



Grants Report

County Executive Office/Legislative Affairs

December 5, 2023
Item No: 15

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 December 5, 2023, the Board of Supervisors considered the following actions:

RECOMMENDED ACTIONS

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

ACTION ITEMS:

1. Approve Grant Application – OC Public Works – Cooperative Watershed Management Program; South OC Watershed Management Area Stakeholder Engagement and Outreach – \$300,000
2. Approve Grant Application – OC Public Works – Cooperative Watershed Management Program; North and Central OC Watershed Management Areas Stakeholder Engagement and Outreach – \$300,000
3. Approve Grant Application – Public Defender – Public Defense Pilot Program – \$3,208,878.25
4. Approve Grant Application – Health Care Agency – Providing Access and Transforming Health (PATH) Justice Involved (JI) Round 3 – \$2,561,959
5. Approve Grant Application – Social Services Agency – California State Preschool Program – \$160,000
6. Approve Grant Application – Social Services Agency – Housing and Disability Advocacy Program – \$1,187,103
7. Approve Grant Award – Social Services Agency – Local Aging and Disability Action Planning Grant Program – \$200,000
8. Approve Grant Award – Sheriff Coroner – 2023 State Criminal Alien Assistance Program – \$2,983,878
9. 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 Julie Bechtol at 714-834-2009.



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

GRANT APPLICATION / **GRANT AWARD**

Today's Date:	November 28, 2023
Requesting Agency/Department:	OC Public Works
Grant Name and Project Title:	Cooperative Watershed Management Program; South OC Watershed Management Area Stakeholder Engagement and Outreach
Sponsoring Organization/Grant Source: <small>(If the grant source is not a government entity, please provide a brief description of the organization/foundation)</small>	US Bureau of Reclamation
Application Amount Requested:	\$300,000
Application Due Date:	December 5, 2023
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? <small>(If yes, attach memo to CEO)</small>	
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? <small>(Please include the specific budget)</small>	A match is not required
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 Cooperative Watershed Management Grant program provides funding to local watershed groups to encourage diverse stakeholders to develop collaborative solutions to address water resource needs. This proposal will support stakeholder engagement and outreach on watershed planning activities. Inclusion of diverse stakeholders is a critical gap that will be filled if the County is awarded this grant opportunity.</p> <p>The activities to be funded through this grant include:</p> <ol style="list-style-type: none"> 1. Identifying and inventorying of CBOs within Orange County 2. Assessing inventoried CBOs to understand the community(ies) they serve, their needs, and determining best fits for future partnerships 3. Analyzing established engagement methods for CBOs and providing recommendations for which method(s) would be best employed to develop partnerships with CBOs identified through inventory assessment 4. Initial CBO engagement / partnership building, which, depending on recommendations for engagement, could include provision of funding to compensate CBOs for their time. 	



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)		
1. Authorize the Director of OC Public Works or designee to submit, on behalf of the County of Orange, a grant application for South OC Watershed Management Area Stakeholder Engagement and Outreach from the US Bureau of Reclamation Cooperative Watershed Management Program for an amount of \$300,000 for the development of a plan to assess and promote the inclusion of communities in developing collaborative solutions for water resource needs.		
Department Contact :	List the name and contact information (telephone, e-mail) of the staff person to be contacted for further information.	
Beatrice Musacchia (Beatrice.Musacchia@ocpw.ocgov.com ; 714-955-0612), Christy Suppes (Christy.Supes@ocpw.ocgov.com ; 714-955-0673), Grant Sharp (Grant.Sharp@ocpw.ocgov.com ; 714-955-0633)		
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:	
Amanda Carr, Deputy Director, OCPW Kevin Onuma, County Engineer James Treadaway, Director, OCPW		



