



STATE OF VERMONT
JOINT FISCAL OFFICE

MEMORANDUM

To: Joint Fiscal Committee members
From: Daniel Dickerson, Fiscal Analyst *DWD*
Date: May 2, 2018
Subject: Limited-Service Position Request #2913

Enclosed please find one (1) item, which the Joint Fiscal Office has received from the administration. **The administration has requested expedited review of this position request by the JFC.** Members will be contacted by May 9, 2018 for a decision unless the member has responded prior to that time.

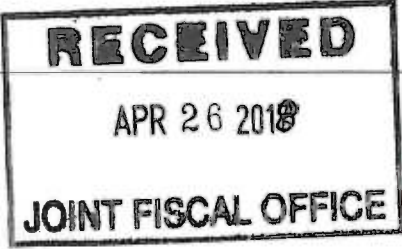
JFO #2913 – One (1) limited-service position within the Department of Economic Development. The position would be titled Grants Management Specialist and would be funded through a recently renewed ongoing grant from the Department of Defense (DOD) – Office of Economic Adjustment. The grant was originally awarded in 2015 to help the State work with defense-related businesses in Vermont that were impacted by reduced federal defense spending. The grant renewal will allow the State to continue on the same course and the responsibilities of the limited-service position would include facilitating the creation of a New England regional group of defense-related businesses and economic development leaders that would work to 1) provide cybersecurity assistance to defense businesses and 2) create a trusted supplier network in the New England region to connect large contractors with smaller sub-contractors. The time period for this limited-service position would be from 1/1/2018 through 6/30/2019. No State funding would be needed to support the position.

[JFO received 4/26/18]

Please review the enclosed materials and notify the Joint Fiscal Office (Daniel Dickerson at (802) 828-2472; ddickerson@leg.state.vt.us) if you have questions or would like an item held for legislative review. Unless we hear from you to the contrary by May 9, 2018 we will assume that you agree to consider as final the Governor's acceptance of these requests.



Vermont Department of Economic Development
 1 National Life Drive – Davis Bldg, 6th Floor
 Montpelier, VT 05620-0501
accd.vermont.gov/economic-development



JFO 2913

To: Joint Fiscal Committee

From: Brett Long, Deputy Commissioner, Department of Economic Development *B.L.*

Date: April 16, 2018

Re: Limited Service Grant Funded Position Request

This memorandum is written to secure approval for the addition of a Limited Service Position to our staff to assist with the additional workload that has been created by the Department of Economic Development's increased role as Fiscal Agent for the six New England states in the awarded 18-month, \$1,500,000, grant from the US Department of Defense's Office of Economic Adjustment (OEA), JFO approved #2800. The CFDA # and the purpose of the grant remain the same as previously approved, the scope has now expanded to incorporate the other New England states.

Background

On March 7, 2018, DED was notified of the grant award by OEA. As Fiscal Agent, DED is entitled to \$150,000 in grant proceeds to compensate for the work being done on behalf of the six-state group over the 18-month period of the grant. This funding was included in the grant to provide a source of compensation for the limited service position that we are seeking to add.

The grant has three tasks; 1) the creation of an organization that will be overseen by a board of regional businesses and state economic development leaders and contracting with an organization to provide administrative support to this board; 2) contracting with an organization that will provide cybersecurity training and assistance to defense-related businesses across the region and; 3) contracting with an organization that will create a "Trusted Supplier" network that is intended to ease the process of connecting large contractors with sub-contractors that meet their procurement requirements.

The limited service position that we have requested will be responsible for coordinating the grant requirements that we will be undertaken as Fiscal Agent on behalf of the other states participating in the grant scope. This position will be responsible for the day-to-day administration of the grant including the collection and reporting of in-kind contributions of the states, communicating with the project managers in the states, communicating with OEA, reporting and record keeping. This largely involves collecting and reporting information from the participants and reporting it in compliance with Federal and Vermont state grant requirements. The need to meet Vermont and Federal requirements has led us to believe that this is work would be better managed in-house.

Unfortunately, although the grant was awarded on March 7th, the grant start date is January 1st. Therefore, we are starting more than two months behind. Since we are now already in mid-April, with only about 14 months left in the grant period, we are asking that this application be expedited so that we can fully expend the grant within the grant performance period.

