.
5. Receive and File Grants Report.

If you or your staff have any questions or require additional information on any of the items in this report, please contact Cynthia Shintaku at 714-834-7086.



CEO-Legislative Affairs Office Grant Authorization eForm

Attachment A

☐ GRANT APPLICATION / ☒ GRANT AWARD

Today's Date:	January 19, 2021																					
Requesting Agency/Department:	Health Care Agency/Public Health																					
Grant Name and Project Title:	Immunization Local Assistance Grant - Amendment																					
Sponsoring Organization/Grant Source: (If the grant source is not a government entity, please provide a brief description of the organization/foundation)	California Department of Public Health (CDPH), Immunization Branch.																					
Application Amount Requested:	N/A																					
Application Due Date:	N/A																					
Board Date when Board Approved this Application:	07/28/20 (Recurring Grant Matrix Application – Health Care Agency)																					
Awarded Funding Amount:	\$4,075,247 (5 year grant) Amendment increases funds of \$754,451 for FY 2020-21																					
Notification Date of Funding Award:	January 15, 2021																					
Is this an Authorized Retroactive Grant Application/Award? No (If yes, attach memo to CEO)																						
Recurrence of Grant	New <input type="checkbox"/> Recurrent <input checked="" type="checkbox"/> Other <input type="checkbox"/> Explain:																					
If this is a recurring grant, please list the funding amount applied for and awarded in the past:	Five Year Agreement: <table><thead><tr><th></th><th>Previous</th><th>This Amendment</th></tr></thead><tbody><tr><td>FY 17-18</td><td>\$688,962</td><td>\$ 688,962</td></tr><tr><td>FY 18-19</td><td>\$688,962</td><td>\$ 688,962</td></tr><tr><td>FY 19-20</td><td>\$647,624</td><td>\$ 647,624</td></tr><tr><td>FY 20-21</td><td>\$647,624</td><td>\$ 1,402,075</td></tr><tr><td>FY 21-22</td><td>\$647,624</td><td>\$ 647,624</td></tr><tr><td>Total</td><td></td><td>\$ 4,075,247</td></tr></tbody></table>		Previous	This Amendment	FY 17-18	\$688,962	\$ 688,962	FY 18-19	\$688,962	\$ 688,962	FY 19-20	\$647,624	\$ 647,624	FY 20-21	\$647,624	\$ 1,402,075	FY 21-22	\$647,624	\$ 647,624	Total		\$ 4,075,247
	Previous	This Amendment																				
FY 17-18	\$688,962	\$ 688,962																				
FY 18-19	\$688,962	\$ 688,962																				
FY 19-20	\$647,624	\$ 647,624																				
FY 20-21	\$647,624	\$ 1,402,075																				
FY 21-22	\$647,624	\$ 647,624																				
Total		\$ 4,075,247																				
Does this grant require CEQA findings?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>																					
What Type of Grant is this?	Competitive <input type="checkbox"/> Other Type <input checked="" type="checkbox"/> Explain: Formula																					
County Match?	Yes <input type="checkbox"/> Amount _____ or _____ % No <input checked="" type="checkbox"/>																					
How will the County Match be Fulfilled? (Please include the specific budget)	N/A																					
Will the grant/program create new part or full-time positions?	No																					
Purpose of Grant Funds:	Provide a summary and brief background of why Board of Supervisors why should accept this grant application/award, and how the grant will be implemented.																					
The purpose of this grant is to assist local health departments (LHDs) in preventing and controlling vaccine-preventable diseases in the local health jurisdiction (LHJ). The purpose of the Grant amendment is to increase funding to augment and enhance efforts around influenza vaccination coverage as well as perform Coronavirus Disease 2019 (COVID-19) vaccination planning and implementation.																						
Board Resolution Required? (Please attach document to eForm)	Yes <input type="checkbox"/> See attached No <input checked="" type="checkbox"/>																					
Deputy County Counsel Name:																						



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(Please list the Deputy County Counsel that approved the Resolution)

Recommended Action/Special Instructions

(Please specify below)

The Health Care Agency requests that the Board of Supervisors approve the Recommended Action authorizing the Agency to accept this Grant Agreement Amendment for the term of July 1, 2017 through June 30, 2022 and delegate authority to the HCA Director, or designee, to execute the Acceptance of Award, and any required documents.