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

GRANT APPLICATION / **GRANT AWARD**

Today's Date:	November 28, 2023
Requesting Agency/Department:	OC Public Works
Grant Name and Project Title:	Cooperative Watershed Management Program; North and Central OC Watershed Management Areas Stakeholder Engagement and Outreach
Sponsoring Organization/Grant Source: <small>(If the grant source is not a government entity, please provide a brief description of the organization/foundation)</small>	US Bureau of Reclamation
Application Amount Requested:	\$300,000
Application Due Date:	December 5, 2023
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? <small>(If yes, attach memo to CEO)</small>	
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? <small>(Please include the specific budget)</small>	A match is not required
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 Cooperative Watershed Management Grant program provides funding to local watershed groups to encourage diverse stakeholders to develop collaborative solutions to address water resource needs. This proposal will support stakeholder engagement and outreach on watershed planning activities. Inclusion of diverse stakeholders is a critical gap that will be filled if the County is awarded this grant opportunity.</p> <p>The activities to be funded through this grant include:</p> <ol style="list-style-type: none"> 1. Identifying and inventorying of CBOs within Orange County 2. Assessing inventoried CBOs to understand the community(ies) they serve, their needs, and determining best fits for future partnerships 3. Analyzing established engagement methods for CBOs and providing recommendations for which method(s) would be best employed to develop partnerships with CBOs identified through inventory assessment 4. Initial CBO engagement / partnership building, which, depending on recommendations for engagement, could include provision of funding to compensate CBOs for their time. 	



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)		
1. Authorize the Director of OC Public Works or designee to submit, on behalf of the County of Orange, a grant application for North and Central Watershed Management Areas Stakeholder Engagement and Outreach from the US Bureau of Reclamation Cooperative Watershed Management Program for an amount of \$300,000 for the development of a plan to assess and promote the inclusion of communities in developing collaborative solutions for water resource needs.		
Department Contact :	List the name and contact information (telephone, e-mail) of the staff person to be contacted for further information.	
Beatrice Musacchia (Beatrice.Musacchia@ocpw.ocgov.com ; 714-955-0612), Christy Suppes (Christy.Suppes@ocpw.ocgov.com ; 714-955-0673), James Fortuna (James.Fortuna@ocpw.ocgov.com ; 714-955-0680)		
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:	
Amanda Carr, Deputy Director, OCPW Kevin Onuma, County Engineer James Treadaway, Director, OCPW		



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

GRANT APPLICATION / **GRANT AWARD**

Today's Date:	November 22, 2023						
Requesting Agency/Department:	Public Defender						
Grant Name and Project Title:	Public Defense Pilot Program						
Sponsoring Organization/Grant Source: <small>(If the grant source is not a government entity, please provide a brief description of the organization/foundation)</small>	California Board of State and Community Corrections						
Application Amount Requested:	\$3,208,878.25						
Application Due Date:	January 5, 2024						
Board Date when Board Approved this Application:							
Awarded Funding Amount:							
Notification Date of Funding Award:							
Is this an Authorized Retroactive Grant Application/Award? No <small>(If yes, attach memo to CEO)</small>							
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="0"> <tr> <td>FY 21- 22 Round 1</td> <td>FY 22-23</td> </tr> <tr> <td>Applied: \$4,004,654</td> <td>Applied: \$3,984,665</td> </tr> <tr> <td>Awarded: \$4,004,654</td> <td>Awarded: \$3,984,665</td> </tr> </table>	FY 21- 22 Round 1	FY 22-23	Applied: \$4,004,654	Applied: \$3,984,665	Awarded: \$4,004,654	Awarded: \$3,984,665
FY 21- 22 Round 1	FY 22-23						
Applied: \$4,004,654	Applied: \$3,984,665						
Awarded: \$4,004,654	Awarded: \$3,984,665						
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: Population Driven Allocation						
County Match?	Yes <input type="checkbox"/> Amount _____ or _____ % No <input checked="" type="checkbox"/>						
How will the County Match be Fulfilled? <small>(Please include the specific budget)</small>							
Will the grant/program create new part or full-time positions?	Yes						
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 funding for the grant comes from the State Budget Act for fiscal year 2021-22, which allocated \$49,500,000 a year for three years to Counties to implement four recently enacted criminal justice mandates. Utilizing grant funding, Public Defender funds programs to represent clients within the scope of the grant—those falling under Penal Code sections 1172.6 (homicide resentencing), 3051 (youthful offender parole), 1172.1 (resentencing upon recommendation of the Secretary of CDCR) and 1473.7 (providing for vacating prior convictions under certain circumstances). The State Budget Act of 2023 reduced the amount in the third year to \$39,400,000 state-wide. This is the third round of funding for this grant and covers a period from March 1, 2024 to March 1, 2025.</p> <p>A resolution was adopted by the Board at the meeting on December 7, 2021. No new resolution is needed for this application.</p>							
Board Resolution Required? <small>(Please attach document to eForm)</small>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>						



