Department **Human Services** Division 005 Fund 124 Program 851

Program 020 Subprogram 504

Purpose of Grant (Brief description of work to be performed) Early Intervention Services This agreement with Washington State Department of Children, Youth and Families (DCYF) awards federal and state funding to provide early intervention services for infants and toddlers with disabilities and their families. A portion of the agreement budget funds county program administration, training and technical assistance, monitoring service providers, and participation in implementing state-wide system improvements. Existing/ongoing program X Yes New program Yes Source of grant funding: Federal X State X Local C Other Grant Term: From 7/01/2024 to 06/30/2026 Grantor: Department of Children, Youth and Families (DCYF) Grant Award \$31,496,120 * Is match required: Yes No If yes, match amount required: Match Source (General Fund, Patient Fees, In-Kind, etc.). If County funded, enter DAC. DAC _____ Amount Amount **Total Resources** \$31,496,120 *Total amended grant anticipated for the two-year term. \$15,748,060 is included in the 2024 budget request. **EXPENDITURES** 1. Internal Operations (Admin., Operations, Direct Service, etc.) (Estimated cost) \$2,351,750 Who will complete the work? Existing FTE(s) Existing project FTE(s) New FTE(s) If new FTEs are needed, complete the following. Attach additional sheet if needed. Classification # FTEs Human Services Specialist II 1.0 **Total FTEs** 1.0 2. Pass Thru (Estimated cost) \$29,144,370

Total Expenditures \$31,496,120

Department **Human Services** Division 005 Fund 124 Program 811 & 851 Program 020 Subprogram 504

Purpose of Grant (Brief description of work to be performed) Developmental Disabilities County Services: State of Washington, Department of Social and Health Services County Program Agreement – DDD County Services provides funding for the county's community contracts for children's early intervention services and adult employment and community support services for individuals with developmental disabilities living in Snohomish County. Existing/ongoing program X Yes New program | Yes Source of grant funding: Federal X State X Local C Other Grant Term: From 7/1/2024 to 6/30/2025 Grantor: Department of Social and Health Services, State of WA Grant Award **\$13,160,622** Is match required: Yes No If yes, match amount required: Match Source (General Fund, Patient Fees, In-Kind, etc.). If County funded, enter DAC. DAC Amount DAC _____ Amount **Total Resources** \$13,160,622 **EXPENDITURES** 1. Internal Operations (Admin., Operations, Direct Service, etc.) (Estimated cost) \$1,305,035 Who will complete the work? Existing FTE(s) Existing project FTE(s) New FTE(s) If new FTEs are needed, complete the following. Attach additional sheet if needed. Classification # FTEs 1.0 Human Services Specialist II Total FTEs 1.0 2. Pass Thru (Estimated cost) \$11,855,587

Total Expenditures \$13,160,622

Purpose of Anticipated Grant (Brief description of work to be performed) **School to Work.**This is a partnership between the school districts, Division of Vocational Rehabilitation and the

Department **Human Services** Division 005 Fund 124 Program 811

County to assist eligible students in their last year of school to obtain competitive paid employ before graduation. For successful placements, DVR will reimburse the County at a rate of \$9,4 for each successful placement. The average placement rate is 15 individuals successfully placed year.	00
Existing/ongoing program Yes New program Yes Source of grant funding: Federal State Local Other	
Grant Term: From 1/1/2024 to 12/31/2024	
Grantor: WA DSHS Division of Vocational Rehabilitation Grant Award \$200,000	
Is match required: Yes No If yes, match amount required:	
Match Source (General Fund, Patient Fees, In-Kind, etc.). If County funded, enter DAC.	
DAC Amount	
DAC Amount	
Total Resources \$200,000	
EXPENDITURES	
1. Internal Operations (Admin., Operations, Direct Service, etc.) (Estimated cost) \$200,000	
Who will complete the work? Existing FTE(s)	
If new FTEs are needed, complete the following. Attach additional sheet if needed.	
# FTEs Classification	
Total FTEs	
2. Pass Thru (Estimated cost) \$0	
Total Expenditures \$200,000	

Department **Human Services** Division 002 Fund 124 Program 197, 198

ADD COLA TO THE TOTAL AMOUNT SO THE AMENDMENT DOES NOT NEED COUNCIL APPROVAL

Purpose of Grant (Brief description of work to be p This award with Department of Health and Human	•
82 children and families (cumulative count) in the N	• •
program with services offered in Arlington, Granite	• •
this program is to provide family-centered services	
to three years. The program is designed to promot	_
	•
enable their parents to fulfill their roles as parents	
Existing/ongoing program Yes New prog	
Source of grant funding: Federal 🛛 State 🗌	Local Other
Grant Term: From 1/1/2024 to 12/31/2024	
Grantor: Department of Health and Human Services	Grant Award \$1,528,428 *
Is match required: Yes No If yes, mat	tch amount required: \$382,107
Match Source (General Fund, Patient Fees, In-Kind, etc.	
Water 30 are (General Fana, Fatient Fees, III kina, etc	
GF Program Support DAC 124-3041979701	Amount \$1,666
GF Program Support DAC 124-3041989701	Amount <u>\$25,128</u>
SUBTOTAL COUNTY FUNDED MATCH	\$26,794
Value of in-kind contributions received from parent volu	unteers, community partnerships, and
professionals serving on advisory boards.	Value \$355,313
	Total Resources \$1,910,535
EXPENDITURES	
1. Internal Operations (Admin., Operations, Direct Service, etc.)	(Estimated cost) \$1,910,535 (includes in kind
match)	
Who will complete the work? Existing FTE(s) 🗵 Existi	ng project FTE(s) New FTE(s)
who will complete the work. Existing 1.12(s) — Exist	116 project 12(3)
If new FTEs are needed, complete the following. Attach	additional sheet if needed.
# FTEs Classification	
Total FTEs1.0 Infant Toddler Specialist	
2. Pass Thru (Estimated value	ne) \$0
	Total Expenditures \$1.910.535
	IVIAI EXDEIIUITUIES 31.31V.333

^{*}Includes grant COLA estimated at 3%. 2024 county budget = \$1,483,911 (not including GF match req.)

Department **Human Services** Division 002 Fund 124 Program 193, 194

Program 020 Subprogram 210

Purpose of Grant (Brief description of work to be performed) **Early Childhood Education and Assistance Program (ECEAP):** This Agreement with Washington State Department of Children, Youth and Families provides funding for ECEAP. Established by the Legislature in 1985, ECEAP is a comprehensive school readiness program serving low-income and at-risk 3- and 4-year-old children and their families in Washington State. Because many factors affect a child's development and learning ability, ECEAP provides preschool education, health services coordination, nutrition, family support and parent involvement. ECEAP currently provides these services to at least 15,000 children per year. 85% of currently enrolled children have family incomes below 110% Federal Poverty Guidelines; the remaining children have either developmental, environmental or research-based risk factors that allow ECEAP eligibility.

Who will complete the work? Existing FTE(s) Ex If new FTEs are needed, complete the following. Att # FTEs Classification 1.0 Human Services Specialist II Total FTEs 1.0 2. Pass Thru (Estimated of		E(S) 🖂			
If new FTEs are needed, complete the following. Att # FTEs Classification 1.0 Human Services Specialist II		E(S) 🖂			
If new FTEs are needed, complete the following. Att # FTEs Classification		E(S)			
If new FTEs are needed, complete the following. Att	ach additional sheet if needed.	E(S)			
	ach additional sheet if needed.	E(S) 🖂			
Who will complete the work? Existing FTE(s)		E(S) 🖂			
	Who will complete the work? Existing FTE(s) Existing project FTE(s) New FTE(s)				
1. Internal Operations (Admin., Operations, Direct Service, etc.) (Estimated cost) \$3,090,059					
EXPENDITURES					
	Total Resources	\$17,395,603			
DAC	Amount				
Match Source (General Fund, Patient Fees, In-Kind,	etc.). If County funded, enter DA	AC.			
Is match required: Yes No If yes,	match amount required:				
Grantor: Department of Children, Youth and Famil	ies, State of WA Grant Award \$1	17,395,603			
Grant Term: From 7/1/2024 to 6/30/2025					
	Source of grant funding: Federal State Local Other				
Source of grant funding: Federal State	Existing/ongoing program Yes New program Yes				

Department **Human Services** Division 004 Fund 124 Program 210-213

Program (LIHEAP) E by the United State State Department of	Energy Assistance Prog is Department of Health of Commerce. The prog	k to be performed) Low Incon ram: The LIHEAP Energy Ass and Human Services (HHS) t gram funds are designed to rec e with a portion of a low-incom	sistance Program is funded hrough the Washington duce the burden of rising
	g program 🔀 Yes 🍴 S funding: Federal 🔀 S	New program	
Grant Term: Fro	om 10/1/2024 to 9/30/	/2026	
Grantor: Departm	ent of Commerce, Stat	e of WA Grant Awar	d \$8,235,057
Is match required:	Yes No	If yes, match amount required	d:
Match Source (Ge	neral Fund, Patient Fee	s, In-Kind, etc.). If County fund	ded, enter DAC.
	DA	AC Amount	t
	DA	AC Amount	t
		Total Resou	urces \$8,235,057
			41 CC3
EXPENDITURES			VI CC3
	ions (Admin., Operations, Direc	ct Service, etc.) (Estimated cost)	
1. Internal Operat			\$8,235,057
 Internal Operat Who will complete 	the work? Existing FTE	ct Service, etc.) (Estimated cost)	\$ 8,235,057 New FTE(s)
1. Internal Operat Who will complete If new FTEs are nee	the work? Existing FTE	ct Service, etc.) (Estimated cost) (s)	\$ 8,235,057 New FTE(s)
1. Internal Operat Who will complete If new FTEs are nee	the work? Existing FTE ded, complete the follo	ct Service, etc.) (Estimated cost) (s)	\$ 8,235,057 New FTE(s)
1. Internal Operat Who will complete If new FTEs are nee	the work? Existing FTE ded, complete the follo	ct Service, etc.) (Estimated cost) (s)	\$ 8,235,057 New FTE(s)

Total Expenditures \$8,235,057

Department Human Services Division 004 Fund 124 Program 210, 211, 212

Purpose of Grant (Brief description of work to be performed) Energy Assistance Program: This Agreement with Cascade Natural Gas (CNG) provides energy assistance for CNG's gas heat customers in Snohomish County. The County reports to CNG the amount of a client's benefit, and, using an internal funds transfer, CNG credits the customer's account that amount, the County does not receive or hold the funds used to pay the clients utility bill. The funds received provide program support and administrative funds to operate the program

Existing/ongoing program 🔀 Yes Source of grant funding: Federal 🗌			
Grant Term: From 10/1/2024 to 9/	30/2025		
Grantor: Cascade Natural Gas		Grant Award \$3,00	00
Is match required: Yes No	If yes, match am	nount required:	
Match Source (General Fund, Patient I	Fees, In-Kind, etc.).	If County funded, en	ter DAC.
	DAC	Amount	
	DAC	Amount	
		Total Resources	\$3,000
EXPENDITURES			
1. Internal Operations (Admin., Operations,	Direct Service, etc.) (EStir	nated cost) \$3,00	00
Who will complete the work? Existing FTE(s)			
If new FTEs are needed, complete the following. Attach additional sheet if needed.			
# FTEs Classification	n		
Total FTEs			
2. Pass Thru	(Estimated cos	t) \$0	
	То	otal Expenditures	\$3,000

Purpose of Grant (Brief description of work to be performed) Low-Income Energy Assistance

