



STATE OF VERMONT
JOINT FISCAL OFFICE

MEMORANDUM

To: Joint Fiscal Committee members
From: Sorsha Anderson, Senior Staff Associate
Date: December 20, 2023
Subject: Grant Request – JFO #3172

Enclosed please find one (1) item, which the Joint Fiscal Office has received from the Administration.

JFO #3172: \$2,478,749.00 to the Agency of Human Services, Department of Mental Health from the Substance Abuse and Mental Health Services Administration to continue post disaster crisis counseling assistance and training program to support Vermonters in the nine counties declared for FEMA Individual Assistance due to the July 2023 flooding event. This work began with previously approved FEMA grant [JFO #3166](#).

[Note: An AA-IPN notice of pre-spending (pg. 14 of this packet) was sent to JFO on September 28, 2023. JFC members were made aware of this notification at the [November 7, 2023 JFC meeting](#).

[Received December 20, 2023]

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. Unless we hear from you to the contrary by January 10, 2024, we will assume that you agree to consider as final the Governor's acceptance of this request.



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:		DMH has received \$2.48M to support crisis counseling in flood-impacted counties through the SAMHSA Regular Services Program. Funding was previously received through the Immediate Services Program via JFO #3166; this grant allows the continuation of those services over a longer time period. This package includes an AA-1PN.			
Date:		11/13/2023			
Department:		Department of Mental Health			
Legal Title of Grant:		RSP - Crisis Counseling Assistance and Training Program			
Federal Catalog #:		93.982			
Grant/Donor Name and Address:		Substance Abuse & Mental Health Services Admin (SAMHSA) 5600 Fishers Ln, Rockville, MD 20857			
Grant Period:		From:	To:		
		11/1/2023	7/31/2024		
Grant/Donation		\$2,478,749			
	SFY 1	SFY 2	SFY 3	Total	Comments
Grant Amount:	\$2,478,749	\$	\$	\$2,478,749	
Position Information:		# Positions	Explanation/Comments		
		0			
Additional Comments:					
Department of Finance & Management		Adam Greshin Digitally signed by Adam Greshin Date: 2023.11.13 11:31:38 DocuSigned by: Adam Greshin		(Initial)	
Secretary of Administration		Sarah Clark 04AB002ED55C438...		(Initial)	
Sent To Joint Fiscal Office				Date	



**State of Vermont**


Department of Mental Health
280 State Drive, NOB 2 North
Waterbury, VT 05671-2010
<http://mentalhealth.vermont.gov/>

Agency of Human Services

[phone] 802-241-0090
[fax] 802-241-0100
[tty] 800-253-0191

MEMORANDUM

TO: Kristin L. Clouser, Secretary of Administration

FROM: Alexia Venafra, Financial Manager III ^{DS}

DATE: November 6, 2023

RE: AA-1 for FEMA Crisis Counseling - Regular Services Program (1H07SM089655-01)

Enclosed please find the documentation notifying the Joint Fiscal Committee (JFO) of the intent of securing a federally funded grant award for Crisis Counseling Assistance and Training Program - Regular Services Program from the Federal Emergency Management Agency (FEMA) for which we previously submitted an AA-1PN dated September 22, 2023 (attached). The funds and the Notice of Award came from the Substance Abuse and Mental Health Services Administration (SAMHSA); SAMHSA receives funds through interagency agreements and then awards them to the State. We recently received the Notice of Award (Award #: 1H07SM089655-01) in the amount of \$2,478,749.

This grant is for additional funds for a post disaster crisis counseling assistance and training program to continue to support Vermonters in the nine counties declared for FEMA Individual Assistance due to the July 2023 flooding event.

DMH, in collaboration with the Department for Public Safety (DPS), applied and received initial funds for this effort through FEMA's Immediate Services Program (ISP). This grant is to fund the continuation of those services through FEMA's Regular Services Program (RSP), which has a duration of nine months. Unlike the ISP, which is awarded to the State through DPS and then transferred to DMH, the RSP is awarded to DMH directly. The ISP has received an extension through November 11th, and the RSP will take effect on the day the Notice of Award is issued.

Please find the following documents enclosed:

- AA-1 memo
- AA-1 form
- Notice of Award
- AA-1PN package

If you have any questions, please contact me via email at alexia.venafra@vermont.gov.



