



STATE OF VERMONT
JOINT FISCAL OFFICE

MEMORANDUM

To: Joint Fiscal Committee members
From: Sorsha Anderson, Staff Associate
Date: February 18, 2021
Subject: Expedited Grant Requests – JFO #3036 and #3037

Enclosed please find two (2) items, which the Joint Fiscal Office has received from the Administration. **The VT Dept of Mental Health has requested an expedited review of JFO #3037.** As the grants are inter-related, both should be considered together. **Please respond by Wednesday, February 24, 2021.**

JFO #3036 - \$3,800,000 to the VT Dept of Health from the Center for Disease Control and Prevention to increase and sustain the public health approach to suicide prevention. This grant includes funding for three (3) limited service positions. Two (2) positions in the Dept of Health: Public Health Programs Administrator and Public Health Analyst II. One (1) position in the Dept of Mental Health: Marketing and Outreach Coordinator. Grant amount is \$760,000 per year for 5 years.

[JFO received 2/16/2021]

JFO #3037 - \$135,000 to the VT Dept of Mental Health from Vibrant Emotional Health for the development of the 988-implementation plan to ensure compliance with the federal mandate for universal access to suicide and prevention services by July 16, 2022. ***[Note: One (1) limited service position is included within JFO #3036].***

[JFO received 2/16/2021]

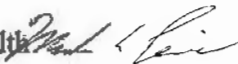
Please review the enclosed materials and notify the Joint Fiscal Office (Sorsha Anderson: sanderson@leg.state.vt.us) if you have questions or would like this item held for legislative review. If no response has been received by Wednesday, February 24, 2021, members will be polled.

**Department of Health
Business Office**
108 Cherry Street – PO Box 70
Burlington, VT 05402-0070
HealthVermont.gov

[phone] 802-863-7736

Agency of Human Services

MEMORANDUM

To: Michael K. Smith, Secretary of Human Services
From: Mark Levine, MD, Commissioner of Health 
Re: Request for Grant Acceptance of Comprehensive Suicide Prevention
Date: 11/24/2020

I am pleased to report that the Department of Health has received a grant for Comprehensive Suicide Prevention from the Centers for Disease Control and Prevention (CDC) for the project called Vermont Addressing Suicide Together (VAST). This grant amount is \$760,000 per year and has a project period of five years from 09/01/2020 - 08/31/2025.

The purpose of this federal grant award is to provide funds for the Department of Health to increase and sustain the capacity of a coordinated statewide public health approach to suicide prevention, and to reduce the morbidity and mortality rate of Vermonters due to suicide and self-directed violence. The rate of Vermont deaths due to suicide has increased 89% from 1999 to 2018. Over the past decade, Vermont has had consistently higher rates of suicide related morbidity and mortality than the US average.

For this five-year project, the Department of Health will collaborate with the Department of Mental Health. The Department of Health is the federal grantee, and Department of Mental Health costs will be funded through this grant. The project will require three new limited service positions, two at Health and one at Mental Health. Funding for all positions is included in the first year grant award and is expected to continue for the full five-year project period.

Please find enclosed a Grant Acceptance Request (AA-1) and Limited Service Position Requests for your review and approval.

Cc: Sarah Clark, AHS Chief Financial Officer





State of Vermont
 Department of Finance & Management
 109 State Street, Pavilion Building
 Montpelier, VT 05620-0401

[phone] 802-828-2376
 [fax] 802-828-2428

Agency of Administration

STATE OF VERMONT FINANCE & MANAGEMENT GRANT REVIEW FORM				
Grant Summary:		Vermont Addressing Suicide Together (VAST)		
Date:		[REDACTED] 12/11/2020		
Department:		Agency of Human Services – Department of Health		
Legal Title of Grant:		Comprehensive Suicide Prevention		
Federal Catalog #:		93.136		
Grant/Donor Name and Address:		Centers for Disease Control and Prevention 1600 Clifton Road Atlanta, GA 30329		
Grant Period:		From:	To:	
		09/01/2020	08/31/2025	
Grant/Donation		\$760,000/year for 5 years		
	SFY 21	SFY 22	SFY 23	Comments
Grant Amount	\$380,000	\$760,000	\$760,000	Remaining amounts to be spent in SFY24-SFY25.
Position Information		# Positions	Explanations/Comments	
		3		
Additional Comments		See attached grant summary. Note: The AA-1 and requested budget have \$5K more in travel and \$5K less in contractual costs than the approved NOA. The AA-1 is correct and the CDC has been notified of the needed NOA revision.		

Department of Finance & Management	Adam Greshin <small>Digitally signed by Adam Greshin Date: 2021.01.20 07:57:45 -05'00'</small>	
Secretary of Administration	Kristin Clouser <small>Digitally signed by Kristin Clouser Date: 2021.01.20 13:19:03 -05'00'</small>	
Sent to Joint Fiscal Office	Ariel Murphy <small>Digitally signed by Ariel Murphy Date: 2021.02.12 18:06:18 -05'00'</small>	

(Initial)

(Initial)

Date



Vermont Addressing Suicide Together (VAST) Project Grant Summary

The Department of Health has received a grant for Comprehensive Suicide Prevention from the Centers for Disease Control and Prevention (CDC) for the project called Vermont Addressing Suicide Together (VAST). This grant amount is \$760,000 per year and has a project period of five years from 09/01/2020 - 08/31/2025.

The purpose of this federal grant award is to provide funds for the Department of Health to increase and sustain the capacity of a coordinated statewide public health approach to suicide prevention, and to reduce the morbidity and mortality rate of Vermonters due to suicide and self-directed violence. The rate of Vermont deaths due to suicide has increased 89% from 1999 to 2018. Over the past decade, Vermont has had consistently higher rates of suicide related morbidity and mortality than the US average.

For this five-year project, the Department of Health will collaborate with the Department of Mental Health. The Department of Health is the federal grantee, and Department of Mental Health costs will be funded through this grant. The project will require new limited service positions in Health and Mental Health: a Public Health Programs Administrator AC: General and a Public Health Analyst II in the Department of Health; and a Marketing and Outreach Coordinator in the Department of Mental Health. A limited service position request is included.

A main goal of the grant is to reduce suicide related outcomes among Vermonters, particularly those in rural areas between the ages of 15 and 64 by at least 10%. To effectively reduce morbidity and mortality rates, we will make use of multi-sectoral partnerships, data analysis and rapid dissemination, and targeted prevention programming. VAST will target sub-populations that experience a high rate of suicide related outcomes, including: people who identify as LGBT, people with disabilities, men who are middle-aged, and members of Abenaki tribes.

The project objectives of this funding are to:

- Create and implement a coordinated multi-sectoral statewide suicide prevention plan using a public health approach.
- Increase the amount of data-driven suicide prevention activities.
- Increase awareness of suicide prevention strategies.
- Enhance existing suicide prevention programs in the state by identifying prevention gaps and opportunities.
- Create protective environments by supporting evidence-based, community-based interventions.
- Increase implementation of Zero Suicide strategies and tools, specifically in rural areas.
- Develop, implement, and evaluate a communication and dissemination plan for stakeholders.

