

ORDINANCE/RESOLUTION REQUEST
Please Submit to Mayor's Legislative Team by noon Wednesday to
Milehighordinance@denvergov.org

Please mark one: **Bill Request** or **Resolution Request**

1. In the past 12 months has your agency submitted this request?

Yes **No**

If yes, please explain:

2. Title: *(Include a one sentence description that clearly indicates the type of request – grant acceptance, contract execution, municipal code change, supplemental request, etc.)*

A Bill authorizing the acceptance of \$15,000 from the Colorado Foundation for Public Health and the Environment (CFPHE) funded by the National Institutes of Health.

3. Requesting Agency: Department of Human Services

4. Contact Person: *with actual knowledge of proposed ordinance*

- **Name: Nan Morehead**
- **Phone: 720-944-2857**
- **Email: nancy.morehead@denvergov.org**

5. Contact Person: *with actual knowledge of proposed ordinance who will present the item at Mayor Council and who will be available for first and second reading, if necessary*

- **Name: Nan Morehead**
- **Phone: 720-944-2857**
- **Email: nancy.morehead@denvergov.org**

6. General description of proposed ordinance including contract scope of work if applicable: The Colorado Foundation for Public Health and Environment has awarded the department \$15,000 to design and pilot interviews with maltreated youth with a history of foster care placement who are transitioning to adulthood. The Kempe Center and DHS will identify those factors that reduce health disparities and promote healthy outcomes for youth as well as evaluate the long-term effectiveness of a preventive intervention for preadolescent youth in foster care.

Please include the following:

a. Duration: 2010

b. Location: Department of Human Services

c. Affected Council District: Citywide

d. Benefits: This program will promote positive social development and acquisition of important life skills.

e. Costs: No costs are associated with this grant award

7. Is there any controversy surrounding this ordinance, groups or individuals who may have concerns about it? Please explain.

No

(Completed by Mayor's Office): **Ordinance Request Number:**

Date: