Grant Policies and Procedures

Introduction
This manual describes the policies and procedures that Portland Children’s Levy grantees must use for the following grant management and accountability issues. The manual is divided into three main sections with the following subparts:

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Financial Reporting & Accountability Policies & Procedures

I. Grant Invoicing and Expenditure Reporting

A. Grantees are reimbursed for expenses on a quarterly basis. Invoices must be based on actual expenditures made during the quarter.

B. Download the invoice and expenditure forms available on our website http://www.portlandchildrenslevy.org/grantee-resources. Prepare the invoice and expenditure report as instructed (instructions are included with the forms when you download them).

C. Invoices must be printed on the grantee agency’s letterhead and must include signatures of 2 different individuals at the agency: an invoice preparer and an invoice approver.

D. Assure that line items in the expenditure report match the line items in the annual grant budget; grant managers cannot authorize payment for line items not included in the approved budget.

E. If the expenditure report includes any negative expenses, be sure to include a note of explanation in the email that accompanies the expenditure report when it is submitted.

F. Submit the invoice and expenditure report electronically on or before the report due date to John Kelly, Fiscal & Administrative Specialist at the Children’s Levy: john.kelly@portlandoregon.gov

II. Advance Payment on Grant

A. All grantees may request advance payments on a quarterly basis, or less often as needed, during a contract year. The allowable advance amount is up to one quarter of the annual grant budget (i.e. 25% budget for year).

B. Download the advance invoice form from our website and submit it as instructed (instructions are included with the download of the form). http://www.portlandchildrenslevy.org/grantee-resources

C. Submit an expense report and invoice for total actual quarterly expenses (see Policy A, above). City accounting will issue a check for the difference between the advance and invoice amounts.

D. If the amount of the advance exceeded the actual expenses reported, then the grantee cannot submit another advance request until the remaining advance is fully recovered by the City. The grantee must spend out the remaining advance in the subsequent quarter, and must invoice for actual expenses incurred during the subsequent quarter. This means that the grantee will have to cover program expenses without the help of an advance for the quarter in question.

Note of caution on advances: PCL staff advises grantees to request only as much of an advance as you anticipate expending in a given quarter if you anticipate needing an advance each quarter. If you receive an advance for more than you expend, you will not be able to request an advance in the following quarter.
III. Revisions of Annual Budgets

A. You are required to request approval of budget revisions if the conditions listed below apply. Budget revisions can be submitted to your grant manager any time through May 15th of the contract year. Budget revisions are not accepted after May 15th. If the conditions listed below do not apply, you are not required to submit a revised budget for approval.

1. **Anticipated or Actual Overspending in One or More Budget Categories**: One or more budget categories (defined as Personnel, Contracted Programmatic Services, Program Expenses, Data Management and Evaluation) is anticipated to be, or is overspent by a $1,000 or 10% of the annual budget for the category, whichever amount is greater.

2. **Need to add a line item** that wasn’t originally approved in budget (e.g. a staff position that was not listed in the original approved annual grant budget or different type of program expense);

3. **At the request of the Grant Manager** due to significant variance between budget and expenditures.

Please note: **grant managers are only authorized to approve expenses that fall within 10% or $1,000 variance for each budget category**, whichever is greater, on the final invoice submitted for the contract year. Additionally, grant managers cannot authorize payment for line items that are not included in the approved budget, or authorize payment for administration expenses that are more than 15% of program expenses.

B. To submit a budget revision to your Children’s Levy Grant Manager, follow the steps below:

1. **Create a revised budget** for the current grant year. The revised budget must resemble the format shown on the Revised Budget Form on our website [http://www.portlandchildrenslevy.org/grantee-resources](http://www.portlandchildrenslevy.org/grantee-resources). You can either download the form, or you can insert a column into your current year Children’s Levy grant budget (on its existing Children’s Levy budget form) that shows the revised budget. The final product should show your current year grant budget in one column, and the revised budget for the current year in the adjacent column. Be sure that the current year budget reflects the most recent approved budget for your program.

2. **Write a brief narrative explanation** of the proposed changes that fall into the categories described above in Section C.1.a-c. The narrative can be written either in an email or in a Word document. It must clearly describe each of the changes requested, including **exact dollar amounts and rationale for each revision**. If you are making changes that do not change the budget category total by 10% or $1,000, whichever is greater, or add a new line item, you do not need to include an explanation of those changes.

3. **Submit the budget revision requests** (i.e. narrative and revised budget in the appropriate format) via email to your grant manager. The grant manager will either approve your request or ask you for additional information. Total annual grant budgets for the contract term may not exceed the total grant amount listed in your contract.

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**Example 1**: If your budget for Personnel is currently $70,000, and you want to increase it to $74,000, and you are not proposing to add any new staff, you do not need to request approval for a budget revision because the proposed change is less than 10% of the total for the budget category.

**Example 2**: If your budget for Program Expenses is $35,000, and you want to make changes to the amounts budgeted to the existing line items, but the total budget for the category stays at $35,000, and you are not adding new line items to the category, you do not need to request approval for a budget revision.
IV. Carry Over of Unspent Grant Funds

A. Grantees may request to carry over unspent funds from year to year within a contract period; unspent funds cannot be carried over between contract periods. Carry-over can be budgeted to any remaining year/s within the contract period (e.g. you can request carry-over from Y1 be budgeted for expenses in Y2 alone, or in Y2 and Y3).

B. Grantees may not request to carry over unspent funds until the grant year has ended and all invoices and expenditure reports for the grant year have been submitted to the Children’s Levy staff. PCL will communicate with grantees by June 30 regarding procedures for making carry over requests.

C. In general, carry over requests should be no more than 10% of the grant year budget; you may request more (or less), and grant managers have discretion to approve or reject requests. You are discouraged from requesting to use carry over for adding or expanding FTE in the program.

