

2023 Grant Work Plan

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**

Funding for early intervention services comes from several sources including state special education funds on behalf of eligible children residing in Snohomish County.

Existing/ongoing program Yes New program Yes
 Source of grant funding: Federal State Local Other

Grant Term: From 7/01/2023 to 06/30/2024

Grantor: **Department of Children, Youth and Families (DCYF)** Grant Award **\$14,004,162**

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 \$14,004,162

* Starting in 2020 the awards are from WA DCYF and cover all school districts in the county. There has been an increase of 10% of children served in this program. (The amount is determined by the number of children eligible for early intervention services who reside in school districts within the County boundaries.) 95% of the funding will be passed through to our subcontracted agencies to provide Early Intervention Services, (with a tiny portion of that covering some payroll for our Direct Service employees). (New information indicates that we will be awarded \$1,008,388 more than was submitted in the 2022 county budget. This funding also includes Federal Part C funds that used to be accounted for in a separate grant.)

EXPENDITURES

1. Internal Operations (Admin., Operations, Direct Service, etc.) (Estimated cost) \$974,574

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) \$13,029,588

Total Expenditures \$14,004,162

2023 Grant Work Plan

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 Yes New program Yes
Source of grant funding: Federal State Local Other

Grant Term: From 7/1/2023 to 6/30/2024

Grantor: **Department of Social and Health Services, State of WA** Grant Award **\$9,479,296**

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	\$9,479,296
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*This is our best estimate at this time of what the grant amount will be.

EXPENDITURES

1. Internal Operations (Admin., Operations, Direct Service, etc.) (Estimated cost) \$831,191

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) \$8,648,105

Total Expenditures	\$9,479,296
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2023 Grant Work Plan

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

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 County to assist eligible students in their last year of school to obtain competitive paid employment before graduation. For successful placements, DVR will reimburse the County at a rate of \$8,670 for each successful placement. The average placement rate is 15 individuals are successfully placed per year.

Existing/ongoing program Yes New program Yes
Source of grant funding: Federal State Local Other

Grant Term: From 1/1/2023 to 12/31/2023

Grantor: **WA DSHS Division of Vocational Rehabilitation** Grant Award **\$150,000**

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 \$150,000

EXPENDITURES

1. Internal Operations (Admin., Operations, Direct Service, etc.) (Estimated cost) \$150,000

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 Expenditures \$150,000

2023 Grant Work Plan

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

Purpose of Grant (Brief description of work to be performed) **Early Head Start**

This award with Department of Health and Human Services supports the enrollment of a minimum 82 children and families (cumulative count) in the North Snohomish County Early Head Start program with services offered in Arlington, Granite Falls, Marysville, and Sultan. The purpose of this program is to provide family-centered services for low income families with very young children. The program is designed to promote the development of the children, and to enable their parents to fulfill their roles as parents and to move toward self-sufficiency.

Existing/ongoing program Yes New program Yes
Source of grant funding: Federal State Local Other

Grant Term: From 1/1/2023 to 12/31/2023

Grantor: **Department of Health and Human Services**

Grant Award **\$1,400,878**

Is match required: Yes No If yes, match amount required: \$350,220
Match Source (General Fund, Patient Fees, In-Kind, etc.). If County funded, enter DAC.

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 volunteers, community partnerships, and professionals serving on advisory boards. Value \$323,426

Total Resources	\$1,751,098
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EXPENDITURES

1. Internal Operations (Admin., Operations, Direct Service, etc.) (Estimated cost) \$1,751,098 (includes inkind match)

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 value) \$0

Total Expenditures	\$1,751,098
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2023 Grant Work Plan

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.

Existing/ongoing program Yes New program Yes
 Source of grant funding: Federal State Local Other

Grant Term: From 7/1/2023 to 6/30/2024

Grantor: **Department of Children, Youth and Families, State of WA** Grant Award **\$15,184,293**

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	\$15,184,293
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*This amount matches the latest contract amount (which exceeds the 2021 estimate at the time the budget was submitted).

EXPENDITURES

1. Internal Operations (Admin., Operations, Direct Service, etc.) (Estimated cost) \$2,566,158

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)	\$12,618,135

Total Expenditures	\$15,184,293
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2023 Grant Work Plan

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

Purpose of Grant (Brief description of work to be performed) **Low Income Home Energy Assistance Program (LIHEAP) Energy Assistance Program:** The LIHEAP Energy Assistance Program is funded by the United States Department of Health and Human Services (HHS) through the Washington State Department of Commerce. The program funds are designed to reduce the burden of rising home energy costs by providing assistance with a portion of a low-income household's heating bill.