STATE OF VERMONT REQUEST FOR GRANT (*) ACCEPTANCE (Form AA-1)

BASIC GRANT INFORMATION				
1. Agency:	Agency of Human Services			
2. Department:	Department of Health			
3. Program:	Vermont Addressing Suicide Together (VAST)			
4. Legal Title of Grant:	Comprehensive Suicide Prevention			
5. Federal Catalog #:	93.136			
6. Grant/Donor Name and Address:	Centers for Disease Control and Prevention 1600 Clifton Road Atlanta, GA 30329			
7. Grant Period:	From:	09/01/2020	To:	08/31/2025
8. Purpose of Grant:	Federal funds to increase and sustain the capacity of a coordinated statewide public health approach to suicide prevention, and to reduce the suicide and self-directed violence morbidity and mortality rate of Vermonters.			
9. Impact on existing program if grant is not Accepted:	None			
10. BUDGET INFORMATION				
	SFY 21	SFY 22	SFY 23	Comments
Expenditures:				
Personal Services	\$146,943	\$293,886	\$293,886	
Operating Expenses	\$23,487	\$46,974	\$46,974	
Grants	\$209,570	\$419,140	\$419,140	
Total	\$380,000	\$760,000	\$760,000	
Revenues:				
State Funds:	\$0	\$0	\$0	
Cash	\$0	\$0	\$0	
In-Kind	\$0	\$0	\$0	
Federal Funds:	\$380,000	\$760,000	\$760,000	
(Direct Costs)	\$329,446	\$658,892	\$658,892	
(Indirect Costs)	\$50,554	\$101,108	\$101,108	
Other Funds:	\$0	\$0	\$0	
	\$0	\$0	\$0	
Total	\$380,000	\$760,000	\$760,000	
Appropriation No:	3420010000	Amount:	\$20,275	
	3420021100		\$335,726	
	3150070400		\$23,999	
		Total	\$380,000	
Has current fiscal year budget detail been entered into Vantage? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
PERSONAL SERVICE INFORMATION				

STATE OF VERMONT REQUEST FOR GRANT (*) ACCEPTANCE (Form AA-1)

11. Will monies from this grant be used to fund one or more Personal Service Contracts? Yes No
 If "Yes", appointing authority must initial here to indicate intent to follow current competitive bidding process/policy.

Appointing Authority Name: Mark Levine, MD Agreed by: MAL (initial)

12. Limited Service Position Information:	# Positions	Title
	1	Public Health Program Administrator AC: General
	1	Public Health Analyst II
	1	Marketing and Outreach Coordinator
Total Positions	3	

12a. Equipment and space for these positions: Is presently available. Can be obtained with available funds.

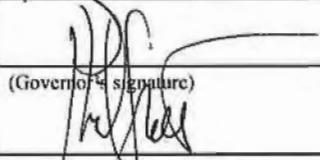
13. AUTHORIZATION AGENCY/DEPARTMENT

I/we certify that no funds beyond basic application preparation and filing costs have been expended or committed in anticipation of Joint Fiscal Committee approval of this grant, unless previous notification was made on Form AA-1PN (if applicable):	Signature: <i>Tracy Dolan</i>	Date: 11/24/2020
	Title: Deputy Commissioner	
	Signature: E-SIGNED by Jenney Samuelson on 2020-12-08 18:04:14 GMT	Date:
	Title: Deputy Secretary	

14. SECRETARY OF ADMINISTRATION

<input checked="" type="checkbox"/>	Approved:	(Secretary or designee signature) Kristin Clouser <small>Digitally signed by Kristin Clouser Date: 2021.01.20 13:19:38 -05'00'</small>	Date:
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15. ACTION BY GOVERNOR

<input checked="" type="checkbox"/>	Check One Box: Accepted	 (Governor's signature)	Date: 2/12/21
<input type="checkbox"/>	Rejected		

16. DOCUMENTATION REQUIRED

Required GRANT Documentation

<input checked="" type="checkbox"/> Request Memo <input type="checkbox"/> Dept. project approval (if applicable) <input checked="" type="checkbox"/> Notice of Award <input type="checkbox"/> Grant Agreement <input checked="" type="checkbox"/> Grant Budget	<input type="checkbox"/> Notice of Donation (if any) <input type="checkbox"/> Grant (Project) Timeline (if applicable) <input type="checkbox"/> Request for Extension (if applicable) <input type="checkbox"/> Form AA-1PN attached (if applicable)
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End Form AA-1

(*) The term "grant" refers to any grant, gift, loan, or any sum of money or thing of value to be accepted by any agency, department, commission, board, or other part of state government (see 32 V.S.A. §5).

Request for Classification Action
New or Vacant Positions
EXISTING Job Class/Title ONLY
Position Description Form C/Notice of Action
For Department of Personnel Use Only

Notice of Action # _____		Date Received (Stamp)
Action Taken: _____		
New Job Title _____		
Current Class Code _____	New Class Code _____	
Current Pay Grade _____	New Pay Grade _____	
Current Mgt Level _____ B/U _____ OT Cat. _____ EEO Cat. _____ FLSA _____		
New Mgt Level _____ B/U _____ OT Cat. _____ EEO Cat. _____ FLSA _____		
Classification Analyst _____	Date _____	Effective Date: _____
Comments: _____		Date Processed: _____
Willis Rating/Components:	Knowledge & Skills: _____	Mental Demands: _____
	Working Conditions: _____	Accountability: _____
	Total: _____	

Position Information:

Incumbent: **Vacant or New Position**

Position Number: Current Job/Class Title: Public Health Programs Administrator AC: General

Agency/Department/Unit: Human Services/Health/DEPRIP GUC:

Pay Group: W40 Work Station: Burlington Zip Code: 05401

Position Type: Permanent Limited Service (end date) 08/31/2025

Funding Source: Core Sponsored Partnership. For Partnership positions provide the funding breakdown (% General Fund, % Federal, etc.) 100% Federal

Supervisor's Name, Title and Phone Number: Stephanie Busch, Public Health Programs Administrator AC,
8023630091

Check the type of request (new or vacant position) and complete the appropriate section.

New Position(s):

a. **REQUIRED:** Allocation requested: Existing Class Code 444900 Existing Job/Class Title:
Public Health Programs Administrator AC: General

b. Position authorized by:

- Joint Fiscal Office – JFO # Approval Date:
- Legislature – Provide statutory citation (e.g. Act XX, Section XXX(x), XXXX session)
- Other (explain) -- Provide statutory citation if appropriate.

Vacant Position:

- a. Position Number:
- b. Date position became vacant:
- c. Current Job/Class Code: Current Job/Class Title:
- d. REQUIRED: Requested (existing) Job/Class Code: Requested (existing) Job/Class Title:
- e. Are there any other changes to this position; for example: change of supervisor, GUC, work station? Yes No If Yes, please provide detailed information:

For All Requests:

1. List the anticipated job duties and expectations; include all major job duties: Planning, administrative and policy development work at a professional level for the Department of Health involving implementation of comprehensive public health approach to suicide prevention program. This position will work as the project manager to promote development of local health care delivery systems to address suicide prevention as a public health issue as required by the Centers for Disease Control and Prevention (CDC) for the Comprehensive Suicide Prevention Grant (Vermont Addressing Suicide Together (VAST)). Duties include planning, program development, evaluation, and grant administration focused on suicide and self-harm. Supervision of multiple contractors is required. They will work in partnership with other divisions as well as a broad range of local, regional, state and federal stakeholders. Significant work on system development to create partnerships, establish lasting processes and policies, and shift practices beyond the timeline of the federal project. This position will work with the VAST epidemiologist, grant team and key stakeholders to provide oversight of the grant program. They will share key programmatic findings through meetings, presentations, and reports to key stakeholders and organizations working to prevent suicide in Vermont. They will participate in monthly grant required calls, webinars, and will complete other tasks as required.
2. Provide a brief justification/explanation of this request: VDH/DEPRIP was recently awarded a CDC grant from the National Center on Injury Prevention and Control for suicide prevention - Vermont Addressing Suicide Together (VAST). The grant requires a full-time program manager to work on the grant to analyze and disseminate surveillance data on suicide and self-harm. The work necessary under this grant cannot be undertaken by current staff in addition to their regular duties. Currently, VDH does not have a program manager who can oversee this grant or accomplish the work of this grant. The work required by the new grant requires a high level of knowledge and experience in public health and mental health, and requires the program management skills of a Public Health Programs Administrator.
3. If the position will be supervisory, please list the names and titles of all classified employees reporting to this position (this information should be identified on the organizational chart as well). N/A

Personnel Administrator's Section:

4. If the requested class title is part of a job series or career ladder, will the position be recruited at different levels? Yes No

5. The name and title of the person who completed this form: Trishia Brooks, HR Administrator

6. Who should be contacted if there are questions about this position (provide name and phone number):
Stephanie Busch 802.363.0091

7. How many other positions are allocated to the requested class title in the department:

8. Will this change (new position added/change to vacant position) affect other positions within the organization? (For example, will this have an impact on the supervisor's management level designation; will duties be shifted within the unit requiring review of other positions; or are there other issues relevant to the classification process.)