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

BASIC GRANT INFORMATION				
1. Agency:	Agency of Human Services			
2. Department:	Department of Mental Health			
3. Program:	Crisis Counseling			
4. Legal Title of Grant:	Crisis Counseling - Regular Services Program			
5. Federal Catalog #:	93.982			
6. Grant/Donor Name and Address:	Substance Abuse & Mental Health Services Admin. (SAMHSA), 5600 Fishers Ln, Rockville, MD 20857			
7. Grant Period:	From:	11/1/2023	To:	7/31/2024
8. Purpose of Grant:	Continued post disaster crisis counseling assistance and training program to support Vermonters in the nine counties declared for FEMA Individual Assistance due to the July 2023 flooding event.			
9. Impact on existing program if grant is not Accepted:	Post disaster crisis counseling assistance and training will end prematurely and abruptly, or will need to be reappropriated to General Fund. Contracts will need to be terminated and the program closure will end these services for Vermonters impacted by the July 2023 Flooding.			
10. BUDGET INFORMATION				
	SFY 1	SFY 2	SFY 3	Comments
Expenditures:	FY 2024	FY	FY	
Personal Services	\$0	\$	\$	
Operating Expenses	\$2,071,336	\$	\$	
Grants	\$407,413	\$	\$	
Total	\$2,478,749	\$	\$	
Revenues:				
State Funds:	\$0	\$	\$	
Cash	\$0	\$	\$	
In-Kind	\$0	\$	\$	
Federal Funds:	\$2,478,749	\$	\$	
(Direct Costs)	\$2,478,749	\$	\$	
(Statewide Indirect)	\$0	\$	\$	
(Departmental Indirect)	\$0	\$	\$	
Other Funds:	\$0	\$	\$	
Grant (source)	\$0	\$	\$	
Total	\$2,478,749	\$	\$	
Appropriation No:	3150070000	Amount:	\$2,478,749	
			\$	
			\$	
			\$	
			\$	
			\$	
			\$	

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

	Total \$2,478,749
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PERSONAL SERVICE INFORMATION

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: _____ Agreed by: _____ (initial)

12. Limited Service Position Information:	# Positions	Title
Total Positions	0	

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

13. AUTHORIZATION AGENCY/DEPARTMENT

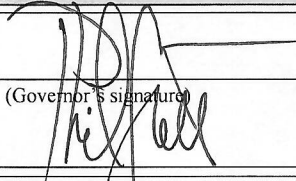
I/we certify that no funds beyond basic application preparation and filing costs have been expended or committed in anticipation of Joint Fiscal Committee approval of this grant, unless previous notification was made on Form AA-1PN (if applicable):

Signature: <i>Alison Krampf</i> Title: Dept. of Mental Health	DocuSigned by: <i>Vona W. Daloz</i> 11/9/2023	Date: 11/7/2023
Signature: _____ Title: _____	8496AFD85AC04E5... Department of Mental Health	
		Date: _____

14. SECRETARY OF ADMINISTRATION

<input checked="" type="checkbox"/> Approved:	(Secretary or designee signature) <i>Sarah Clark</i>	Date: 11/20/2023
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15. ACTION BY GOVERNOR

<input checked="" type="checkbox"/>	Check One Box: Accepted		
<input type="checkbox"/>	Rejected	(Governor's signature)	Date: 12/19/23

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 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 checked="" 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).

DS
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11/8/2023



Department of Health and Human Services
 Substance Abuse and Mental Health Services Administration
 Center for Mental Health Services

Notice of Award
 FAIN# H07SM089655
Federal Award Date
 10/26/2023

Recipient Information

1. Recipient Name

HUMAN SERVICES VERMONT AGENCY OF
 280 STATE DR
 WATERBURY, VT 05671

2. Congressional District of Recipient

00

3. Payment System Identifier (ID)

1036000264D4

4. Employer Identification Number (EIN)

036000264

5. Data Universal Numbering System (DUNS)

809376155

6. Recipient's Unique Entity Identifier

YLQARK22FMQ1

7. Project Director or Principal Investigator

Lee Dorf

Lee.Dorf@vermont.gov
 802-585-0885

8. Authorized Official

Emily Hawes
 Emily.Hawes@vermont.gov
 802-241-0090

Federal Agency Information

9. Awarding Agency Contact Information

Suraj Goyle
 Grants Specialist
 suraj.goyle@samhsa.hhs.gov
 240-276-2552

10. Program Official Contact Information

Anne Reim
 Program Official
 Anne.Reim@samhsa.hhs.gov
 240-276-2894

Federal Award Information

11. Award Number

1H07SM089655-01

12. Unique Federal Award Identification Number (FAIN)

H07SM089655

13. Statutory Authority

P.L. 93-288, SEC. 416 as amended

14. Federal Award Project Title

RSP-Crisis Counseling Assistance and Training Program. Starting Over Strong Vermont (SOS VT)

