

ORDINANCE/RESOLUTION REQUEST

Date of Request: August 7, 2015

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

1. Has your agency submitted this request in the last 12 months?

Yes **No**

If yes, please explain:

2. Title:

Authorizes an amended contract with Savio House Residential Child Care Facility, through contract number 2015-21827-01, for \$0.00 for a total amount of \$844,225 to provide placements and case management services to children in out-of-home care. This amendment adds a tiered rate structure for vendor payment.

Savio House Residential Child Care Facility
325 King Street
Denver, CO 80219

3. Requesting Agency: Denver Department of Human Services

4. Contact Person:

- **Name:** Ron Mitchell
- **Phone:** 720-944-2903
- **Email:** Ron.Mitchell@denvergov.org

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- **Name:** Ron Mitchell
- **Phone:** 720-944-2903
- **Email:** Ron.Mitchell@denvergov.org

6. General description of proposed ordinance including contract scope of work if applicable:

This ordinance request will authorize an amended contract with Savio House Residential Child Care Facility, through contract number 2015- 21827-01, for \$0.00 for a total amount of \$844,225 to provide placements and case management services to children in out-of-home care. This amendment adds a tiered rate structure into the budget.

The purpose of this contract is to improve outcomes for children and youth in placement and treatment services, improve matching of children with foster/group homes, decrease likelihood of children re-entering same or higher level of care, and return children to home or placement with relatives more quickly.

- a. Contract Control Number:** 2015-21827-01
- b. Duration:** 7/1/2015 – 6/30/2018
- c. Location:** Denver Department of Human Services
- d. Affected Council District:** All Districts
- e. Benefits:** Improved continuum of care for children and cost savings to department
- f. Costs:** \$844,225 (contract amount, this amendment adds no additional dollars).

7. Is there any controversy surrounding this ordinance? Please explain.

No

To be completed by Mayor's Legislative Team:

SIRE Tracking Number: _____

Date Entered: _____