Attachments:


- Organizational charts are **required** and must indicate where the position reports.
- Class specification (optional).
- For new positions, include copies of the language authorizing the position, or any other information that would help us better understand the program, the need for the position, etc.
- Other supporting documentation such as memos regarding department reorganization, or further explanation regarding the need to reallocate a vacancy (if appropriate).

Trishia Brooks

Personnel Administrator's Signature (**required**)*

11/16/2020


Date


E-SIGNED by Stephanie Busch
on 2020-11-16 11:42:15 EST

Supervisor's Signature (**required**)*

November 16, 2020

Date


E-SIGNED by Tracy Dolan
on 2020-11-16 14:21:30 EST

Appointing Authority or Authorized Representative Signature (**required**)*

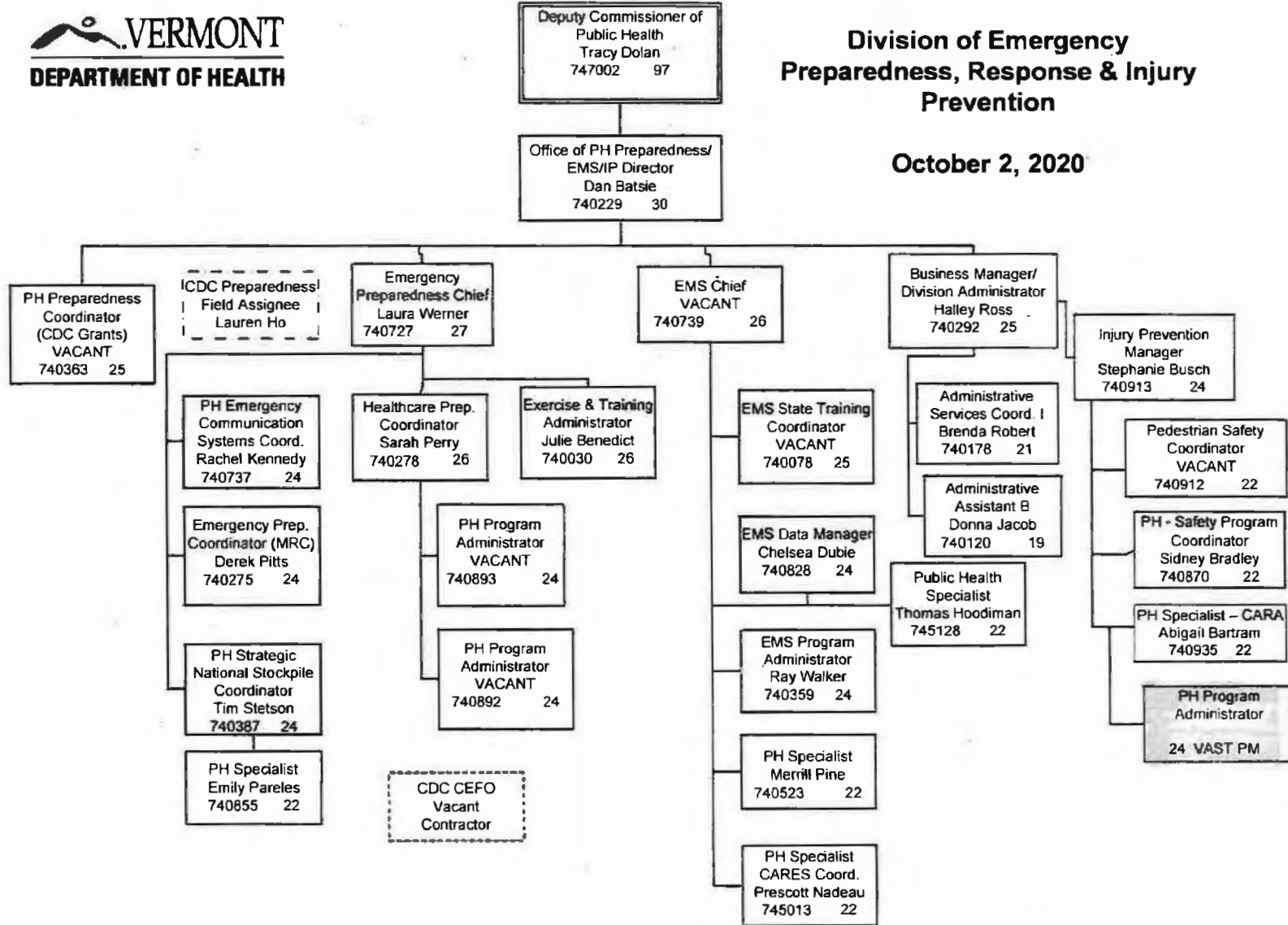
November 16, 2020

Date

* Note: Attach additional information or comments if appropriate.

**Division of Emergency
Preparedness, Response & Injury
Prevention**

October 2, 2020



**Request for Classification Action
New or Vacant Positions
EXISTING Job Class/Title ONLY
Position Description Form C/Notice of Action
For Department of Personnel Use Only**

Notice of Action # _____		Date Received (Stamp)
Action Taken: _____		
New Job Title _____		
Current Class Code _____	New Class Code _____	
Current Pay Grade _____	New Pay Grade _____	
Current Mgt Level _____ B/U _____ OT Cat. _____ EEO Cat. _____ FLSA _____		
New Mgt Level _____ B/U _____ OT Cat. _____ EEO Cat. _____ FLSA _____		
Classification Analyst _____	Date _____	Effective Date: _____
Comments: _____		Date Processed: _____
Willis Rating/Components:	Knowledge & Skills: _____	Mental Demands: _____
	Working Conditions: _____	Accountability: _____
	Total: _____	

Position Information:

Incumbent: **Vacant or New Position**

Position Number: Current Job/Class Title: Public Health Analyst II

Agency/Department/Unit: Human Services/Health/Health Surveillance/Public Health Statistics/REE

GUC: 74306

Pay Group: W40 Work Station: Burlington Zip Code: 05401

Position Type: Permanent Limited Service (end date) 08/31/2025

Funding Source: Core Sponsored Partnership. For Partnership positions provide the funding breakdown (% General Fund, % Federal, etc.) 100% Federal

Supervisor's Name, Title and Phone Number: Mallory Staskus, Public Health Analyst III, 802-651-1516

Check the type of request (new or vacant position) and complete the appropriate section.

New Position(s):

a. **REQUIRED:** Allocation requested: Existing Class Code 027200 Existing Job/Class Title: Public Health Analyst II

b. Position authorized by:

- Joint Fiscal Office – JFO # Approval Date:
- Legislature – Provide statutory citation (e.g. Act XX, Section XXX(x), XXXX session)
- Other (explain) -- Provide statutory citation if appropriate.

Vacant Position:

- a. Position Number:
- b. Date position became vacant:
- c. Current Job/Class Code: Current Job/Class Title:
- d. REQUIRED: Requested (existing) Job/Class Code: Requested (existing) Job/Class Title:
- e. Are there any other changes to this position; for example: change of supervisor, GUC, work station? Yes No If Yes, please provide detailed information:

For All Requests:

1. List the anticipated job duties and expectations; include all major job duties: Analysis and reporting on data as required by the Centers for Disease Control and Prevention (CDC) for the Comprehensive Suicide Prevention Grant (Vermont Addressing Suicide Together (VAST)). Utilize known data sources, statistical and epidemiological methods to analyze data. Identify, create and disseminate data products to be used by statewide and local suicide prevention partners. Work with the VAST Program Manager and key stakeholders to provide and explain Vermont data related to suicide and self-harm. Assist with evaluation of programs intended to prevent suicide and self-harm. Work with key data collection partners such as the Vermont Violent Death Reporting System, law enforcement and assistant medical examiners to improve data collected about suicide and self-harm. Share key findings through meetings, presentations, reports and data briefs to key stakeholders and organizations working to prevent suicide in Vermont. Participate in monthly grant required calls, associated webinars and complete other tasks as required.