Existing/ongoing program Yes New program Yes
Source of grant funding: Federal State Local Other

Grant Term: From 10/1/2023 to 3/31/2026

Grantor: **Department of Commerce, State of WA** Grant Award **\$3,481,467**

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 _____

Note: Amount equals the most current LIHEAP Grant award.

Total Resources \$3,481,467

EXPENDITURES

1. Internal Operations (Admin., Operations, Direct Service, etc.) (Estimated cost) **\$3,481,467**

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 Expenditures \$3,481,467

2023 Grant Work Plan

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 New program Yes
Source of grant funding: Federal State Local Other

Grant Term: From 10/1/2023 to 9/30/2024

Grantor: **Cascade Natural Gas** Grant Award **\$3,000**

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 \$3,000

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) \$0

Total Expenditures \$3,000

2023 Grant Work Plan

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

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

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 Yes New program Yes

Source of grant funding: Federal State Local Other

Grant Term: From 10/1/2023 to 9/30/2024

Grantor: **Puget Sound Energy**

Grant Award **\$214,940**

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 \$214,940

EXPENDITURES

1. Internal Operations (Admin., Operations, Direct Service, etc.) (Estimated cost) \$214,940

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 Expenditures \$214,940

2023 Grant Work Plan

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 New program Yes
Source of grant funding: Federal State Local Other

Grant Term: From 10/1/2023 to 9/30/2024

Grantor: **Cascade Natural Gas** Grant Award **\$225**

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 \$225

EXPENDITURES

1. Internal Operations (Admin., Operations, Direct Service, etc.) (Estimated cost) \$225

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 Expenditures \$225

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

2023 Grant Work Plan

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.

Existing/ongoing program Yes New program Yes
Source of grant funding: Federal State Local Other

Grant Term: From 10/1/2023 to 9/30/2024

Grantor: **Department of Commerce, State of WA** Grant Award **\$542,177**

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	\$542,177
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EXPENDITURES

1. Internal Operations (Admin., Operations, Direct Service, etc.) **(Estimated cost)** **\$542,177**

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 Expenditures	\$542,177
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Department **Human Services** Division 002 Fund 124 Program 110

2023 Grant Work Plan

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. This amount represents a two year award. We used half this amount for the 2023 budget.

Existing/ongoing program Yes New program Yes
Source of grant funding: Federal State Local Other

Grant Term: From 7/1/2023 to 6/30/2024

Grantor: **Department of Commerce, State of WA** Grant Award **\$133,382**

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 \$133,382

EXPENDITURES

1. Internal Operations (Admin., Operations, Direct Service, etc.) **(Estimated cost) \$133,382**

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 Expenditures \$133,382

Division 002 Fund 124 Program 110

2023 Grant Work Plan

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**

This Agreement with Washington State Department of Health and Social Services, Aging and Long-Term Support Administration (AL TSA), 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 7/1/2023 to 6/30/2024

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.

	# FTEs	Classification
Total FTEs	_____	_____

2. Pass Thru (Estimated cost) \$575,000

Total Expenditures \$603,750

2023 Grant Work Plan

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 (AL TSA), 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.

Existing/ongoing program Yes New program Yes

Source of grant funding: Federal State Local Other

Grant Term: From 7/1/2023 to 6/30/2024

Grantor: **Department of Social and Health Services, State of WA** Grant Award **\$14,989,966***

Is match required: Yes No If yes, match amount required: \$364,230

Match Source (General Fund, 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 <u>\$125,752</u>
SUBTOTAL COUNTY FUNDED MATCH		\$195,998

State grant revenues used as Match ****included in Grant Award**** Amount \$168,232

MATCH TOTAL **\$364,230**

Total Resources	\$15,185,964
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EXPENDITURES

1. Internal Operations (Admin., Operations, Direct Service, etc.) (Estimated cost) \$13,424,972

Who will complete the work? Existing FTE(s) Existing project FTE(s) New FTE(s)

2023 Grant Work Plan

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

# FTEs	Classification
<u>3.0</u>	<u>Case Manager</u>
<u>1.0</u>	<u>Registered Nurse</u>
<u>1.0</u>	<u>Case Management Admin Assistant</u>
<u>1.0</u>	<u>Case Management Supervisor</u>
Total FTEs	<u>6.0</u>
	Sum of new positions included in 2023 budget request

2. Pass Thru (Estimated cost) \$1,760,992

Total Expenditures \$15,185,964

*Total grant amount anticipated for the grant term. \$12,658,172 is included in the 2023 budget request.