Department **Human Services** Division 004 Fund 124 Program 210-212

Program: Puget Sound Energy provides energy assistance for PSE's gas heat customers in Snohomish County. The County reports to PSE the amount of a client's benefit, and, using an internal funds transfer, PSE credits the customer's account that amount, the County does not receive or hold the funds used to pay the clients utility bill. The funds received provide program support and administrative funds to operate the program Existing/ongoing program X Yes New program | Yes Source of grant funding: Federal State Local Other Grant Term: From 10/1/2024 to 9/30/2025 Grantor: Puget Sound Energy Grant Award **\$69,672** Is match required: Yes No If yes, match amount required: _____ Match Source (General Fund, Patient Fees, In-Kind, etc.). If County funded, enter DAC. DAC Amount _____ DAC _____ Amount Total Resources \$69,672 **EXPENDITURES** 1. Internal Operations (Admin., Operations, Direct Service, etc.) (Estimated cost) \$69,672 Who will complete the work? Existing FTE(s) Existing project FTE(s) New FTE(s) If new FTEs are needed, complete the following. Attach additional sheet if needed. Classification # FTEs Total FTEs 2. Pass Thru (Estimated cost) \$0

Total Expenditures

\$69,672

Department Human Services Division 004 Fund 124 Program 210, 211, 212

Purpose of Grant (Brief description of work to be performed) **Energy Assistance Program:** This Agreement with Cascade Natural Gas (CNG) provides Winter Help energy assistance for CNG's gas heat customers in Snohomish County. The County reports to CNG the amount of a client's benefit, and, using an internal funds transfer, CNG credits the customer's account that amount, the County does not receive or hold the funds used to pay the clients utility bill. The funds received provide program support and administrative funds to operate the program

Existing/ongoing program 🔀 Yes Source of grant funding: Federal 🗌		Other 🔀
Grant Term: From 10/1/2024 to 9/	30/2025	
Grantor: Cascade Natural Gas	Gra	ant Award \$225
Is match required: Yes No	If yes, match amount	required:
Match Source (General Fund, Patient F	ees, In-Kind, etc.). If Cou	unty funded, enter DAC.
	DAC	Amount
	DAC	Amount
	Tota	al Resources \$225
EXPENDITURES		
1. Internal Operations (Admin., Operations, I	Direct Service, etc.) (Estimated	l cost) \$225
Who will complete the work? Existing F	TE(s) 🛛 Existing projec	ct FTE(s) New FTE(s)
If new FTEs are needed, complete the fo	ollowing. Attach addition	nal sheet if needed.
# FTEs Classification	١	
Total FTEs		
2. Pass Thru	(Estimated cost)	\$0
	Total E	expenditures \$225

Department Human Services Division 004 Fund 124 Program 210, 211, 212, 213

Purpose of Grant (Brief description of work to be performed) **Community Services Block Grant (CSBG) (Indirect).** This Agreement with Washington State Department of Commerce provides funding to eliminate/reduce the causes and impact of poverty. CSBG funds, in accordance with federal law, are used to address local priority needs determined through a low income needs assessment. Needs being addressed are: mental health counseling, family law, and enhanced case management services for those in emergency shelters or transitional housing.

	ram ⊠ Yes New program ng: Federal ⊠ State □ Loc		
Grant Term: From 10)/1/2024 to 9/30/2025		
Grantor: Department of	Commerce, State of WA	Grant Award \$585	,767
Is match required: Y	es 🛛 No 💮 If yes, match a	mount required:	
Match Source (General F	Fund, Patient Fees, In-Kind, etc.)	. If County funded, en	ter DAC.
	DAC	Amount	
	DAC	Amount	
		Total Resources	\$585,767
EXPENDITURES			
•	6 (Admin., Operations, Direct Service, etc.) Ork? Existing FTE(s) Existing	` <u> </u>	· · · · · —
If new FTEs are needed, o	complete the following. Attach a	additional sheet if need	ded.
# FTEs	Classification		
1.0	Human Services Specialist III		
Total FTEs 1.0			
2. Pass Thru		(Estimated cost)	\$0
	Tot	al Expenditures	\$585,767

Department **Human Services** Division 002 Fund 124 Program 110

Purpose of Grant (Brief description of work to be performed) **Community Services Block Grant (State-CSBG).** This Agreement with Washington State Department of Commerce provides funding to eliminate/reduce the causes and impact of poverty. CSBG funds, in accordance with Washington State Department of Commerce requirements, are used to address local priority needs determined through a low income needs assessment. Needs being addressed are: mental health counseling, family law, and enhanced case management services for those in emergency shelters or transitional housing.

Existing/ongoing program X Yes New pro Source of grant funding: Federal X State	<u> </u>	
Grant Term: From 7/1/2024 to 6/30/2025		
Grantor: Department of Commerce, State of WA	Grant Award \$ 81,691	
Is match required: Yes No If yes,	natch amount required:	
Match Source (General Fund, Patient Fees, In-Kir	d, etc.). If County funded, enter DAC.	
DAC	Amount	_
DAC	Amount	
	Total Resources \$81,691	
EXPENDITURES		
1. Internal Operations (Admin., Operations, Direct Service, Who will complete the work? Existing FTE(s)	<u></u>	
If new FTEs are needed, complete the following.	Attach additional sheet if needed.	
# FTEs Classification		
Total FTEs		
2. Pass Thru	(Estimated cost) \$0	
	Total Expenditures \$81 691	

Division 002 Fund 124 Program 110

This Agreement with Washington State Department of Health and Social Services, Aging and Long-Term

Department **Human Services** Division 003 Fund 124 Program 511

Program 020 Subprogram 313, 314

Purpose of Grant (Brief description of work to be performed) Caregiver Training

Support Administration (ALTSA), provides funding authority (no maximum award) to Snohomish County to reimburse the County and contracted agencies for the costs of providing orientation, caregiving education, and Continuing Education to paid home care workers serving Medicaid eligible clients. The County will be reimbursed an administrative fee of 5% of the amount of class time for home care agency providers. This is a fee for service agreement with no maximum contract amount; budget estimates are based upon projected activity. Existing/ongoing program Yes New program Yes Source of grant funding: Federal State Local Other Grant Term: From 7/1/2024 to 6/30/2025 Grantor: Department of Social and Health Services, State of WA Grant Award \$ 603,750 Is match required: Yes No If yes, match amount required: _____ Match Source (General Fund, Patient Fees, In-Kind, etc.). If County funded, enter DAC. DAC _____ Amount _____ DAC _____ Amount ____ **Total Resources** \$603,750 **EXPENDITURES** 1. Internal Operations (Admin., Operations, Direct Service, etc.) (Estimated cost) \$28,750 Who will complete the work? Existing FTE(s) Existing project FTE(s) New FTE(s) If new FTEs are needed, complete the following. Attach additional sheet if needed. Classification # FTEs **Total FTEs** 2. Pass Thru (Estimated cost) \$575,000

Total Expenditures \$603,750

Department **Human Services** Division 003 Fund 124 Program 511,543

Program 020 Subprogram 313, 314, 316, 321, 324, 325, 326, and 327

Purpose of Grant (Brief description of work to be performed) State Federal Services Agreement
This Agreement with Washington State Department of Health and Social Services, Aging and Long-Term
Support Administration (ALTSA), combines funds to support several ongoing services and activities into one
award. Services to be provided include: Case Management services for Medicaid financed home care and
Chore service, and Home Care Contract Management. Other services include Senior Information and
Assistance, Ethnic Meal Transportation, Stabilized Housing, Non-Core Case Management, Adult Day Health,
State Family Caregiver Support, Kinship Caregiver Support Program, Senior Drug Education, Home Delivered
Meals Expansion, Senior Farmer's Market Nutrition, Care Transitions, Program of All-Inclusive Care for the
Elderly, State Matching Funds for Federal OAA American Rescue Plan, and funds to support administration
of these activities.

S. S. S.		her 🗌
Grantor: Department of S	ocial and Health Services, State of WA	Grant Award \$16,198,056*
Is match required: X	s No If yes, match amount red	quired: \$389,230
Match Source (General Fu	nd, Patient Fees, In-Kind, etc.). If County	funded, enter DAC.
County General	DAC 124-3045439700	Amount \$ 70,246
GF Program Support	DAC 124-3045439703	Amount \$125,752
SUBTOTAL COUNTY FUNDED MATCH		\$195,998
State grant revenues used MATCH TOTAL	as Match ** <u>included in Grant Award**</u>	Amount <u>\$193,232</u> \$389,230
Total Resources \$16,394,054		
EXPENDITURES		
1. Internal Operations (A	dmin., Operations, Direct Service, etc.) (Estimated co	st) \$14,457,429
Who will complete the work? Existing FTE(s) 🗵 Existing project FTE(s) 🗌 New FTE(s) 🖂		

If new FTEs are needed, complete the following. Attach additional sheet if needed.

# FIES	Classification
2.0	Case Manager Lead

2.0 <u>Case Manager</u>

<u>1.0</u> <u>Case Management Aide</u>

Total FTEs 5.0 Sum of new positions included in 2024 budget request

2. Pass Thru (Estimated cost) \$1,936,625

Total Expenditures \$16,394,054

^{*}Total grant amount anticipated for the grant term. \$15,094,054 is included in the 2024 budget request.

Department **Human Services** Division 003 Fund 124 Program 511

Program 020, Subprograms 310, 311, 317, 318, 320, 323, 347

Purpose of Grant (Brief description of work to be performed) Older Americans Act

This Agreement with Washington State Department of Health and Social Services, Aging and Long-Term Support Administration (ALTSA), provides federal Older Americans Act funds which support subcontracted services from community agencies to County elder citizens age 60+ who live in their own homes. Services include Information and Assistance, Congregate Nutrition, Home Delivered Meals, Family Caregiver Support, Chronic Disease Education, Case Management, Legal Services, Stabilized Housing, Volunteer Transportation, and Client Specific Support.

A portion of these funds (10%) also finances planning, advocacy and administrative activities of the Human Services Department's Aging and Long-Term Care program which serves as the State designated Area Agency on Aging (AAA) for Snohomish County.

	Total Exp	enditures \$3,790,920	
2. Pass Thru	(Estimated cost)	\$3,276,324	
Total FTEs			
If new FTEs are needed, complete the fo # FTEs Classification	_	sneet it needed.	
1. Internal Operations (Admin., Operations, Direct Service, etc.) (Estimated cost) \$514,596 Who will complete the work? Existing FTE(s) Existing project FTE(s) New FTE(s)			
EXPENDITURES	Tetimotod co	r+\	
	Total R	esources \$3,790,920	
See next page for match breakdown			
Pass Thru	Match Amount \$48	30,824	
Internal Cost	Match Amount \$12	22,061	
Match Source (General Fund, Patient F	ees, In-Kind, etc.). If County	funded, enter DAC.	
Is match required: Xes No	If yes, match amount req	uired: \$602,885	
Grantor: Department of Social and He	-		
Grant Term: From 1/1/2024 to 9/30			
Source of grant funding: Federal 🔀		her 🔛	
_			
Existing/ongoing program X Yes	New program Yes		

Purpose of Grant (Brief description of work to be performed) Older Americans Act Cont.

*Total grant award anticipated. Historically, the Grantor has prepared a unilateral amendment prior to the end of the federal fiscal year in compliance with federal requirements to obligate funding.

Match Detail

Match Source (General Fund, Patient Fees, In-Kind, etc.). If County funded, enter DAC.