Thank you for your consideration





Agency of Commerce and Community Development

1 National Life Drive – Davis Bldg, 6th Floor
Montpelier, VT 05620-0501
accd.vermont.gov

[phone] 802-461-9353

TO: Joint Fiscal Committee

FROM: Brett Long, Deputy Commissioner, Department of Economic Development *BL*

DATE: May 1, 2018

RE: Limited Service Grant Funded Position Request

We have been asked to explain the funding source for a recently awarded grant and why this award has not been treated as a new grant with the corresponding paperwork.

The VT Department of Economic Development believes that the recently awarded \$1.5 million grant from the US Department of Defense's Office of Economic Adjustment (OEA) is best considered a follow-on to our earlier grant – rather than a new effort. The original grant has been amended and extended so that our efforts to help Vermont's defense-related businesses to build their capabilities so that they can diversify their revenues by expanding their offerings to non-DOD clients is continuing.

One of the objectives of our original grant is the creation of a regional defense-related supply chain that would demonstrate the flow of goods through the New England region. The creation of this network was a major task of an OEA grant to the State of Connecticut. Connecticut's effort was never completed and one of the issues preventing completion was the need for better coordination and communication among the states. As a result, the first task of the new grant is to create an organization that will foster this inter-state coordination. This new grant envisions an organization that will be led by economic development leaders from each of the New England states and representatives from two defense-related businesses from each state. Once the organization is created, it will undertake two tasks; 1) providing cybersecurity assistance to defense businesses and; 2) creating a network of trusted suppliers throughout the New England region. This trusted supplier network is intended to expand the amount of defense work that remains within the region – and to make it easier for contractors to find local suppliers that have the capabilities, credentials and capacity to do the work within the region. Retaining this work is expected to benefit Vermont's manufacturing businesses. This task will complete the supply chain work envisioned with the original grant. Therefore, these tasks are a direct outgrowth of the work started in our original grant.

Thank you for your consideration. Please contact me if you have additional questions or concerns.



**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: Department of Economic Development Date: 03/27/2018

Name and Phone (of the person completing this request): Kristen Ziter (802) 622-4166

Request is for:

- Positions funded and attached to a new grant.
 Positions funded and attached to an existing grant approved by JFO # 2800

1. Name of Granting Agency, Title of Grant, Grant Funding Detail (attach grant documents):

Department of Defense, Office of Economic Adjustment (OEA), Defense Industry Adjustment (DIA), federal assistance to undertake community economic adjustment activities as the Federal government cuts back on defense spending. Grant agreement attached.

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>
Grants Management Specialist,	1 position,	Department of Economic Development - OEA	1/01/18 - 6/30/19

*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:

The original award was to carry out activities within our state. In doing so we identified a larger need to work regionally and create larger supply chain capacity and efficiencies. We have now received additional funding to lead a New England regional approach. This will require more one more staff position to complete the activities approved by the grant. The approved grant budget includes the Federal funding for this position.

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)).

[Signature] Signature of Agency or Department Head Date: 3/27/18

[Signature] Approved/Denied by Department of Human Resources Date: 3/29/18

4/1/18 [Signature] Approved/Denied by Finance and Management Date: 20 Apr 18

[Signature] Approved/Denied by Secretary of Administration Date: 23 April 18

Comments:

APR 02 2018

Office of Economic Adjustment Department of Defense

Notice Of Award

1.FEDERAL AWARDING AGENCY

U.S. DEPARTMENT OF DEFENSE
OFFICE OF ECONOMIC ADJUSTMENT
2231 CRYSTAL DRIVE, SUITE 520
ARLINGTON, VA 22202

2.INSTRUMENT TYPE:

Grant Agreement

3.AWARD TYPE

Non-Construction

4.TYPE OF ACTION:

New Award

6.FEDERAL AWARD DATE:

2018-03-07

6.AWARDED TO:

Vermont Department of Economic Development
One National Life Drive, Davis Building, 6th Fl
Montpelier VT
05620-0501

7.PRINCIPAL INVESTIGATOR

Brett Long
Director, Business Support
1 National Life Drive Davis Building, 6th Floor Montpelier
brett.long@vermont.gov

8.UNIQUE ENTITY IDENTIFIER:

809800667

9.OEA AWARD NUMBER:

ST-G823-18-01

10.FEDERAL AWARD IDENTIFICATION NUMBER:

HQ00051810009

11.PROGRAM TYPE:

Defense Industry Adjustment

12.AMENDMENT NUMBER:

13.REGULATORY AUTHORITY:

2 CFR 200

14.PERIOD OF PERFORMANCE:

01/01/2018 - 06/30/2019

15.STATUTORY AUTHORITY:

10. U.S. Code § 2391

16.CFDA NUMBER AND TITLE:

12.617 Economic Adjustment Assistance for State Governments

17.TITLE AND DESCRIPTION:

New England Regional Defense Industry Collaboration

18. BUDGET SUMMARY

	FEDERAL	NON-FEDERAL	TOTAL APPROVED BUDGET
PREVIOUSLY OBLIGATED	\$0.00	\$0.00	\$0.00
OBLIGATED BY THIS ACTION	\$1,500,000.00	\$153,754.09	\$1,653,754.09
INDIRECT COST RATE IS: 0%	\$0.00	\$0.00	\$0.00
TOTAL OBLIGATED ON AWARD	\$1,500,000.00	\$153,754.09	\$1,653,754.09
GRANT TOTAL	\$1,500,000.00	\$153,754.09	\$1,653,754.09

19. FEDERAL AGENCY POINTS-OF-CONTACT

GRANTS MANAGEMENT SPECIALIST:

Elaine Smokes
elaine.a.smokes.ctr@mail.mil

PROJECT MANAGER:

Margit Myers
margit.a.myers.civ@mail.mil
(703) 697-2119

20. TERMS AND CONDITIONS

The following terms and conditions are incorporated herein by reference with the same force and effect as if they were given in full text. Upon request the Federal awarding agency will make the full text available, or they can be found as described below.

The following documents may be found at:
<http://www.oea.gov/grants/grant-terms-and-conditions>.

National Policy Requirements
General OEA Terms and Conditions
Program-Specific Terms and Conditions

Special Conditions

The grant period is January 1, 2018, through June 30, 2019. Eligible costs incurred between January 1, 2018, and the date of this Agreement are allowable and reimbursable.

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19. FEDERAL AGENCY POINTS-OF-CONTACT

GRANTS MANAGEMENT SPECIALIST:

Elaina Smokes
elaina.a.smokes.ctr@mail.mil

PROJECT MANAGER:

Margit Myers
margit.a.myers.civ@mail.mil
(703) 697-2119

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21.AWARD PERFORMANCE GOALS

REPORTING TYPE	FREQUENCY	DUE DATE
Performance Report	Quarterly	2018-04-30
Performance Report	Quarterly	2018-07-31
Performance Report	Quarterly	2018-10-31
Performance Report	Quarterly	2019-01-31
Federal Financial Report	Quarterly	2019-01-31
Performance Report	Quarterly	2019-04-30
Federal Financial Report	Quarterly	2019-09-30
Final Performance Report	Quarterly	2019-09-30

22.AFFIRMATION OF AWARD

By signing this agreement, the Authorized Representative assures that the recipient will carry out the project/program described in its application and will comply with the terms and conditions and other requirements of this award.

