

Legislation Text

File #: 23-0481, Version: 1

Department: Juvenile Probation **Department Head/Elected Official:** Henry Gonzales

Regular or Supplemental RCA: Regular RCA **Type of Request:** Grant

Project ID (if applicable): Vendor/Entity Legal Name (if applicable):

MWDBE Contracted Goal (if applicable): MWDBE Current Participation (if applicable): Justification for 0% MWDBE Participation Goal: Choose an item.

Request Summary (Agenda Caption):

Request by Juvenile Probation for approval to accept from the Houston-Galveston Area Council (H-GAC) grant funds in the amount of \$18,000, with no required match, for the FY 2022-23 Regional Juvenile Mental Health Services Program.

Background and Discussion:

If accepted, HCJPD will utilize this grant funding for mental health assessments and/or therapy for juveniles referred to the department.

Expected Impact:

As a result of this grant, HCJPD staff will be able to provide the mental health services and assessments to assist HCJPD in appropriately managing cases and programs for youth with a mental health diagnosis.

Alternative Options:

There would be a severe delay in the assessments and treatments required to stabilize youth identified as having a mental health diagnosis.

Alignment with Goal(s):

- X Justice and Safety
- _ Economic Opportunity
- _ Housing
- _ Public Health
- _ Transportation

- _ Flooding
- _ Environment
- _ Governance and Customer Service

Prior Court Action (if any): N/A

Date	Agenda Item #	Action Taken

Location:

Address (if applicable): 1200 Congress, Houston, Texas 77002 Precinct(s): Countywide

Fiscal and Personnel Summary					
Service Name HGAC (Houston-Galveston Area Council) Mental Health Grant					
·	FY 23	FY 24	Next 3 FYs		
Incremental Expenditures (do NOT w	rite values in the	ousands or millions	s)		
Labor Expenditures	\$	\$	\$		
Non-Labor Expenditures	\$18,000	\$	\$		
Total Incremental Expenditures	\$18,000	\$	\$		
Funding Sources (do NOT write value	s in thousands o	r millions)	-		
Existing Budget					
Grant	\$	\$	\$		
Choose an item.	\$	\$	\$		
Choose an item.	\$	\$	\$		
Total Current Budget	\$	\$	\$		
Additional Budget Requested					
Grant	\$18,000	\$	\$		
Choose an item.	\$	\$	\$		
Choose an item.	\$	\$	\$		
Total Additional Budget Requested	\$18,000	\$	\$		
Total Funding Sources	\$18,000	\$	\$		
Personnel (Fill out section only if reques	ting new PCNs)	·			
Current Position Count for Service	-	-	-		
Additional Positions Requested	-	-	-		
Total Personnel	-	-	-		

Anticipated Court Date: 1/31/2023

Anticipated Implementation Date (if different from Court date):

Emergency/Disaster Recovery Note: Not an emergency, disaster, or COVID-19 related item

Contact(s) name, title, department: Kelly Barron, Special Projects, TAQA

Attachments (if applicable): Grant, Order