15. Assistance Listing Number

93.982

16. Assistance Listing Program Title

Mental Health Disaster Assistance and Emergency Mental Health

17. Award Action Type

New Competing

18. Is the Award R&D?

No

Summary Federal Award Financial Information

19. Budget Period Start Date 11/01/2023 – End Date 07/31/2024

20. Total Amount of Federal Funds Obligated by this Action	\$2,478,749
20a. Direct Cost Amount	\$2,478,749
20b. Indirect Cost Amount	\$0

21. Authorized Carryover

22. Offset

23. Total Amount of Federal Funds Obligated this budget period \$2,478,749

24. Total Approved Cost Sharing or Matching, where applicable \$0

25. Total Federal and Non-Federal Approved this Budget Period \$2,478,749

26. Project Period Start Date 11/01/2023 – End Date 07/31/2024

27. Total Amount of the Federal Award including Approved Cost Sharing or Matching this Project Period \$2,478,749

28. Authorized Treatment of Program Income

Additional Costs

29. Grants Management Officer - Signature

Eileen Bermudez

30. Remarks

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



Crisis Counseling
Department of Health and Human Services
Substance Abuse and Mental Health Services Administration
Center for Mental Health Services

Notice of Award

Issue Date: 10/26/2023

Award Number: 1H07SM089655-01
FAIN: H07SM089655
Program Director: Lee Dorf

Project Title: RSP-Crisis Counseling Assistance and Training Program. Starting Over Strong Vermont (SOS VT)

Organization Name: HUMAN SERVICES VERMONT AGENCY OF

Authorized Official: Emily Hawes

Authorized Official e-mail address: Emily.Hawes@vermont.gov

Budget Period: 11/01/2023 – 07/31/2024
Project Period: 11/01/2023 – 07/31/2024

Dear Grantee:

The Substance Abuse and Mental Health Services Administration hereby awards a grant in the amount of \$2,478,749 (see “Award Calculation” in Section I and “Terms and Conditions” in Section III) to HUMAN SERVICES VERMONT AGENCY OF in support of the above referenced project. This award is pursuant to the authority of P.L. 93-288, SEC. 416 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 – 1H07SM089655-01

Award Calculation (U.S. Dollars)

Travel	\$1,320
Supplies	\$11,428
Contractual	\$2,466,001
Direct Cost	\$2,478,749
Approved Budget	\$2,478,749
Federal Share	\$2,478,749
Cumulative Prior Awards for this Budget Period	\$0
AMOUNT OF THIS ACTION (FEDERAL SHARE)	\$2,478,749

SUMMARY TOTALS FOR ALL YEARS	
YR	AMOUNT
1	\$2,478,749

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

Fiscal Information:

CFDA Number:	93.982
EIN:	1036000264D4
Document Number:	23SM89655A
Fiscal Year:	2024

IC	CAN	Amount
SM	C96R761	\$2,478,749

IC	CAN	2024
SM	C96R761	\$2,478,749

SM Administrative Data:

PCC: DR / OC: 4145

SECTION II – PAYMENT/HOTLINE INFORMATION – 1H07SM089655-01

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 – 1H07SM089655-01

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:

Use of program income – Additive: Recipients will add program income to funds committed to the project to further eligible project objectives. Sub-recipients that are for-profit commercial organizations under the same award must use the deductive alternative and reduce their subaward by the amount of program income earned.

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 – SM SPECIAL TERMS AND CONDITIONS – 1H07SM089655-01

REMARKS

Crisis Counseling Assistance and Training Program (FEMA)

Regular Services Program (RSP)

FEMA-DR-4720-VT

SAMHSA Grant #: SM-089655-01

1. NOTICE OF AWARD. The total award for this Regular Services Program (RSP) Grant is in the amount of **\$2,478,749** based on the budget submitted on **September 21, 2023**. This grant shall be used for the purposes of funding crisis counseling assistance and training under Section 416 of the Robert T. Stafford Disaster Relief and Emergency Assistance Act, as amended 42 U.S.C. Section 5183 and 44 CFR Section 206.171 (g).