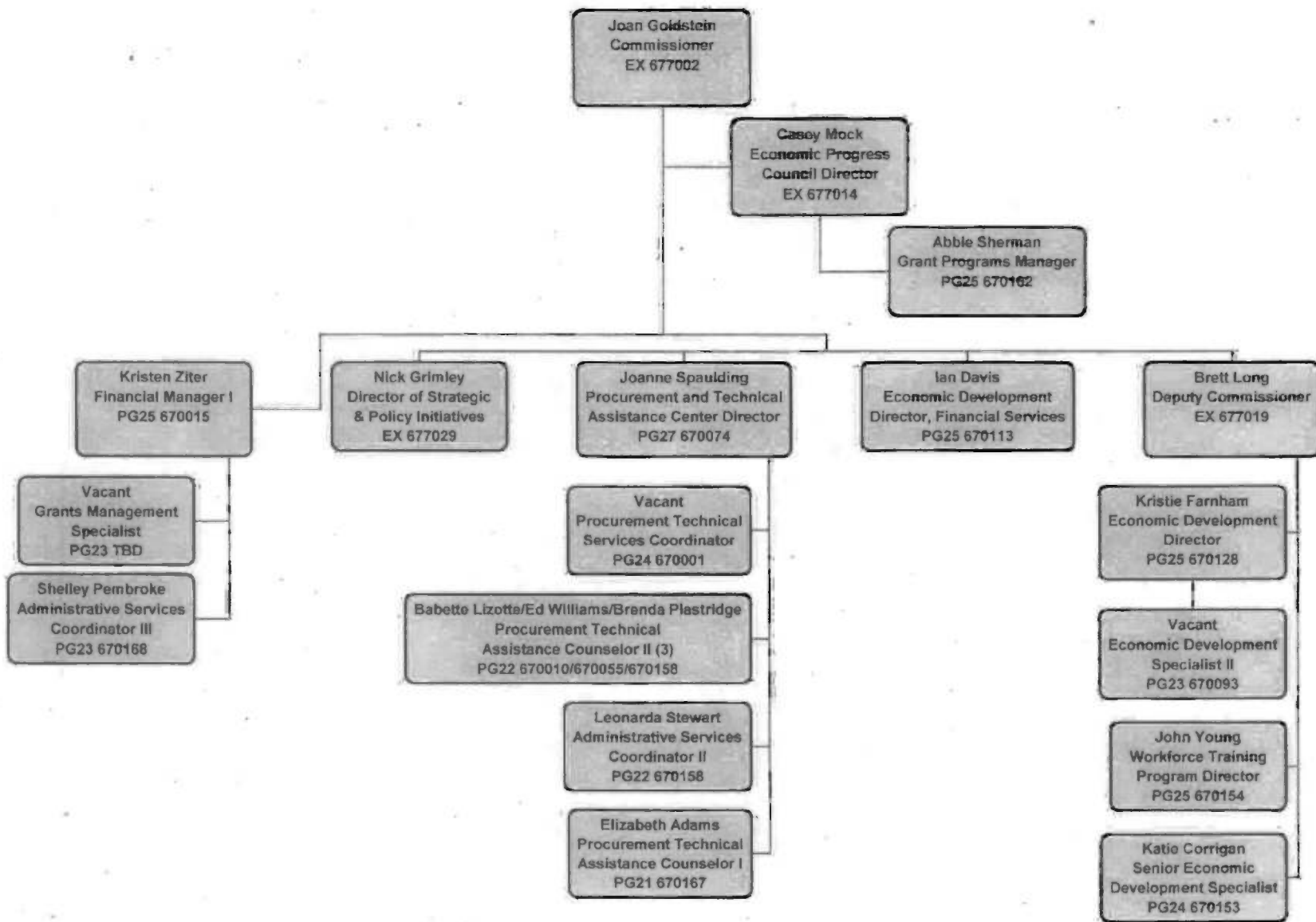
FOR THE RECIPIENT

FOR THE UNITED STATES OF AMERICA

[Signature]
 Name: *Commissioner* Date Signed: *3/19/18*
 Title: *Economic Development*
State of Vermont

[Signature: Patrick O'Brien]
 Patrick O'Brien
 Award Official
 Date Signed: 2018-03-07

AGENCY OF COMMERCE AND COMMUNITY DEVELOPMENT
ORGANIZATION CHART
FISCAL 2018 BUDGET
DEPT OF ECONOMIC DEVELOPMENT



VERMONT DEPARTMENT OF PERSONNEL
Request for Classification Review
Position Description Form A

- **This form is to be used by managers and supervisors to request classification of a position (filled or vacant) when the duties have changed, and by managers and supervisors to request the creation of a new job class/title (for a filled, vacant, or new position), and by employees to request classification of their position.**
- This form was designed in Microsoft Word to download and complete on your computer. This is a form-protected document, so information can only be entered in the shaded areas of the form.
- If you prefer to fill out a hard copy of the form, contact your Personnel Officer.
- To move from field to field use your mouse, the arrow keys or press Tab. Each form field has a limited number of characters. Use your mouse or the spacebar to mark and unmark a checkbox.
- Where additional space is needed to respond to a question, you might need to attach a separate page, and number the responses to correspond with the numbers of the questions on the form. Please contact your Personnel Officer if you have difficulty completing the form.
- The form must be complete, including required attachments and signatures or it will be returned to the department's personnel office. All sections of this form are required to be completed unless otherwise stated.

INSTRUCTIONS: Tell us about the job. The information you provide will be used to evaluate the position. It will not be used in any way to evaluate an employee's performance or qualifications.

Answer the questions carefully. The information you give will help ensure that the position is fairly evaluated. Here are some suggestions to consider in completing this questionnaire:

- Tell the **facts** about what an employee in this position is actually expected to do.
- Give **specific examples** to make it clear.
- Write in a way so a person unfamiliar with the job will be able to understand it.
- Describe the job **as it is now**, not the way it was or will become.
- Before answering each question, read it carefully.

To Submit this Request for Classification Review: If this is a filled position, the employee must sign the original* and forward to the supervisor for the supervisor's review and signature. The Personnel Officer and the Appointing Authority must also review and sign this request before it is considered complete. The effective date of review is the beginning of the first pay period following the date the complete Request for Classification Review is date stamped by the Classification Division of the Department of Personnel.