2023 Grant Work Plan

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 (AL TSA), 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.

Existing/ongoing program Yes New program Yes

Source of grant funding: Federal State Local Other

Grant Term: From 1/1/2023 to 9/30/2024

Grantor: **Department of Social and Health Services, State of WA** Grant Award **\$2,893,381***

Is match required: Yes No If yes, match amount required: \$554,438

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

Internal Cost Match Amount \$114,203

Pass Thru Match Amount \$440,235

See next page for match breakdown

Total Resources \$3,447,819

EXPENDITURES

1. Internal Operations (Admin., Operations, Direct Service, etc.) (Estimated cost) \$494,900

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) \$2,952,919

Total Expenditures \$3,447,819

2023 Grant Work Plan

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 \$68,858

State grant revenues included in State/Fed Services Agreement Amount \$45,345

SUBTOTAL \$114,203

PASS THRU MATCH

County General DAC 124-3045209700 Amount \$62,000

State grant revenues and/or subcontract agency revenues Amount \$378,235

SUBTOTAL \$440,235

MATCH TOTAL \$554,438

2023 Grant Work Plan

Department **Human Services** Division 003 Fund 124

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 Yes New program Yes

Source of grant funding: Federal State Local Other

Grant Term: From 10/1/23 to 9/30/2024

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 grant amount anticipated for grant term. \$41,500 is included in the 2023 budget request.

2023 Grant Work Plan

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 (AL TSA), 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.

Existing/ongoing program Yes New program Yes

Source of grant funding: Federal State Local Other

Grant Term: From 10/1/2023 to 9/30/2024

Grantor: **Department of Social and Health Services, State of WA** Grant Award **\$4,800**

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 \$4,800

EXPENDITURES

1. Internal Operations (Admin., Operations, Direct Service, etc.) (Estimated cost) \$4,800

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 Expenditures \$4,800

2023 Grant Work Plan

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 Project**

Demonstration – MAC/TSOA Implementation: This Agreement with Washington State Department of Health and Social Services, Aging and Long-Term Support Administration (AL TSA), 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. 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 New program Yes
 Source of grant funding: Federal State Local Other
 Grant Term: From 1/1/2023 to 12/31/2023

Grantor: **Department of Social and Health Services, State of WA** Grant Award **\$1,647,782***

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 \$1,647,782

EXPENDITURES

1. Internal Operations (Admin., Operations, Direct Service, etc.) (Estimated cost) \$815,000

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) \$832,782

Total Expenditures \$1,647,782

*Total maximum contract anticipated for grant term. \$1,316,000 budgeted in Division 003, Aging, request.

2023 Grant Work Plan

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.

Existing/ongoing program Yes New program Yes
 Source of grant funding: Federal State Local Other

Grant Term: From 7/1/2023 to 6/30/2024

Grantor: **U S Dept. of Housing and Urban Development** Grant Award **\$3,141,611**

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 \$3,141,611.00

EXPENDITURES

1. Internal Operations (Admin., Operations, Direct Service, etc.) **(Estimated cost) \$724,322**

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)** **\$2,417,289**

Total Expenditures \$3,141,611.00

2023 Grant Work Plan

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 2.** This agreement with the Washington State Department of Commerce Passes through federal US Department of Housing and Urban Development (HUD) 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 1/1/2023 to 6/30/2023

Grantor: **U S Dept. of Housing and Urban Development** Grant Award **\$2,120,847**

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 \$2,120,847

EXPENDITURES

1. Internal Operations (Admin., Operations, Direct Service, etc.) **(Estimated cost) \$20,847**

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) \$2,100,000**

Total Expenditures \$2,120,847

2023 Grant Work Plan

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 CV 1/3**. 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 to prevent, prepare for and respond to coronavirus.