2. PROJECT PERIOD. The project period for this RSP grant shall last up to 9 months from **November 1, 2023**, as established by this Notice of Award (NOA). A state, territory or tribe may only be reimbursed for allowable costs incurred during the project period.

3. ACCOUNT INFORMATION. SAMHSA Division of Grants Management has created a Public Assistance (P) Account in the Division of Payment Management's, Payment Management

System (PMS) to provide a separate accounting for these federal funds. When discussing your account with the PMS Account Representative, please use the document number identified on Page 2 of the Notice of Award under Section I - AWARD DATA, Fiscal Information.

4. **INDIRECT COSTS.** No indirect costs are allowable on RSP grants. The recipient shall ensure that indirect charges are not included in the grant application, budget revisions, or any quarterly and final budget expense reports submitted for review and approval.

5. **REPORTING REQUIREMENTS:**

- Quarterly progress reports are due 30 days after each quarterly reporting period. Specific information will be provided by your corresponding GPO and will be reflected in a subsequent Programmatic Letter.
- A final program, report shall be submitted within 120 days after the end of the project period.
- An account of funds shall be submitted with the final program report.

Ways of submitting Quarterly and Final reports:

1. via eRA system: https://era.nih.gov/era-training/samhsa-videos.htm?q=era_training/samhsa_videos.cfm#amendments under ([Terms and Conditions for SAMHSA Grantees](#)); and
2. via email: directly to your corresponding GPO.

Additional resources:

- <https://www.samhsa.gov/grants/grants-training-materials>
- <https://www.samhsa.gov/grants/applying/registration-requirements>: eRA Commons

Federal Financial Report (FFR)

All financial reporting for recipients of Health and Human Services (HHS) grants and cooperative agreements will be consolidated through a single point of entry, which has been identified as the Payment Management System (PMS). The SF-425 initiative ensures all financial data is reported consistently through one source; shares reconciled financial data to the HHS grants management systems; assists with the timely financial monitoring and grant closeout; and reduces expired award payments. The FFR is required on an annual basis and should reflect only cumulative actual Federal funds authorized and disbursed, any non-Federal matching funds (if identified in the Funding Opportunity Announcement (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. Additional guidance to complete the FFR can be found at <http://www.samhsa.gov/grants/grants-management/reporting-requirements>. Effective January 1, 2021, recipients can connect seamlessly from the **eRA Commons FFR Module to PMS** by clicking the **Manage FFR** button on the **Search for Federal Financial Report (FFR)** page.

- Recipients who do not have access to PMS may use the following instructions on how to update user permission: <https://pms.psc.gov/grant-recipients/access-newuser.html>.
- Recipients who currently have access to PMS and are submitting or certifying the FFR on behalf of their organization, should login to PMS and update their permissions to request access to the FFR Module using the following instructions: <https://pms.psc.gov/grant-recipients/access-changes.html>.
 - Instructions on how to submit a FFR via PMS are available at <https://pmsapp.psc.gov/pms/app/help/ffr/ffr-grantee-instructions.html> (**Must be logged into PMS to access link**)

If you have questions about how to set up a PMS account for your organization, please contact the PMS Help Desk at PMSSupport@psc.hhs.gov or 1-877-614-5533. Note:

Recipients will use PMS to report all financial expenditures, as well as to drawdown funds; SAMHSA recipients will continue to use the eRA Commons for all other grant-related matters including submitting progress reports, requesting post-award amendments, and accessing grant documents such as the Notice of Award.

STANDARD TERMS AND CONDITIONS

Quarter Program/Fiscal/Data reporting

Quarterly progress reports are due 30 days after each quarterly reporting period.

Report	Reporting Period	Due Date
First Quarter Program/Fiscal/Data	11/1/23 - 2/1/24	3/1/2024
Second Quarter Program/Fiscal Data	2/2/24 - 5/2/24	5/31/2024
Final Program/Fiscal Data		
Liquidation Deadline	11/1/23 - 7/31/24	11/28/2024 (120 days)
Closeout Reporting	11/1/23 - 7/31/24	11/28/2024 (120 days)

Standard Terms for Awards

Your organization must comply with the Standard Terms and Conditions for the Fiscal Year in which your grant was awarded. The Fiscal Year for your award is identified on your Notice of Award. SAMHSA's Terms and Conditions webpage is located at:

<https://www.samhsa.gov/grants/grants-management/notice-award-noa/standard-terms-conditions>.