2. Provide a brief justification/explanation of this request: VDH/DEPRIP was recently awarded a CDC grant from the National Center on Injury Prevention and Control for suicide prevention - Vermont Addressing Suicide Together (VAST). The grant requires a full-time epidemiologist to work on the grant to analyze and disseminate surveillance data on suicide and self-harm. The work necessary under this grant cannot be undertaken by current staff in addition to their regular duties. Currently, VDH does not have an analyst who can produce the data needed to accomplish the work of this grant. The work required by the new grant is statistically advanced and requires the attention of a Public Health Analyst II.

3. If the position will be supervisory, please list the names and titles of all classified employees reporting to this position (this information should be identified on the organizational chart as well). N/A

Personnel Administrator's Section:

4. If the requested class title is part of a job series or career ladder, will the position be recruited at different levels? Yes No

5. The name and title of the person who completed this form: Trishia Brooks, HR Administrator

6. Who should be contacted if there are questions about this position (provide name and phone number):
Mallory Staskus, 802-651-1516 or Jennifer Hicks 802-863-7264

7. How many other positions are allocated to the requested class title in the department: 13 14

8. Will this change (new position added/change to vacant position) affect other positions within the organization? (For example, will this have an impact on the supervisor's management level designation; will duties be shifted within the unit requiring review of other positions; or are there other issues relevant to the classification process.) No

Attachments:

- Organizational charts are **required** and must indicate where the position reports.
- Class specification (optional).
- For new positions, include copies of the language authorizing the position, or any other information that would help us better understand the program, the need for the position, etc.
- Other supporting documentation such as memos regarding department reorganization, or further explanation regarding the need to reallocate a vacancy (if appropriate).

Trishia Brooks

Personnel Administrator's Signature (**required**)*

11/16/2020

Date

E-SIGNED by Mallory Staskus
on 2020-11-16 11:38:52 EST

Supervisor's Signature (**required**)*

November 16, 2020

Date

E-SIGNED by Tracy Dolan
on 2020-11-16 13:29:07 EST

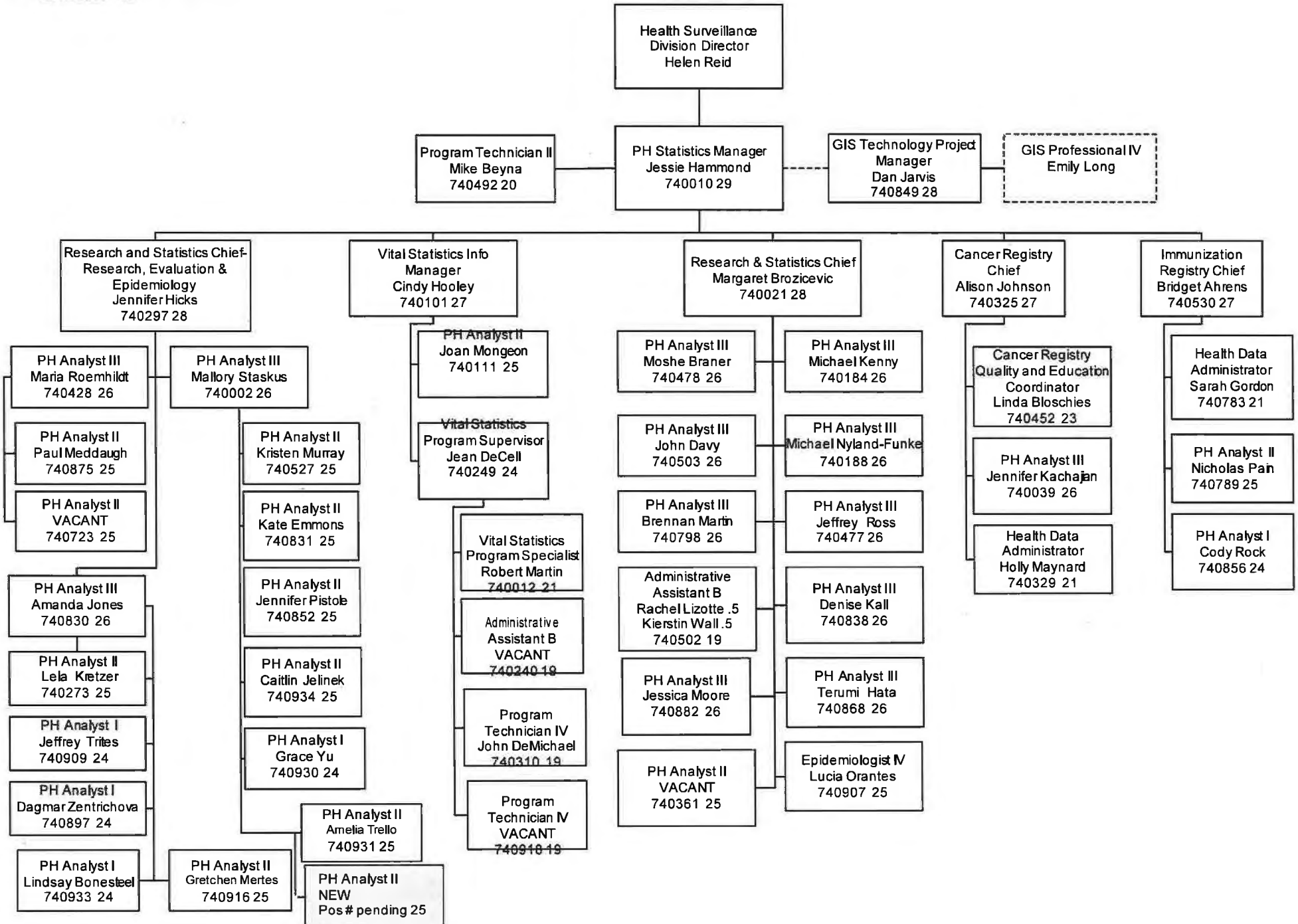
November 16, 2020

Appointing Authority or Authorized Representative Signature (**required**)*

Date

* Note: Attach additional information or comments if appropriate.

August 1, 2020



**Request for Classification Action
New or Vacant Positions
EXISTING Job Class/Title ONLY
Position Description Form C/Notice of Action
For Department of Personnel Use Only**

Notice of Action # _____	Date Received (Stamp)
Action Taken: _____	
New Job Title _____	
Current Class Code _____	New Class Code _____
Current Pay Grade _____	New Pay Grade _____
Current Mgt Level _____ B/U _____ OT Cat. _____ EEO Cat. _____ FLSA _____	
New Mgt Level _____ B/U _____ OT Cat. _____ EEO Cat. _____ FLSA _____	
Classification Analyst _____	Date _____
Comments:	Effective Date: _____
	Date Processed: _____
Willis Rating/Components: Knowledge & Skills: _____ Mental Demands: _____ Accountability: _____	
Working Conditions: _____ Total: _____	

Position Information:

Incumbent: **Vacant or New Position**

Position Number: Current Job/Class Title: Marketing and Outreach Coordinator

Agency/Department/Unit: Agency Human Services/Mental Health/ GUC:

Pay Group: W40 Work Station: Waterbury Zip Code: 05476

Position Type: Permanent Limited Service (end date) 08/31/2025

Funding Source: Core Sponsored Partnership. For Partnership positions provide the funding breakdown (% General Fund, % Federal, etc.) 100% Federal; 0.5 FTE position

Supervisor's Name, Title and Phone Number: Cheryle Wilcox , Interim Policy Director, 802-760-9171

Check the type of request (new or vacant position) and complete the appropriate section.

New Position(s):

- REQUIRED: Allocation requested: Existing Class Code 469700 Existing Job/Class Title: Marketing and Outreach Coordinator
- Position authorized by:

- Joint Fiscal Office – JFO # Approval Date:
- Legislature – Provide statutory citation (e.g. Act XX, Section XXX(x), XXXX session)
- Other (explain) -- Provide statutory citation if appropriate.