Existing/ongoing program Yes New program Yes
 Source of grant funding: Federal State Local Other

Grant Term: From 01/1/2023 to 12/31/2023

Grantor: **U S Dept. of Housing and Urban Development** Grant Award **\$2,360,226**

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 \$2,360,226

EXPENDITURES

1. Internal Operations (Admin., Operations, Direct Service, etc.) **(Estimated cost) \$33,156**

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) \$2,327,070**

Total Expenditures \$2,360,226

2023 Grant Work Plan

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 7/1/2023 to 6/30/2024

Grantor: **U S Dept. of Housing and Urban Development** Grant Award **\$3,065,459**

Is match required: Yes No If yes, match amount required: \$3,065,459

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

<u>Ending Homelessness</u>	DAC <u>124-304044624122</u>	Amount <u>\$45,360</u>
<u>Passed to Sub-recipient</u>	DAC <u>N/A</u>	Amount <u>\$ 3,020,099</u>

Total Resources \$6,130,918

EXPENDITURES

1. Internal Operations* (Admin., Operations, Direct Service, etc.) **(Estimated cost) \$90,720**

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) \$6,040,198**

Total Expenditures \$6,130,918

* Includes County and sub-recipient funded match amounts of \$45,360 and \$3,020,099 respectively.

2023 Grant Work Plan

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 Other

Grant Term: From 7/1/2023 to 6/30/2024

Grantor: **Department of Commerce, State of WA** Grant Award **\$3,261,469**

Is match required: Yes No Match amount required: \$3,261,469

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

<u>Ending Homelessness</u>	<u>DAC 124-304044624122</u>	Amount <u>\$0</u>
<u>Passed to Subrecipient</u>	<u>DAC N/A</u>	Amount <u>\$3,261,469</u>

Total Resources	\$6,522,938
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EXPENDITURES

1 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 _____

2 Pass Thru* **(Estimated cost)** **\$6,522,938**

Total Expenditures	\$6,522,938
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Includes sub-recipient funded match amounts of \$3,261,469.

2023 Grant Work Plan

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

Program 020 Subprogram 205

Purpose of Grant (Brief description of work to be performed) **HOME.**

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 7/1/2023 to 6/30/2024

Grantor: **U S Dept. of Housing and Urban Development** Grant Award **\$2,232,921**

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 _____
<u>Passed to Sub-recipient</u>	DAC <u>N/A</u>	Amount _____

Total Resources \$2,232,921

EXPENDITURES

1. Internal Operations (Admin., Operations, Direct Service, etc.) **(Estimated cost)** \$223,292

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)** **\$2,009,629**

Total Expenditures \$2,232,921

2023 Grant Work Plan

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 New program Yes
 Source of grant funding: Federal State Local Other

Grant Term: From 7/1/2023 to 6/30/2024

Grantor: **U S Dept. of Housing and Urban Development** Grant Award **\$11,296,118**

Is match required: Yes No If yes, match amount required: \$2,824,030

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

Ending Homelessness DAC 124-304044624122 Amount \$264,885

Passed to Sub-recipient DAC N/A Amount \$2,559,145

Total Resources \$14,120,148

EXPENDITURES

1 Internal Operations (Admin., Operations, Direct Service, etc.) **(Estimated cost) \$1,324,422**

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
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_____	_____
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_____	_____
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Total FTEs	_____
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2 Pass Thru* **(Estimated cost) \$12,795,726**

Total Expenditures \$14,120,148

* County and sub-recipient funded match amounts total \$264,885 and \$2,559,145 respectively

2023 Grant Work Plan

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. This award potentially would be included in our annual renewal grant beginning in 2024.

Existing/ongoing program Yes New program Yes
 Source of grant funding: Federal State Local Other

Grant Term: From 7/1/2023 to 6/30/2024

Grantor: **U S Dept. of Housing and Urban Development** Grant Award **\$250,000**

Is match required: Yes No If yes, match amount required: \$62,500

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

Ending Homelessness DAC 124-304044624122 Amount \$0

Passed to Sub-recipient DAC N/A Amount \$62,500

Total Resources	\$312,500
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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)** **\$312,500**

Total Expenditures	\$312,500
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* Sub-recipient funded match amounts total \$62,500.

2023 Grant Work Plan

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 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. This award potentially would be included in our annual renewal grant beginning in 2024.

Existing/ongoing program Yes New program Yes
 Source of grant funding: Federal State Local Other

Grant Term: From 7/1/2023 to 6/30/2024

Grantor: **U S Dept. of Housing and Urban Development** Grant Award **\$1,214,893**

Is match required: Yes No If yes, match amount required: \$303,724

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

Ending Homelessness DAC 124-304044624122 Amount \$0

Passed to Sub-recipient DAC N/A Amount \$303,724

Total Resources \$1,518,617

EXPENDITURES

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.