V. Annual Grant Budgets

A. Grantees will be required to create annual line item grant budgets by August 30 of each fiscal year of the grant. PCL staff will provide further instruction on how to proceed by June 30.
Program Reporting & Accountability Policies and Procedures

I. General Program Reporting Requirements and Due Dates

A. Program reports due to Children’s Levy staff are specified in Section II.E of the grant contracts.

B. All forms needed for reporting will be supplied to you directly from your Children’s Levy Grant Manager, or can be found on the Portland Children’s Levy website [http://www.portlandchildrenslevy.org/grantee-resources](http://www.portlandchildrenslevy.org/grantee-resources)

C. If you have questions about reporting obligations, contact your grant manager:

<table>
<thead>
<tr>
<th>PCL Program Area</th>
<th>Grant Manager and Contact Information</th>
</tr>
</thead>
<tbody>
<tr>
<td>After School Hunger Relief</td>
<td>Lisa Pellegrino, (503) 823.2939</td>
</tr>
<tr>
<td></td>
<td><a href="mailto:lisa.pellegrino@portlandoregon.gov">lisa.pellegrino@portlandoregon.gov</a></td>
</tr>
<tr>
<td>Child Abuse Prevention/Intervention</td>
<td>Lisa Hansell, (503) 865-6061</td>
</tr>
<tr>
<td>Foster Care Programs</td>
<td><a href="mailto:lisa.hansell@portlandoregon.gov">lisa.hansell@portlandoregon.gov</a></td>
</tr>
<tr>
<td>Early Childhood Mentoring</td>
<td>Meg McElroy, (503) 865.6013</td>
</tr>
<tr>
<td></td>
<td><a href="mailto:meg.mcelroy@portlandoregon.gov">meg.mcelroy@portlandoregon.gov</a></td>
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</table>

D. Reporting due dates: as indicated in Section II.E of the grant contract are as follows:

<table>
<thead>
<tr>
<th>Due Date</th>
<th>Report Required</th>
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<tr>
<td>January 31</td>
<td>Mid-Year Progress Report (Word Format)</td>
</tr>
<tr>
<td>July 31</td>
<td>Annual Data Report (Excel Format) &amp; Narrative Report (Word Format) &amp; Participant List: After School and Mentoring grantees only (Excel Format)</td>
</tr>
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</table>

NOTE: If those days fall on a weekend, then submit the reports by the next business day.

E. **Financial Penalty for Late Reports:** Please remember, per Section II.E of the grant contract, that failure to submit any required reports on the specified due dates without prior written extension from your Grant Manager will result in a financial penalty of 3% off the current or next grant invoice.
### II. Purpose and Use of Grantee Reports

Below is an explanation of the intended purpose and use of each report.

<table>
<thead>
<tr>
<th>Report Type</th>
<th>Purpose and Use</th>
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<tbody>
<tr>
<td>Mid-Year Progress Report (Word)</td>
<td><strong>Purpose and Use:</strong> Gauge program implementation progress at mid-year, including whether the program is on track to meet annual service goals (e.g. number of children to be served) and to understand issues encountered with program implementation. Serves as a mechanism for grantees to inform grant managers about programmatic adjustments that were made/need to be made.</td>
</tr>
<tr>
<td>Annual Data Report (Excel)</td>
<td><strong>Purpose and Use:</strong> Analyze program’s annual performance data on PCL’s 5 main accountability metrics: 1) Grant Service Goals; 2) Client Participation in Services; 3) Program Outcomes; 4) Staff Turnover; and 5) Demographics of Populations Served. Template also contains a summary of the program’s performance on each of those metrics over the contract period and gauges the individual grantee’s performance compared to average performance of all other grantees in the program area and across the entire Levy.</td>
</tr>
<tr>
<td>Annual Narrative Report (Word)</td>
<td><strong>Purpose and Use:</strong> Understand a program’s overall progress and performance for the year; includes grantee’s reflections on and explanations of data in the Annual Data Report, and it serves as a mechanism for grantees to inform grant managers about issues with program implementation and any programmatic adjustments that were made/need to be made. Assure grantee organizations have a functioning board of directors that met regularly during the contract year.</td>
</tr>
<tr>
<td>Participant List (Excel)</td>
<td><strong>Purpose and Use for After School &amp; Mentoring:</strong> The names and other identifying information of participants in after-school and mentoring programs are collected and forwarded by PCL to the school districts in which program participants attend school. The school districts then report aggregate data on program participants on mutually agreed upon variables such as school attendance and test scores.</td>
</tr>
<tr>
<td>Referral and Eligibility Verification Form (PDF)</td>
<td><strong>Purpose and Use for Foster Care:</strong> Verification from DHS assures the children and youth receiving services through PCL-funded foster care programs meet eligibility requirements (are in foster care or aged-out of foster care at the time of enrollment).</td>
</tr>
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#### Other Uses of Grantee Reports:

- **Aggregation of Grantee Data for Overall PCL Performance and Accountability to Public:** In addition to using the data to monitor each program’s performance, PCL staff aggregate program data to look at the overall performance of grantees in a program area and across the entire Levy. These aggregate data are reported annually to the Allocation Committee. For additional information on PCL’s Accountability Metrics, and the rationale for the metrics used, see: [http://www.portlandchildrenslevy.org/about-us/performance-and-results](http://www.portlandchildrenslevy.org/about-us/performance-and-results)

- **Public Information:** Rarely does anyone other than PCL staff read reports, but all reports are public record. Members of the public could request to read them under the Freedom of Information Act.
III. Grant Contract Monitoring

A. **Report Analysis:** Grant Manager will use the Mid-Year Progress reports, Annual Data and Narrative reports, and Participant Lists to analyze program progress compared to contract goals.

B. **Report Follow-Up and Feedback:** After reviewing report(s) and any additional information submitted, Grant Manager will provide feedback to the grantee via e-mail, typically within six weeks of report receipt. Feedback will be provided on the report itself and will identify report strengths, concerns and/or questions, needs for additional information, and any further actions required on the part of the Grantee.

C. **Assessment of Grantee Performance Over Time:** Grant managers will compile grantee performance summaries annually using the methods below. Summaries will be provided to grantees annually for review, comment and correction.

1. **Grantee Data on Performance Metrics:** Grant managers will use Worksheet L. Annual Avgs in the grantee’s Annual Data Report to monitor grantees’ performance on PCL’s 5 main accountability metrics averaged to date. PCL staff will update the worksheet with the average rates on these metrics for all Levy funded programs, for the program area, and, if applicable, for the sub-program area (e.g. early childhood home visiting programs). Information on Worksheet L. shall be used to create the Grantee Performance Summary (Appendix B).

2. **Summary of Grant Performance:** Grant managers will annually create a Grantee Performance Summary for each grant that assesses grantee’s performance on the metrics as compared to other grantees in the program area, or, where applicable, in the sub-program area. The summary will be updated annually to cumulatively include all reporting years in the relevant contract period. The rating method used to arrive at the ratings used on the Grantee Summary Form is described in Appendix C: Definitions and Methods for Summary Form and Data Sheet.

D. **Grantee Performance Parameters:** The table on the following page outlines the parameters that MAY raise performance concerns for PCL grant managers and result in the need for follow-up and further explanation from grantees.