Vacant Position:

- a. Position Number:
- b. Date position became vacant:
- c. Current Job/Class Code: Current Job/Class Title:
- d. REQUIRED: Requested (existing) Job/Class Code: Requested (existing) Job/Class Title:
- e. Are there any other changes to this position; for example: change of supervisor, GUC, work station? Yes No If Yes, please provide detailed information:

For All Requests:

1. List the anticipated job duties and expectations; include all major job duties: Planning, coordination, and advisory work at a professional level for the Department of Mental Health involving public education/outreach, marketing, and media relations. Specifically, this position will work towards the implementation of comprehensive approach to suicide prevention and promote development of local health care delivery systems to address suicide prevention as a public health issue as required by the Centers for Disease Control and Prevention (CDC) for the Comprehensive Suicide Prevention Grant (Vermont Addressing Suicide Together (VAST)). The primary purpose of this position is to work with the Vermont Department of Health's VAST grant team and stakeholders. This position will provide the grant team with timely and accurate information about the grant programs, services, and resources using a variety of means and formats to accommodate their diverse needs. They will ensure communications between Departments are well coordinated, effectively delivered, cost effective, and responsive to the needs of the grant and stakeholders. They will participate in monthly grant required calls, associated webinars, and complete other tasks as required.
2. Examples of Work: Plans, develops, manages, and evaluates communications, marketing, and public outreach/education plans to support strategic objectives and targeted outcomes for the grant. Plans, develops, and implements PSA campaigns and media buys to reach intended target audiences as determined by the overall grant team to meet the needs of the Comprehensive Suicide Prevention Grant (Vermont Addressing Suicide Together (VAST)). Writes, edits, designs, and produces the VAST grant's outreach and education materials and ensures materials adhere to the Department's common look and feel standards and the State's brand standards, are written in plain language, and are accessible to our consumers. Advises the VAST grant team on matters related to media strategies and coordinates grant press releases. Serves as an advisor to Agency or Department heads on media and communications strategies. Performs related duties as required.

2. Provide a brief justification/explanation of this request: VDH/DMH was recently awarded a CDC grant from the National Center on Injury Prevention and Control for suicide prevention - Vermont Addressing Suicide

Together (VAST). The grant requires a 0.5 FTE Communications position to work on the grant to develop and promote effective suicide prevention messaging. DMH does not have a communications position currently, and the work necessary under this grant can not be undertaken by current staff, in addition to their regular duties. The work required by the new grant requires experience in public health messaging, and effective communications knowledge in mental health, suicide prevention, or a related field.

3. If the position will be supervisory, please list the names and titles of all classified employees reporting to this position (this information should be identified on the organizational chart as well). N/A

Personnel Administrator's Section:

4. If the requested class title is part of a job series or career ladder, will the position be recruited at different levels? Yes No

5. The name and title of the person who completed this form:

6. Who should be contacted if there are questions about this position (provide name and phone number):

7. How many other positions are allocated to the requested class title in the department:

8. Will this change (new position added/change to vacant position) affect other positions within the organization? (For example, will this have an impact on the supervisor's management level designation; will duties be shifted within the unit requiring review of other positions; or are there other issues relevant to the classification process.)

Attachments:

Organizational charts are required and must indicate where the position reports.

Class specification (optional).

For new positions, include copies of the language authorizing the position, or any other information that would help us better understand the program, the need for the position, etc.

Other supporting documentation such as memos regarding department reorganization, or further explanation regarding the need to reallocate a vacancy (if appropriate).

Tammie Ellison

Personnel Administrator's Signature (required)*

11/9/20

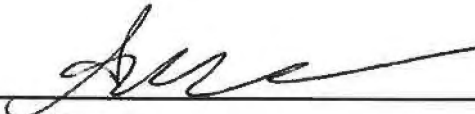
Date

Cheryle Bilodeau Wilcox

Digitally signed by Cheryle Bilodeau
Wilcox
Date: 2020.11.05 14:13:09 -05'00'

Supervisor's Signature (required)*

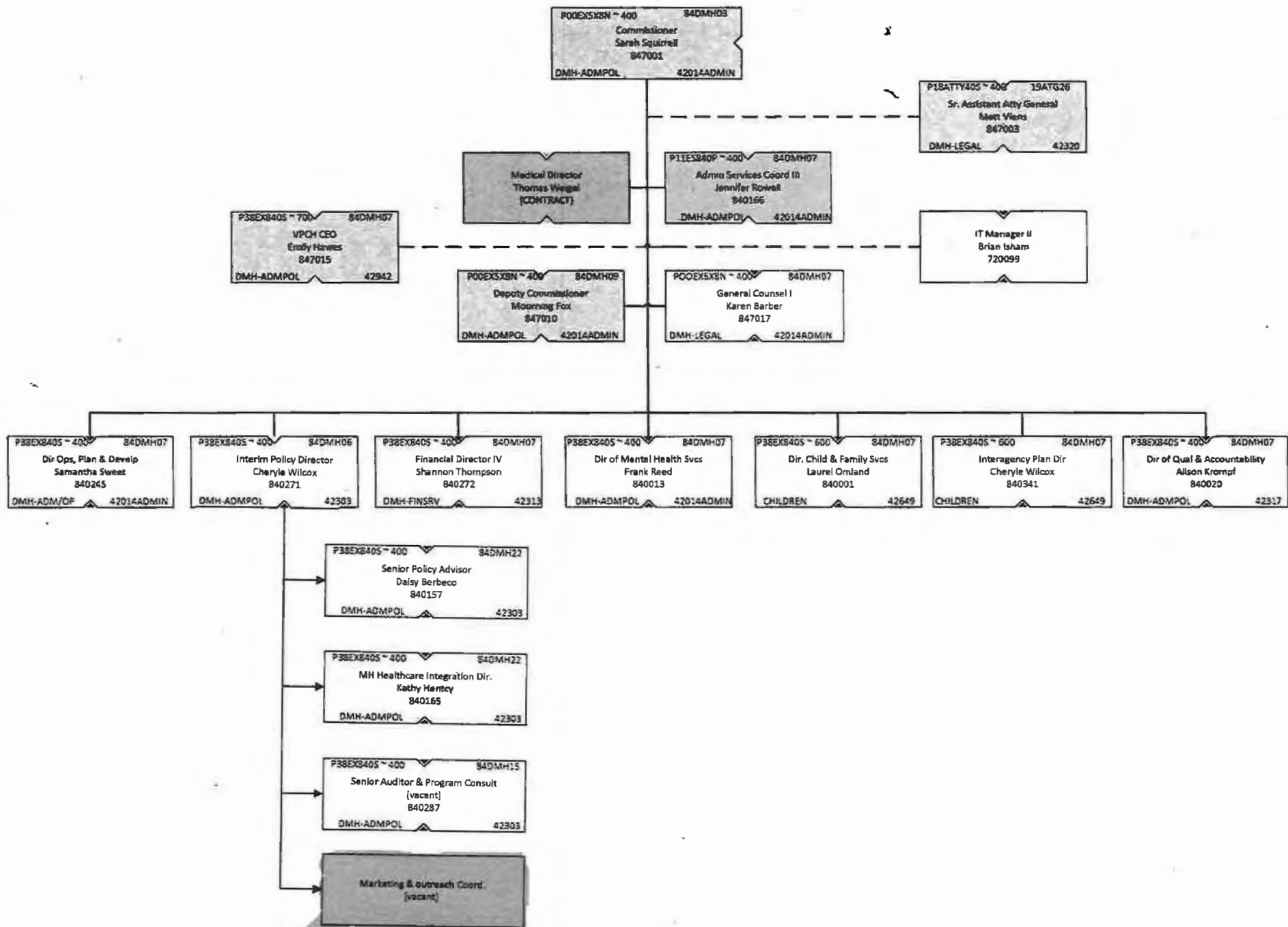
Date



Appointing Authority or Authorized Representative Signature (required)*

11/6/20
Date

* Note: Attach additional information or comments if appropriate.



**STATE OF VERMONT
Joint Fiscal Committee Review
Limited Service - Grant Funded
Position Request Form**

This form is to be used by agencies and departments when additional grant funded positions are being requested. Review and approval by the Department of Human Resources must be obtained prior to review by the Department of Finance and Management. The Department of Finance will forward requests to the Joint Fiscal Office for JFC review. A Request for Classification Review Form (RFR) and an updated organizational chart showing to whom the new position(s) would report must be attached to this form. Please attach additional pages as necessary to provide enough detail.