CEO-Legislative Affairs Office Grant Authorization eForm

Attachment A

Deputy County Counsel Name: (Please list the Deputy County Counsel that approved the Resolution)	Mark Servino & Brittany McLean
Recommended Action/Special Instructions (Please specify below)	
Authorize the Public Defender, or designee, to apply for the third round of funding under the California Board of State and Community Corrections Public Defense Pilot Program.	
Department Contact :	List the name and contact information (telephone, e-mail) of the staff person to be contacted for further information.
Martin Schwarz Public Defender martin.schwarz@ocpubdef.com (657) 251-8879	
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:
Martin Schwarz Public Defender	



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

GRANT APPLICATION / **GRANT AWARD**

Today's Date:	November 28, 2023
Requesting Agency/Department:	Health Care Agency / Mental Health and Recovery Services
Grant Name and Project Title:	Providing Access and Transforming Health (PATH) – Justice Involved (JI) Round 3
Sponsoring Organization/Grant Source: <small>(If the grant source is not a government entity, please provide a brief description of the organization/foundation)</small>	California Department of Health Care Services
Application Amount Requested:	\$2,561,959 (this is funding available – Funding awarded will be determined on HCA's implementation plan)
Application Due Date:	March 31, 2024
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? <small>(If yes, attach memo to CEO)</small>	
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:	No
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? <small>(Please include the specific budget)</small>	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.

CalAIM is a multi-year initiative of California's Department of Health Care Services (DHCS) to improve the quality of life and health outcomes of Medi-Cal members by implementing a broad delivery system, and a program and payment reform across the Medi-Cal program. Through the CalAIM Justice-Involved (JI) Reentry Initiative, DHCS will require state prisons, county jails, youth correctional facilities, county behavioral health departments, and Managed Care Plans (MCPs) to implement processes for facilitated referrals and linkages to continued behavioral health treatment in the community for individuals who receive behavioral health services while incarcerated. It is expected that behavioral health linkages will be fully integrated into the delivery of the pre-release services, once implemented. Behavioral health-related pre-release services and behavioral health linkages will be provided in partnership with county behavioral health agencies and correctional facilities.



This grant opportunity will provide funding to support the provision of the 90-day Pre-Release implementation processes and the Justice-Involved Reentry Initiative planning effort. DHCS envisions the 90-day Pre-Release Services as part of the CalAIM Justice-Involved Reentry Demonstration initiative, which is mandatory per federal and state law.

In addition, the grant will provide funding to the collaborative planning effort amongst Orange County Sheriff Department (OCSD), Probation, Social Services Agency (SSA), Correctional Health Services (CHS), Health Care Agency (HCA) and CalOptima to identify stand up processes, protocols, personnel, and IT system modification necessary to support the delivery of pre-release and re-entry planning processes.

Eligible funding expenditure under this grant are:

- Training, technical assistance, and planning efforts to support agencies standing up behavioral health in-reach (if correctional facilities develop an agreement with county behavioral health agencies to perform these activities) and establishing linkages to the community.
- Recruitment, hiring, onboarding, and supporting staff salaries for personnel supporting behavioral health in-reach services and behavioral health linkages (as mandated in AB 133)

In order to implement behavioral health linkages, DHCS will require all county behavioral health agencies to complete an implementation plan using a readiness assessment tool provided by DHCS, which will focus on new processes required to support the implementation of behavioral health linkages, as required by AB 133.

Components of the readiness assessment with respect to behavioral health linkages will focus on:

Focus Area	Readiness Element	Minimum Requirement to Go Live
1. Initial Data Sharing	1a. Initial Data Sharing – Defined process to (1) obtain medical records as appropriate for individuals with treatment history; and (2) notify MCP (if enrolled) that county behavioral health care coordination is occurring, as necessary.	Minimum Requirement
2. Data Sharing	2a. Data Sharing for Release –Defined process to (1) receive correctional facility medical record information and ensure that it is incorporated into post-release medical record; and (2) identify any individuals who may benefit from professional-to-professional clinical handoff.	Minimum Requirement
3. Release Planning	3a. Follow-up Appointments – Defined process to provide follow-up appointment date/time/location within clinically appropriate window (e.g., for someone on MAT, recommended follow-up would be next day post-release). Minimum Requirement 3b. Transportation – Defined process to ensure transportation to appointment has been arranged. Minimum	Minimum Requirement
4. Professional to	4a. Reentry Professional-to-Professional Clinical Handoff – Established process to provide in-person/telehealth professional-to-professional clinical handoff between correctional provider and	