*An employee may choose to sign the form, make a copy, submit original to supervisor as noted above, while concurrently sending the copy to the Classification Division, 144 State Street, Montpelier, with a cover note indicating that the employee has submitted the original to the supervisor and is submitting the copy as a **Concurrent** filing.

If this is a request (initiated by employees, VSEA, or management) for review of all positions in a class/title please contact the appropriate Classification Analyst or the Classification Manager to discuss the request prior to submitting.

Request for Classification Review Position Description Form A

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: _____ Accountability: _____	
Working Conditions: _____ Total: _____	

Incumbent Information:

Employee Name: Employee Number:
Position Number: Current Job/Class Title:
Agency/Department/Unit: Work Station: Zip Code:
Supervisor's Name, Title, and Phone Number:
How should the notification to the employee be sent: employee's work location or other address, please provide mailing address:

New Position/Vacant Position Information:

New Position Authorization: Request Job/Class Title: 049601/Grants Management Specialist
Position Type: Permanent or Limited / Funding Source: Core, Partnership, or Sponsored
Vacant Position Number: Current Job/Class Title: Dept id 7120010424
Agency/Department/Unit: Agency of Commerce and Community Development, Dept. of Economic Development
Work Station: Montpelier Zip Code: 05620-0501
Supervisor's Name, Title and Phone Number: Kristen Ziter, Financial Manager, 802-622-4166

Type of Request:

- Management:** A management request to review the classification of an existing position, class, or create a new job class.
- Employee:** An employee's request to review the classification of his/her current position.

1. Job Duties

This is the **most critical** part of the form. Describe the activities and duties required in your job, **noting changes (new duties, duties no longer required, etc.) since the last review**. Place them in order of importance, beginning with the single most important activity or responsibility required in your job. The importance of the duties and expected end results should be clear, including the tolerance that may be permitted for error. Describe each job duty or activity as follows:

- **What** it is: The nature of the activity.
- **How** you do it: The steps you go through to perform the activity. Be specific so the reader can understand the steps.
- **Why** it is done: What you are attempting to accomplish and the end result of the activity.

For example a Tax Examiner might respond as follows: **(What)** Audits tax returns and/or taxpayer records. **(How)** By developing investigation strategy; reviewing materials submitted; when appropriate interviewing people, other than the taxpayer, who have information about the taxpayer's business or residency. **(Why)** To determine actual tax liabilities.

Consultative, administrative and technical work at a professional level involving the management, monitoring and close out of a major federal grant program as part of a regional, New England, effort. Responsible for technical assistance to businesses and partners including regional state and federal officials and other program administrators. Duties include program management, compliance monitoring, and reporting.

2. Key Contacts

This question deals with the personal contacts and interactions that occur in this job. Provide brief typical examples indicating your primary contacts (**not** an exhaustive or **all-inclusive** list of contacts) other than those persons to whom you report or who report to you. If you work as part of a team, or if your primary contacts are with other agencies or groups outside State government describe those interactions, and what your role is. For example: *you may collaborate, monitor, guide, or facilitate change.*

This position will work both independently and as part of a team to facilitate the collaboration of various federal grant partners including New England state officials and participating business professionals.

3. Are there licensing, registration, or certification requirements; or special or unusual skills necessary to perform this job?

Include any special licenses, registrations, certifications, skills; (such as counseling, engineering, computer programming, graphic design, strategic planning, keyboarding) including skills with specific equipment, tools, technology, etc. (such as mainframe computers, power tools, trucks, road equipment, specific software packages). Be specific, if you must be able to drive a commercial vehicle, or must know Visual Basic, indicate so.

No

4. Do you supervise?

In this question "supervise" means if you direct the work of others where you are held **directly** responsible for assigning work; performance ratings; training; reward and discipline or effectively recommend such action; and

other personnel matters. List the names, titles, and position numbers of the classified employees reporting to you:

No

5. In what way does your supervisor provide you with work assignments and review your work?

This question deals with how you are supervised. Explain how you receive work assignments, how priorities are determined, and how your work is reviewed. There are a wide variety of ways a job can be supervised, so there may not be just one answer to this question. For example, some aspects of your work may be reviewed on a regular basis and in others you may operate within general guidelines with much independence in determining how you accomplish tasks.

This position will work independently to facilitate and coordinate the program, progress and outcomes will be reviewed by management throughout the grant to make the most of the program opportunities.

6. Mental Effort

This section addresses the mental demands associated with this job. Describe the most mentally challenging part of your job or the most difficult typical problems you are expected to solve. Be sure to give a specific response and describe the situation(s) by example.