INTERNAL COSTS

 County General
 DAC 124-3045119700
 Amount \$63,216

 County General
 DAC 124-3045209700
 Amount \$15,000

State grant revenues included in State/Fed Services Agreement Amount \$43,845

SUBTOTAL \$122,061

PASS THRU MATCH

County General DAC 124-3045209700 Amount \$ 47,000

State grant revenues and/or subcontract agency revenues Amount \$433,824

SUBTOTAL \$480,824

MATCH TOTAL \$602,885

Department **Human Services** Division 003 Fund 124 Program 511 Program 020 Subprogram 346

Purpose of Grant (Brief description of work to be performed) **Medicare Enrollment and Outreach Assistance Program**

This Agreement with Washington State Office of Insurance Commissioner provides funding to conduct

Medicare and Medicare Part D outreach, including rural areas; and to assist eligible Medicare beneficiaries to enroll in Medicare Part D, or to apply for the Medicare Low-income Subsidy and Medicare Savings Plans. Existing/ongoing program X Yes New program | Yes Source of grant funding: Federal State Local Other Grant Term: From 10/1/24 to 9/30/2025 Grantor: Office of Insurance Commissioner, State of WA Grant Award \$83,000* Is match required: Yes No If yes, match amount required: Match Source (General Fund, Patient Fees, In-Kind, etc.). If County funded, enter DAC. DAC _____ Amount **Total Resources** \$83,000 **EXPENDITURES** 1. Internal Operations (Admin., Operations, Direct Service, etc.) (Estimated cost) \$3,000 Who will complete the work? Existing FTE(s) Existing project FTE(s) New FTE(s) If new FTEs are needed, complete the following. Attach additional sheet if needed. # FTEs Classification Total FTEs 2. Pass Thru (Estimated cost) \$80.000

Total Expenditures

\$83,000

^{*}Total amount anticipated for grant term. \$41,500 (one-half) is included in the 2024 budget request.

Department Human Services Division 003 Fund 124 Program 543

Purpose of Grant (Brief description of work to be performed) **Care Consultation Services for Veteran Directed Home Services:** This Agreement with Washington State Department of Health and Social Services, Aging and Long-Term Support Administration (ALTSA), provides funding for the Case Management program to assist eligible veterans with choosing and accessing various home care services available under the program. This is a fee for service agreement with no maximum contract amount; budget estimates are based upon current and projected activity.

Total Expenditures \$4,800			
2. Pass Thru	(Estimated cost)	\$0	
Total FTEs			
# FTEs Classifi	•		
If new FTEs are needed, complete			
Who will complete the work? Exis	sting FTE(s) 🔀 Existing project	t FTE(s) New FTE(s)	
1. Internal Operations (Admin., Ope	erations, Direct Service, etc.) (Estimated	cost) \$4,800	
EXPENDITURES			
	Total	Resources \$4,800	
·	DAC	Amount	-
	DAC	Amount	
Match Source (General Fund, Pat	tient Fees, In-Kind, etc.). If Cou	nty funded, enter DAC.	
Is match required: Yes X I	No If yes, match amount r	required:	
Grantor: Department of Social a	nd Health Services, State of W	A Grant Award \$4,800	
Grant Term: From 10/1/2024	to 9/30/2026		
Source of grant funding: Feder	ral State Local C	Other	
_			

Department **Human Services** Division 003 Fund 124 Program 511

Program 020, Subprogram 313

Purpose of Grant (Brief description of work to be performed) Medicaid Transformation Program – MAC/TSOA Implementation: This Agreement with Washington State Department of Health and Social Services, Aging and Long-Term Support Administration (ALTSA), provides funding in support of Long Term Supports and Services (LTSS) for the aging population. Medicaid Alternative Care (MAC) supports unpaid family caregivers, avoiding or delaying the need for more intensive Medicaid-funded services. This benefit package is for individuals who are eligible for Medicaid but not currently accessing Medicaid-funded services. Tailored Supports for Older Adults (TSOA) offers a limited set of services and supports to help individuals avoid or delay the need for Medicaid-funded services. This is an eligibility category and benefit package for people "at risk" of future Medicaid LTSS use, who do not currently meet Medicaid financial eligibility criteria. Effective 1/1/2024, the program is revised from a Medicaid demonstration project to a regular program. This is a fee for service agreement with a maximum contract amount. Actual revenues are based on deliverables and actual number of clients served.

Existing/ongoing program Yes Source of grant funding: Federal State Local Other Grant Term: From 1/1/2024 to 12/31/2024
Grantor: Department of Social and Health Services, State of WA Grant Award \$1,453,778
Is match required: Yes No If yes, match amount required:
Match Source (General Fund, Patient Fees, In-Kind, etc.). If County funded, enter DAC.
DAC Amount
Total Resources \$1,453,778
EXPENDITURES
1. Internal Operations (Admin., Operations, Direct Service, etc.) (Estimated cost) \$853,778
Who will complete the work? Existing FTE(s) \(\subseteq \) Existing project FTE(s) \(\subseteq \) New FTE(s) \(\subseteq \)
If new FTEs are needed, complete the following. Attach additional sheet if needed.
FTEs Classification
Total FTEs 3.0 Case Manager
2. Pass Thru (Estimated cost) \$600,000
Total Expenditures \$1,453,778

Department **Human Services** Division 007 Fund 124 Programs 461 & Program 020 Subprogram 205

Purpose of Grant (Brief description of work to be performed) **Community Development Block Grant.** This agreement with the U. S. Department of Housing and Urban Development provides federal funds to support affordable housing, public facilities, infrastructure improvements, and services primarily for low- and moderate-income persons and neighborhoods.

		•	ollowing. Attach add	ditional sheet if nee	
If new FTEs are	e needed, co	omplete the fo	ollowing. Attach add		
	e needed, co	omplete the fo	ollowing. Attach add		
	e needed, co	omplete the fo	ollowing. Attach add		
		omplete the fo	ollowing. Attach add		
		•			
	•	·	Direct Service, etc.) (Esting	nated cost) \$748 roject FTE(s) \ \ \ \	<u></u>
EXPENDITUI	RES				
				Total Resources	\$3,262,483
- 			DAC	Amount	
			DAC	Amount	
Match Source	e (General F	und, Patient F	ees, In-Kind, etc.). I	f County funded, er	nter DAC.
Is match requi	red: Ye	es 🔀 No	If yes, match am	ount required:	
Grantor: US	Dept. of Ho	using and Urb	oan Development	Grant Award \$3,2	62,483
Cuantam IIC		/2024 to 0/30)/2025		
	n: From 7/1	/2024 to 6/30			
Grant Term		_	_	Other	
Source of g	grant funding	g: Federal 🔀	New program State Local	' <u> </u>	

Department **Human Services** Division 007 Fund 124 Programs 461 & Program 020 Subprogram 205

Purpose of Grant (Brief description of work to be performed) Emergency Solutions Grant (Direct). This agreement with the U. S. Department of Housing and Urban Development provides federal funds to support affordable housing, public facilities, infrastructure improvements, and services primarily for low- and moderate-income persons and neighborhoods.
Existing/ongoing program Yes New program Yes Source of grant funding: Federal State Local Other Grant Term: From 7/1/2024 to 6/30/2025
Grantor: U S Dept. of Housing and Urban Development Grant Award \$276,115
Is match required: Yes No If yes, match amount required: \$276,115
Match Source (General Fund, Patient Fees, In-Kind, etc.). If County funded, enter DAC.
<u>Ending Homelessness</u> DAC_124-304044624122 Amount \$46,258
Passed to Sub-recipient DAC N/A Amount \$229,857
Total Resources \$552,230
EXPENDITURES
1. Internal Operations* (Admin., Operations, Direct Service, etc.) (Estimated cost) \$92,516 Who will complete the work? Existing FTE(s) Existing project FTE(s) New FTE(s)
If new FTEs are needed, complete the following. Attach additional sheet if needed.
FTEs Classification
Total FTEs
2. Pass Thru * (Estimated cost) \$459,714
Total Expenditures \$552,230

^{*} Includes County and sub-recipient funded match amounts of \$46,258 and \$229,857 respectively.

Department **Human Services** Division 007 Fund 124 Programs 461 & Program 020 Subprogram 205

Purpose of Grant (Brief description of work to be performed) **Emergency Solutions Grant CV (Indirect).** This agreement with the Washington State Department of Commerce Passes through federal US Department of Housing and Urban Development (HUD) ESG funds, which provided for emergency shelter, homeless prevention, and case management to individuals and families who are homeless or at risk of becoming homeless. Funds are subcontracted to nonprofit agencies.

# FTEs Classificatio ———————————————————————————————————	(Estimated cost)	\$3,998,572
# FTEs Classificatio	on _ _	
	on - -	
	on -	
	on	
•		
If new FTEs are needed, complete the	following. Attach additional sheet if need	led.
	FTE(s) Existing project FTE(s) Ne	· · · <u>—</u>
EXPENDITURES	(-	40
	Total Resources	\$3,998,572
Passed to Subrecipient DAG	<u>C</u> <u>N/A</u> Amount	
Ending Homelessness DAG	C <u>124-304044624122</u> Amount <u>\$</u> 0	
Match Source (General Fund, Patient	Fees, In-Kind, etc.). If County funded, en	ter DAC.
Is match required: Yes No	Match amount required:	
Grantor: Department of Commerce ,	State of WA Grant Award \$3,99	8,572
C D	50/2025	
Grant Term: From 7/1/2024 to 6/3)n/2025	
	State Local Other	

Department **Human Services** Division 007 Fund 124 Programs 461 & Program 020 Subprogram 205

Purpose of Grant (Brief description of work to be performed) **Emergency Solutions Grant (Indirect).** This agreement with the Washington State Department of Commerce Passes through federal US Department of Housing and Urban Development (HUD) ESG funds, which provided for emergency shelter, homeless prevention, and case management to individuals and families who are homeless or at risk of becoming homeless. Funds are subcontracted to nonprofit agencies.