Professional Clinical Handoff	county behavioral health provider, as necessary, and defined processes in place to ensure county behavioral health agency is able to participate in care transitions meeting for any client that has been identified by correctional staff, care manager, or clinical consultants as needing additional team coordination (e.g., clients identified to have high/complex needs).	Minimum Requirement
5. Follow-up Post-Release	5a. Post-Release Scheduling – Established process to schedule individual for appointments on an ongoing basis as needed, within clinically appropriate timeframe, ensuring they have adequate transportation to appointment.	Minimum Requirement
Focus Area	Readiness Element	Minimum Requirement to Go Live
	5b. Post-Release Follow-up – Established process to provide follow-up to individual if they miss an appointment in the community. DHCS supports the best practice of deploying a community health worker to work with the ECM provider to reschedule missed appointments as soon as possible.	Minimum Requirement
6. Oversight and Project Management	<p>6a. Staffing Structure and Plan – Clear staffing and/or contractor structure to support each readiness element and compliance with DHCS requirements for behavioral health linkages, including identification of county-operated and/or county-contracted providers that will (1) fulfill the required processes described above and (2) receive referrals for follow-up visits in the community for continued behavioral health care.</p> <p>6b. Governance Structure for Partnerships – Defined governance structure for coordinating with key partners (e.g., correctional facilities, care management organizations, providers, MCPs)</p> <p>6c. Reporting and Oversight Processes – Established process to collect, monitor, and report on DHCS required measures, including corrective action processes to address operational challenges</p>	<p>Minimum Requirement</p> <p>Minimum Requirement</p>

If the Board approves HCA’s request to submit an implementation plan to DHCS for PATH JI Round 3 funds, we will return to the Board with a Notice of Award and amount awarded. Funds will be awarded based on HCA’s implementation plan.

<p>Board Resolution Required? (Please attach document to eForm)</p> <p>Deputy County Counsel Name: (Please list the Deputy County Counsel that approved the Resolution)</p>	<p>Yes <input type="checkbox"/></p> <p>No <input checked="" type="checkbox"/></p>
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CEO-Legislative Affairs Office Grant Authorization eForm

Recommended Action/Special Instructions (Please specify below)	
Approve the Health Care Agency, Mental Health and Recovery Services to submit an implementation plan for DHCS' Providing Access and Transforming Health (PATH) Justice-Involved Reentry Initiative Capacity Building Program rounds as appropriate for Fiscal Years 2022-2025.	
Department Contact :	List the name and contact information (telephone, e-mail) of the staff person to be contacted for further information.
Veronica Kelley, Chief of Mental Health and Recovery Services vkelly@ochca.com phone: 714-834-7024	
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:
Veronica Kelley, Chief of Mental Health and Recovery Services vkelly@ochca.com phone: 714-834-7024	



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

GRANT APPLICATION / **GRANT AWARD**

Today's Date:	December 5, 2023
Requesting Agency/Department:	Social Services Agency
Grant Name and Project Title:	California State Preschool Program
Sponsoring Organization/Grant Source: <small>(If the grant source is not a government entity, please provide a brief description of the organization/foundation)</small>	California Department of Education
Application Amount Requested:	\$160,000
Application Due Date:	February 23, 2024
Board Date when Board Approved this Application:	N/A
Awarded Funding Amount:	N/A
Notification Date of Funding Award:	Expected June 2024
Is this an Authorized Retroactive Grant Application/Award? No <small>(If yes, attach memo to CEO)</small>	
Type 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:	FY 2022/23: <ul style="list-style-type: none"> • Amount applied for – \$160,000 • Amount Awarded – \$158,051 FY 2021/22: <ul style="list-style-type: none"> • Amount Applied for – \$160,000 • Amount Awarded – \$128,619 FY 2020/21: <ul style="list-style-type: none"> • Amount Applied for – \$160,000 • Amount Awarded – \$125,411 Note: Annual increases are a result of state budget increases and are adjusted by California Department of Education.
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: Continued Funding Application
County Match?	Yes <input type="checkbox"/> Amount _____ or _____ % No <input checked="" type="checkbox"/>
How will the County Match be Fulfilled? <small>(Please include the specific budget)</small>	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.
<p>In 2014, the Social Services Agency (SSA) was awarded a grant from the California Department of Education (CDE), Early Education and Support Division, to provide full day/full-year preschool services to increase the availability of early education development programs to eligible preschool children so that more children from low and moderate-income families enter kindergarten ready to learn and succeed in school and in life.</p> <p>SSA utilized this funding in Fiscal Years 2020-21, 2021-22 and 2022-23 to support full-day/full-year preschool services at the Tustin Family Campus Early Childhood Development Center for children involved in the child welfare system due to abuse and neglect.</p>	