Agency/Department: Agency of Human Services / Department of Health Date: 11/24/20

Name and Phone (of the person completing this request): Paul Daley (802) 863-7284

Request is for:

- Positions funded and attached to a new grant.
- Positions funded and attached to an existing grant approved by JFO # _____

1. Name of Granting Agency, Title of Grant, Grant Funding Detail (attach grant documents):
 CDC, Comprehensive Suicide Prevention: Vermont Addressing Suicide Together (VAST), 1 NU50CE002594-01-00

2. List below titles, number of positions in each title, program area, and limited service end date (information should be based on grant award and should match information provided on the RFR) position(s) will be established only after JFC final approval:

<u>Title* of Position(s) Requested</u>	<u># of Positions</u>	<u>Division/Program</u>	<u>Grant Funding Period/Anticipated End Date</u>
Public Health Programs Administrator AC: General	1 (1.0 FTE)	DEPRIP	09/01/2020 - 08/31/2025
Public Health Analyst II	1 (1.0 FTE)	Health Surveillance	09/01/2020 - 08/31/2025

*Final determination of title and pay grade to be made by the Department of Human Resources Classification Division upon submission and review of Request for Classification Review.

3. Justification for this request as an essential grant program need:

These positions were required for all recipients of this CDC grant. They will both be supporting the essential need of suicide prevention in Vermont. The Public Health Programs Administrator will implement programs to address suicide prevention as a public health crisis at the local level. The Public Health Analyst will provide advanced statistical epidemiology skills to develop suicide prevention data that will influence policy decisions. These positions will be full-time and entirely federally funded at 1.0 FTE each.

I certify that this information is correct and that necessary funding, space and equipment for the above position(s) are available (required by 32 VSA Sec. 5(b)).

Tracy Dolan Digitally signed by Tracy Dolan Date: 2020.11.16 13:17:20 -05'00' 11/16/2020

Signature of Agency or Department Head _____ Date _____

Aimee Pope Digitally signed by Aimee Pope Date: 2020.12.10 10:35:00 -05'00' _____ Date _____

Approved/Denied by Department of Human Resources _____ Date _____

Approved/Denied by Finance and Management _____ Date _____

Kristin Clouser Digitally signed by Kristin Clouser Date: 2021.01.20 14:16:11 -05'00' _____ Date _____

Approved/Denied by Secretary of Administration _____ Date _____

[Handwritten signature]

2/12/21

Approved/Denied by Governor (required as amended by 2019 Leg. Session) _____ Date _____

Comments:

**STATE OF VERMONT
Joint Fiscal Committee Review
Limited Service - Grant Funded
Position Request Form**

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Agency/Department: Agency of Human Services / Department of Mental Health Date: 11/5/20

Name and Phone (of the person completing this request): Cheryle Wilcox, (802) 760-9171

Request is for:

- Positions funded and attached to a new grant.
 Positions funded and attached to an existing grant approved by JFO # _____

1. Name of Granting Agency, Title of Grant, Grant Funding Detail (attach grant documents):
 CDC, Comprehensive Suicide Prevention: Vermont Addressing Suicide Together (VAST), 1 NU50CE002594-01-00

2. List below titles, number of positions in each title, program area, and limited service end date (information should be based on grant award and should match information provided on the RFR) position(s) will be established only after JFC final approval:

<u>Title* of Position(s) Requested</u>	<u># of Positions</u>	<u>Division/Program</u>	<u>Grant Funding Period/Anticipated End Date</u>
Marketing and Outreach Coordinator	1	Policy	09/01/2020 - 08/31/2025

*Final determination of title and pay grade to be made by the Department of Human Resources Classification Division upon submission and review of Request for Classification Review.

3. Justification for this request as an essential grant program need:

This position was required for all recipients of this CDC grant. It will be supporting the essential need of suicide prevention in Vermont. This position will plan, develop, and direct a comprehensive communications program, including marketing, public relations, media relations, and education and outreach efforts.

I certify that this information is correct and that necessary funding, space and equipment for the above position(s) are available (required by 32 VSA Sec. 5(b)).

 11/6/2020
 Signature of Agency or Department Head Digitally signed by Aimee Pope Date
 Aimee Pope Date: 2020.12.10 10:52:25 -0500'

Approved / Denied by Department of Human Resources Date

Approved/Denied by Finance and Management Date

 Kristin Clouser Digitally signed by Kristin Clouser
Date: 2021.01.20 14:29:11 -05'00'

Approved/Denied by Secretary of Administration Date
 2/12/21

Approved/Denied by Governor (required as amended by 2019 Leg. Session) Date

Comments:

**Vermont Department of Health (VDH)
Division of Emergency Preparedness and Response and Injury Prevention (DEPRIP):
Response to NOFO#: CDC-RFA-CE20-2001**

Vermont's Comprehensive Suicide Prevention

Budget Narrative REVISION

Year 1 Budget Period September 1, 2020 – August 31, 2021:

- A. Personnel:** Provide employee(s) (including names for each identified position) of the applicant/recipient organization, including in-kind costs for those positions whose work is tied to the grant project.

Position	Name	Annual Salary/Rate	Level of Effort	Months	Total Salary Charge to Award
(1) Program Manager	To Be Hired	\$53,446 Annual Salary	100%	12 Months	\$53,446
(2) Epidemiologist /Public Health Analyst	To Be Hired	\$53,446 Annual Salary	100%	12 Months	\$53,446
(3) Communications/ Media Coordinator	To Be Hired	\$56,649 Annual Salary	50%	12 Months	\$22,325
(4) DMH Co-Principal Investigator I	Alison Krompf	\$79,290 Annual Salary	10% FTE In Kind	12 Months	\$0
(5) VDH Co-Principal Investigator II	Stephanie Busch	\$55,931 Annual Salary	10% FTE	12 Months	\$5,593
(6) DMH Medical Director	Tom Weigel	\$260,000 Annual Salary	5% FTE In Kind	12 Months	\$0
PERSONNEL TOTAL					\$134,810

JUSTIFICATION: Describe the role and responsibilities of each position.

- (1) The Program Manager (PM) (to be hired) will conduct administrative work for the grant. The position is reasonable for the implementation, administration, coordination, quality control and evaluation of Vermont's Comprehensive Suicide Prevention Program. The PM will provide daily oversight and management, and engage in discussions and planning with stakeholders, coordinate, update, develop and conduct

trainings. Duties include planning assessments, coordinating planned activities, program monitoring, quality improvement and evaluation, technical assistance, and education for the suicide prevention program. The PM will work directly with other state agencies and community partners to deliver the program. The PM (key staff) will conduct administrative work for the grant. The Position is responsible for the implementation, administration, coordination, quality control and evaluation of the VAST project.

(2) The Epidemiologist/Public Health Analyst (to be hired) (100% FTE) will coordinate and direct the development and implementation of project data collection, coordinating with contracted evaluator and data analysis activities, representing the project on data issues in communication with the grant team and CDC.

(3) The Communications/ Media Coordinator (to be hired) (50% FTE) will ensure that proper suicide prevention information provided through media means is tailored appropriately for affected population groups. The Communications/ Media Director is responsible for controlling all communication information that is given to both public and private entities.

(4 & 5) CO-PIs Mrs. Krompf and Ms. Busch will be responsible for strategic planning, performance and progress tracking, and ensuring proper resources and staffing for VAST project. Both Co-PI's will provide executive oversight to the grant at the level of effort of 10% each. Co-PI, Mrs. Krompf has 15+ years of experience in the healthcare and mental health fields, currently leading suicide prevention activities for DMH. Co-PI, Stephanie Busch, has been with the Vermont Department of Health as the Injury Prevention manager since 2018. Busch has 10 years of healthcare and public health experience working to integrate mental health, and injury prevention initiatives into emergency services.