Authorize the Health Care Agency Director, or designee, to execute such future amendments to the Agreement referenced above that do not change the Agreement amount by more than 10% of the original amount and/or make immaterial changes to the scope of work.

Due to the amendment being associated with COVID-19 for FY 20-21, we are asking for this amendment be expedited through the Grants Report process.

Department Contact:

List the name and contact information (telephone, e-mail) of the staff person to be contacted for further information.

Marc Meulman, (714) 834-2980, mmeulman@ochca.com

Name of the individual attending the Board Meeting:

List the name of the individual who will be attending the Board Meeting for this Grant Item:

Margaret Bredehoft



CEO-Legislative Affairs Office
Grant Authorization eForm

Attachment A

☒ GRANT APPLICATION / ☐ GRANT AWARD

Today's Date:	1/26/21
Requesting Agency/Department:	OC Community Resources/OC Parks
Grant Name and Project Title:	Public Beach Restoration Grant: Capistrano Beach Nature Based Adaptation Demonstration Project
Sponsoring Organization/Grant Source: (If the grant source is not a government entity, please provide a brief description of the organization/foundation)	California Department of Boating and Waterways (DBW)
Application Amount Requested:	Up to \$3 million
Application Due Date:	February 1, 2021
Board Date when Board Approved this Application:	N/A
Awarded Funding Amount:	N/A
Notification Date of Funding Award:	N/A
Is this an Authorized Retroactive Grant Application/Award? NO (If yes, attach memo to CEO)	
Recurrence of Grant	New <input type="checkbox"/> Recurrent <input type="checkbox"/> Other <input checked="" type="checkbox"/> Explain:
If this is a recurring grant, please list the funding amount applied for and awarded in the past:	OC Parks applied for this grant for restoration of Capistrano Beach in 2019. The program was not funded for that cycle so we are re-applying this year.
Does this grant require CEQA findings?	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
What Type of Grant is this?	Competitive <input checked="" type="checkbox"/> Other Type <input type="checkbox"/> Explain:
County Match?	Yes <input checked="" type="checkbox"/> Amount: <u> </u> or <u>15</u> % No <input type="checkbox"/>
How will the County Match be Fulfilled? (Please include the specific budget)	OC Parks budgeted item.
Will the grant/program create new part or full-time positions?	NO
Purpose of Grant Funds:	Provide a summary and brief background of why Board of Supervisors why should accept this grant application/award, and how the grant will be implemented.
<p>If awarded, the California Department of Boating and Waterways Public Beach Restoration Grant, funds will be used by OC Parks to implement a nature-based climate adaptation demonstration project at Capistrano Beach to test and evaluate the feasibility of a shoreline protection strategy that could be applied elsewhere along the California Coast in similar circumstances. The project, in conjunction with California State Parks, aims to promote ecosystem-based methodologies demonstrated in the project to increase the resiliency of Capistrano Beach from the impacts of coastal hazards and the effects of sea level rise.</p>	
Board Resolution Required? (Please attach document to eForm)	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Deputy County Counsel Name: (Please list the Deputy County Counsel that approved the Resolution)	Mark Batarse



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Grant Authorization eForm**

Attachment A

Recommended Action/Special Instructions

(Please specify below)

1. Authorize the OC Community Resources Director or designee to apply for the State of California Department of Boating and Waterways Public Beach Restoration Grant for Capistrano Beach Park. Authorize the OC Community Resources Director or designee to sign and submit all documents required for participation in the program.
2. Adopt the attached Grant Resolution for the Department of Boating and Waterways Public Beach Restoration Grant.

Department Contact:

List the name and contact information (telephone, e-mail) of the staff person to be contacted for further information.

