



Grant Number: 1H79TI080488-01
FAIN: TI080488
Program Director: Kelsey Rivera

Project Title: Finding Home Project

Grantee Address	Business Address
MENDOCINO COUNTY HEALTH AND HUMAN SERVICES AGENCY Mendocino County Health and Human Services Agency 747 South State Street Ukiah, CA 954825815	Ms. Molgaard, Anne Mendocino County Health and Human Services Agency 747 South State Street Ukiah, CA 954825815

Budget Period: 09/30/2017 – 09/29/2018
Project Period: 09/30/2017 – 09/29/2022

Dear Grantee:

The Substance Abuse and Mental Health Services Administration hereby awards a grant in the amount of \$400,000 (see "Award Calculation" in Section I and "Terms and Conditions" in Section III) to MENDOCINO COUNTY HEALTH AND HUMAN SERVICES AGENCY in support of the above referenced project. This award is pursuant to the authority of Section 506 of the Public Health Service Act, as amended and is subject to the requirements of this statute and regulation and of other referenced, incorporated or attached terms and conditions.

Award recipients may access the SAMHSA website at www.samhsa.gov (click on "Grants" then SAMHSA Grants Management), which provides information relating to the Division of Payment Management System, HHS Division of Cost Allocation and Postaward Administration Requirements. Please use your grant number for reference.

Acceptance of this award including the "Terms and Conditions" is acknowledged by the grantee when funds are drawn down or otherwise obtained from the grant payment system.

If you have any questions about this award, please contact your Grants Management Specialist and your Government Project Officer listed in your terms and conditions.

Sincerely yours,
Eileen Bermudez
Grants Management Officer
Division of Grants Management

See additional information below

SECTION I – AWARD DATA – 1H79TI080488-01

Award Calculation (U.S. Dollars)

Salaries and Wages	\$88,417
Fringe Benefits	\$53,050
Personnel Costs (Subtotal)	\$141,467
Supplies	\$900
Consortium/Contractual Cost	\$198,830
Other	\$23,436
Direct Cost	\$364,633
Indirect Cost	\$35,367
Approved Budget	\$400,000
Federal Share	\$400,000
Cumulative Prior Awards for this Budget Period	\$0
AMOUNT OF THIS ACTION (FEDERAL SHARE)	\$400,000

SUMMARY TOTALS FOR ALL YEARS	
YR	AMOUNT
1	\$400,000
2	\$400,000
3	\$400,000
4	\$400,000
5	\$400,000

*Recommended future year total cost support, subject to the availability of funds and satisfactory progress of the project.

Fiscal Information:

CFDA Number: 93.243
EIN: 1946000520A4
Document Number: 17TI80488A
Fiscal Year: 2017

IC	CAN	Amount
TI	C96N215	\$400,000

IC	CAN	2017	2018	2019	2020	2021
TI	C96N215	\$400,000	\$400,000	\$400,000	\$400,000	\$400,000

TI Administrative Data:

PCC: GBHI / **OC:** 4145

SECTION II – PAYMENT/HOTLINE INFORMATION – 1H79TI080488-01

Payments under this award will be made available through the HHS Payment Management System (PMS). PMS is a centralized grants payment and cash management system, operated by the HHS Program Support Center (PSC), Division of Payment Management (DPM). Inquiries regarding payment should be directed to: The Division of Payment Management System, PO Box 6021, Rockville, MD 20852, Help Desk Support – Telephone Number: 1-877-614-5533.

The HHS Inspector General maintains a toll-free hotline for receiving information concerning fraud, waste, or abuse under grants and cooperative agreements. The telephone number is: 1-

800-HHS-TIPS (1-800-447-8477). The mailing address is: Office of Inspector General, Department of Health and Human Services, Attn: HOTLINE, 330 Independence Ave., SW, Washington, DC 20201.

SECTION III – TERMS AND CONDITIONS – 1H79TI080488-01

This award is based on the application submitted to, and as approved by, SAMHSA on the above-title project and is subject to the terms and conditions incorporated either directly or by reference in the following:

- a. The grant program legislation and program regulation cited in this Notice of Award.
- b. The restrictions on the expenditure of federal funds in appropriations acts to the extent those restrictions are pertinent to the award.
- c. 45 CFR Part 75 as applicable.
- d. The HHS Grants Policy Statement.
- e. This award notice, INCLUDING THE TERMS AND CONDITIONS CITED BELOW.

Treatment of Program Income:

Additional Costs

In accordance with the regulatory requirements provided at 45 CFR 75.113 and Appendix XII to 45 CFR Part 75, recipients that have currently active Federal grants, cooperative agreements, and procurement contracts with cumulative total value greater than \$10,000,000 must report and maintain information in the System for Award Management (SAM) about civil, criminal, and administrative proceedings in connection with the award or performance of a Federal award that reached final disposition within the most recent five-year period. The recipient must also make semiannual disclosures regarding such proceedings. Proceedings information will be made publicly available in the designated integrity and performance system (currently the Federal Awardee Performance and Integrity Information System (FAPIIS)). Full reporting requirements and procedures are found in Appendix XII to 45 CFR Part 75.

SECTION IV – TI Special Terms and Conditions – 1H79TI080488-01

REMARKS:

1. This Notice of Award (NoA) is issued to inform your organization that the application submitted through the Benefit of Homeless Individuals (Short Title: GBHI) funding opportunity T117-009 has been selected for funding.