Existing/ongoing program Yes New program Source of grant funding: Federal State Local Othe	er 🗌	
Grant Term: From 7/1/2024 to 6/30/2025		
Grantor: Department of Commerce, State of WA Grant Aw	ward \$3,998,57	3
Is match required: Xes No Match amount required	d: \$3,998,57	3
Match Source (General Fund, Patient Fees, In-Kind, etc.). If County fu	unded, enter D	AC.
Ending Homelessness DAC 124-304044624122 Amo	ount <u>\$</u> 0	
Passed to Subrecipient DAC N/A Amo	ount \$3,998,57	73
Total Res	sources \$7,	,997,146
EXPENDITURES 1 Internal Operations (Admin., Operations, Direct Service, etc.) (Estimated Who will complete the work? Existing FTE(s) Existing project FTE(s)	<u></u>	E(s)
If new FTEs are needed, complete the following. Attach additional she	eet if needed.	
# FTEs Classification		
Total FTEs		
2 Pass Thru* (Estimated cost)	\$ 7,	997,146
Total Expenditu	ures \$7	.997.146

Includes <u>sub-recipient funded</u> match amounts of \$3,998,573

Department **Human Services** Division 007 Fund 124 Programs 461 & Program 020 Subprogram 205

Purpose of Grant (Brief description of This agreement with the U. S. Department funds to support affordable housing, purprimarily for low- and moderate-income	nent of Housing and Urbar ublic facilities, infrastructur	n Development pore Te improvements,	
Existing/ongoing program 🔀 Yes Source of grant funding: Federal 🏾	_ : —	Other	
Grant Term: From 7/1/2024 to 6/3	0/2025		
Grantor: U S Dept. of Housing and U	rban Development	Grant Award \$	2,460,857
Is match required: Yes 🔀 No	If yes, match amount	required: \$_	
Match Source (General Fund, Patient	Fees, In-Kind, etc.). If Cou	ınty funded, ente	er DAC.
	DAC	Amount	
Passed to Sub-recipient	DAC N/A	Amount	
		l Resources	\$2,460,857
EXPENDITURES			
1. Internal Operations (Admin., Operations, Who will complete the work? Existing		· _ ·	
If new FTEs are needed, complete the	following. Attach additior	nal sheet if neede	ed.
# FTEs Classificatio	n		
	_		
	_		
Total FTEs			
2. Pass Thru (E	estimated cost)	\$ 2,237,859	
	Total Expe	nditures	\$2,460,857

Department **Human Services** Division 007 Fund 124 Programs 461 & Program 020 Subprogram 205

Purpose of Grant (Brief description of work to be performed) **Continuum of Care – Renewal Award.** This agreement with the U. S. Department of Housing and Urban Development provides Continuum of Care (CoC) funding (previously provided via multiple upline grant contracts). This grant funds various services including permanent supportive housing for chronically homeless persons, persons suffering from mental health and/or substance abuse issues, with the goal of client stabilization and ultimately self-sufficiency

Existing/ongoing program Yes Source of grant funding: Federal	State Local Local	Other 🗌	
Grant Term: From 7/1/2024 to 6/30/2			
Grantor: U S Dept. of Housing and Urba	n Development Gran	nt Award \$14,5 4	18,246
Is match required: X Yes No	If yes, match amount r	equired: \$3,6	13,356
Match Source (General Fund, Patient Fed	es, In-Kind, etc.). If Cour	nty funded, ente	er DAC.
Ending Homelessness D.	AC <u>124-304044624122</u>	Amount \$3	30,814
Passed to Sub-recipient D	AC <u>N/A</u>	Amount 3,2	82,542
	Total	Resources	\$18,161,602
EXPENDITURES			
1 Internal Operations (Admin., Operations, Directions Who will complete the work? Existing FT		· _ ·	
If new FTEs are needed, complete the foll	lowing. Attach additiona	al sheet if neede	ed.
# FTEs Classification			
Total FTEs			
2 Pass Thru* (Esti	mated cost)	\$16,838,348	
	Total Exper	ditures	\$18,161,602

^{*} County and sub-recipient funded match amounts total \$3613,356 respectively

Department **Human Services** Division 007 Fund 124 Programs 461 & Program 020 Subprogram 205

Purpose of Grant (Brief description of work to be performed) **Continuum of Care – YHDP Renewal or Replacement.** This agreement with the U. S. Department of Housing and Urban Development provides Continuum of Care (CoC) funding (previously provided via multiple upline grant contracts). This grant funds various services including permanent supportive housing for chronically homeless persons, persons suffering from mental health and/or substance abuse issues, with the goal of client stabilization and ultimately self-sufficiency

Grantor: U S Dept. of Housing and Urban Development Grant Award \$1,321,097 Is match required: Yes No If yes, match amount required: \$314,268 Match Source (General Fund, Patient Fees, In-Kind, etc.). If County funded, enter DAC. Ending Homelessness DAC Amount \$0 Passed to Sub-recipient DAC N/A Amount \$314,268 EXPENDITURES 3 Internal Operations (Admin., Operations, Direct Service, etc.) (Estimated cost) \$0 Who will complete the work? Existing FTE(s) Existing project FTE(s) New FTE(s) If new FTEs are needed, complete the following. Attach additional sheet if needed. # FTES Classification Total FTEs 4 Pass Thru* (Estimated cost) \$1,635,365	Existing/ongoing program Yes Source of grant funding: Federal Grant Term: From 7/1/2024 to 6/30	State Local	es Dther	
Match Source (General Fund, Patient Fees, In-Kind, etc.). If County funded, enter DAC. Ending Homelessness DAC Amount \$0 Passed to Sub-recipient DAC N/A Amount \$314,268 Total Resources \$1,635,365 EXPENDITURES 3 Internal Operations (Admin., Operations, Direct Service, etc.) (Estimated cost) \$0 Who will complete the work? Existing FTE(s) Existing project FTE(s) New FTE(s) If new FTEs are needed, complete the following. Attach additional sheet if needed. # FTES Classification Total FTES Total FTES Total FTES	Grantor: U S Dept. of Housing and Urb	oan Development (Grant Award \$1,321	1,097
Ending Homelessness Passed to Sub-recipient DAC N/A Amount \$314,268 Total Resources \$1,635,365 EXPENDITURES 3 Internal Operations (Admin., Operations, Direct Service, etc.) (Estimated cost) \$0 Who will complete the work? Existing FTE(s) Existing project FTE(s) New FTE(s) If new FTEs are needed, complete the following. Attach additional sheet if needed. # FTES Classification Total FTES Total FTES Total FTES	Is match required: Xes No	If yes, match amou	ınt required: \$314	1,268
Passed to Sub-recipient DAC N/A Amount \$314,268 Total Resources \$1,635,365 EXPENDITURES 3 Internal Operations (Admin., Operations, Direct Service, etc.) (Estimated cost) \$0 Who will complete the work? Existing FTE(s) ∑ Existing project FTE(s) ∑ New FTE(s) ☐ If new FTEs are needed, complete the following. Attach additional sheet if needed. # FTES Classification ———————————————————————————————————	Match Source (General Fund, Patient F	ees, In-Kind, etc.). If (County funded, ente	er DAC.
Total Resources \$1,635,365 EXPENDITURES 3 Internal Operations (Admin., Operations, Direct Service, etc.) (Estimated cost) \$0 Who will complete the work? Existing FTE(s) \(\sumeq \text{ Existing project FTE(s)} \) New FTE(s) \(\sumeq In new FTEs are needed, complete the following. Attach additional sheet if needed. # FTEs Classification Total FTEs	Ending Homelessness	DAC_	Amount \$0	
**EXPENDITURES 3 Internal Operations (Admin., Operations, Direct Service, etc.) (Estimated cost) \$0 Who will complete the work? Existing FTE(s) Existing project FTE(s) New FTE(s) If new FTEs are needed, complete the following. Attach additional sheet if needed. # FTEs Classification	Passed to Sub-recipient	DAC N/A	Amount \$31	4,268
3 Internal Operations (Admin., Operations, Direct Service, etc.) (Estimated cost) \$0 Who will complete the work? Existing FTE(s) Existing project FTE(s) New FTE(s) If new FTEs are needed, complete the following. Attach additional sheet if needed. # FTEs Classification ———————————————————————————————————		To	otal Resources	\$1,635,365
# FTEs Classification ———————————————————————————————————	3 Internal Operations (Admin., Operations, D	_ ` `		v FTE(s)
Total FTEs	If new FTEs are needed, complete the fo	ollowing. Attach addit	ional sheet if neede	ed.
	# FTEs Classification	1		
4 Pass Thru* (Estimated cost) \$1,635,365	Total FTEs			
Total Expenditures 1,635,365	4 Pass Thru* (Es	stimated cost)	\$1,635,365	

^{*} County match amounts \$162,500 respectively

Department **Human Services** Division 007 Fund 124 Programs 461 & Program 020 Subprogram 205

Purpose of Grant (Brief description of work to be performed) Continuum of Care – Potential New Award. This agreement with the U. S. Department of Housing and Urban Development provides Continuum of Care (CoC) funding (previously provided via multiple upline grant contracts). This grant funds various services including permanent supportive housing for chronically homeless persons, persons suffering from mental health and/or substance abuse issues, with the goal of client stabilization and ultimately self-sufficiency

Existing/ongoing program Yes New program Yes

Source of grant funding: Federal	New program ∑ Yes ☑ State ☐ Local ☐ Oth	er 🗌
Grant Term: From 7/1/2024 to 6/3	0/2025	
Grantor: U S Dept. of Housing and Ur	ban Development Grant A	ward \$1,277,810
Is match required: Xes No	If yes, match amount requ	ired: \$319,453
Match Source (General Fund, Patient	Fees, In-Kind, etc.). If County	unded, enter DAC.
Ending Homelessness	DAC 124-304044624122 Ar	nount \$319,453
Passed to Sub-recipient	DAC <u>N/A</u> Am	ount \$0
	Total Re	sources \$1,597,263
EXPENDITURES 5 Internal Operations (Admin., Operations, Who will complete the work? Existing	• •	t) \$1,597,263
will will complete the work: Existing	FTE(s) Existing project FTE	(s) New FTE(s)
If new FTEs are needed, complete the		_
	following. Attach additional sh	_
If new FTEs are needed, complete the	following. Attach additional sh	_
If new FTEs are needed, complete the	following. Attach additional sh	_
If new FTEs are needed, complete the	following. Attach additional sh	_
If new FTEs are needed, complete the fine of the fine	following. Attach additional sh	eet if needed.

^{*} County match amounts \$162,500 respectively

Department **Human Services** Division 007 Fund 124 Programs 461 & Program 020 Subprogram 205

Purpose of Grant (Brief description of work to be performed) **Emergency Housing Fund** (**Indirect**). This agreement with the Washington State Department of Commerce Passes through ARPA, which provided for emergency shelter, homeless prevention, and case management to individuals and families who are homeless or at risk of becoming homeless. Funds are subcontracted to nonprofit agencies.

Existing/ongoing program Yes New program Source of grant funding: Federal State Local Other				
Grant Term: From 7/1/2024 to 6/30/2026				
Grantor: Department of Commerce, State of WA Grant Award \$16,114,290*				
Is match required: Yes No Match amount required: \$0				
Match Source (General Fund, Patient Fees, In-Kind, etc.). If County funded, enter DAC.				
Total Resources \$16,114,290				
EXPENDITURES				
5 Internal Operations (Admin., Operations, Direct Service, etc.) (Estimated cost) \$60,000 Who will complete the work? Existing FTE(s) Existing project FTE(s) New FTE(s)				
If new FTEs are needed, complete the following. Attach additional sheet if needed.				
# FTEs Classification				
Total FTEs				
6 Pass Thru* (Estimated cost) \$16,054,290				
Total Expenditures \$16,114,290				

^{*}Total grant amount anticipated for two year grant term. One half, \$8,027,145, is included in the 2024 budget request.

Department **Human Services** Division 007 Fund 124 Programs 461 & Program 020 Subprogram 205

Purpose of Grant (Brief description of work to be performed) **System Demonstration Grant** (Formerly called Consolidated Homelesness Grant-CHG). This agreement with the Washington State Department of Commerce consolidated which provides funding for emergency shelter, rapid rehousing rent assistance, or permanent supportive housing. The program also provides Housing and essential needs for homeless and household at risk of homeless population target.

	Total Expenditures	\$24,248,203			
2 Pass Thru	(Estimated cost)	\$18,168,628			
Internal Operations (Admin., Operations, Direct Service, etc.) (Estimated cost) \$6,079,575 Who will complete the work? Existing FTE(s) Existing project FTE(s) New FTE(s) If new FTEs are needed, complete the following. Attach additional sheet if needed.					
	Total Resources	\$24,248,203			
	Amount \$				
DAC <u>N/A</u>	Amount \$_				
Match Source (General Fund, Patient Fees, In-Kind, etc.). If County funded, enter DAC.					
Is match required: Yes No Match a	amount required: \$0				
Grantor: Department of Commerce, State of WA	Grant Award \$24,2	248,203*			
Grant Term: From 7/1/2024 to 6/30/2026					
Existing/ongoing program X Yes New pro Source of grant funding: Federal State	<u> </u>				

^{*}Total grant amount anticipated for two year grant term. \$13,615,197, is included in the 2024 budget request

Department **Human Services** Division 004 Fund 124 Program 461

Program 020 Subprogram 205

Purpose of Grant (Brief description of work to be performed) **Commerce Afgan Resettlement.** This Agreement with Washington State Department of Commerce provides funding to assist Afghan refugees settle in Snohomish County. Funds are intended to stabilize arriving refugees by providing basic assistance, including rent and housing needs, transportation, healthcare, food, clothing, and other essential items.