Sue McIntire, OC Parks Grants Manager - (714) 478-3421; sue.mcintire@ocparks.com

Name of the individual attending the Board Meeting:

List the name of the individual who will be attending the Board Meeting for this Grant Item:

Stacy Blackwood, OC Parks Director or designee

RESOLUTION OF THE BOARD OF SUPERVISORS OF
ORANGE COUNTY, CALIFORNIA

January 26, 2021

WHEREAS, the State Department of Boating and Waterways (DBW) has been delegated the responsibility by the Legislature of the State of California for the administration of the Public Beach Restoration Grant Program, setting up necessary procedures governing the application; and

WHEREAS, said procedures established by the State Department of Boating and Waterways require the Applicant to certify by resolution the approval of the application as part of submission of said application to the State; and

WHEREAS, successful Applicants will enter into a contract with the State of California to complete the Grant Scope project;

NOW, THEREFORE, BE IT RESOLVED that this Board does hereby:

1. Approve the filing of an application for the Capistrano Beach Nature Based Adaptation Demonstration Project; and
2. Certifies that said Applicant has or will have available, prior to commencement of any work on the project included in this application, the sufficient funds to complete the project; and
3. Certifies that if the project is awarded, the Applicant has or will have sufficient funds to operate and maintain the project, and
4. Delegates the authority to the OC Community Resources Director, OC Parks Director, or authorized designee to conduct all negotiations, sign and submit all documents, including, but not limited to applications, agreements, amendments, and payment requests, which may be necessary for the application to the program; and
5. Agrees to comply with all applicable federal, state and local laws, ordinances, rules, regulations and guidelines.

Resolution No. Item No. <Clerk to complete upon adoption>



CEO-Legislative Affairs Office
Grant Authorization eForm

Attachment A

☒ GRANT APPLICATION / ☐ GRANT AWARD

Today's Date:	January 14, 2021
Requesting Agency/Department:	Orange County Sheriff-Coroner Department
Grant Name and Project Title:	Traffic Reporting Improvement Program (TRIP) Grant (CFDA#20.610)
Sponsoring Organization/Grant Source: (If the grant source is not a government entity, please provide a brief description of the organization/foundation)	State of California Office of Traffic Safety
Application Amount Requested:	\$60,000
Application Due Date:	January 30, 2021
Board Date when Board Approved this Application:	
Awarded Funding Amount:	
Notification Date of Funding Award:	
Is this an Authorized Retroactive Grant Application/Award? (If yes, attach memo to CEO)	
Recurrence of Grant	New <input checked="" type="checkbox"/> Recurrent <input type="checkbox"/> Other <input type="checkbox"/> Explain:
If this is a recurring grant, please list the funding amount applied for and awarded in the past:	N/A
Does this grant require CEQA findings?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
What Type of Grant is this?	Competitive <input checked="" type="checkbox"/> Other Type <input type="checkbox"/> Explain:
County Match?	Yes <input type="checkbox"/> Amount _____ or _____ % No <input checked="" type="checkbox"/>
How will the County Match be Fulfilled? (Please include the specific budget)	N/A
Will the grant/program create new part or full-time positions?	No
Purpose of Grant Funds:	Provide a summary and brief background on why the Board of Supervisors should accept this grant application/award, and how the grant will be implemented.
<p>The Traffic Reporting Improvement Program (TRIP) grant funds are intended to be utilized to adopt and implement effective programs to improve the timeliness, accuracy, completeness, uniformity, integration, and accessibility of state data and to improve the compatibility of the state data systems with national data systems to enhance the ability to observe and analyze national trends in crash occurrences, rates, outcomes, and circumstances.</p> <p>If awarded, the grant funds will be utilized to purchase a computer program that would automatically send the mandated information to the Statewide Integrated Traffic Records System. This computer program will allow Sheriff to automate the process of submitting reports in order to reduce potential errors that occur and streamline the report submission process.</p> <p>The grant period is October 1, 2021 through September 30, 2022.</p> <p>The Sheriff plans to return to the Board with a request to accept funding, if the grant application is</p>	



**CEO-Legislative Affairs Office
Grant Authorization eForm**

Attachment A

accepted.

Board Resolution Required?

(Please attach document to eForm)

Yes ☐

No ☒

Deputy County Counsel Name:

(Please list the Deputy County Counsel that approved the Resolution)

Recommended Action/Special Instructions

(Please specify below)

Authorize the Sheriff-Coroner, or designee, to sign all necessary application documents required for the submission of the application and supporting documentation to the State of California Office of Traffic Safety.

Nicole Sims, Supervising Deputy County Counsel, has reviewed and approved the application.

Department Contact :

List the name and contact information (telephone, e-mail) of the staff person to be contacted for further information.