# FTEs	Classification
Total FTEs	

6 Pass Thru* **(Estimated cost)** **\$1,518,617**

Total Expenditures \$1,518,617

* Sub-recipient funded match amounts total \$303,724.

2023 Grant Work Plan

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 – New Award Unsheltered and Homeless.** This agreement with the U. S. Department of Housing and Urban Development provides Continuum of Care (CoC) funding to facilitate a community approach for reducing homelessness among people with severe services needs, and those with histories of unsheltered homelessness.

Existing/ongoing program Yes New program Yes
Source of grant funding: Federal State Local Other

Grant Term: From 7/1/2023 to 6/30/2024

Grantor: **U S Dept. of Housing and Urban Development** Grant Award **\$3,402,600**

Is match required: Yes No If yes, match amount required: \$850,650

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

Ending Homelessness DAC 124-304044624122 Amount \$0

Passed to Sub-recipient DAC N/A Amount \$850,650

Total Resources	\$4,253,250
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EXPENDITURES

7 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	_____

8 Pass Thru* **(Estimated cost)** **\$4,253,250**

Total Expenditures	\$4,253,250
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* Sub-recipient funded match amounts total \$850,650.

2023 Grant Work Plan

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 Homelessness 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.

Existing/ongoing program Yes New program Yes
 Source of grant funding: Federal State Local Other

Grant Term: From 7/1/2023 to 6/30/2024

Grantor: **Department of Commerce, State of WA** Grant Award **\$12,906,394**

Is match required: Yes No Match amount required: \$0

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

_____	DAC <u>N/A</u>	Amount \$ _____
_____	DAC <u>N/A</u>	Amount \$ _____

Total Resources \$12,906,394

EXPENDITURES

1 Internal Operations (Admin., Operations, Direct Service, etc.) **(Estimated cost) \$4,863,645**

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) \$8,042,749**

Total Expenditures \$12,906,394

2023 Grant Work Plan

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 Afgan 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.

Existing/ongoing program Yes New program Yes

Source of grant funding: Federal State Local Other

Grant Term: From 7/1/2023 to 6/30/2024

Grantor: **Department of Commerce, State of WA**

Grant Award **\$1,085,000**

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	\$1,085,000
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EXPENDITURES

1. 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
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_____	_____
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_____	_____
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Total FTEs _____

2. Pass Thru

(Estimated cost)

\$1,085,000

Total Expenditures	\$1,085,000
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2023 Grant Work Plan

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.

Existing/ongoing program Yes New program Yes
 Source of grant funding: Federal State Local Other

Grant Term: From 7/1/2023 to 6/30/2024

Grantor: **Department of Commerce, State of WA**

Grant Award **\$350,000**

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 \$350,000

EXPENDITURES

1. Internal Operations (Admin., Operations, Direct Service, etc.) **(Estimated cost)** \$62,000

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)

\$288,000

Total Expenditures \$350,000

2023 Grant Work Plan

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

Purpose of Grant (Brief description of work to be performed) **Shelter Program Grant.** This Agreement with Washington State Department of Commerce provides funding to implement a shelter program that uses equitable and creative approaches to shelter people with the goal of exiting residents to permanent housing.

Existing/ongoing program Yes New program Yes
 Source of grant funding: Federal State Local Other

Grant Term: From 7/1/2023 to 6/30/2024

Grantor: **Department of Commerce, State of WA** Grant Award **\$2,290,046**

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 \$2,290,046

EXPENDITURES

1. Internal Operations (Admin., Operations, Direct Service, etc.) **(Estimated cost)** \$290,046

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)** **\$2,000,000**

Total Expenditures \$2,290,046

2023 Grant Work Plan

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.

Existing/ongoing program Yes New program Yes
Source of grant funding: Federal State Local Other

Grant Term: From 1/1/2023 to 9/30/2025

Grantor: **US Department of the Treasury** Grant Award **\$10,000,000**

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	\$10,000,000
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EXPENDITURES

1. 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 _____

2. Pass Thru **(Estimated cost)** **\$10,000,000**

Total Expenditures	\$10,000,000
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2023 Grant Work Plan

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.