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

Attachment A

Approval to submit the continued funding application will extend the state funding to Fiscal Year 2024-25 for the purpose of supporting the development and increasing school readiness of preschool youth who have been victims, or at risk of becoming victims, of child abuse and neglect. The requested grant amount remains the same as the previous year and aligns with expenditure trends and service.

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)

1. Authorize the Social Services Agency Director or designee to apply for the California State Preschool Program grant funds and execute the Standard Agreement and all grant documents as required for participation in the program.

Department Contact :

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

An Tran, 714-541-7708, An.Tran@ssa.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:

An Tran 714-541-7708, An.Tran@ssa.ocgov.com



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

GRANT APPLICATION / **GRANT AWARD**

Today's Date:	December 5, 2023														
Requesting Agency/Department:	Social Services Agency														
Grant Name and Project Title:	Housing and Disability Advocacy Program														
Sponsoring Organization/Grant Source: <small>(If the grant source is not a government entity, please provide a brief description of the organization/foundation)</small>	California Department of Social Services														
Application Amount Requested:	\$ 1,187,103														
Application Due Date:	December 15, 2023														
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 <small>(If yes, attach memo to CEO)</small>															
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="0"> <tr> <td>2018 Applied: \$2,147,651</td> <td>2018 Awarded: \$2,147,651</td> </tr> <tr> <td>2019-20 Applied: \$1,091,855</td> <td>2019-20 Awarded: \$1,091,855</td> </tr> <tr> <td>2020 Applied: \$102,634;</td> <td>2020 Awarded: \$102,634</td> </tr> <tr> <td>2020-21 Applied: \$1,270,023</td> <td>2020-21 Awarded: \$1,270,023</td> </tr> <tr> <td>2020-21 Applied: \$127,002</td> <td>2020-21 Awarded: \$127,002</td> </tr> <tr> <td>2021-22 Applied: \$7,659,238</td> <td>2021-22 Awarded: \$7,659,238</td> </tr> <tr> <td>2022-23 Applied: \$7,659,238</td> <td>2022-23 Awarded: \$7,659,238</td> </tr> </table>	2018 Applied: \$2,147,651	2018 Awarded: \$2,147,651	2019-20 Applied: \$1,091,855	2019-20 Awarded: \$1,091,855	2020 Applied: \$102,634;	2020 Awarded: \$102,634	2020-21 Applied: \$1,270,023	2020-21 Awarded: \$1,270,023	2020-21 Applied: \$127,002	2020-21 Awarded: \$127,002	2021-22 Applied: \$7,659,238	2021-22 Awarded: \$7,659,238	2022-23 Applied: \$7,659,238	2022-23 Awarded: \$7,659,238
2018 Applied: \$2,147,651	2018 Awarded: \$2,147,651														
2019-20 Applied: \$1,091,855	2019-20 Awarded: \$1,091,855														
2020 Applied: \$102,634;	2020 Awarded: \$102,634														
2020-21 Applied: \$1,270,023	2020-21 Awarded: \$1,270,023														
2020-21 Applied: \$127,002	2020-21 Awarded: \$127,002														
2021-22 Applied: \$7,659,238	2021-22 Awarded: \$7,659,238														
2022-23 Applied: \$7,659,238	2022-23 Awarded: \$7,659,238														
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: Non-competitive allocation.														
County Match?	Yes <input checked="" type="checkbox"/> Amount 100% No <input type="checkbox"/>														
How will the County Match be Fulfilled? <small>(Please include the specific budget)</small>	State: Homeless Housing, Assistance and Prevention (HHAP)														
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>The Housing and Disability Advocacy Program (HDAP) is a county-administered state program that provides housing and disability benefits application assistance to people with a disability who are experiencing homelessness. HDAP requires outreach, case management, disability benefits advocacy, housing assistance, and prioritizes individuals experiencing chronic homelessness or individuals experiencing homelessness who rely most heavily on government-funded services. HDAP provides funding to the County of Orange (County) System of Care to better serve those experiencing homelessness in Orange County and increases care coordination between the Social Services Agency (SSA), OC Community Resources (OCCR), Health Care Agency and County Executive Office, Office of Care Coordination.</p> <p>The California Budget Act of 2023 appropriated \$25 million for HDAP statewide in FY 2023-24. On November 6, 2023, the California Department of Social Services (CDSS) issued an All County Welfare Director Letter announcing the FY 2023-24 application opportunity for HDAP funds, including the County's non-competitive allocation in the amount of \$1,187,103, available for the expenditure period of July 1, 2023, to June 30, 2025.</p>															