Standards for Financial Management

Recipients and subrecipients are required to meet the standards and requirements for financial management systems set forth in 45 CFR part 75 Subpart D. The financial systems must enable the recipient and subrecipient to maintain records that adequately identify the sources of funds for federally assisted activities and the purposes for which the award was used, including authorizations, obligations, unobligated balances, assets, liabilities, outlays or expenditures, and any program income. The system must also enable the recipient and subrecipient to compare actual expenditures or outlays with the approved budget for the award. SAMHSA funds must retain their specific identity – they may not be commingled with non-federal funds or other federal funds. “Commingling funds” typically means depositing or recording funds in a general account without the ability to identify each specific source of funds with related expenditures.

Reasonable Costs for consideration

Recipients must exercise proper stewardship over Federal funds and ensure that costs charged to awards are allowable, allocable, reasonable, necessary, and consistently applied regardless of the source of funds according to “Reasonable Costs” consideration per 2 CFR § 200.404 and the “Factors affecting allowability of costs” per 2 CFR § 200.403. A cost is reasonable if, in its nature and amount, it does not exceed that which would be incurred by a prudent person under the circumstances prevailing at the time the decision was made to incur the cost.

Consistent Treatment of Costs

Recipients must treat costs consistently across all federal and non-federal grants, projects and

cost centers. Recipients may not direct-charge federal grants for costs typically considered indirect in nature, unless done consistently. If part of the indirect cost rate, then it may not also be charged as a direct cost. Examples of indirect costs include (administrative salaries, rent, accounting fees, utilities, office supplies, etc.). If typical indirect cost categories are included in the budget as direct costs, it is SAMHSA's understanding that your organization has developed a cost accounting system adequate to justify the direct charges and to avoid an unfair allocation of these costs to the federal government. Also, note that all awards are subject to later review in accordance with the requirements of [45 CFR 75.364](#), [45 CFR 75.371](#), [45 CFR 75.386](#) and [45 CFR Part 75, Subpart F](#), Audit Requirements.

Compliance with Award Terms and Conditions

FAILURE TO COMPLY WITH THE ABOVE STATED TERMS AND CONDITIONS MAY RESULT IN ACTIONS IN ACCORDANCE WITH [45 CFR 75.371](#), REMEDIES FOR NON-COMPLIANCE AND [45 CFR 75.372](#) TERMINATION. THIS MAY INCLUDE WITHHOLDING PAYMENT, DISALLOWANCE OF COSTS, SUSPENSION AND DEBARMENT, TERMINATION OF THIS AWARD, OR DENIAL OF FUTURE FUNDING.

All previous terms and conditions remain in effect until specifically approved and removed by the Grants Management Officer.

Closeout Requirements - Discretionary Grants

Recipients must complete all actions required for closeout to include:

- Liquidate all obligations incurred under the award. All payment requests must be submitted before the end of the **(120) days post-award reconciliation/liquidation period**.
- Reconcile financial expenditures to the reported total disbursements and charges in PMS.
- Return any funds due to PMS as a result of refunds, corrections, or audits. Refer the following link for additional guidance <https://pms.psc.gov/grant-recipients/returning-funds-interest.html>

Recipients must close the award in accordance with 2 CFR 200.344 Closeout and the terms and conditions listed in the grant notice of award. Recipients must liquidate all obligations incurred under an award not later than one hundred twenty (120) days after the end of awards obligation and project period. **After one hundred twenty (120) days, PMS account is automatically - locked. SAMHSA does not approve payment requests after one hundred twenty (120) days post-award reconciliation/liquidation period.** Therefore, recipients are expected to complete all expenditure requests within the approved project period and the aforementioned 120-day post-award reconciliation/liquidation period. **Recipients late withdrawal requests occurring after the aforementioned periods will be denied. Final reports are due to SAMHSA no later than 120 days after the end of the project period.** Final reports include:

- Submit via PMS the Final Federal Financial Report (Final FFR, SF-425) (PDF | 1.2 MB)₂
- Submit in eRA Commons the Final Progress Report (FPR) or other reports required by the terms and conditions of the award.
- Submit in eRA Commons a Tangible Personal Property Report (TPPR SF-428, SF428B & if needed additional forms from SF428 series) to account for any property acquired with federal funds or indicate on the form that you have no property to report.

