ORDINANCE/RESOLUTION REQUEST

Please email requests to the Mayor's Legislative Team

at MileHighOrdinance@DenverGov.org by 3:00pm on Monday.

All fields must be completed.

Incomplete request forms will be returned to sender which may cause a delay in processing.

						Date of Request:	Sept 18, 2012
Pl	ease mark one:	⊠ Bill Request	or		Resolution Reques	t	
1.	Has your agency s	submitted this request in	the last 1	2 mon	ths?		
	☐ Yes	⊠ No					
	If yes, please	explain:					
2.	Title: (Include a concise, one sentence description – please include <u>name of company or contractor</u> and <u>contract control number</u> - that clearly indicates the type of request: grant acceptance, contract execution, amendment, municipal code change, supplemental request, etc.) The Department of Safety is requesting an ordinance approving and providing for the extension of an agreement for \$854,799 from the federal Substance Abuse Mental Health Services Administration (SAMHSA) for DARTT services to Drug Court clients co-occurring substance abuse and mental health issues.						
3.	Requesting Agenc Depart	y: rtment of Safety					
4.	Contact Person: (With actual knowledge of proposed ordinance/resolution.) Name: Laura Wachter Phone: 720-913-6445 Email: Laura.wachter@denvergov.org						
5.	Contact Person: (With actual knowledge of proposed ordinance/resolution who will present the item at Mayor-Council and who will be available for first and second reading, if necessary.) Name: Regina Huerter Phone: 720-913-6606 Email: Regina.Huerter@denvergov.org						
6.	The Crime treatment The grant	on of proposed ordinance e Prevention and Control (services to persons with co- original time frame was the grant. We are asking fo	Commissiono-occurring pree years.	on receng ment	ived a SAMHSA gra tal health and substar 0/1/2009 –9/29/2012;	ant to provide high fidelith ace abuse issues enrolled \$284,933 annually and	in Denver Drug Court \$854,799 over the life
	** Please complete enter N/A for that f	the following fields: (Inc. ield.)	omplete fi	ields ma	ay result in a delay ir	n processing. If a field is	not applicable, please
	b. Durationsc. Locationsd. Affected 6e. Benefits:	Control Number: GC9: 10/1/2009 through 9/29/n/a Council District: All	2013	Gover	nment		
	7. Is there any controversy surrounding this ordinance? (Groups or individuals who may have concerns about it?) Please explain.						
	•	eve there are any issues su	ırrounding	g this a	greement.		
		To be	complete	d by Mo	ayor's Legislative Te	eam:	
SI	RE Tracking Number	·			Date l	Entered:	

Fund 12210	und 12210 Org 3501101		Project: S1109SAMHSA9-13	
Fund	Org	Project		
Account Number: 43	7700			
High Intensity wrap mental illness	around services for Drug Court clients with		T	
Prior Amount Amendment Amount	+,	2-Year Ext	Prior council action none	
Total Amount	\$854,799			
Term: FY 10/1/200	9 –9/29/2013;	Contract # :	GC93016 (1)	

- Contract extension through September 29, 2013
- Provision by the contractor to provide the following by entity:

Funds are to be used for operational costs and intervention/treatment services. All costs are based on 12 months.

Contract is sub contracted to MHCD provide High Intensity treatment services.

To be completed by Mayor's Legislative Team:			
SIRE Tracking Number:	Date Entered:		