- For example, a purchasing clerk might respond: *In pricing purchase orders, I frequently must find the cost of materials not listed in the pricing guides. This involves locating vendors or other sources of pricing information for a great variety of materials.*
- Or, a systems developer might say: *Understanding the ways in which a database or program will be used, and what the users must accomplish and then developing a system to meet their needs, often with limited time and resources.*

This program has numerous external partners and the individual must be able to lead the New England team with competing priorities to successful regional outcomes.

7. Accountability

This section evaluates the job's expected results. In weighing the importance of results, consideration should be given to responsibility for the safety and well-being of people, protection of confidential information and protection of resources.

What is needed here is information not already presented about the job's scope of responsibility. What is the job's most significant influence upon the organization, or in what way does the job contribute to the organization's mission?

Provide annualized dollar figures if it makes sense to do so, explaining what the amount(s) represent.

For example:

- A social worker might respond: *To promote permanence for children through coordination and delivery of services;*
- A financial officer might state: *Overseeing preparation and ongoing management of division budget: \$2M Operating/Personal Services, \$1.5M Federal Grants.*

This position will implement key outcomes of this \$1.5M Federal grant.

8. Working Conditions

The intent of this question is to describe any adverse conditions that are routine and expected in your job. It is not to identify special situations such as overcrowded conditions or understaffing.

- a) What significant mental stress are you exposed to? All jobs contain some amount of stress. If your job stands out as having a significant degree of mental or emotional pressure or tension associated with it, this should be described.

Type	How Much of the Time?

- b) What hazards, special conditions or discomfort are you exposed to? (Clarification of terms: **hazards** include such things as potential accidents, illness, chronic health conditions or other harm. Typical examples might involve exposure to dangerous persons, including potentially violent customers and clients, fumes, toxic waste, contaminated materials, vehicle accident, disease, cuts, falls, etc.; and **discomfort** includes exposure to such things as cold, dirt, dust, rain or snow, heat, etc.)

Type	How Much of the Time?
N/A	

- c) What weights do you lift; how much do they weigh and how much time per day/week do you spend lifting?

Type	How Heavy?	How Much of the Time?
N/A		

- d) What working positions (sitting, standing, bending, reaching) or types of effort (hiking, walking, driving) are required?

Type	How Much of the Time?
Desk	90
Travel may be necessary in and/or out of state	10

Additional Information:

Carefully review your job description responses so far. If there is anything that you feel is important in understanding your job that you haven't clearly described, use this space for that purpose. Perhaps your job has some unique aspects or characteristics that weren't brought out by your answers to the previous questions. In this space, add any additional comments that you feel will add to a clear understanding of the requirements of your job.

--

Employee's Signature (required): _____ Date: _____

Supervisor's Section:

Carefully review this completed job description, but **do not** alter or eliminate any portion of the original response. Please answer the questions listed below.

1. What do you consider the most important duties of this job and why?

Program management

2. What do you consider the most important knowledge, skills, and abilities of an employee in this job (not necessarily the qualifications of the present employee) and why?

Federal grants management, leadership skills, ability to maintain effective working relationships

3. Comment on the accuracy and completeness of the responses by the employee. List below any missing items and/or differences where appropriate.

N/A

4. Suggested Title and/or Pay Grade:

Grants Management Specialist/PG 23

Supervisor's Signature (required):

K Ziller

Date:

3/27/18

Personnel Administrator's Section:

Please complete any missing information on the front page of this form before submitting it for review.

Are there other changes to this position, for example: Change of supervisor, GUC, work station?

Yes No If yes, please provide detailed information.

N/A (CN)

Attachments:

- Organizational charts are **required** and must indicate where the position reports.
- Draft job specification is **required** for proposed new job classes.

Will this change affect other positions within the organization? If so, describe how, (for example, have duties been shifted within the unit requiring review of other positions; or are there other issues relevant to the classification review process).

No

No (CN)

Suggested Title and/or Pay Grade:

Grants Management Specialist/ PG 23

Personnel Administrator's Signature (required):

Courtney Nelson

Date: 03/29/2018

Appointing Authority's Section:

Please review this completed job description but **do not alter** or eliminate any of the entries. Add any clarifying information and/or additional comments (if necessary) in the space below.

Suggested Title and/or Pay Grade:

Grants Management Specialist/ PG 23

Appointing Authority or Authorized Representative Signature (required)

[Handwritten Signature]

Date

3/27/18