CEO-Legislative Affairs Office Grant Authorization eForm

Attachment A

All grantees must apply by December 15, 2023, to receive funds available through the noncompetitive allocation. Approval of this application will allow for continuity and development of HDAP services and provide a needed resource to the System of Care as the County continues to address homelessness in our community. SSA will bring any award received subsequent to the application submission back to the Board for approval.

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 Social Services Agency Director or designee to apply for the Housing and Disability Advocacy Program allocation in the amount of \$1,187,103 and execute an agreement with the State of California Department of Social Services to administer the Housing and Disability Advocacy Program funds.

Department Contact:

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

An Tran, 714-541-7708, An.Tran@ssa.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:

An Tran, 714-541-7708, An.Tran@ssa.ocgov.com



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

GRANT APPLICATION / GRANT AWARD

Today's Date:	December 5, 2023
Requesting Agency/Department:	Social Services Agency
Grant Name and Project Title:	Local Aging & Disability Action Planning Grant Program
Sponsoring Organization/Grant Source: <small>(If the grant source is not a government entity, please provide a brief description of the organization/foundation)</small>	California Department of Aging
Application Amount Requested:	\$200,000
Application Due Date:	October 2, 2023
Board Date when Board Approved this Application:	October 17, 2023
Awarded Funding Amount:	\$200,000
Notification Date of Funding Award:	November 13, 2023
Is this an Authorized Retroactive Grant Application/Award? No <small>(If yes, attach memo to CEO)</small>	
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:	
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? <small>(Please include the specific budget)</small>	N/A
Will the grant/program create new part or full-time positions?	Yes
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>The Local Aging & Disability Action Planning (LADAP) Grant Program is administered by the California Department of Aging (CDA) and provides grants to communities to plan and develop local age and disability-friendly action plans. The local plans aim to improve a community's livability and address the current, emerging and future needs of California's older adults, people with disabilities and caregivers through cross-sector collaboration and transformational systems change.</p> <p>The LADAP grant program aligns with California's Master Plan for Aging (MPA) and the County's own work towards developing a countywide MPA. The Request for Applications was released on August 29, 2023, and SSA submitted the grant application by the deadline of October 2, 2023. The Board approved the application on October 17, 2023, and on November 13, 2023, CDA announced that SSA's proposal was selected for award. The LADAP Grant Program runs from January 5, 2024, through March 31, 2025.</p>	



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

As the lead agency for the countywide MPA initiative, SSA has closely collaborated with other county agencies, local governments, community-based organizations and community members of all ages and abilities on MPA-related activities. Approval to accept SSA's LADAP Grant Program award will help enhance and expand this important work in partnership with Orange County's older adults and other stakeholders.

SSA will utilize the grant funds to accelerate the development of the countywide MPA by facilitating the hiring of a Human Services Manager whose focus will be the successful planning, drafting and adoption of a countywide MPA and other MPA-related activities.

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 Social Services Agency Director or designee to accept the award for the Local Aging & Disability Action Planning Grant Program up to the amount of \$200,000, and to execute the grant agreement and all grant documents as required for participation in the program.

