

DESCHUTES COUNTY DOCUMENT SUMMARY

(NOTE: This form is required to be submitted with ALL contracts and other agreements, regardless of whether the document is to be on a Board agenda or can be signed by the County Administrator or Department Director. If the document is to be on a Board agenda, the Agenda Request Form is also required. If this form is not included with the document, the document will be returned to the Department. Please submit documents to the Board Secretary for tracking purposes, and not directly to Legal Counsel, the County Administrator or the Commissioners. In addition to submitting this form with your documents, please submit this form electronically to the Board Secretary.)

Please complete all sections **above** the Official Review line.

Date: 11/02/2021

Department: Adult Parole and Probation

Contractor/Supplier/Consultant Name: Oregon Department of Corrections

Contractor Contact: Denise Sitler **Contractor Phone #:** 503-945-9051

Type of Document: Intergovernmental Agreement No.6159

Goods and/or Services: Deschutes County receives a formula allocation from the Department of Corrections (DOC) to provide supervision and services for offenders on probation, parole, and post-prison supervision. Grant in Aid provides the majority of funding for community correction actives as outlined in the Deschutes County Community Corrections plan.

Background & History: The state of Oregon Department of Corrections provides funding to counties to “promote public safety by holding offenders accountable for their actions and reducing the risk of future criminal behavior”. Counties utilize funding to work with adults sentenced to probation, or returning home from prison for felony and limited misdemeanor charges in three key areas: Supervision, Services, and Sanctions. Historically supervision (in the form of supervising court conditions, case management and / or surveillance) and sanctions (in the form of increased reporting, community service or jail) have comprised the bulk of resources and time counties spend to achieve this mission. More recently, the state and counties have made attempts to rebalance their array of interventions by improving the quantity and quality of services and supervision that are aimed at long-term behavior change, as well as ensuring necessary short-term accountability.

The Adult Parole & Probation division is tasked with creating a biennial Community Corrections Plan to describe our goals and intentions for using state funding, in alignment with state and county goals, and best available evidence about what works.

Agreement Starting Date: 07/01/2021

Ending Date: 06/30/2023

Annual Value or Total Payment: Payment of \$11,836,132 over 2 year period.

- Insurance Certificate Received (check box)
 General Liability Insurance Expiration Date:
 Professional Liability Insurance Expiration Date:
-

Check all that apply:

- RFP, Solicitation or Bid Process
- Informal quotes (<\$150K)
- Exempt from RFP, Solicitation or Bid Process (specify – see DCC §2.37)
Informal quotes and need immediate solution in interim.

Funding Source: (Included in current budget? Yes No

If **No**, has budget amendment been submitted? Yes No

Is this a Grant Agreement providing revenue to the County? Yes No

Special conditions attached to this grant:

Deadlines for reporting to the grantor:

If a new FTE will be hired with grant funds, confirm that Personnel has been notified that it is a grant-funded position so that this will be noted in the offer letter: Yes No

Contact information for the person responsible for grant compliance:

Name:

Phone #:

Departmental Contact and Title: Trevor Stephens, Management Analyst

Phone #: 541-330-8261

Department Director Approval:


Signature

11/3/21
Date

Distribution of Document: Return to Trevor Stephens, Adult Parole and Probation.

Official Review:

County Signature Required (check one):

- BOCC (if \$150,000 or more) – BOARD AGENDA Item
- County Administrator (if \$25,000 but under \$150,000)
- Department Director - Health (if under \$50,000)
- Department Head/Director (if under \$25,000)

Legal Review _____

Date _____

Document Number