(6) The Medical Director, Dr. Tom Weigel, will provide oversight of the state of Vermont EMS system including providing EMS clinical care oversight, developing protocols, and ensuring the continuous availability of a physician to resolve EMS system problems. He will provide of effort of 5% in-kind.

FEDERAL REQUEST (enter in Section B column 1 line 6a of form SF424A) \$134,810

B. Fringe Benefits (\$57,968)

The State of Vermont uses a 45% rate of total salaries to calculate fringe. This translates into \$57,968 based on the salary noted above.

Component	Rate	Wage	Cost
FICA	7.65%	\$116,896	\$0
Retirement	9.00%	\$116,896	\$0
Medical	80%	Of actual cost	See narrative below

Life Insurance	75%	Of actual cost	See narrative below
Dental	100%	Of actual cost	See narrative below
FRINGE TOTAL			\$57,968

JUSTIFICATION: Fringe reflects current rate for agency.

The actual cost of fringe benefits (not a fringe benefit rate) will be reported as a direct cost of the program. The actual cost of fringe benefits varies from employee to employee based on salary, employee choice of health care plan, and employee election of certain other benefits. The usual major components of this cost are FICA at 7.65% of salary, retirement at 9% of salary and a portion – 80% for medical, 75% for life and 100% for dental – of the actual costs of the medical, dental and life insurance coverage selected by the employee. The cost of each employee's fringe benefits will be allocated to the program based on hours worked in the program relative to all hours worked by the employee. Based on the current cost of fringe benefits for employees in similar programs, we are estimating the cost of these fringe benefits at 45% of salary.

FEDERAL REQUEST**\$57,968**C. **Consultant Costs:** Not applicable.D. **Equipment:** Not applicable.E. **Supplies:**

Item(s)	Unit Cost	Amount Requested
Office supplies	N/A	\$3,000
2 cell phones and data plans	\$600	\$1,200
Computers (3)	\$2000	\$6,000
SUPPLIES TOTAL		\$10,200

Supplies:

Office supplies These funds will be used for office supplies including but not limited to mailing, office supplies, etc

Phones: These funds will also provide the program manager and communications with phones for access to emails and a telephone as a part of divisions costs.

Computer: These funds will cover the cost of new computers for the three new employees included in the budget.

F. Travel:

Travel	Location	Item	Rate	Total Cost
Local travel	Vermont	Mileage	3000 miles at .545 per mile	\$1635
Required grantee meeting (Atlanta) for three staff	Atlanta GA	N/A	Airfare (\$550), Lodging (\$450, 3 nights @ \$150/night), Per Diem (\$128, 4 days @ \$32/day), Ground Transport (\$100)	\$3,684
AAS or other related public health conferences	TBD	N/A	\$2800 per person per conference for a total of 4 staff.	\$11,200
TRAVEL TOTAL				\$16,519

JUSTIFICATION:

1. Local travel is needed to provide on-site technical assistance to the contractors and relevant state entities, including formal presentations to state agencies, legislators, law enforcement, media, professional associations, and educational institutions. Local travel rate for the Vermont Department of Health is .545/mile
2. Grantee In-person meeting: As per the NOFO requirements, money is requested for the Program Manager and 2 additional staff to attend the required meeting or reverse site visit. As per the NOFO requirements, money is requested for the Program Manager and one additional staff to attend the required meeting or reverse site visit. Costs to travel for this are estimated at \$1,228 per person (Airfare (\$550), Lodging (\$450, 3 nights @ \$150/night), Per Diem (\$128, 4 days @ \$32/day), Ground Transport (\$100).
3. American Association of Suicidology or public health related conferences (such as APHA), money is requested for two staff to attend two AAS (or related conference) to share knowledge and leverage knowledge of current best practices in the field. American Association of Suicidology or public health suicide prevention-related conference (APHA), money is requested for the Program Manager and one additional staff to attend AAS (or related conference) to share knowledge and leverage knowledge of current best practices in the field. Costs to travel for this are estimated at \$1,425 per person (Airfare (\$550), Lodging (\$600, 4 nights @ \$150/night), Per Diem (\$175, 5 days @ \$32/day), registration (Approximately \$500), Ground Transport (\$100). \$2,800 per conference per person.

FEDERAL REQUEST (enter in Section B column 1 line 6c of form SF424A) \$16,519

G. Other:

Item(s)	Number Needed	Unit Cost	Amount Requested
Operational Cost for 2 cubicles	2	\$4127.5	\$8,255
Material Printing \$1/brochure x 10,000	12,000	\$1	\$12,000
OTHER TOTAL			\$20,255

JUSTIFICATION: Explain the use of each item requested.

Operational cost for 2 cubicles These funds will also cover the required operational cost for adding two new cubicles to our current spaces needed for the new staff. The cost was derived from a recent estimate.

Printing These funds will be used to print developed program material and resources including but not limited to data reports, infographics, etc.

FEDERAL REQUEST – (enter in Section B column 1 line 6h of form SF424A) **\$20,255**

H. Contractual Costs:

Contract: A contractual arrangement will be used to carry out a portion of the programmatic effort or for the acquisition of routine goods or services under the grant. Such arrangements may be in the form of consortium agreements or contracts. A consultant is an individual retained to provide professional advice or services for a fee. The applicant/grantee must establish written procurement policies and procedures that are consistently applied. All procurement transactions shall be conducted in a manner to provide to the maximum extent practical, open and free competition.

Vendor	Explanation	Amount Requested
VCHIP	Evaluation Contracted Service	\$60,081
To Be Determined	Communications Campaign: Research and Development	\$65,000
To Be Determined	Communications Media and Marketing Project(s)	\$76,000
Vermont Suicide Prevention Center	Contracted delivery of training and grant activities	\$128,059
Invest EAP	Peer Support Hub training and development	\$80,000
Vermont Cares Partners	Expanding some telemental health via Mental Health First Aid to rural Vermont	\$10,000
TOTAL		\$419,140

JUSTIFICATION: Explain the need for each contractual agreement and how it relates to the overall project.

Evaluation Services

\$60,081

Tom Delaney from VCHIP will be the contracted lead evaluator coordinating and directing the development and implementation of project evaluation, conducting evaluation data and data analysis activities, representing the project on evaluation issues in communication with the grant

team, and project officer. This consultant work will be with VCHIP is a quality improvement and healthcare services research program in the Dept. of Pediatrics of the University of Vermont Larner College of Medicine. Evaluation cost anticipate a 3% increase annually.

Communications Campaign: Research and Development Work \$65,000

Research is essential to every campaign strategy because we must understand the barriers to and motivations for different behaviors. Once we understand that (and it changes with different intended audiences), we can provide the right marketing strategy around messages that resonate with the intended audience.

Communications Media Project(s) \$76,000

Funds support media campaigns/projects needed to meet project goals and objectives; the campaign will work to reduce stigma around mental health, seeking help, and promote community, as well as enhance the reach of the project. The project director, communications coordinator, and partners will work with the VDH communications office to develop a multimedia plan to include public education and outreach efforts to engage the community about grantee activities, safe messaging, and provision of presentations at public meetings and community events to stakeholders, community, and families.

Vermont Suicide Prevention Center \$128,059

Trainings, Technical Assistance, Consultation, Coordination in the following areas: CHL/VTSPC will provide a variety of services including trainings, technical assistance, consultation on a variety of activities in the project. Their involvement will allow for greater capacity of the project to carry out the purpose of the targeted work by providing technical expertise in suicide prevention including, but not limited to people with lived experience. The actual contract amount will adjust depending on actual trainings and number of trained individuals in the year. Costs raised 2% per year in years 2, 3, 4, and 5. Trainings, Technical Assistance, Consultation, Coordination in the following areas: Participation in Implementation Committee; oversight of The Coalition, Gatekeeper training, AHS departments and SS organizations, online trainings, Gatekeeper training, Training of Trainer, Engage Partners in Safe Storage education, CALM training, Suicide Prevention Symposium, Zero Suicide Practice Institute, Support DA OSAs, Partner engagement, telemental health, EBP CAMS Training, Training in Screening and Assessment, Caring Contacts TA, and Project Administrative costs.