This award reflects approval of the budget submitted April 25, 2017 as part of the application by your Organization.

2. Recipients are expected to plan their work to ensure that funds are expended within the 12-month budget period reflected on this Notice of Award. If activities proposed in the approved budget cannot be completed within the current budget period, SAMSHA cannot guarantee the approval of any request for carryover of remaining unobligated funding.

3. Register Program Director/Project Director (PD) in eRA Commons:

If you have not already done so, you must register the PD listed on the HHS Checklist in eRA Commons to assign a Commons ID. Once the PD has received their Commons ID, please send this information to your Grants Management Specialist. You can find additional information about the eRA Commons registration process at

https://era.nih.gov/reg_accounts/register_commons.cfm.

SPECIAL TERMS OF AWARD:

Disparity Impact Statement (DIS)

By **November 30, 2017** you must:

Submit an electronic copy of a disparity impact statement to the Government Project Officer (GPO) and Grants Management Specialist (GMS) as identified under Contacts on this notice of award.

The disparity impact statement should be consistent with information in your application regarding access, *service use and outcomes for the program and include three components as described below. Questions about the disparity impact statement should be directed to your GPO. Examples of disparity impact statements can be found on the SAMHSA website at

<http://www.samhsa.gov/grants/grants-management/disparity-impactstatement>.

**Service use is inclusive of treatment services, prevention services as well as outreach, engagement, training, and/or technical assistance activities.*

The disparity impact statement, in response to the Special Term of Award, consists of three components:

1. Proposed number of individuals to be served and/or reached by subpopulations in the grant implementation area should be provided in a table that covers the entire grant period. The disparate population(s) should be identified in a narrative that includes a description of the population and rationale for how the determination was made.
2. A quality improvement plan for how you will use your program (GPRA) data on access, use and outcomes to monitor and manage program outcomes by race, ethnicity and LGBT status, when possible. The quality improvement plan should include strategies for how processes and/or programmatic adjustments will support efforts to reduce disparities for the identified sub-populations.
3. The quality improvement plan should include methods for the development and implementation of policies and procedures to ensure adherence to the Enhanced Culturally and Linguistically Appropriate Services (CLAS) Standards and the provision of effective care and services that are responsive to:
 - a. Diverse cultural health beliefs and practices;
 - b. Preferred languages; and
 - c. Health literacy and other communication needs of all sub-populations within the proposed geographic region.

SPECIAL CONDITIONS OF AWARD:

NONE

STANDARD TERMS OF AWARD:

Refer to the following SAMHSA website for Standard Terms for All Awards for FY 2017: [Standard Terms and Conditions Webpage \(https://www.samhsa.gov/grants/grants-management/notice-award-noa/standard-terms-conditions\)](https://www.samhsa.gov/grants/grants-management/notice-award-noa/standard-terms-conditions). Please be sure to also reference the following Standard Terms:

* [Standard Terms and Conditions \(https://www.samhsa.gov/grants/grants-management/notice-award-noa/standard-terms-conditions\)](https://www.samhsa.gov/grants/grants-management/notice-award-noa/standard-terms-conditions),

* [New Grant \(https://www.samhsa.gov/sites/default/files/grants/fy-2017-new-award-standard-terms.pdf\)](https://www.samhsa.gov/sites/default/files/grants/fy-2017-new-award-standard-terms.pdf),

Key Staff

Key staff is listed below:

Kelsey Rivera, Project Director @ 10% level of effort

Unnamed Evaluator @ unspecified level of effort

Any changes in key staff including level of effort involving separation from the project for more than three months or a 25 percent reduction in time dedicated to the project, requires prior approval. Reference the Prior Approval Standard Term for additional information and instructions.

REPORTING REQUIREMENTS:

Programmatic Progress Reports

Submission of semi-annual Programmatic Progress Report is due no later than the dates as follows:

1st Report - April 30, 2018

2nd Report – October 30, 2018

**Please submit your Programmatic Progress Report to DGMPProgressReports@samhsa.gov and copy your Program Official. (DO NOT SUBMIT HARD COPIES)
Annual Federal Financial Report (FFR)**

The Federal Financial Report (FFR) (SF-425) is required on an annual basis and must be submitted no later than 90 days after the end of the budget period. The annual FFR should reflect only cumulative actual federal funds authorized and disbursed, any non-federal matching funds (if identified in the FOA), unliquidated obligations incurred, the unobligated balance of the federal funds for the award, as well as program income generated during the timeframe covered by the report. The SF-425 is available at (<http://apply07.grants.gov/apply/forms/sample/SF425-V1.0.pdf>). Additional guidance to complete the FFR can be found: <http://www.samhsa.gov/grants/grants-management/reporting-requirements>.

Annual FFRs must be submitted to the applicable email:

CSAT Grants CSATFFR@samhsa.gov

Failure to comply with the above stated terms and conditions may result in suspension, classification as Restriction status, termination of this award or denial of funding in the future.

All responses to special terms and conditions of award and post award requests may be electronically mailed to the Grants Management Specialist and to the Program Official as identified on your Notice of Award.

It is essential that the Grant Number be included in the SUBJECT line of the email.

CONTACTS:

Valerie Tarantino, Program Official

Phone: 240-276-1747 **Email:** Valerie.Tarantino@samhsa.hhs.gov

Elizabeth Carlini, Grants Specialist

Phone: (240) 276-0582 **Email:** elizabeth.carlini@samhsa.hhs.gov **Fax:** (240) 276-1430