Luis Ramirez, Grants Manager

LURAMIREZ@ocsd.org

714-647-1871

Name of the individual attending the Board Meeting:

List the name of the individual who will be attending the Board Meeting for this Grant Item:

Sergeant Brent Jasper



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Attachment A

☒ GRANT APPLICATION / ☐ GRANT AWARD

Today's Date:	January 19, 2021															
Requesting Agency/Department:	District Attorney's Office															
Grant Name and Project Title:	Alcohol and Drug Impaired Driver Grants: Vertical Prosecution Program and California Traffic Safety Resource Program Training Network															
Sponsoring Organization/Grant Source: (If the grant source is not a government entity, please provide a brief description of the organization/foundation)	California Office of Traffic Safety															
Application Amount Requested:	Total Grant Application Amount: \$1,944,928 <ul style="list-style-type: none">Vertical Prosecution Program: \$1,111,500CA Traffic Safety Resource Program: \$833,428															
Application Due Date:	January 31, 2021															
Board Date when Board Approved this Application:	N/A															
Awarded Funding Amount:	N/A															
Notification Date of Funding Award:	N/A															
Is this an Authorized Retroactive Grant Application/Award? No (If yes, attach memo to CEO)																
Recurrence of Grant	New <input type="checkbox"/> Recurrent <input checked="" type="checkbox"/> Other <input type="checkbox"/> Explain:															
If this is a recurring grant, please list the funding amount applied for and awarded in the past:	<table border="1"><thead><tr><th>Year</th><th>Amount</th><th>Purpose</th></tr></thead><tbody><tr><td>FFY 20-21</td><td>\$1,039,400</td><td>Vertical Prosecution</td></tr><tr><td>FFY 20-21</td><td>\$761,738</td><td>Statewide Training</td></tr><tr><td>FFY 19-20</td><td>\$754,563</td><td>Vertical Prosecution</td></tr><tr><td>FFY 19-20</td><td>\$722,513</td><td>Statewide Training</td></tr></tbody></table>	Year	Amount	Purpose	FFY 20-21	\$1,039,400	Vertical Prosecution	FFY 20-21	\$761,738	Statewide Training	FFY 19-20	\$754,563	Vertical Prosecution	FFY 19-20	\$722,513	Statewide Training
Year	Amount	Purpose														
FFY 20-21	\$1,039,400	Vertical Prosecution														
FFY 20-21	\$761,738	Statewide Training														
FFY 19-20	\$754,563	Vertical Prosecution														
FFY 19-20	\$722,513	Statewide Training														
Does this grant require CEQA findings?	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>															
What Type of Grant is this?	Competitive <input checked="" type="checkbox"/> Other Type <input type="checkbox"/> Explain:															
County Match?	Yes <input type="checkbox"/> Amount _____ or _____ % No <input checked="" type="checkbox"/>															
How will the County Match be Fulfilled? (Please include the specific budget)	N/A															
Will the grant/program create new part or full-time positions?	Existing personnel will provide the grant-funded services.															
Purpose of Grant Funds:	Provide a summary and brief background on why the Board of Supervisors should accept this grant application/award, and how the grant will be implemented.															
The California Office of Traffic Safety (OTS) awards funds to identify and address emerging traffic safety issues through innovative and evidence-based programs. This grant will provide continued funding for specialized personnel consisting of prosecutorial and investigative staff to prosecute alcohol and drug impaired driving cases as well as to provide training and technical assistance to police officers, prosecutors and other traffic safety professionals throughout the state. OCDA has been working in partnership with OTS on traffic safety and driving under the influence of drugs prosecutions since 2011. In 2017, OTS designated the District Attorney's Office as the statewide training agency for traffic safety.																



CEO-Legislative Affairs Office Grant Authorization eForm

Attachment A

Board Resolution Required? (Please attach document to eForm)	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Deputy County Counsel Name: (Please list the Deputy County Counsel that approved the Resolution)		
Recommended Action/Special Instructions (Please specify below)		
Request approval to apply for the California Office of Traffic Safety Grants program funding.		
Department Contact :	List the name and contact information (telephone, e-mail) of the staff person to be contacted for further information.	
Glenn Robison 714-347-8778, glenn.robison@da.ocgov.com		
Name of the individual attending the Board Meeting:	List the name of the individual who will be attending the Board Meeting for this Grant Item:	
Glenn Robison		