Existing/ongoing program Yes New program Yes
 Source of grant funding: Federal State Local Other

Grant Term: From 1/1/2023 to 9/30/2025

Grantor: **Department of Commerce, State of WA** Grant Award **\$9,996,048**

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 \$9,996,048

EXPENDITURES

3. Internal Operations (Admin., Operations, Direct Service, etc.) **(Estimated cost)** \$21,048

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)** **\$9,975,000**

Total Expenditures \$9,996,048

2023 Grant Work Plan

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

Purpose of Grant (Brief description of work to be performed) **American Rescue Plan Act-Home (ARPA)**. 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 1/1/2023 to 9/30/2025

Grantor: **U S Dept. of Housing and Urban Development** Grant Award **\$1,580,343**

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 \$1,580,343

EXPENDITURES

1. Internal Operations (Admin., Operations, Direct Service, etc.) **(Estimated cost)** \$15,419

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)** **\$1,564,924**

Total Expenditures \$1,580,343

2023 Grant Work Plan

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.

Existing/ongoing program Yes New program Yes
 Source of grant funding: Federal State Local Other

Grant Term: From 1/1/2023 to 12/31/2024

Grantor: **North Sound Behavioral Health Administrative Service Org.** Grant Award **\$569,836***

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 \$569,836

EXPENDITURES

1. Internal Operations (Admin., Operations, Direct Service, etc.) **(Estimated cost) \$569,836**

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 Expenditures \$569,836

*Total grant amount anticipated for two year grant term. One half, \$284,918, is included in the 2023 budget request.

2023 Grant Work Plan

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

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

This Agreement with the North Sound Behavioral Health Administrative Service 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 Services staff will identify incarcerated persons in need of these services and arrange for these services. Community agencies will provide direct services to eligible persons under contract to the County.

Existing/ongoing program Yes New program Yes
 Source of grant funding: Federal State Local Other

Grant Term: From 1/1/2023 to 12/31/2024

Grantor: **North Sound Behavioral Health Administrative Services Org.** Grant Award **\$402,034***

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 \$ 402,034

EXPENDITURES

1. Internal Operations (Admin., Operations, Direct Service, etc.) **(Estimated cost) \$402,034**

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 Expenditures \$ 402,034

*Total grant amount anticipated for two year grant term. One half, \$201,017 is included in the 2023 budget request.

2023 Grant Work Plan

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

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

This Agreement with the North Sound Behavioral Health Administrative Service Organization/Washington State provides State funding for Snohomish County’s Community Involuntary Treatment Administration Program and Voluntary Crisis & Stabilization Services Program.

Existing/ongoing program Yes New program Yes
 Source of grant funding: Federal State Local Other

Grant Term: From 1/1/2023 to 12/31/2024

Grantor: **North Sound Behavioral Health Administrative 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, enter DAC.

_____	DAC _____	Amount _____
_____	DAC _____	Amount _____

Total Resources \$8,524,646

EXPENDITURES

1. Internal Operations (Admin., Operations, Direct Service, etc.) **(Estimated cost) \$8,524,646**

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 Expenditures \$8,524,646

*Total grant amount anticipated for two-year grant term. \$4,025,951, is included in the 2023 budget request.

2023 Grant Work Plan

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

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

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 1/1/2023 to 12/31/2024

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

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	_____	_____

2. Pass Thru (Estimated cost) \$0

Total Expenditures \$520,000

*Total grant amount anticipated for two-year grant term. \$320,000 is included in the 2023 budget request.

2023 Grant Work Plan

Department **Human Services** Division 004 Fund 124 Program 411
 Program 020 Subprogram 501

Purpose of Grant (Brief description of work to be performed) **Mental Health Block Grant (MHBG).**
 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 1/1/2023 to 12/31/2024

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.

	# FTEs	Classification
	_____	_____
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 2023 budget request.

2023 Grant Work Plan

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 Yes New program Yes
 Source of grant funding: Federal State Local Other

Grant Term: From 1/1/2023 to 12/31/2024

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 _____
_____	DAC _____	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.

	# FTEs	Classification
	_____	_____
Total FTEs	_____	_____

4. Pass Thru (Estimated cost) \$483,880

Total Expenditures \$719,140

*Total grant amount anticipated for two-year grant term. \$359,700, is included in the 2023 budget request.