E. **Performance in Context:** The table also explains the contextual factors that grant managers will take into account in evaluating performance. When concerns are identified, the Grant Manager will consider various factors to determine the appropriate course of action including, but not limited to, those listed in the table.

F. **Licensed Child Care Facilities ONLY:** PCL requires that child care facilities subject to inspection and certification under Oregon Administrative Rules (OAR) 414-300-0000 through 414-300-0415 maintain current licensure under those laws. PCL will terminate funding for services delivered at any and all facilities covered in PCL grants that experience a loss or suspension of its license under state regulations. PCL staff will monitor compliance with Oregon Early Learning Division’s Office of Child Care licensing requirements, and complaints lodged against licensed childcare facility/ies that receive PCL funding.

PCL’s monitoring of these conditions will include: 1) periodic checks of records for all PCL-funded facilities as shown on the Early Learning Division’s Child Care Safety Portal; and 2) requests by PCL to the Office of Child Care for compliance history documentation, as needed and at the discretion of PCL staff, based on information published online at the Safety Portal. “Valid” complaints and compliance violations,
particularly those defined as “serious” by OAR, may be grounds for termination of PCL grant contracts, at the discretion of the Portland Children’s Levy.

**Issues of Concern with Grantee Performance**

1. Variance of 20% or more between service goals and actual services delivered.
2. Variance of 20% or more between the demographics of people served and the specific populations proposed for service in the contract (e.g. specific age groups, geographic area, specific ethnic groups).
3. Services provided to a significant number of ineligible children/families (e.g. children/families who are not Portland residents; for foster care programs, services for children who were not in foster care or aged out of foster care at the time of program engagement).
4. Low number of program participants meeting the participation floor (i.e. falling into the “Low” category for participation/service utilization on the Grantee Performance Summary).
5. High number of program participants leaving the program with a minimal level of participation (i.e. falling into the “High” category for early exits on the Grantee Performance Summary).
6. Differences between the program model outlined in the contract and the actual services delivered (e.g. different curriculum being used, different program components, referral sources).
7. Significant variance in actual outcomes vs. outcome goals or meeting fewer than 50% of goals set.
8. High staff turnover, throughout the program or in specific positions key to program delivery (i.e. falling into the “High” category on the Grantee Performance Summary).
9. Quality of reports (e.g. missing information, inaccurate information, irrelevant information).
10. Indication that board of directors of organization has many vacancies and/or is failing to meet regularly during the contract year.
11. Significant underspending of grant (variance between approved annual budget and actual expenditures).

**Contextual Factors Used for Evaluating Grantee Performance**

1. The importance of the program element for which there is a concern;
2. Whether or not the program is in the startup or expansion phase;
3. The degree to which the program is out of compliance;
4. The information provided in the report regarding reasons for discrepancies and plans to correct;
5. Whether or not the issue is an on-going concern;
6. Continual program improvement efforts.

**Possible Follow-Up Actions for Grantee Performance Concerns**

PCL Staff will communicate all concerns to grantees in writing and provide a reasonable time for grantees to address concerns.

1. Request report revision and/or additional information regarding the area of concern.
2. Negotiate a contract amendment to reflect more appropriate service goals and/or other terms.
3. Request more frequent reporting (e.g. monthly, quarterly) and/or additional program performance data.
4. Require submission of an action plan outlining steps that will be taken to ensure contract goals are achieved, and agreement on a schedule for supplemental reporting to track progress on action plan.
5. Require a site visit to observe service delivery and discuss concerns or review performance with Grantee.
6. Recommend a reduced level of funding; or contract termination to Allocation Committee.
7. Recommend to Allocation Committee that contract not be renewed.
**Instructions for Completing Program Reports**

I. **Mid-Year Narrative Report**

A. **Data Collection Methods and Expectations:** PCL expects that grantees will use and follow consistent, timely, and documented methods for collecting data that allows grantees to accurately and sufficiently complete the required mid-year narrative report. PCL staff may request a site visit to review grantee data collection and analysis methods.

B. **Instructions for Completing the Mid-Year Narrative:** Follow the instructions, including font size and page limits, as instructed on the first page of the form.

C. **Client Stories Optional but Encouraged:** In the mid-year and year-end narrative reports, grantees may submit a client story. The strongest stories include information such as why the participant came to your program, some description of the participant’s life or circumstances, some discussion of the program’s services that the participant engaged in, and the impact that the program had on the participant. If your program does not have a compelling participant story to tell in a given year, then report one another time when you feel it is worth telling. PCL Communications Director, Mary Gay Broderick, often uses the stories to pursue local media coverage and in PCL media, such as e-newsletters and Facebook page. Stories are also shared with the PCL Allocation Committee.

II. **Participant Lists: After School & Mentoring Programs ONLY**

A. **Data Collection Methods and Expectations:** PCL expects that grantees will use appropriate and documented methods for collecting data that allows grantees to accurately and sufficiently complete the required participant lists. PCL staff may request a site visit to review grantee data collection and analysis methods.

B. **Instructions for Completing the Participant Lists for After School & Mentoring Programs:** Complete current year participant list form for After-School and Mentoring programs sent annually by grant manager. List the following information for all program participants that met the minimum dosage for outcome reporting listed in Section I.C.1.d of your contract:

- First and last name
- School attended
- Grade in school
- Date of birth
- School identification number
- Whether the student participated in the program during the previous school year. If you do not know whether they participated during the previous year, leave the space blank.
- List all information you have for any given student even if you do not have all information requested.

Upload the completed list to the folder shared with you by your grant manager to ensure the security of student information. **Do not transmit the completed list via email.**

See Appendix C for PCL Policies and Procedures for Confidentiality of Participant Lists & Client Stories
III. Referral Form and Eligibility Verification Form – Foster Care Programs Only

A. **Overview:** A completed referral form or completed eligibility verification form is required for each child/youth who enrolls in Levy funded foster care services. The referral form will be initiated by DHS when making a referral to a PCL-funded foster care program. PCL-funded foster care programs initiate the eligibility verification form when a referral is received from a source other than DHS.

If a PCL-funded foster care program receives a referral from a source other than DHS, DHS needs to determine eligibility and approve enrollment in services. Eligibility determination is needed for all cases. However, in some situations, approval to enroll in PCL-funded services is not required (e.g. services for youth who have aged out of foster care, services for youth who are no longer in foster care but meet New Avenues for Youth eligibility requirements).