Failure to complete the closeout actions in 120 days after the project period end may result in a unilateral closeout of the grant by SAMHSA. This may affect future funding of federal programs

and result in the reimbursement of funding to SAMHSA. **If the recipient does not submit all reports satisfactorily in accordance with 2 CFR 200.344 SAMHSA will report the recipients material failure to comply with the terms and conditions of the award with the OMB-designated integrity and performance system (currently FAPIIS). Federal awarding agencies may also pursue other enforcement actions per 2 CFR 200.339.** Refer to the following SAMHSA for Closeout Standard Terms and Conditions <https://www.samhsa.gov/grants/grants-management/notice-award-noa/standard-terms-conditions>. Additional information on closeout is available at <https://www.samhsa.gov/grants/grants-management/grant-closeout>.

Staff Contacts:

Anne Reim, Program Official

Phone: 240-276-2894 **Email:** Anne.Reim@samhsa.hhs.gov

Suraj Goyle, Grants Specialist

Phone: 240-276-2552 **Email:** suraj.goyle@samhsa.hhs.gov

**State of Vermont**


Department of Mental Health
280 State Drive, NOB 2 North
Waterbury, VT 05671-2010
<http://mentalhealth.vermont.gov/>

Agency of Human Services

[phone] 802-241-0090
[fax] 802-241-0100
[tty] 800-253-0191

MEMORANDUM

TO: Kristin L. Clouser, Secretary of Administration

FROM: Alexia Venafra, Financial Manager III  ^{DS}

CC:

DATE: September 22, 2023

RE: AA-1PN for FEMA Crisis Counseling - Regular Services Program (DR-4720-VT)

Enclosed please find the documentation notifying the Joint Fiscal Committee (JFO) of the unavoidable need to spend State funds in advance of JFO approval of grant requests and with the intent of securing a federally funded grant award for Crisis Counseling Assistance and Training Program - Regular Services Program from the Federal Emergency Management Agency (FEMA). The funds and the Notice of Award will be coming from the Substance Abuse and Mental Health Services Administration (SAMHSA); SAMHSA receives funds through interagency agreements and then awards them to the State.

This grant is for additional funds for a post disaster crisis counseling assistance and training program to continue to support Vermonters in the nine counties declared for FEMA Individual Assistance due to the July 2023 flooding event.

DMH, in collaboration with the Department for Public Safety (DPS), applied and received initial funds for this effort through FEMA's Immediate Services Program (ISP). This grant is to fund the continuation of those services through FEMA's Regular Services Program (RSP), which has a duration of nine months. Unlike the ISP, which is awarded to the State through DPS and then transferred to DMH, the RSP is awarded to DMH directly. The amount we requested for RSP in our initial application submission is: \$2,478,748.38. We are still responding to Requests for Information from our federal partners since submitting the application, so the final budget on the Notice of Award may vary from what is listed here. The ISP has received an extension through November 11th, and the RSP will take effect on the day the Notice of Award is issued.

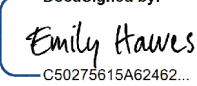
Please find the following documents enclosed:

- AA-1PN memo
- AA-1PN form
- Grant Application

If you have any questions, please contact me via email at alexia.venafra@vermont.gov or phone 802.241.0092.



STATE OF VERMONT GRANT SPENDING PRE-NOTICE (Form AA-1PN)