2023 Grant Work Plan

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 New program Yes
 Source of grant funding: Federal State Local Other

Grant Term: From 7/1/2023 to 6/30/25

Grantor: **WA State Health Care Authority**

Grant Award **\$1,570,120***

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	_____
_____	DAC	_____	Amount	_____

Total Resources \$1,570,120

EXPENDITURES

1. Internal Operations (Admin., Operations, Direct Service, etc.) (Estimated cost) \$886,822

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) \$683,298

Total Expenditures \$1,570,120

*Total grant amount anticipated for two-year grant term. \$410,000, is included in the Human Services Department 2023 budget request (six month's funding).

2023 Grant Work Plan

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.

Existing/ongoing program Yes New program Yes
 Source of grant funding: Federal State Local Other

Grant Term: From 1/1/2023 to 12/31/2024

Grantor: **City of Arlington**

Grant Award **\$388,216***

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 \$388,216

EXPENDITURES

1. Internal Operations (Admin., Operations, Direct Service, etc.) (Estimated cost) \$388,216

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 Expenditures \$388,216

*Total amount anticipated for two year contract term. One half, \$199,468 is included in the 2023 budget request.

2023 Grant Work Plan

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 New program Yes
 Source of grant funding: Federal State Local Other

Grant Term: From 1/1/2023 to 12/31/2023

Grantor: **City of Monroe**

Grant Award **\$89,518**

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 \$89,518

EXPENDITURES

1. Internal Operations (Admin., Operations, Direct Service, etc.) (Estimated cost) \$89,518

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 Expenditures \$89,518

2023 Grant Work Plan

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.

Existing/ongoing program Yes New program Yes
Source of grant funding: Federal State Local Other

Grant Term: From 1/1/2023 to 12/31/2023

Grantor: **Lake Stevens School District** Grant Award **\$ 28,000**

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 \$28,000

EXPENDITURES

1. Internal Operations (Admin., Operations, Direct Service, etc.) **(Estimated cost) \$28,000**

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 \$ 28,000

2023 Grant Work Plan

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 New program Yes
 Source of grant funding: Federal State Local Other

Grant Term: From 1/1/2023 to 12/31/2023

Grantor: **Mukilteo School District** Grant Award **\$5,000**

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 \$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 Expenditures \$5,000

2023 Grant Work Plan

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

Purpose of Grant (Brief description of work to be performed) **Trauma Informed Practices-Monroe School District.** Trauma Informed practices consultation will be provided to schools within the Monroe 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

Grant Term: From 1/1/2023 to 12/31/2023

Grantor: **Monroe School District**

Grant Award **\$63,000**

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 \$63,000

EXPENDITURES

1. Internal Operations (Admin., Operations, Direct Service, etc.) (Estimated cost) \$63,000

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 Expenditures \$63,000

2023 Grant Work Plan

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 New program Yes
 Source of grant funding: Federal State Local Other

Grant Term: From 1/1/2023 to 12/31/2023

Grantor: **Darrington 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 _____
_____	DAC _____	Amount _____

Total Resources \$18,000

EXPENDITURES

3. 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	_____

4. Pass Thru (Estimated cost) \$0

Total Expenditures \$18,000

2023 Grant Work Plan

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

Purpose of Grant (Brief description of work to be performed) **Trauma Informed Practices-Sultan School District.** Trauma Informed practices consultation will be provided to schools within the Sultan 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

Grant Term: From 1/1/2023 to 12/31/2023

Grantor: **Sultan 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 _____
_____	DAC _____	Amount _____

Total Resources	\$18,000
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EXPENDITURES

5. 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	_____

6. Pass Thru (Estimated cost) \$0

Total Expenditures	\$18,000
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2023 Grant Work Plan

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 Yes New program Yes
Source of grant funding: Federal State Local Other

Grant Term: From 1/1/2022 to 12/31/2024

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
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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.

	# FTEs	Classification
	_____	_____
	_____	_____
Total FTEs	_____	

2. Pass Thru (Estimated cost) \$0

Total Expenditures	\$20,000
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2023 Grant Work Plan

Department **Human Services** Division 011 Fund 124 Program 730

Purpose of Grant (Brief description of work to be performed) **Snohomish County Office of Court Appointed Advocate for the Support of the CASA/Volunteer Guardian Ad Litem Program**

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 7/1/2023 to 6/30/2024

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 _____
_____	DAC _____	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.

	# FTEs	Classification
Total FTEs	_____	_____

2. Pass Thru (Estimated cost) \$-0-

Total Expenditures \$214,286