Invest EAP \$80,000

Costs are allocated include the implementation of at one or two rural peer hubs per year, for a minimum total of 8 peer hubs throughout the State. In addition, budget costs include administrative and logistical support to provide for oversight and uniform service delivery across all peer hubs. Contract would support Centers for Wellbeing Program Oversight and Supervision, Peer Program Coordinator, Peer Program Clinical Supervisor, Peer Program Outreach, In-State Travel, Bi-monthly Clinical Supervision of Peer Support Groups, Equipment/Supplies (website, postage, etc.), Crisis Intervention and Wellness Trainings

Vermont Cares Partners \$10,000

Funds will be used to support costs for transitions to virtual MFHA trainings for rural Vermonters. Costs include online training certifications –focused on rural MHFA instructors.

FEDERAL REQUEST – (enter in Section B column 1 line 6f of form SF424A) **\$419,140**

I. Total Direct Costs: (\$658,892)

J. Indirect Costs: (\$101,108)

The Vermont Department of Health uses a Cost Allocation Plan, not an indirect rate. The Vermont Department of Health is a department of the Vermont Agency of Human Services, a public assistance agency, which uses a Cost Allocation Plan in lieu of an indirect rate agreement as authorized by OMB Circular A-87, Attachment D. This Cost Allocation Plan was approved by the US Department of Health and Human Services effective October 1, 1987. A copy of the most recent 20255 approval letter is attached. The Cost Allocation Plan summarizes actual, allowable costs incurred in the operation of the program. These costs include items which are often shown as direct costs, such as telephone and general office supply expenses, as well as items which are often included in an indirect rate, such as the cost of office space and administrative salaries. These costs are allocated to the program based on the salaries and wages paid in the program. Because these are actual costs, unlike an Indirect Cost Rate, these costs will vary from quarter to quarter and cannot be fixed as a rate. Based on costs allocated to similar programs during recent quarters, we would currently estimate these allocated costs at 75% of the direct salary line item, yielding a total cost of \$101,108 for the period.

Year 1 Budget Period September 1, 2020 – August 31, 2021

TOTAL DIRECT CHARGES: FEDERAL REQUEST – \$658,892

INDIRECT CHARGES: FEDERAL REQUEST – \$101,108

TOTAL FEDERAL REQUEST –\$760,000

<u>Budget Summary:</u>	Total
A. Salaries and Wages	\$134,810
B. Fringe Benefits	\$57,968
C. Consultant Costs	\$0
D. Equipment	\$0
E. Supplies	\$10,200
F. Travel	\$16,519
G. Other	\$20,255
H. Contractual Costs	\$419,140
I. Total Direct Costs (sum A-H)	\$658,892
j. Indirect Costs	\$101,108
k. TOTAL (sum of i and j)	\$760,000

Total Project Period (5 years) September 1, 2020 – August 31, 2025

1. DATE ISSUED MM/DD/YYYY 08/31/2020		1a. SUPERSEDES AWARD NOTICE dated except that any additions or restrictions previously imposed remain in effect unless specifically rescinded	
2. CFDA NO. 93.136 - Injury Prevention and Control Research and State and Community Based Programs			
3. ASSISTANCE TYPE Cooperative Agreement			
4. GRANT NO. 1 NU50CE002594-01-00 Formerly		5. TYPE OF AWARD Other	
4a. FAIN NU50CE002594		5a. ACTION TYPE New	
6. PROJECT PERIOD MM/DD/YYYY From 09/01/2020		Through 08/31/2025	
7. BUDGET PERIOD MM/DD/YYYY From 09/01/2020		Through 08/31/2021	
8. TITLE OF PROJECT (OR PROGRAM) Vermont Addressing Suicide Together (VAST)			

**DEPARTMENT OF HEALTH AND HUMAN SERVICES
Centers for Disease Control and Prevention
CDC Office of Financial Resources**

2939 Brandywine Road
Atlanta, GA 30341

**NOTICE OF AWARD
AUTHORIZATION (Legislation/Regulations)
301, 391(a)(2) and 392(a)(1) of the Public Health Service Act**

9a. GRANTEE NAME AND ADDRESS Human Services, Vermont Agency Of 280 State Dr Vermont Department of Health Waterbury, VT 05671-9501	9b. GRANTEE PROJECT DIRECTOR Stephanie A Busch 108 Cherry Street Emergency Prep, Resp, Injury P Burlington, VT 05401-4295 Phone: 802-863-7313
10a. GRANTEE AUTHORIZING OFFICIAL Mr. Paul Daley. 108 Cherry Street Burlington, VT 05401-9962 Phone: 802-863-7284	10b. FEDERAL PROJECT OFFICER Audrey Moffitt 1600 Clifton Rd Atlanta, GA 30333 Phone: 404-639-8088

ALL AMOUNTS ARE SHOWN IN USD

11. APPROVED BUDGET (Excludes Direct Assistance)		12. AWARD COMPUTATION	
I Financial Assistance from the Federal Awarding Agency Only		a. Amount of Federal Financial Assistance (from item 11m) 760,000.00	
II Total project costs including grant funds and all other financial participation		b. Less Unobligated Balance From Prior Budget Periods 0.00	
a. Salaries and WageS	134,810.00	c. Less Cumulative Prior Award(s) This Budget Period 0.00	
b. Fringe Benefits	57,968.00	d. AMOUNT OF FINANCIAL ASSISTANCE THIS ACTION 760,000.00	
c. Total Personnel Costs	192,778.00	13. Total Federal Funds Awarded to Date for Project Period 760,000.00	
d. Equipment	0.00	14. RECOMMENDED FUTURE SUPPORT (Subject to the availability of funds and satisfactory progress of the project):	
e. Supplies	10,200.00	YEAR	TOTAL DIRECT COSTS
f. Travel	11,519.00	a. 2	d. 5
g. Construction	0.00	b. 3	e. 6
h. Other	20,255.00	c. 4	f. 7
i. Contractual	424,140.00	15. PROGRAM INCOME SHALL BE USED IN ACCORD WITH ONE OF THE FOLLOWING ALTERNATIVES:	
j. TOTAL DIRECT COSTS	658,892.00	a. DEDUCTION	
k. INDIRECT COSTS	101,108.00	b. ADDITIONAL COSTS	
l. TOTAL APPROVED BUDGET	760,000.00	c. MATCHING	
m. Federal Share	760,000.00	d. OTHER RESEARCH (Add / Deduct Option)	
n. Non-Federal Share	0.00	e. OTHER (See REMARKS)	
REMARKS (Other Terms and Conditions Attached - <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No)		16. THIS AWARD IS BASED ON AN APPLICATION SUBMITTED TO, AND AS APPROVED BY, THE FEDERAL AWARDING AGENCY ON THE ABOVE TITLED PROJECT AND IS SUBJECT TO THE TERMS AND CONDITIONS INCORPORATED EITHER DIRECTLY OR BY REFERENCE IN THE FOLLOWING:	
		a. The grant program legislation	
		b. The grant program regulations,	
		c. This award notice including terms and conditions, if any, noted below under REMARKS.	
		d. Federal administrative requirements, cost principles and audit requirements applicable to this grant	
		In the event there are conflicting or otherwise inconsistent policies applicable to the grant, the above order of precedence shall prevail. Acceptance of the grant terms and conditions is acknowledged by the grantee when funds are drawn or otherwise obtained from the grant payment system.	

GRANTS MANAGEMENT OFFICIAL:

Valencia Williams, Lead Grant Management Specialist
1600 Clifton Rd
Atlanta, GA 30333
Phone: 404.498.3260

17.OBJ CLASS 41.51	18a. VENDOR CODE 1036000264D4	18b. EIN 036000264	19. DUNS 809376155	20. CONG. DIST. 00
FY-ACCOUNT NO.	DOCUMENT NO.	ADMINISTRATIVE CODE	AMT ACTION FIN ASST	APPROPRIATION
21. a. 0-9390DWP	b. 20NU50CE002594	c. CE	d. \$760,000.00	e. 75-20-0952
22. a.	b.	c.	d.	e.
23. a.	b.	c.	d.	e.