B. **Eligibility Verification Form Instructions:**
   1. Complete the section of the form titled “Eligibility Verification Request”.
   2. Send the form, referral and eligibility form instructions and the list of PCL-funded foster care programs to the following DHS mailbox: CAF-SDA2_PDXChildrensLevy@dhsoha.state.or.us. Designated DHS staff will forward the materials to the caseworker.
   3. Obtain a release of information from the child’s guardian, or the youth (if youth is 18 or older or an emancipated minor), if requested to do so by DHS. DHS will request a release if a child or youth is not currently in DHS’s Legal custody and guardianship (e.g. child is in temporary custody, case is closed).
   4. Within 3 days of receiving the request, DHS shall provide written eligibility determination and enrollment approval as appropriate.
   5. If DHS determines the child/youth is eligible and approves enrollment or indicates approval is “N/A”, complete the section titled “Eligibility Verification for Portland Children’s Levy” (section designated for PCL-funded Program).

C. **Referral Form Instructions:**
   1. Within 3 days of receiving a referral from DHS for services, complete the section of the form titled “PCL-funded Service Provider Referral Outcome”.
   2. Send the completed form to the DHS Caseworker/Designee.
   3. If your program enrolls the child/youth in services, complete the section titled “Eligibility Verification for Portland Children’s Levy” (section designated for PCL-funded Program).

D. **Submit Eligibility Verification to Portland Children’s Levy:**
   1. Once both sections of the “Eligibility Verification for Portland Children’s Levy”, of either the referral form or the eligibility verification form, are complete and the child/youth is enrolled, send a copy of page 2 of the form to lisa.hansell@portlandoregon.gov. **Do not send page one of the form as it contains children's names and other confidential information.**

E. **List of Eligible Participants:** Using the verification forms received, PCL staff shall maintain a list of eligible participants for each program. PCL shall send the list of eligible participants to each program at least once a year, by July 5th. Grantees may request a copy of the list at any time. Grantees are to review the list and notify PCL staff of any discrepancies. It is important to finalize the list before completing the annual report. Grantees shall provide annual report data for all eligible children/youth served during the contract year.

See Appendix D for a copy of the Referral form
See Appendix E for a copy of the Eligibility Verification Form
IV. Annual Data Report

A. Data Collection Methods and Expectations: PCL expects that grantees will use consistent, timely, and documented methods for collecting data, including use of PCL-approved outcome measurement tools that allow grantees to accurately and sufficiently complete the required Annual Data Report. PCL staff may request a site visit to review grantee data collection and analysis methods.

B. Report Template Customized for each Grantee: PCL staff have customized an Annual Report Template for your grant contract. It will be helpful to have a copy of your grant contract on hand as you complete your report so you can double check that the template reflects the scope of services specified in your grant contract. Contact your grant manager if you need a copy of the grant contract.

C. Instructions for Completing the Annual Data Report:
Follow the steps below to complete the Annual Data Report template, which contains several Excel “worksheets.” By clicking the tabs on the bottom of the screen in the Excel window, you can see the different worksheets, lettered A – L. It is designed to cover up to 5 years of reporting in the event the grant is renewed.

1. Worksheet A.SvcGoals, shows the service expectations specified in Section I.A & B of the grant agreement; purpose of the sheet is to compare service goals to actual service provided during the reporting period. Enter your data in the yellow cells for the relevant year. As you enter it, the white and blue cells to the right will auto-calculate. The blue areas show the main performance metrics that will be used for your grant (the same metrics are used for all PCL grants). Total unduplicated number of Children or Primary Care Givers served should reflect an unduplicated count of children or caregivers served in the program with PCL funds during the annual reporting period (July 1 – June 30).

Definitions:

| Unduplicated: unique children/caregivers served that participated in the Levy funded program during the contract year, regardless of whether they participated in previous years, and regardless of the number of service components that the child/caregiver received. | Duplicated: in after school programs duplicated counts refer to children who participated in multiple classes offered by grantee during the contract year and who are counted for each class they participated in, or participants in summer programming who also participated in school-year programming. In hunger relief programs duplicated counts refer to the number of individuals that receive food at a distribution site regardless of whether they received food at the same site multiple times. |

Enter data only in YELLOW cells. All other cells contain formulas and functions, including linking worksheets in the template together; those cells are “locked. Locking cells prevents formulas from being removed or changed. If you discover any errors in the way your template is designed (such as formulas that do not calculate correctly), contact your grant manager.

Look for “red triangles” in the template. PCL staff included comments/tips to help you complete the template, and you can find/read those by putting your cursor anywhere you see a small red triangle on a cell in the template.
2. **Worksheet B.Partic**, shows the client participation expectations specified in Section I.C.1 of the grant agreement; purpose of the sheet is to compare participation goals to actual participation during the reporting period. The sheet uses data you enter there, plus data already entered on A.SvcGoals to calculate various participation rates. Enter data in the yellow cells for the relevant year, and notice the auto-calculations in the white and blue cells.

3. **Worksheet C.DisagPartic**, will contain data on clients that met the “minimum dosage” disaggregated by race/ethnicity; purpose of the sheet is to look at variation in participation rates of different populations. Enter data in the yellow cells for the relevant year and notice the auto-calculations in the white cells; the sheet pulls data entered on B.Partic. There are no grant goals or performance metrics for this worksheet.

4. **Worksheet D.Outcomes**, shows the program outcome goals specified in Section I.C.2 of the grant agreement; purpose of the sheet is to compare outcome goals to actual outcomes achieved during the reporting period. Enter data in the yellow cells for the relevant year, and notice the auto-calculations in the white and blue cells; the sheet pulls data entered on B.Partic.

5. **Worksheet E. StaffTurnover**, will contain data on staff positions paid by the PCL grant and the number of times they turned over during the reporting period. The sheet lists positions included on your most recent approved annual grant budget. Enter data only in the yellow cells for the relevant year, and notice the auto-calculations in the white and blue cells. Follow the instructions on the sheet for how to represent the number of staff in a position, and the level of turnover.

6. **Worksheets F.Y1Demog- Worksheet J**, report the demographics of all clients served during the reporting period (one worksheet per year). To reduce reporting burden, most programs only need to report the demographics of children served (a few will do both children and parents/primary caregivers). Enter data in the yellow cells and notice the auto-calculations in the green cells and blue cells. Also, the sheet’s orange cells link to relevant cells on A.SvcGoals.

   See Section IV on the following pages of this document for specific instructions and definitions to complete the Demographic Report worksheet/s in the Annual Data Report.