Who will cor	nplete the work? Ex ire needed, complet # FTEs Classi 	te the following. Attack	(Estimated cost) Ing project FTE(s) In additional sheet if need to be a second cost)	• • —	
Who will con	nplete the work? Ex	cisting FTE(s) Existing Existi	ng project FTE(s)	New FTE(s)	
Who will cor	nplete the work? Ex	cisting FTE(s) Existing Existi	ng project FTE(s)	New FTE(s)	
Who will cor	nplete the work? Ex	cisting FTE(s) Existing Existi	ng project FTE(s)	New FTE(s)	
Who will cor	nplete the work? Ex	cisting FTE(s) Existing Existi	ng project FTE(s)	New FTE(s)	
Who will cor	nplete the work? Ex	xisting FTE(s) Exist	ng project FTE(s)	New FTE(s)	
	•	<u> </u>	·	·	
EXPENDIT	JRES				
			Total Resources	\$3,000,000	
		DAC	Amount		
		DAC	Amount		
Match Sour	ce (General Fund, P	atient Fees, In-Kind, et	c.). If County funded, e	nter DAC.	
Is match req	uired: 🗌 Yes 🔀	No If yes, match	n amount required:		
Grantor: De	partment of Comm	erce, State of WA	Grant Award \$3,0	000,000	
Grant Ter	m: From 7/1/2024	to 6/30/2025			
	0 0. 0	Yes New program eral ☐ State ☑ Lo	<u> </u>		
0.	ongoing program 🔀				

Department **Human Services** Division 004 Fund 124 Program 461

Program 020 Subprogram 205

Purpose of Grant (Brief description of work to be performed) **Commerce Ukraine Resettlement**. This Agreement with Washington State Department of Commerce provides funding to assist Ukraine refugees settle in Snohomish County. Funds are intended to stabilize arriving refugees by providing basic assistance, including rent and housing needs, transportation, healthcare, food, clothing and other essential items.

	vork? Existing FTE(s)		
If new FTEs are needed, # FTEs	complete the following. Attack		
If new FTEs are needed,	complete the following. Attack		
If new FTEs are needed,	complete the following. Attack		
1. Internal Operation	(Admin., Operations, Direct Service, etc.)	(Estimated cost)	
EXPENDITURES		Total Nesources	33,000,000
		Total Resources	
		Amount	
(DAC	•	
	Fund, Patient Fees, In-Kind, etc		
<u> </u>	Yes No If yes, match	- ,	•
	of Commerce, State of WA	Grant Award \$3.00	00.000
Grant Torm: From 7	/1/2024 to 6/30/2026		
Source of Brane faria.	ing: Federal State X		
	gram X Yes New program		

Department **Human Services** Division 004 Fund 124 Program 461

Program 020 Subprogram 205

Purpose of Grant (Brief description of work to be performed) Treasury Emergency Rental Assistance (TERA). This anticipated additional federal direct funding from the US Treasury provides funding to prevent evictions by paying past due and future rent, and past due utilities while targeting limited resources to those the greatest needs and distributing funds equitably.

o. o o. o =	☑ Yes New program ☐ \ ederal ☑ State ☐ Local [/es Other		
Grant Term: From 1/1/202	4 to 9/30/2025			
Grantor: US Department of th	ne Treasury	Grant Award \$10,0	000,000	
Is match required: Yes	No If yes, match amo	unt required:		
Match Source (General Fund, Patient Fees, In-Kind, etc.). If County funded, enter DAC.				
	DAC	Amount		
	DAC	Amount		
	Т	otal Resources	\$10,000,000	
EXPENDITURES 1. Internal Operations (Admin., Operations, Direct Service, etc.) (Estimated cost) \$0 Who will complete the work? Existing FTE(s) \(\subseteq \text{ Existing project FTE(s)} \subseteq \text{ New FTE(s)} \left\]				
If new FTEs are needed, complete the following. Attach additional sheet if needed.				
# FTEs Clas			ded.	
#FIES Clas	sification		ded.	
Total FTEs Clas	sification		ded.	
		ed cost)	\$10,000,000	
Total FTEs		ed cost)		

Department **Human Services** Division 004 Fund 124 Program 461 Program 020 Subprogram 205

Purpose of Grant (Brief description of work to be performed) **Treasury Emergency Rental Assistance (T-RAP).** This anticipated renewal agreement with Washington State Department of Commerce, provides funding to prevent evictions by paying past due and future rent, and past due utilities while targeting limited resources to those the greatest needs and distributing funds equitably.

· · · · · · · · · · · · · · · · · · ·	gram Yes New program Yes ing: Federal State Local	Other
Grant Term: From 1,	/1/2024 to 9/30/2025	
Grantor: Department of	of Commerce, State of WA Gra	nt Award \$9,996,048
Is match required:	Yes No If yes, match amount	required:
Match Source (General	Fund, Patient Fees, In-Kind, etc.). If Cou	nty funded, enter DAC.
	DAC	Amount
	DAC	Amount
	Tota	Resources \$9,996,048
•	ns (Admin., Operations, Direct Service, etc.) (Estin	nated cost) \$21,048
If new FTEs are needed,	work? Existing FTE(s) Existing project complete the following. Attach addition Classification	t FTE(s) New FTE(s)
-		t FTE(s) New FTE(s)
If new FTEs are needed, # FTEs	complete the following. Attach addition	t FTE(s) New FTE(s) al sheet if needed.

Department **Human Services** Division 007 Fund 124 Programs 461 & Program 020 Subprogram 205

Purpose of Grant (Brief description of work to be performed) **Local Document Recording Fees (LDRF)** This agreement with the Washington State Department of Commerce consolidated which provides gap funding to help compensate for decreases in local document recording fees.

7	Total Expenditures	\$1,957,461		
4 Pass Thru (Estimated cost)	\$1,957,461		
3 Internal Operations (Admin., Operations, Direct Service, etc.) (Estimated cost) \$0 Who will complete the work? Existing FTE(s) Existing project FTE(s) New FTE(s) If new FTEs are needed, complete the following. Attach additional sheet if needed.				
	Total Resources	\$1,957,461		
DAC N/A	Amount \$			
DAC <u>N/A</u>	Amount <u>\$</u>			
Match Source (General Fund, Patient Fees, In-Kind, etc.). If County funded, enter DAC.				
Is match required: Yes No Match ame	ount required: \$0			
Grantor: Department of Commerce, State of WA	Grant Award \$1,95	7,461*		
Grant Term: From 7/1/2024 to 6/30/2026				
Existing/ongoing program Yes New program Source of grant funding: Federal State				

^{*}Total grant amount anticipated for two year grant term. \$978,731, is included in the 2024 budget request

Department **Human Services** Division 007 Fund 124 Programs 461 & Program 020 Subprogram 205

Purpose of Grant (Brief description of work to be performed) **Inflation Funding.** This agreement with the Washington State Department of Commerce which provides funding for increasing costs with a priority for providing funds to maintain direct services staff working in homeless programs.

5 Internal Operations (Admin., Operations, Direct Service, etc.) (Estimated cost) \$0 Who will complete the work? Existing FTE(s) Existing project FTE(s) New FTE(s) If new FTEs are needed, complete the following. Attach additional sheet if needed.				

^{*}Total grant amount anticipated for two year grant term. \$963,096, is included in the 2024 budget request

Department **Human Services** Division 007 Fund 124 Programs 461 & Program 020 Subprogram 205

Purpose of Grant (Brief description of work to be performed) **Prevention.** This agreement with the Washington State Department of Commerce which provides funding for rental assistance and services to prevent rental households from becoming homeless.

Total Expenditures \$6,369,21	7			
8 Pass Thru (Estimated cost) \$5,859,679				
7 Internal Operations (Admin., Operations, Direct Service, etc.) (Estimated cost) \$509,538 Who will complete the work? Existing FTE(s) Existing project FTE(s) New FTE(s) If new FTEs are needed, complete the following. Attach additional sheet if needed.				
Total Resources \$6,369,21 EXPENDITURES	7			
<u>DAC N/A</u> Amount \$				
DAC <u>N/A</u> Amount <u>\$</u>				
Match Source (General Fund, Patient Fees, In-Kind, etc.). If County funded, enter DAC.				
Is match required: Yes No Match amount required: \$0				
Grantor: Department of Commerce, State of WA Grant Award \$6,369,217*				
Grant Term: From 7/1/2024 to 6/30/2026				
Existing/ongoing program Yes New program Yes Source of grant funding: Federal State Local Other				

^{*}Total grant amount anticipated for two year grant term. \$3,184,609, is included in the 2024 budget request

Department **Human Services** Division 007 Fund 124 Programs 461 &

Program 020 Subprogram 205

Purpose of Grant (Brief description of work to be performed) the HOME Investment Partnerships American Rescue Plan Program **HOME-ARP**

This agreement with the U. S. Department of Housing and Urban Development provides federal funding to HOME to reduce homelessness and increase housing stability, and services primarily for low- and moderate-income persons and neighborhoods.

If new FTEs are needed, complete the following. Attach additional sheet if needed. # FTEs Classification ———————————————————————————————————
If new FTEs are needed, complete the following. Attach additional sheet if needed. # FTEs Classification ———————————————————————————————————
If new FTEs are needed, complete the following. Attach additional sheet if needed.
EXPENDITURES 3. Internal Operations (Admin., Operations, Direct Service, etc.) (Estimated cost) \$729,508 Who will complete the work? Existing FTE(s) Existing project FTE(s) New FTE(s)
Total Resources \$729,508
Passed to Sub-recipient DAC N/A Amount
DAC Amount
Match Source (General Fund, Patient Fees, In-Kind, etc.). If County funded, enter DAC.
Is match required: Yes No If yes, match amount required: \$
Grantor: U S Dept. of Housing and Urban Development Grant Award \$729,508
Grant Term: From 7/1/2024 to 6/30/2025
Existing/ongoing program Yes New program Yes Source of grant funding: Federal State Local Other Grant Term: From 7/1/2024 to 6/30/2025

Department **Human Services** Division 005 Fund 124 Program 411

Purpose of Grant (Brief description of work to be performed) **DMA-Marijuana Excise Tax Distribution.**

This Agreement with the North Sound Behavioral Health Administrative Service Organization/Washington State provides State funding the provision of health care, research, and substance use disorder prevention services.

Who will complete the work? If new FTEs are needed, comp # FTEs Cla Total FTEs Cla Total FTEs 2. Pass Thru		dditional sheet if need	
If new FTEs are needed, comp # FTEs Cla	plete the following. Attach a		
If new FTEs are needed, comp	plete the following. Attach a		
If new FTEs are needed, comp	plete the following. Attach a		
If new FTEs are needed, comp	plete the following. Attach a		
·			
Who will complete the work?	P Existing FTE(s) 🔀 Existing	; project FTE(s) 📗 Ne	ew FTE(s)
1. Internal Operations (Admi	in., Operations, Direct Service, etc.) (Est	imated cost) \$569,	.836
EXPENDITURES			
		Total Resources	\$569,836
	DAC	Amount	
	DAC	Amount	
Match Source (General Fund	d, Patient Fees, In-Kind, etc.)	. If County funded, en	ter DAC.
Is match required: Yes	No If yes, match a	mount required:	
Grantor: North Sound Behav	ioral Health Administrative	Service Org. Grant	Award \$569,836*
	024 to 12/31/2025		
Grant Term: From 1/1/20			

^{*}Total grant amount anticipated for two year grant term. One half, \$284,918, is included in the 2024 budget request.