PURPOSE & INSTRUCTIONS:			
<p><i>This form is intended solely as notification to the Joint Fiscal Committee of the unavoidable need to spend State funds in advance of Joint Fiscal Committee approval of grant requests and with the intent of securing a federally or privately funded grant award. Pre-notification is required for expenditures of state funds beyond basic grant application preparation and filing costs. Expenditure of these state funds does not guarantee that a grant will be awarded to the State of Vermont, or that a future grant award will be accepted by the Joint Fiscal Committee. If a grant award is subsequently received, a completed Form AA-1 Request for Grant Acceptance must be submitted to the Joint Fiscal Committee for review and approval before spending or obligating additional funds.</i></p>			
BASIC GRANT INFORMATION			
1. Agency:	Agency of Human Services		
2. Department:	Department of Mental Health		
3. Program:	DR-4720-VT Crisis Counseling		
4. Legal Title of Grant:	Crisis Counseling - Regular Services Program		
5. Federal Catalog #:	97.032 & 93.982		
6. Grant/Donor Name and Address:	Substance Abuse & Mental Health Services Admin. (SAMHSA), 5600 Fishers Ln Rockville, MD 20857		
7. Grant Period:	From:	9/13/2023	To: 6/13/2024
8. Purpose of Grant:	Continued post disaster crisis counseling assistance and training program to support Vermonters in the nine counties declared for FEMA Individual Assistance due to the July 2023 flooding event.		
9. STATE FUNDS TO BE SPENT IN ADVANCE OF GRANT ACCEPTANCE BY JOINT FISCAL:			
Expenditures:	FY 24	Required Explanation/Comments	
Personal Services	\$0.00	(Include type of expenditures to be incurred, i.e. training, planning, proposal development, etc.) Planning, training, travel, supplies, etc.	
Operating Expenses	\$92,428.98		
Grants	\$400,339.20		
Total	\$492,768.18		
10. AUTHORIZATION AGENCY/DEPARTMENT			
I/We certify that spending these State funds in advance of Joint Fiscal Approval of a Grant is unavoidable, and that a completed Form AA-1 Request for Grant Acceptance will be submitted for Joint Fiscal Committee approval if a grant award is received for this program:	Signature:	<div style="border: 1px solid black; border-radius: 50%; padding: 2px; display: inline-block;">  </div>	Date: 9/23/2023
	Title:	DMH Commissioner	
	Signature:		Date:
	Title:		
11. ATTACHMENTS: Attach relevant documentation that demonstrates the necessity of this expenditure. (example: funding opportunity guidelines require training, etc.)			
Distribution: Original - Joint Fiscal Office; Copy 1 – Department Grant File; Copy 2 – Attach to Form AA-1 (if grant is subsequently received).			
(End Form AA-1PN – Grant Spending Pre-Notice – Form AA-1PN)			

DEPARTMENT OF HOMELAND SECURITY
Federal Emergency Management Agency

OMB Number: 1660-0085
Expires 03-31-2026

**APPLICATION FOR CRISIS COUNSELING PROGRAM SERVICES
(REGULAR SERVICES PROGRAM)**

PAPERWORK BURDEN DISCLOSURE NOTICE

Public reporting burden for this form is estimated to average 20 hours per response. The burden estimate includes the time for reviewing instructions, searching existing data sources, gathering and maintaining the needed data, and completing, reviewing, and submitting the form. You are not required to respond to this collection of information unless a valid OMB control number appears in the upper right corner of this form. Send comments regarding the accuracy of the burden estimate and any suggestions for reducing this burden to: Information Collections Management, Department of Homeland Security, Federal Emergency Management Agency, 500 C Street, SW, Washington, DC, 20472, Paperwork Reduction Project (1660-0100). **NOTE: Do not send your completed form to the above address.**

PRIVACY ACT STATEMENT

GENERAL: The information on this form may be disclosed as generally permitted under 5 U.S.C. § 552a (b) of the Privacy Act of 1974, as amended. This includes using this information as necessary and authorized by the routine uses published in DHS/FEMA - 004 Grant Management Information Files System of Records, 74 Fed. Reg. 39705 (August 7, 2009) and upon written request, by consent, by agreement, or as required by law.

AUTHORITY: Section 416 of the Robert T. Stafford Disaster Relief and Emergency Assistance Act, as amended (42 U.S.C. § 5183); 44 C.F.R. § 206.171.

PURPOSES AND USES: This information is being collected for the primary purpose of determining eligibility for the Crisis Counseling Assistance and Training Program, Regular Services Program funding following a Presidentially-declared disaster.

EFFECTS OF NONDISCLOSURE: The disclosure of information on this form is voluntary; however, failure to provide the information requested may delay or prevent FEMA from providing the requested funding.

PART I: GENERAL APPLICATION INFORMATION

Completion of this form including applicable attachments satisfies legal requirements for application for the Regular Services Program (RSP) under 42 U.S.C. § 5183 as implemented at 44 C.F.R. § 206.171. Failure to use this application may result in a failure to meet these requirements and/or a delay in processing the request. This application must be submitted no later than 60 days following the declaration of a major disaster.