7. **Worksheet K.DemogPopPartic**, this sheet pulls data from C.DisagPartic and from Worksheets F-J. It allows you to look at the race/ethnicity demographics of the total population served by the program each year, compared to the race/ethnicity of the population that met the “minimum dosage” for participation. You do not enter any data on this sheet.

8. **Worksheet L.AnnualAvg**, this sheet pulls data from Worksheets A, B, D, and E to look at the overall performance of the program on PCL’s main accountability metrics. You do not enter data on this sheet. See section II.C.3.a. of this document for explanation of how Worksheet L will be used by PCL staff.

**V. Demographic Data Worksheets F – J in Annual Data Report**

A. **Data Collection Methods and Expectations**: PCL expects all grantees to collect demographic data on participants in PCL funded services.

   1. Demographic data reported to the Children’s Levy should be based on data collected on agency or program intake/enrollment forms.
2. At a minimum, your PCL-funded program intake procedures must include methods for collecting the following demographic data on each client served in your PCL-funded program: gender, race/ethnicity, primary language in the home, age, and residence zip code.

3. You are highly encouraged, but not required, to collect demographic data regarding clients’ socioeconomic status and their disability status.

B. Definitions of Demographic Categories and Options in each Category: PCL expects that grantees will use the definitions discussed below to complete the demographic data worksheets included in the Annual Data Report template.

1. Gender
Gender options are male, female, transgender, genderqueer or not given. Data should be recorded as the number of children/caregivers who identify in each category.

2. Race/Ethnicity
The list of race/ethnicity options are based on distinctions used by a variety of public and private agencies including Multnomah County Department of Human Services, Oregon Department of Human Services and the Coalition of Communities of Color.

   a. Unduplicated Count: To complete the unduplicated count for race/ethnicity, record participants that identify only one race/ethnicity on your intake form in the appropriate category on the form based on the definitions provided below. If a participant identified more than one race/ethnicity on your intake form, count that participant as “Multiracial” on the PCL form.

   b. Inclusive Identity Count: To complete the inclusive identity count for race/ethnicity, all participants who identified as more than one race/ethnicity should be counted in each race/ethnicity category they chose. Participants who identified only one race/ethnicity should be counted in the single category marked. The inclusive identity count will be higher than the unduplicated count. If you did not collect inclusive race/ethnicity data for your program, do not complete this section. Beginning July 1, 2015, PCL will require that all grantees offer the option of choosing multiple racial/ethnic identities on intake forms completed by clients participating in PCL funded programs.

   c. Identity Definitions: PCL expects grantees to use clients’ self-identification of race/ethnicity in reporting data in this category of the worksheet. PCL recognizes that the intake forms of agencies/programs vary in format (e.g. some ask clients to fill in a blank; other offer a list of choices), and that agencies may count the same clients in different racial/ethnic categories depending on how different funders define these categories.

<table>
<thead>
<tr>
<th>Race/Ethnicity Identity Definitions and How to Use Them</th>
</tr>
</thead>
<tbody>
<tr>
<td>For purposes of reporting racial/ethnic identification data to PCL, grantees should use the definitions below to choose the PCL reporting category that most closely aligns with the racial/ethnic identity indicated by the client on your intake form. If your agency/program does not collect data on each of these identity options, report clients in the PCL categories in which you collect data.</td>
</tr>
<tr>
<td>PCL does not recommend that you list the full text of the definitions as written below on your program intake/enrollment forms. PCL recommends that your form offer fill-in-the-blank or a check list of identity options without the definitions.</td>
</tr>
</tbody>
</table>
Examples:
If your intake form does not offer an option for African or African Immigrant, but does offer Black/African American as an option, you should report all clients served who marked this category in the “Black or African American” category on the PCL report.

If your intake form contains a blank for the client to fill in their race/ethnicity and the client identifies as Ukrainian, you should report that client in the Slavic category on the PCL report per the definition below.

**African:** A person who is a refugee, immigrant or seeking asylum from the countries of Africa.

**Asian:** A person having origins in any of the original peoples of the East Asia, Southeast Asia, or South Asia including for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand and Vietnam.

**Black or African American:** A person having origins in any of the black racial groups of Africa.

**Hispanic or Latino:** A person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin.

**Middle Eastern:** A person having origins in any of the original peoples of the Middle East ranging from Turkey and Iran in the north and Saudi Arabia, Oman and Yemen in the south and east.

**Native American or Alaska Native:** A person having origins in any of the original peoples of North and South America (including Central America).

**Native Hawaiian or Pacific Islander:** A person having origins in any of the original peoples of Hawaii, Guam, Samoa or other Pacific Islands.

**Slavic:** A person having origins in any of the original peoples of the states of the former Soviet Union, or other Slavic culture or origin.

**White:** A person having origins in any of the original peoples of Europe.

**Not Given:** This category should be used when the information was not provided by the participant on the intake form.

3. **Primary Language in the Home**
   a. **Language Options Listed on Worksheet:** Options in this category are based on the primary language spoken in the home regardless of whether the child/caregiver is multi-lingual. Data should be recorded as the number of children/caregivers served who identify the primary language spoken in the home as one of the options listed. For foster care programs, report the primary language in the home of the birth parents.

   b. **“Other” Languages Option:** If the primary language spoken in the home of the client served is not one of the options on the worksheet, use the “other” option to report the number of clients. Record the specific other language spoken at the bottom of the form as labelled; you may include the number of clients that speak any additional languages that you list.

   c. **“Not Given” Option:** If a program unsure of the primary language spoken in the home, then use the “not given” option.
4. **Age**
Options for this category are defined by the age of the child/caregiver served during the contract year. If the child enrolled during the contract year, enter the age of the child at enrollment. If the child enrolled prior to July 1 of the contract year, then enter the age of the child as of July 1 of the contract year.

5. **Residence Zip Code**
a. Zip Code Options: The options listed in this category include the zip codes in the City of Portland. *School-based programs* may use the zip code of the school if your program does not collect this information from individual participants, or if it is missing from the information provided by the participant. *For foster care programs*, indicate the zip code of the birth parents if located within the City of Portland. If the birth parents do not live in the City of Portland, indicate the zip code of the foster care home.

   b. “Homeless” Option listed: PCL uses the following definition of “homeless” based on the Federal McKinney-Vento Homeless Assistance Act: individuals who lack a fixed, regular, and adequate nighttime residence, and includes: (i) children sharing the housing of other persons due to loss of housing, economic hardship, or a similar reason; living in motels, hotels, trailer parks, or camping grounds due to the lack of alternative adequate accommodations; living in emergency or transitional shelters; are abandoned in hospitals; (ii) children who have a primary nighttime residence that is a public or private place not designed for or ordinarily used as a regular sleeping accommodation for human beings; (iii) children living in cars, parks, public spaces, abandoned buildings, substandard housing, bus or train stations, or similar settings.