Department **Human Services** Division 005 Fund 124 Program 472

Purpose of Grant (Brief description of work to be performed) Jail Transition Services.

1. Internal Operations (Admin., Operations, Direct Who will complete the work? Existing FTE(If new FTEs are needed, complete the followant for the followa	(s) Existing project FTE(s) New FTE(s)				
1. Internal Operations (Admin., Operations, Direct Who will complete the work? Existing FTE(If new FTEs are needed, complete the follow # FTEs Classification Total FTEs Total FTEs	(s) Existing project FTE(s) New FTE(s) wing. Attach additional sheet if needed.				
1. Internal Operations (Admin., Operations, Direct Who will complete the work? Existing FTE(If new FTEs are needed, complete the followant for the followa	(s) Existing project FTE(s) New FTE(s)				
1. Internal Operations (Admin., Operations, Direct Who will complete the work? Existing FTE((s) Existing project FTE(s) New FTE(s)				
1. Internal Operations (Admin., Operations, Directions) Who will complete the work? Existing FTE((s) Existing project FTE(s) New FTE(s)				
1. Internal Operations (Admin., Operations, Direct					
	(Fatimated and) (A02.024				
	Total Resources \$ 402,034				
DA	C Amount				
Match Source (General Fund, Patient Fees	s, In-Kind, etc.). If County funded, enter DAC.				
	If yes, match amount required:				
Grant Term: From 1/1/2024 to 12/31/3	Administrative Services Org. Grant Award \$402,034*				
Existing/ongoing program Yes N Source of grant funding: Federal S	State \(\sum_{\text{Local}} \sum_{\text{Docal}} \sum_{\text{Other}} \sum_{\text{Docal}} \)				
, , , , , , , , , , , , , , , , , , ,	sons in need of these services and arrange for these direct services to eligible persons under contract to				
Organization/Washington State provides State General Funds to Snohomish County to finance mental health services to mentally ill offenders' prior to and upon their release from jail confinement to assist them to make a safe transition into community settings. These services include efforts to expedite applications for new or re-instated Medicaid benefits. County Human					
mental health services to mentally ill offen	ders' prior to and upon their release from jail				

budget request.

Purpose of Grant (Brief description of work to be performed) Integrated Crisis Care Network.

Department **Human Services** Division 005 Fund 124 Program 471

_	n Administrative Service				
Organization/Washington State provides State funding for Snohomish County's Community Involuntary Treatment Administration Program and Voluntary Crisis & Stabilization Services					
Program.	antary Crisis & Stabiliza	tion services			
_					
Existing/ongoing program X Yes New program Source of grant funding: Federal X State X Lo					
	cai Otilei				
Grant Term: From 1/1/2024 to 12/31/2025	- C ! C C	A			
Grantor: North Sound Behavioral Health Administrativ	e Services Org. Grant	Award \$8,524,646 *			
**Includes State, Medicaid, MHBG, and SABG funding					
Is match required: Yes No If yes, match	amount required:				
Match Source (General Fund, Patient Fees, In-Kind, etc	.). If County funded, er	nter DAC.			
DAC	Amount				
DAC	Amount				
	Total Resources	\$8,524,646			
		. , ,			
EXPENDITURES					
EXPENDITURES 1. Internal Operations (Admin., Operations, Direct Service, etc.) (E					
Internal Operations (Admin., Operations, Direct Service, etc.) (E	stimated cost) \$8,52	24,646			
1. Internal Operations (Admin., Operations, Direct Service, etc.) (E Who will complete the work? Existing FTE(s) Existing	stimated cost) \$8,52 ng project FTE(s) N	24,646 ew FTE(s)			
1. Internal Operations (Admin., Operations, Direct Service, etc.) (E Who will complete the work? Existing FTE(s) Existing If new FTEs are needed, complete the following. Attach	stimated cost) \$8,52 ng project FTE(s) N	24,646 ew FTE(s)			
1. Internal Operations (Admin., Operations, Direct Service, etc.) (E Who will complete the work? Existing FTE(s) Existing	stimated cost) \$8,52 ng project FTE(s) N	24,646 ew FTE(s)			
1. Internal Operations (Admin., Operations, Direct Service, etc.) (E Who will complete the work? Existing FTE(s) Existing If new FTEs are needed, complete the following. Attach	stimated cost) \$8,52 ng project FTE(s) N	24,646 ew FTE(s)			
1. Internal Operations (Admin., Operations, Direct Service, etc.) (E Who will complete the work? Existing FTE(s) Existing If new FTEs are needed, complete the following. Attach # FTEs Classification ———————————————————————————————————	stimated cost) \$8,52 ng project FTE(s) N	24,646 ew FTE(s)			
1. Internal Operations (Admin., Operations, Direct Service, etc.) (E Who will complete the work? Existing FTE(s) Existing If new FTEs are needed, complete the following. Attach	stimated cost) \$8,52 ng project FTE(s) N	24,646 ew FTE(s)			
1. Internal Operations (Admin., Operations, Direct Service, etc.) (E Who will complete the work? Existing FTE(s) Existing If new FTEs are needed, complete the following. Attach # FTEs Classification ———————————————————————————————————	stimated cost) \$8,52 ng project FTE(s) N	24,646 ew FTE(s)			
1. Internal Operations (Admin., Operations, Direct Service, etc.) (E Who will complete the work? Existing FTE(s) Existing If new FTEs are needed, complete the following. Attach # FTEs Classification ———————————————————————————————————	stimated cost) \$8,52 ng project FTE(s) N additional sheet if nee	24,646 ew FTE(s)			
 Internal Operations (Admin., Operations, Direct Service, etc.) (E Who will complete the work? Existing FTE(s) Existing If new FTEs are needed, complete the following. Attach # FTEs Classification Total FTEs Pass Thru (Estimated 	stimated cost) \$8,52 ng project FTE(s) N additional sheet if nee	24,646 ew FTE(s)			

request.

Purpose of Grant (Brief description of work to be performed) Substance Abuse Block Grant.

Department **Human Services** Division 004 Fund 124 Program 411

This Agreement with the North Sound Behavioral Health Administrative Service Organization/Washington State provides State funding for opioid outreach and treatment, including the purchase of Naloxone kits (emergency opioid overdose medicine). The goals are to increase individual engagement in substance abuse disorder treatment services, lower the barriers to accessing medication assisted treatment, and increase individual stability.
Existing/ongoing program Yes New program Yes Source of grant funding: Federal State Local Other
Grant Term: From 1/1/2024 to 12/31/2025
Grantor: North Sound Behavioral Health Administrative Services Org. Grant Award \$520,000*
Is match required: Yes No If yes, match amount required:
Match Source (General Fund, Patient Fees, In-Kind, etc.). If County funded, enter DAC.
DAC Amount
DAC Amount
Total Resources \$520,000
EXPENDITURES
 EXPENDITURES 1. Internal Operations (Admin., Operations, Direct Service, etc.) (Estimated cost) \$520,000 Who will complete the work? Existing FTE(s) Existing project FTE(s) New FTE(s) If new FTEs are needed, complete the following. Attach additional sheet if needed.
1. Internal Operations (Admin., Operations, Direct Service, etc.) (Estimated cost) \$520,000 Who will complete the work? Existing FTE(s) Existing project FTE(s) New FTE(s)
1. Internal Operations (Admin., Operations, Direct Service, etc.) (Estimated cost) \$520,000 Who will complete the work? Existing FTE(s) Existing project FTE(s) New FTE(s) If new FTEs are needed, complete the following. Attach additional sheet if needed. # FTEs Classification ———————————————————————————————————
1. Internal Operations (Admin., Operations, Direct Service, etc.) (Estimated cost) \$520,000 Who will complete the work? Existing FTE(s) Existing project FTE(s) New FTE(s) If new FTEs are needed, complete the following. Attach additional sheet if needed.
1. Internal Operations (Admin., Operations, Direct Service, etc.) (Estimated cost) \$520,000 Who will complete the work? Existing FTE(s) Existing project FTE(s) New FTE(s) If new FTEs are needed, complete the following. Attach additional sheet if needed. # FTEs Classification ———————————————————————————————————
1. Internal Operations (Admin., Operations, Direct Service, etc.) (Estimated cost) \$520,000 Who will complete the work? Existing FTE(s) Existing project FTE(s) New FTE(s) If new FTEs are needed, complete the following. Attach additional sheet if needed. # FTEs Classification Total FTEs Total FTEs

Purpose of Grant (Brief description of work to be performed) Mental Health Block Grant (MHBG).

Department **Human Services** Division 004 Fund 124 Program 411

Program 020 Subprogram 501

This Agreement with the North Sound Behavioral Health Administrative Service Organization/Washington State provides State funding, the grant funds will be used for Co-responder expenses and/or Community outreach housing. The goal is to provide participants with the greatest opportunity to achieve stability and success in housing, and access to transition into appropriate and individualized long-term housing placements. Existing/ongoing program Yes New program Yes Source of grant funding: Federal State Local Other Grant Term: From 1/1/2024 to 12/31/2025 Grantor: North Sound Behavioral Health Administrative Services Org. Grant Award \$241,784* Is match required: Yes No If yes, match amount required: Match Source (General Fund, Patient Fees, In-Kind, etc.). If County funded, enter DAC. DAC _____ Amount _____ DAC _____ Amount ____ **Total Resources** \$241,784 **EXPENDITURES** 1. Internal Operations (Admin., Operations, Direct Service, etc.) (Estimated cost) \$241,784 Who will complete the work? Existing FTE(s) Existing project FTE(s) New FTE(s) If new FTEs are needed, complete the following. Attach additional sheet if needed. Classification # FTEs Total FTEs 2. Pass Thru (Estimated cost) \$0.00 **Total Expenditures** \$241,784

^{*}Total grant amount anticipated for two-year grant term. \$120,892, is included in the 2024 budget request.

Department **Human Services** Division 004 Fund 124 Program 411

Program 020 Subprogram 501

Purpose of Grant (Brief description of work to be performed) Trueblood Services.

This Agreement with the North Sound Behavioral Health Administrative Service Organization/Washington State provides State funding to provide case management and temporary housing placement within Snohomish County for Individuals who are both (1) involved in the Snohomish County criminal justice system, and (2) have a diagnosed mental illness. The goal is to provide participants with the greatest opportunity to achieve stability and success in housing, and access to transition into appropriate and individualized long-term housing placements. Existing/ongoing program X Yes New program Yes Source of grant funding: Federal State Local Other Grant Term: From 1/1/2024 to 12/31/2025 Grantor: North Sound Behavioral Health Administrative Services Org. Grant Award \$719,140* Is match required: Yes No If yes, match amount required: Match Source (General Fund, Patient Fees, In-Kind, etc.). If County funded, enter DAC. DAC _____ Amount Amount _____ Total Resources \$719,140 **EXPENDITURES** 3. Internal Operations (Admin., Operations, Direct Service, etc.) (Estimated cost) \$235,260 Who will complete the work? Existing FTE(s) Existing project FTE(s) New FTE(s) If new FTEs are needed, complete the following. Attach additional sheet if needed. Classification # FTEs Total FTEs \$483,880 4. Pass Thru (Estimated cost) Total Expenditures \$719,140 *Total grant amount anticipated for two-year grant term. \$242,070, is included in the 2024 budget request.