Department Contact:

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

An Tran, 714-541-7708, An.Tran@ssa.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:

An Tran, 714-541-7708, An.Tran@ssa.ocgov.com



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

GRANT APPLICATION / GRANT AWARD

Today's Date:	November 22, 2023										
Requesting Agency/Department:	Sheriff-Coroner Department										
Grant Name and Project Title:	2023 State Criminal Alien Assistance Program										
Sponsoring Organization/Grant Source: <small>(If the grant source is not a government entity, please provide a brief description of the organization/foundation)</small>	Bureau of Justice Assistance/Office of Justice Systems/U.S. Department of Justice										
Application Amount Requested:	Approximately \$2.5 million (Formula Grant)										
Application Due Date:	May 31, 2023										
Board Date when Board Approved this Application:	May 9, 2023										
Awarded Funding Amount:	\$2,983,878										
Notification Date of Funding Award:	November 21, 2023										
Is this an Authorized Retroactive Grant Application/Award? No <small>(If yes, attach memo to CEO)</small>											
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><u>Fiscal Year Revenue is received</u></th> <th><u>Amount Received</u></th> </tr> </thead> <tbody> <tr> <td>FY 2019-20</td> <td>\$ 4,975,363</td> </tr> <tr> <td>FY 2022-23</td> <td>\$2,011,581</td> </tr> <tr> <td>FY 2022-23</td> <td>\$2,501,786</td> </tr> <tr> <td>FY 2023-24</td> <td>\$2,598,711</td> </tr> </tbody> </table>	<u>Fiscal Year Revenue is received</u>	<u>Amount Received</u>	FY 2019-20	\$ 4,975,363	FY 2022-23	\$2,011,581	FY 2022-23	\$2,501,786	FY 2023-24	\$2,598,711
	<u>Fiscal Year Revenue is received</u>	<u>Amount Received</u>									
	FY 2019-20	\$ 4,975,363									
	FY 2022-23	\$2,011,581									
	FY 2022-23	\$2,501,786									
FY 2023-24	\$2,598,711										
*See explanation under "Purpose of Grant Funds" section.											
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 Program										
County Match?	Yes <input type="checkbox"/> Amount _____ or _____ % No <input checked="" type="checkbox"/>										
How will the County Match be Fulfilled? <small>(Please include the specific budget)</small>											
Will the grant/program create new part or full-time positions?											
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 Office of Justice Systems/U.S. Department of Justice (DOJ), administered through the Bureau of Justice Assistance (BJA), offers the State Criminal Alien Assistance Program (SCAAP) Grant offering payment to eligible states and units of local government that incur certain types of costs due to incarceration of undocumented criminal aliens during a particular 12-month reporting period. When available, the Sheriff-Coroner Department (Sheriff) applies for SCAAP Grant funding. See Recurring Grant section above for the amounts received in the past.</p> <p>This grant program is retrospective in that the award is based on the number of inmates who served at least four consecutive days (qualifying inmates) during the fiscal year covered by the grant. The 2023 SCAAP grant is based upon qualifying inmates in custody during FY 2021-22. The 2023 SCAAP grant award will be received in FY 2023-24 in the amount of \$2,983,878.</p>											



CEO-Legislative Affairs Office Grant Authorization eForm

Attachment A

The amount received as noted on the table above for each fiscal year is for the application submitted for the prior two fiscal years. The amount of revenue the Sheriff received in FY 2023-24 was \$2,598,711 which includes the 2022 SCAAP grant award, FY 2022-23 was \$4,513,367 which includes the 2020 SCAAP award of \$2,011,581 for FY 2018-19 services, and the 2021 SCAAP award of \$2,501,786 for FY 2019-20 services. The amount of revenue the Sheriff received in FY 2019-20 was \$4,975,363 which includes the 2019 award of \$2,465,578 for FY 2017-18 services and the 2018 award of \$2,509,785 for FY 2016-2017 services.

Sheriff intends to utilize the SCAAP funding to cover salaries, wages and employee benefits to employees who work primarily and directly in jails; and a reasonable allocable portion for employees who, although not primarily and directly working in and for the jails, provide necessary services (e.g. transportation staff, etc.). The intended use for the 2023 SCAAP funding of \$2,983,878 is consistent with prior years and will be used for jail salaries and benefits.

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)

Accept the Bureau of Justice Assistance/Office of Justice Systems/U.S. Department of Justice Grant State Criminal Alien Assistance Program (SCAAP) Grant award in the amount of \$2,983,878 for services to qualifying inmates incarcerated during July 1, 2021, through June 30, 2022.

Department Contact :

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

Director Noma M. Crook
Financial/Administrative Services Division
714.834.6681 NCrook@ocsheriff.gov

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:

Noma Crook or designee