6. **Socioeconomic Status**
Options in this category are based on the Federal Poverty Level definitions for 2015 and corresponds to USDA Free & Reduced Meals guidelines for FY14-15. It may be necessary to calculate clients’ level of poverty using either the table below or USDA guidelines, depending on how data is collected from participants. PCL staff will send grantees an updated version of the table below each year, as the federal government updates its FPL and USDA figures. *For foster care programs*, report the socioeconomic status of the birth parents if the data is available. *For after-school and mentoring programs* that do not collect socioeconomic data, enter “Not Given” on the worksheet. PCL staff will obtain data on the percentage of program participants that received free and reduced-price lunches during the year from the school districts.

*Income breakdown based on the 2018 Federal Poverty Level (FPL):*

<table>
<thead>
<tr>
<th># in Family</th>
<th>100% of FPL</th>
<th>101%-130% of FPL</th>
<th>131%-185% of FPL</th>
<th>186%-200% of FPL</th>
<th>201% of FPL and above</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>$12,140</td>
<td>$12,261</td>
<td>$15,782</td>
<td>$22,580</td>
<td>$24,280</td>
</tr>
<tr>
<td>2</td>
<td>$16,460</td>
<td>$16,625</td>
<td>$21,398</td>
<td>$30,616</td>
<td>$32,920</td>
</tr>
<tr>
<td>3</td>
<td>$20,780</td>
<td>$20,988</td>
<td>$27,014</td>
<td>$38,651</td>
<td>$41,560</td>
</tr>
<tr>
<td>4</td>
<td>$25,100</td>
<td>$25,351</td>
<td>$32,630</td>
<td>$46,868</td>
<td>$50,200</td>
</tr>
<tr>
<td>5</td>
<td>$29,420</td>
<td>$29,714</td>
<td>$38,246</td>
<td>$54,721</td>
<td>$58,840</td>
</tr>
<tr>
<td>6</td>
<td>$33,740</td>
<td>$34,077</td>
<td>$43,862</td>
<td>$62,756</td>
<td>$67,480</td>
</tr>
<tr>
<td>7</td>
<td>$38,060</td>
<td>$38,441</td>
<td>$49,478</td>
<td>$70,411</td>
<td>$76,120</td>
</tr>
<tr>
<td>8</td>
<td>$42,380</td>
<td>$42,804</td>
<td>$55,094</td>
<td>$78,827</td>
<td>$84,760</td>
</tr>
</tbody>
</table>
7. **Disability:** The option in this category is based on the following definition of disability in the Americans with Disability Act: a person who has a physical or mental impairment that substantially limits one or more major life activities, a person who has a history or record of such impairment, or a person who is perceived by others as having such an impairment.

VI. Annual Narrative Report

A. **Data Collection Methods and Expectations:** PCL expects that grantees use the data reported in the Grantee’s Annual Data Report, and any other relevant observations, qualitative data, or other quantitative data to thoughtfully answer the questions in the annual narrative report.

B. **Instructions for Completing the Annual Narrative Report:** Follow the instructions, including font size and page limits, as instructed on the first page of the form. The form also instructs grantees how to refer to the grantee’s Annual Data Report to complete some sections of the narrative report.
# Appendix A: Grantee Performance Summary Form

## GRANTEE PERFORMANCE SUMMARY FYxx-yy

<table>
<thead>
<tr>
<th>Grantee Organization Name:</th>
<th>Grantee Program Name:</th>
</tr>
</thead>
</table>

### Service Description

- **Annual Service Goal:**
- **Annual Budget FY xx-yy:**
- **Culturally Specific Program:** No/ Yes
- **Percent of Children Served from E Portland:** %

### Program Performance Review

1. **Service Goals**
   - **Staff Comments:**
   - **No Concerns | Concerns**

2. **Early Exits**
   - **Staff Comments:**
   - **Low | Average | High**

3. **Participation & Service Utilization**
   - **Staff Comments:**
   - **High | Average | Low**

4. **Staff Turnover**
   - **Staff Comments:**
   - **Low | Average | High**

5. **Outcome Goals Met**
   - **Staff Comments:**
   - **All | Most | Some | Few**

### Financial Review

- **Staff Comments:**

### Notes

- **•**

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Portland Children’s Levy: Grant Policies and Procedures

Page 17 of 24
Appendix B: Methods & Definitions for Grantee Performance Assessments

Definitions and Methods: Grantee Performance Summary and Data Sheet

Before you review the Grantee Performance Summary Forms and Data sheets for individual grants, please review the information below to understand how terms are defined, and how data were calculated.

Grantee Performance Summary

1. **Culturally Specific Program Designation**: This designation is taken from the 2014 application processes where applicants who were deemed to have met the criteria in the Request for Investment for a culturally specific program were awarded an additional 3 points in the scoring process.

2. **Percent of Children Served from East Portland (if applicable)**

   Requests for Investment in all program areas issued in 2014 awarded an additional 3 points to applicants who demonstrated that they were either located east of 82nd Avenue, or would predominantly serve clients that reside or go to school east of 82nd Avenue. Grantees with contract goals to serve East Portland have this data point reported on the summary form. To arrive at the percentage on the form, staff calculated the annual percentage of clients residing or going to school in the zip codes listed below, and then averaged those percentages. The following zip codes are predominantly east of 82nd Avenue and in the City of Portland:
   - 97216
   - 97220
   - 97230
   - 97233
   - 97236
   - 97266

3. **Service Goals**: Staff use the rubric below to determine whether service levels were concerning or not.

<table>
<thead>
<tr>
<th>Concerns (Program exhibited one or more of the characteristics below).</th>
<th>No Concerns (Program exhibited one or more of the characteristics below).</th>
</tr>
</thead>
<tbody>
<tr>
<td>Failed to meet primary service goal(s) by substantial margin.</td>
<td>Met or exceeded all service goals.</td>
</tr>
<tr>
<td>Failed to meet many service goals.</td>
<td>If primary service goal(s) were not met, the margin was small.</td>
</tr>
<tr>
<td>Negative trend in meeting service goals.</td>
<td>If several service goals were not met, the margins were very small.</td>
</tr>
<tr>
<td>High turnover of participants caused grantee to substantially exceed service goals.</td>
<td>Positive trend in meeting service goals.</td>
</tr>
<tr>
<td></td>
<td>Justifiable reasons for not meeting service goals; goals subsequently modified.</td>
</tr>
</tbody>
</table>

4. **Early Exits, Participation and Service Utilization, Staff Turnover**: Each year, PCL staff use the annual rate on each metric (as reported in grantee annual data reports, Worksheet L.AnnualAvgs) to calculate a multi-year average rate on each metric. This same set of calculations is done (i.e. annual percentages that compose a range over time, and a multi-year average of the range) for each program area and across all grants Levy-wide (see additional explanation on the next page).