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Department Human Services Division 004 Fund 124 Program 411

Program 020 Subprogram 501

Purpose of Grant (Brief description of work to be performed) **Criminal Justice Treatment Account (CJTA).** State funds provided through Washington State Health Care Authority, CJTA funding is used to provide substance abuse disorder treatment and recovery assistance to individuals involved in the criminal justice system. Human Services partners with local treatment providers, as well as Snohomish County Superior Court and Snohomish County Corrections, to deliver contracted services.

Existing/ongoing program 🔀 Yes Source of grant funding: Federal [: =		
Grant Term: From 7/1/2024 to 6/	/30/25		
Grantor: WA State Health Care Auth	nority Gr	ant Award \$1,57	0,120*
Is match required: \square Yes \boxtimes No	If yes, match amoun	t required:	
Match Source (General Fund, Patient	t Fees, In-Kind, etc.). If Co	unty funded, ent	er DAC.
	DAC	Amount	
	DAC	Amount	
	Tota	al Resources	\$1,570,120
EVOEND ITHESE			
1. Internal Operations (Admin., Operation Who will complete the work? Existing If new FTEs are needed, complete the	g FTE(s) 🔀 Existing proje	ct FTE(s) Ne	w FTE(s)
1. Internal Operations (Admin., Operation Who will complete the work? Existing	g FTE(s) 🔀 Existing projee following. Attach addition	ct FTE(s) Ne	w FTE(s)
1. Internal Operations (Admin., Operation Who will complete the work? Existing If new FTEs are needed, complete the	g FTE(s) 🔀 Existing projee following. Attach addition	ct FTE(s) Ne	w FTE(s) 🗌 ed.

Total Expenditures

\$1,570,120

^{*}Total grant amount anticipated for two-year grant term. \$410,000, is included in the Human Services Department 2024 budget request (six month's funding).

Department Human Services Division 009 Fund 124, SubFund 002, Program 900

Purpose of Grant (Brief description of work to be performed) **Law Enforcement Embedded Social Worker.** These funds will pay for 1.0 FTE law enforcement embedded social worker with the City of Arlington Police Department. The goal of the program is to provide an alternative police response to those with social service needs in the City of Arlington. The social worker provides assistance to police responses for people with behavioral health, housing, and financial needs. The program aims to bridge gaps between law enforcement and social services in our community to better coordinate response and follow up for individuals that can benefit from those services. The social worker will also be responsible for providing social service training for officers.

2. Pass Thr	u		(Estimated co	ost) \$0	
Total FTEs					
	# FTEs	Classification	1		
If new FTEs a	re needed, o	complete the fo	ollowing. Attach a	dditional sheet if nee	ded.
	•	-		imated cost) \$388 project FTE(s) N	<u> </u>
EXPENDITU	JRES				
				Total Resources	\$388,216
			DAC	Amount	
			DAC	Amount	
Match Sour	ce (General I	Fund, Patient F	ees, In-Kind, etc.)	If County funded, er	iter DAC.
Is match requ	uired: 🗌 Y	'es 🔀 No	If yes, match a	mount required:	
Grantor: Cit	y of Arlingto	on		Grant Award \$388	3,216*
	m: From 1/	1/2024 to 12/3	31/2024		
Grant Ter			24 /2224		

^{*}Total amount anticipated for two year contract term. One half, \$194,108 is included in the 2024 budget request.

Department Human Services Division 009 Fund 124, SubFund 002, Program 900

Purpose of Grant (Brief description of work to be performed) **Snohomish County Human Services Outreach Team (SCOUT).** These funds will pay for 1.0 FTE law enforcement embedded social worker with Snohomish County Public Transportation Benefit Area Relating to Transit Safety and Protection Services. The goal of the program is to add social worker services to the existing transit safety & security services to those with social service needs. The social worker provides assistance to responses for people with behavioral health, housing, and financial needs. The program aims to bridge gaps between Transit Police Unit and social services in our community to better coordinate response and follow up for individuals that can benefit from those services. The social worker will also be responsible for providing social service training for officers.

Existing/ongoing program X Yes Source of grant funding: Federal		Other 🔀			
Grant Term: From 1/1/2024 to 12/31,	/2024				
Grantor: Snohomish County Public Trans	sportation Gra	ant Award \$388 ,	,216*		
Is match required: Yes No If yes, match amount required:					
Match Source (General Fund, Patient Fee	es, In-Kind, etc.). If Cou	unty funded, en	ter DAC.		
DA	AC	Amount			
DA	AC	Amount			
	Tota	al Resources	\$388,216		
EXPENDITURES3. Internal Operations (Admin., Operations, Directly Who will complete the work? Existing FTE					
If new FTEs are needed, complete the follo	owing. Attach addition	nal sheet if need	led.		
# FTEs Classification					
Total FTEs					
4. Pass Thru	(Estimated cost)	\$0			
	Total Expe	nditures	\$388,216		

^{*}Total amount anticipated for two year contract term. One half, \$194,108 is included in the 2024 budget request.

Department Human Services Division 009 Fund 124, SubFund 002, Program 900

Purpose of Grant (Brief description of work to be performed) **Law Enforcement Embedded Social Worker.** These funds will pay for .5 FTE law enforcement embedded social worker with the City of Monroe Police Department. The goal of the program is to provide an alternative police response to those with social service needs in the City of Monroe. The social worker provides assistance to police responses for people with behavioral health, housing, and financial needs. The program aims to bridge gaps between law enforcement and social services in our community to better coordinate response and follow up for individuals that can benefit from those services. The social worker will also be responsible for providing social service training for officers.

Existing/ongoing program 🔀 Yes Source of grant funding: Federal					
Grant Term: From 1/1/2024 to 12	2/31/2024				
Grantor: City of Monroe	(Grant Award \$146	,832		
Is match required: Yes No	If yes, match amou	nt required:			
Match Source (General Fund, Patien	t Fees, In-Kind, etc.). If (County funded, en	ter DAC.		
	DAC	Amount			
	DAC	Amount			
	To	tal Resources	\$146,832		
EXPENDITURES					
1. Internal Operations (Admin., Operations, Direct Service, etc.) (Estimated cost) \$146,832 Who will complete the work? Existing FTE(s) Existing project FTE(s) New FTE(s) If new FTEs are needed, complete the following. Attach additional sheet if needed.					
# FTEs Classification	on				
2. Pass Thru	(Estimated cost)	\$0			
	Total	Expenditures	\$146,832		

Department **Human Services** Division 009 Fund 124, SubFund 002, Program 901

Purpose of Grant (Brief description of work to be performed) **Trauma-Informed Practices** – **Arlington School District.** Trauma Informed practices consultation will be provided to schools within the Lake Stevens School District. The goal of the consultation is to increase knowledge for school staff regarding trauma and the impact it has on students' performance and behavior, and to enhance staff skill-base around responding to all students. Continua Consulting group will provide the consultation with the school district.

Existing/ongoing program Yes No Source of grant funding: Federal St	·	
Grant Term: From 1/1/2024 to 12/31/2	024	
Grantor: Arlington School District	Grant Award	\$ 18,000
Is match required: Yes No	yes, match amount required	:
Match Source (General Fund, Patient Fees,	In-Kind, etc.). If County fund	ed, enter DAC.
DAC	Amount	
DAC	Amount	
	Total Resou	rces \$18,000
EXPENDITURES		
1. Internal Operations (Admin., Operations, Direct S	Service, etc.) (Estimated cost)	\$18,000
Who will complete the work? Existing FTE(s) 🔀 Existing project FTE(s) [New FTE(s)
If new FTEs are needed, complete the follow	ving. Attach additional sheet	if needed.
# FTEs Classification		
Total FTEs		
2. Pass Thru	(Estimated cost)	\$
	Total Expenditu	ıres \$ 18,000

Department **Human Services** Division 009 Fund 124, SubFund 002, Program 901

Purpose of Grant (Brief description of work to be performed) **Trauma-Informed Practices – Index School District.** Trauma Informed practices consultation will be provided to schools within the Lake Stevens School District. The goal of the consultation is to increase knowledge for school staff regarding trauma and the impact it has on students' performance and behavior, and to enhance staff skill-base around responding to all students. Continua Consulting group will provide the consultation with the school district.

Existing/ongoing program Yes Source of grant funding: Federal		Other 🔀
Grant Term: From 1/1/2024 to 12/31,	/2024	
Grantor: Index School District	Gra	nt Award \$ 5,000
Is match required: Yes No	If yes, match amount	required:
Match Source (General Fund, Patient Fee	s, In-Kind, etc.). If Cou	nty funded, enter DAC.
DA	AC	Amount
DA	AC	Amount
	Tota	l Resources \$5,000
EXPENDITURES		
3. Internal Operations (Admin., Operations, Dire	ct Service, etc.) (Estimated	cost) \$5,000
Who will complete the work? Existing FTE	(s) 🛛 Existing projec	t FTE(s) New FTE(s)
If new FTEs are needed, complete the follo	owing. Attach addition	al sheet if needed.
# FTEs Classification		
Total FTEs		
4. Pass Thru	(Estimated cost)	\$
	Total Ex	penditures \$ 5,000

Department **Human Services** Division 009 Fund 124, SubFund 002, Program 901

Purpose of Grant (Brief description of work to be performed) **Trauma-Informed Practices** – **Snohomish School District.** Trauma Informed practices consultation will be provided to schools within the Lake Stevens School District. The goal of the consultation is to increase knowledge for school staff regarding trauma and the impact it has on students' performance and behavior, and to enhance staff skill-base around responding to all students. Continua Consulting group will provide the consultation with the school district.

0. 0	oing program Yes nt funding: Federal	_ ' '		
Grant Term:	From 1/1/2024 to 12/	31/2024		
Grantor: S	nohomish School Dist	rict	Grant Award \$ 1	18,000
Is match required	d: 🗌 Yes 🔀 No	If yes, match amo	ount required: _	
Match Source (General Fund, Patient F	Fees, In-Kind, etc.). If	County funded,	enter DAC.
		DAC	Amount	
		DAC	Amount	
		Т	otal Resource	s \$18,000
EXPENDITURE	S			
5. Internal Ope	erations (Admin., Operations,	Direct Service, etc.) (Estim	ated cost) \$18	3,000
Who will comple	te the work? Existing F	FTE(s) 🔀 Existing pr	oject FTE(s)	New FTE(s)
If new FTEs are n	eeded, complete the f	ollowing. Attach add	itional sheet if ne	eeded.
#	# FTEs Classification	า		
_				
_	<u> </u>			
Total FTEs _				
6. Pass Thru		(Estimated cost) \$_	
		Tota	l Expenditures	\$ \$18,000

Department **Human Services** Division 009 Fund 124, SubFund 002, Program 901

Purpose of Grant (Brief description of work to be performed) **Trauma-Informed Practices** – **Lakewood School District.** Trauma Informed practices consultation will be provided to schools within the Lake Stevens School District. The goal of the consultation is to increase knowledge for school staff regarding trauma and the impact it has on students' performance and behavior, and to enhance staff skill-base around responding to all students. Continua Consulting group will provide the consultation with the school district.