   To determine whether a grantee’s performance was low, average or high for a given metric, staff calculate standard deviations from the multi-year average rate for the program area, or the sub-program area (e.g. home visiting programs, after-school enrichment programs), whichever was applicable. Where the grantee’s own multi-year average falls within one standard deviation higher or lower than the program area or sub-program area average, grantee is scored as “average, meaning within the average range of performance for the program area.” If grantee’s performance is higher or lower than one standard deviation than the multi-year average rate, the grantee is rated “high” or “low” respectively. Please note that an “average” rating means performance was similar to program area peers, thus an “average” rating may
be high or low in absolute terms (e.g. where the average rate was 92%, a grantee rate of 94% may be “average,” but that average range is overall high in absolute terms).

5. **Outcome Goals Met**: Grantees are rated “Most” where a grantee achieved fewer than 100% but more than 50% of goals. Grantees are rated “Some” where a grantee achieved 50% or fewer but more than 25% of goals. Grantees are rated “Few” where a grantee achieved 25% or fewer of outcome goals.

**Performance Metric Data in Worksheet L. Annual Averages**

For your reference, the following list explains how each performance metric is calculated. Staff will update Worksheet L each year, after the grantee has completed the annual data report, to reflect the Levy-wide and Program Area averages for each performance metric.

1. **Service Goals**: The worksheet will take the percentage of the listed service goals met by the grantee for each component for both the number served and amount of service to be offered and average these percentages for the grant years. Where service goals were set as a range (e.g. serving 35-45 parents), the worksheet calculates whether the goal was met as follows: if the number achieved was at least at the low-end of the range, then 100% of the goal was met.

2. **Early Exits**: The worksheet will take the percentage of participants served who exited the program having received only a small amount of service (defined in most contracts) each year of the grant and average these percentages. The multi-year average early exit rate for all Levy programs, for all programs in a specific program area, and, where applicable, the rate for similar programs within a program area will also be listed.

3. **Participation/Utilization**: The worksheet will take the percentage of participants who met various participation or utilization data points (e.g. the percentage that met the participation threshold for outcome tracking; the percentage who received at least 75% of home visits offered), for each year of the grant and average the percentages. Multi-year averages for rates for these variables for the Levy, the program areas and, if applicable, similar programs within a program area will also be listed.

4. **Staff Turnover**: The worksheet will take the percentage of staff turnover in staff positions funded by the Levy for each year of the grant and average these percentages. Multi-year average staff turnover rates for the Levy and for the specific program area will also be listed. Staff turnover rates will be calculated without regard for whether positions are full time or part time, and include both line staff and management staff. In some cases, the number of positions PCL funds for a grant is small such that turnover percentages may appear high. In these cases, staff will note the situation in the comments on the Performance Summary Form.

5. **Outcomes**: The worksheet will take the percentage of outcome goals met each year of the grant and average the percentages. Multi-year averages for the Levy and the specific program area will also be listed.

6. **Financial Review**: Staff will include relevant information on grant spending for the time period covered by the summary.
Appendix C: PCL Policies and Procedures for Confidentiality of Participant Lists & Client Stories

Participant Lists for After School and Mentoring Programs

PCL staff use the following procedures to safeguard the confidentiality of program participants after grantees transmit the participation lists to Children’s Levy staff:

A. Access to One Drive folder with confidential information is limited to PCL grant manager and grantee staff responsible for PCL reporting.
B. Completed participant lists for all grantees are transferred to a single folder that is shared by PCL staff with MESD staff responsible for providing aggregate data on program participants with PCL staff;
C. After aggregate data is released to PCL by school districts, PCL deletes all participants lists from MS One Drive folder.

Client Stories reported by Grantees

PCL staff expects that grantees take the lead in protecting client/participant confidentiality.

When grantees report participant stories to us, we expect that 1) participants’ names have been changed; and 2) participants have given permission to the grantee to report the story.

We assume that we can use participant stories reported to us: 1) to pursue media stories with grantees; 2) to report special stories to the Allocation Committee; or 3) to be included in the compilation of all participant stories posted annually to our website; or 4) to be shared with other grantees.

If a grantee would like to share a story with PCL staff in a progress report but does not want it used for any other purpose, then the grantee should indicate that the story is confidential. PCL staff has respected that request from grantees in the past, and will continue to do so.
Appendix D: Referral Form

REFERRAL to
Portland Children’s Levy Funded Foster Care Services

Instructions: DHS Staff complete items 1. Referral to Portland Children’s Levy Funded Service Provider and 3. DHS portion of Eligibility Verification below and send to the program contact identified on the List of Portland Children’s Levy funded Foster Care Programs, located on DHS’s shared contacts in Outlook as Portland Children’s Levy 0219. Complete instructions on page 3. This referral form is available on the D2 intranet.

<table>
<thead>
<tr>
<th>1. Referral to Portland Children’s Levy Funded Service Provider (to be completed by DHS)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Child/Youth Name:</strong> ____________________ <strong>DOB:</strong> ________________</td>
</tr>
<tr>
<td><strong>Street Address:</strong> ____________________ <strong>City:</strong> _______________ <strong>Zip code:</strong> _____________</td>
</tr>
<tr>
<td><strong>OrKids 7-digit Person Number:</strong> ________________ <strong>Birth Parent Zip code:</strong> _____________</td>
</tr>
<tr>
<td><strong>Currently in sub-care placement?</strong> ☐ Yes ☐ No If “No”, was youth in sub-care at least 180 days after age 14 and exited DHS sub-care after age 16? ☐ Yes ☐ No <strong>Gender:</strong> ☐ Male ☐ Female ☐ Other</td>
</tr>
<tr>
<td><strong>School:</strong> ____________________ <strong>Grade:</strong> _______ <strong>Not school-age</strong></td>
</tr>
<tr>
<td><strong>Academic Priority?</strong> ☐ Yes ☐ No <strong>IF High School Student, on track to graduate?</strong> ☐ Yes ☐ No</td>
</tr>
<tr>
<td><strong>Type of placement (check one):</strong> ☐ Family foster home ☐ Group home ☐ Relative ☐ Emergency Shelter ☐ Subsidy ☐ Other than Foster Care ☐ Independent ☐ Chafee Housing ☐ Residential (list facility): ____________________________</td>
</tr>
<tr>
<td><strong>Foster Parent(s):</strong> ____________________ <strong>Phone Number:</strong> ____________________</td>
</tr>
<tr>
<td><strong>Race/Ethnicity:</strong> ☐ African American ☐ Native American/Native Alaskan ☐ White ☐ African Immigrant/Refugee ☐ Eastern European Immigrant/Refugee ☐ Latino/Hispanic ☐ Asian ☐ Native Hawaiian/Pacific Islander ☐ Multiracial/Multiethnic</td>
</tr>
</tbody>
</table>