Existing/ongoing program Yes Source of grant funding: Federal		ther 🔀
Grant Term: From 1/1/2024 to 12/33	1/2024	
Grantor: Lakewood School Distric	t Grant	Award \$ 5,000
Is match required: Yes No	If yes, match amount red	quired:
Match Source (General Fund, Patient Fe	es, In-Kind, etc.). If County	y funded, enter DAC.
	DAC An	nount
)AC An	nount
	Total R	esources \$5,000
EXPENDITURES		
7. Internal Operations (Admin., Operations, Dir	rect Service, etc.) (Estimated co	ost) \$5,000
Who will complete the work? Existing FT	E(s) Existing project F	TE(s) New FTE(s)
If new FTEs are needed, complete the fol	lowing. Attach additional	sheet if needed.
# FTEs Classification		
Total FTEs		
8. Pass Thru	(Estimated cost)	\$
	Total Expe	enditures \$ 5,000

Department **Human Services** Division 009 Fund 124, SubFund 002, Program 901

Purpose of Grant (Brief description of work to be performed) **Trauma-Informed Practices – Everett School District.** Trauma Informed practices consultation will be provided to schools within the Lake Stevens School District. The goal of the consultation is to increase knowledge for school staff regarding trauma and the impact it has on students' performance and behavior, and to enhance staff skill-base around responding to all students. Continua Consulting group will provide the consultation with the school district.

Existing/ongoing program Yes Source of grant funding: Federal		\boxtimes		
Grant Term: From 1/1/2024 to 12/3	1/2024			
Grantor: Everett School District	Grant Awar	d \$ 18,000		
Is match required: Yes No	If yes, match amount required	d:		
Match Source (General Fund, Patient Fo	ees, In-Kind, etc.). If County fund	ded, enter DAC.		
	DAC Amount	·		
	DAC Amount	·		
	Total Resou	ırces \$18,000		
EXPENDITURES				
9. Internal Operations (Admin., Operations, Direct Service, etc.) (Estimated cost) \$18,000				
Who will complete the work? Existing F	TE(s) Existing project FTE(s)	New FTE(s)		
If new FTEs are needed, complete the fo	ollowing. Attach additional sheet	if needed.		
# FTEs Classification				
Total FTEs				
10. Pass Thru	(Estimated cost)	\$		
	Total Expendit	ures \$ 18,000		

Department **Human Services** Division 009 Fund 124, SubFund 002, Program 901

Purpose of Grant (Brief description of work to be performed) **Trauma-Informed Practices** – **Edmonds School District.** Trauma Informed practices consultation will be provided to schools within the Lake Stevens School District. The goal of the consultation is to increase knowledge for school staff regarding trauma and the impact it has on students' performance and behavior, and to enhance staff skill-base around responding to all students. Continua Consulting group will provide the consultation with the school district.

Existing/ongoing program Yes Source of grant funding: Federal	. : <u> </u>	ther $oxed{oxed}$
Grant Term: From 1/1/2024 to 12/3	31/2024	
Grantor: Edmonds School Distric	t Grant	: Award \$ 18,000
Is match required: Yes No	If yes, match amount re	quired:
Match Source (General Fund, Patient F	ees, In-Kind, etc.). If Count	ty funded, enter DAC.
1000	DAC A	mount
	DAC A	mount
	Total I	Resources \$18,000
EXPENDITURES		
11. Internal Operations (Admin., Operations, D	Direct Service, etc.) (Estimated c	ost) \$18,000
Who will complete the work? Existing F	TE(s) 🔀 Existing project I	FTE(s) New FTE(s)
If new FTEs are needed, complete the fo	ollowing. Attach additional	sheet if needed.
# FTEs Classification		
Total FTEs		
12. Pass Thru	(Estimated cost)	\$
	Total Exp	enditures \$ 18,000

Department **Human Services** Division 009 Fund 124, SubFund 002, Program 901

Purpose of Grant (Brief description of work to be performed) **Trauma-Informed Practices – Lake Stevens School District.** Trauma Informed practices consultation will be provided to schools within the Lake Stevens School District. The goal of the consultation is to increase knowledge for school staff regarding trauma and the impact it has on students' performance and behavior, and to enhance staff skill-base around responding to all students. Continua Consulting group will provide the consultation with the school district.

٥. ٥	ng program	_ ''		
Grant Term: F	From 1/1/2024 to 12/	31/2024		
Grantor: La	ake Stevens School Di	strict	Grant Award	\$ 5,000
Is match required	: Yes 🔀 No	If yes, match amo	ount required	:
Match Source (G	ieneral Fund, Patient F	ees, In-Kind, etc.). If	County fund	ed, enter DAC.
		DAC	Amount	
		DAC	Amount	
		1	Total Resou	rces \$5,000
EXPENDITURES	5			
13. Internal Oper	rations (Admin., Operations,	Direct Service, etc.) (Estim	ated cost)	\$5,000
Who will complet	e the work? Existing F	TE(s) 🔀 Existing pr	oject FTE(s) [New FTE(s)
If new FTEs are no	eeded, complete the f	ollowing. Attach add	itional sheet	if needed.
#	FTEs Classification	า		
Total FTEs				
14. Pass Thru		(Estimated cost	:)	\$
		Tota	l Expenditu	ires \$ 5,000

Department **Human Services** Division 009 Fund 124, SubFund 002, Program 901

Purpose of Grant (Brief description of work to be performed) Trauma-Informed Practices – Marysville School District. Trauma Informed practices consultation will be provided to schools within the Marysville School District. The goal of the consultation is to increase knowledge for school staff regarding trauma and the impact it has on students' performance and behavior, and to enhance staff skill-base around responding to all students. Continua Consulting group will provide the consultation with the school district. Existing/ongoing program Yes New program Yes Source of grant funding: Federal State Local Other X Grant Term: From 1/1/2024 to 12/31/2024 Grantor: **Marysville School District** Grant Award \$ 18,000 Is match required: Yes No If yes, match amount required: _____ Match Source (General Fund, Patient Fees, In-Kind, etc.). If County funded, enter DAC. DAC _____ Amount Amount Total Resources \$18,000 **EXPENDITURES** 1. Internal Operations (Admin., Operations, Direct Service, etc.) (Estimated cost) \$18,000 Who will complete the work? Existing FTE(s) Existing project FTE(s) New FTE(s) If new FTEs are needed, complete the following. Attach additional sheet if needed. # FTEs Classification **Total FTEs** 2. Pass Thru (Estimated cost)

Total Expenditures \$18,000

Department **Human Services** Division 009 Fund 124, SubFund 002, Program 901

Purpose of Grant (Brief description of work to be performed) **Trauma Informed Practices-Mukilteo School District.** Trauma Informed practices consultation will be provided to schools within the Mukilteo School District. The goal of the consultation is to increase knowledge for school staff regarding trauma and the impact it has on students' performance and behavior, and to enhance staff skill-base around responding to all students. Continua Consulting group will provide the consultation with the school district.

Existing/ongoing program 🔀 Yes Source of grant funding: Federal [_			
Grant Term: From 1/1/2024 to 12	/31/2024			
Grantor: Mukilteo School District		Grant Award \$10,0)00	
Is match required: Yes No	If yes, match a	mount required:		
Match Source (General Fund, Patient	Fees, In-Kind, etc.)	. If County funded, en	ter DAC.	
	DAC	Amount		
	DAC	Amount		
		Total Resources	\$10,000	
EXPENDITURES 1. Internal Operations (Admin., Operations, Direct Service, etc.) (Estimated cost) \$10,000				
Who will complete the work? Existing FTE(s) Existing project FTE(s) New FTE(s) If new FTEs are needed, complete the following. Attach additional sheet if needed.				
# FTEs Classification	_			
Total FTEs	- -			
2. Pass Thru	(Estimated co	ost) \$0		
	Т	otal Expenditures	\$10,000	

Department **Human Services** Division 009 Fund 124, SubFund 002, Program 901

Purpose of Grant (Brief description of work to be performed) **Trauma Informed Practices-Darrington School District.** Trauma Informed practices consultation will be provided to schools within the Darrington School District. The goal of the consultation is to increase knowledge for school staff regarding trauma and the impact it has on students' performance and behavior, and to enhance staff skill-base around responding to all students. Continua Consulting group will provide the consultation with the school district.

Existing/ongoing program 🔀 Yes Source of grant funding: Federal 🗌		Other 🔀		
Grant Term: From 1/1/2024 to 12/31	/2024			
Grantor: Darrington School District	Gra	ant Award \$5,00 0)	
Is match required: Yes No	If yes, match amount	required:		
Match Source (General Fund, Patient Fee	es, In-Kind, etc.). If Co	unty funded, ente	er DAC.	
D	AC	Amount		
D/	AC	Amount		
	Tota	l Resources	\$5,000	
EXPENDITURES				
1. Internal Operations (Admin., Operations, Direct Service, etc.) (Estimated cost) \$5,000				
Who will complete the work? Existing FTE(s) Existing project FTE(s) New FTE(s)				
If new FTEs are needed, complete the following. Attach additional sheet if needed.				
# FTEs Classification				
Total FTEs				
2. Pass Thru	(Estimated cost)	\$0		
	Total F	xnenditures	\$5,000	

Department Human Services Division 009 Fund 124, SubFund 002, Program 901

Purpose of Grant (Brief description of work to be performed) 2% liquor tax ILA-City of

Marysville. Interlocal agreement with the City of Marysville facilitating the City to remit 2% of their liquor tax receipts to Snohomish County, as the City does not operate their own facility or program in compliance with RCWs 71.24.550 and 71.24.555. Snohomish County uses the 2% funds to operate an approved Chemical Dependency program. Existing/ongoing program X Yes New program | Yes Source of grant funding: Federal State Local Other Grant Term: From 1/1/2024 to 12/31/2025 Grantor: City of Marysville Grant Award **\$20,000** Is match required: Yes No If yes, match amount required: _____ Match Source (General Fund, Patient Fees, In-Kind, etc.). If County funded, enter DAC. DAC _____ Amount _____ DAC _____ Amount _____ **Total Resources** \$20,000 **EXPENDITURES** 1. Internal Operations (Admin., Operations, Direct Service, etc.) (Estimated cost) \$20,000 Who will complete the work? Existing FTE(s) Existing project FTE(s) New FTE(s) If new FTEs are needed, complete the following. Attach additional sheet if needed. Classification # FTEs **Total FTEs** (Estimated cost) 2. Pass Thru \$0

Total Expenditures

\$20,000

Purpose of Grant (Brief description of work to be performed) Snohohomish County Office of Court

Appointed Advocate for the Support of the CASA/Volunteer Guardian Ad Litem Program

Department Human Services Division 011 Fund 124 Program 730

This Agreement with Washington State Administrative Office of the Courts (AOC) provides funding authority to Snohomish County to increase the number of children served by the Court-appointed special advocates (CASAs)/volunteer guardians ad litem as defined by RCW 13.34.030(11) in dependency matters or to reduce the average caseload of volunteers to recommended standards. Existing/ongoing program Yes New program Yes Source of grant funding: Federal State Local Other Grant Term: From 7/1/2024 to 6/30/2025 Grantor: Washington State Administrative Office of the Courts Grant Award \$ 214,286 Is match required: Yes No If yes, match amount required: Match Source (General Fund, Patient Fees, In-Kind, etc.). If County funded, enter DAC. DAC _____ Amount _____ Amount Total Resources \$214,286 **EXPENDITURES** 1. Internal Operations (Admin., Operations, Direct Service, etc.) (Estimated cost) \$214,286 Who will complete the work? Existing FTE(s) Existing project FTE(s) New FTE(s) If new FTEs are needed, complete the following. Attach additional sheet if needed. Classification # FTEs Total FTEs 2. Pass Thru (Estimated cost) \$-0-**Total Expenditures** \$214,286