**DHS REQUEST FOR PCL-FUNDED SERVICES**

**Referral sent to (PCL-funded Program Name):** ____________________

**Services requested:** ____________________________________________________

**Caseworker Name:** ____________________ **Phone:** ________________ ext. ________

**Branch/Tribe:** ____________________ **Mailing Address:** ____________________

**Email:** ____________________ **Fax:** ____________________ **Supervisor:** ____________________

<table>
<thead>
<tr>
<th>2. PCL-FUNDED SERVICE PROVIDER REFERRAL OUTCOME (to be completed by PCL-funded Program)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Date Referral Received:</strong> _____________ <strong>Date Child Enrolled in PCL-funded Program:</strong> _____________</td>
</tr>
<tr>
<td><strong>If child/youth did not engage in services, list reason(s):</strong> ____________________________________________________</td>
</tr>
</tbody>
</table>
## Eligibility Verification for Portland Children’s Levy

### 3. DHS Caseworker/designee to complete for children referred by DHS to PCL-funded services:

<table>
<thead>
<tr>
<th>OrKids 7-digit Person Number: ______________________________</th>
<th>Date of Birth: ____________</th>
</tr>
</thead>
<tbody>
<tr>
<td>DHS Caseworker: __________________________________________</td>
<td></td>
</tr>
</tbody>
</table>

I approve the enrollment of this child/youth in the above PCL-funded program.  

- [ ] Yes  
- [ ] N/A

<table>
<thead>
<tr>
<th>DHS Caseworker/Designee Signature: __________________________</th>
</tr>
</thead>
<tbody>
<tr>
<td>If Designee signing, Designee's Name: ________________________</td>
</tr>
<tr>
<td>Date referred to PCL-funded services/determined eligible: ____________</td>
</tr>
</tbody>
</table>

### 4. PCL-funded Program to complete:

<table>
<thead>
<tr>
<th>Program Name: ______________________________</th>
<th>Program Contact: ____________________________</th>
</tr>
</thead>
</table>

Date child/youth enrolled in PCL-funded program: ____________

*Once complete, PCL-funded program to send Page 2 of the completed Referral form to Lisa Hansell at lisa.hansell@portlandoregon.gov.*

*Do not send page 1, it includes children’s names and other confidential information.*
Appendix E: Eligibility Verification Form

PCL PROGRAM ELIGIBILITY VERIFICATION
Portland Children’s Levy Funded Foster Care Services

Instructions:

PCL Funded foster care service providers complete section 1. Eligibility Verification Request for children/youth who are referred to services by a source other than DHS. Send form to: CAF-SDA2.PDXChildrensLevy@dhsoha.state.or.us

DHS staff complete sections 2 and 3 and return to PCL-funded program contact.

Complete instructions on pages 3 and 4.

<table>
<thead>
<tr>
<th>1. ELIGIBILITY VERIFICATION REQUEST (to be completed by PCL-funded Program)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Child/Youth Name: ____________________________________________ DOB: ____________________</td>
</tr>
<tr>
<td>PCL-funded Program Name: _____________________________________ Contact: ________________________</td>
</tr>
<tr>
<td>Phone: ________________ Fax: ________________ Email: _______________________________</td>
</tr>
<tr>
<td>Sent Eligibility Verification Request to: <a href="mailto:CAF-SDA2.PDXChildrensLevy@dhsoha.state.or.us">CAF-SDA2.PDXChildrensLevy@dhsoha.state.or.us</a> Date: ____________</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>2. DHS ELIGIBILITY DETERMINATION (to be completed by DHS)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Child/Youth is Determined Eligible ☐Yes ☐No Birth Parent Zip Code: ____________________</td>
</tr>
<tr>
<td>Name of Person Who Determined Eligibility: _________________ Phone: ______________________</td>
</tr>
<tr>
<td>DHS Approval to Enroll in PCL-Funded Service ☐Yes ☐No ☐N/A</td>
</tr>
<tr>
<td>If child/youth is determined eligible but DHS does not approve enrollment, list reason(s):</td>
</tr>
<tr>
<td></td>
</tr>
</tbody>
</table>

Please complete additional information on page 2
### Eligibility Verification for Portland Children’s Levy

#### 3. DHS Caseworker/designee to complete for children referred to PCL funded services by sources other than DHS and determined to be eligible by DHS:

<table>
<thead>
<tr>
<th>OrKids 7-digit Person Number</th>
<th>Date of Birth</th>
</tr>
</thead>
<tbody>
<tr>
<td>____________________________</td>
<td>______________</td>
</tr>
</tbody>
</table>

DHS Caseworker: __________________________________________________________

I approve the enrollment of this child/youth in the above PCL-funded program. □ Yes □ N/A

DHS Caseworker/Designee Signature: __________________________________________

If Designee signing, Designee’s Name: _________________________________________

Date referred to PCL-funded services/determined eligible: ________________

DHS Caseworker/designee to complete Items 2 and 3 on this form as appropriate and return to the PCL-funded program contact who requested eligibility verification. See additional instructions on page 4 of this form.

#### 4. PCL-funded Program to complete:

<table>
<thead>
<tr>
<th>Program Name</th>
<th>Program Contact</th>
</tr>
</thead>
<tbody>
<tr>
<td>______________</td>
<td>________________</td>
</tr>
</tbody>
</table>

Date child/youth enrolled in PCL-funded program: ________________

Once complete, PCL-funded program to send Page 2 of the completed Eligibility Verification form to Lisa Hansell at lisa.hansell@portlandoregon.gov.

Do not send page 1, it includes children’s names and other confidential information.