1. Request Date: 09/12/2023	2. Declaration #: DR-4720-VT	3. Declaration Date: 07/14/2023
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4. State, Tribal Government or Territory requesting services:	State of Vermont
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5. Primary Point of Contact (POC) information for the administration of this program.

5a. POC Name:	Lee Dorf
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5b. POC Organization:	Vermont Department of Mental Health
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5c. POC Mailing Address:	280 State Drive - NOB 2 North, Waterbury, VT 05671-2010
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5d. POC E-Mail Address:	Lee.Dorf@vermont.gov
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5e. POC Phone Number	8025850885
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6. Amount requested for Regular Services Program (RSP) funding (please round to nearest dollar).	\$2,478,748
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PART II: RESPONSE ACTIVITIES FROM DATE OF INCIDENT

7. Describe State and local crisis counseling activities from the date of the incident to the date of this application. Enter "N/A" if no crisis counseling activities have been conducted to date.

The State of Vermont has experienced historic flooding resulting in significant damages and losses across many municipalities across counties in Vermont. State and Federal officials began their preliminary damage assessments (PDAs) on July 12. Several counties have had major impacts including Washington, Orange, Rutland, Lamoille, Windsor, Windham, and Chittenden. Thousands of homes, businesses, and properties have been damaged, which has directly impacted tens of thousands of Vermonters. The Community Mental Health Centers (CMHC) serving the populations in these communities have been impacted directly as well, doing what they can to support their staff and the clients. The traumatic distress from such a significant event is further compounded by those who experienced loss in the same communities from the impacts of Tropical Storm Irene in 2011. The State is seeking additional funds to support the population as a result of this disaster event and to mitigate mental and emotional disturbances related to the impacts.

If an Immediate Services Program (ISP) was implemented for this disaster, please answer questions #8-10 below. Otherwise, skip to question #11.

8. Please provide a brief summary of the ISP currently in place. Please include information on the population served, any extensions (date and amount), the number of providers, the start and end dates of the program, and summarize any trends. Include any best practices as well as any challenges and describe how those challenges were addressed or will be addressed in the RSP.

DMH has identified seven (7) providers to cover the nine (9) declared counties with Crisis Counseling Services. The contract agreements are all drafted and routing for execution, which should be executed by the time this application is reviewed. We have also requested a 60-day extension of the ISP to allow the the RSP approval and award to occur. DMH entered a contract for Core Content Training. The first session was held in-person in Waterbury, VT on September 5-6. There were 26 individuals who completed the training. We plan to host additional virtual trainings as new staff are hired by the providers. DMH is also working with an organization to provide project management and logistical support to the CCP, Vermont Program for Quality Health Care.

DMH has been working with the state's Marketing Office and our existing vendors to seek bids for public service announcements, media buys, print material, and strategic support for this statewide initiative. This process takes time and is not as far along as we would hope, but we anticipate having a better sense of the marketing plan by late September.

9. If applicable, explain why any service providers not included in the ISP were added to this RSP application. Additionally, explain why any service providers included in the ISP are excluded from the proposed RSP.

In our ISP application we listed what we thought would happen, but have since needed to make some minor adjustments. The provider tab in our budget was previously consolidated, but we can now provide the specifics for the individual providers. We had also listed the project management under state personnel, but the process would be prohibitive, so we should have included that in the contractual section of the ISP budget.

We will also be working with Vermont 211 to be the phone point of contact to refer callers to the appropriate provide for their region should they call and could benefit from CCP service due to the flooding event. They will be reporting call metrics and volumes on what they receive once 211 is advertised for these services.

10. Describe how the RSP will build on the work done in the ISP. Describe how contacts and resources identified during the ISP will be leveraged during the RSP.

The ISP is just getting started with contracts being executed and staff being trained and hired. Services have been provided on a limited basis in some areas while the pieces all come together, but the goal with the RSP is to ramp up the exposure and services available to the impacted Vermonters. This is timely as school is back in session and supports such as FEMA DRCs and State MARCs are being demobilized.

With the providers under contract, ODCES being operational, and a marketing plan coming together, we can bring these much needed supports to Vermonter in need, including education about programs they may not realize is available to them, such as Disaster Legal Services.

11. Please provide a brief summary that provides key information on the scope and magnitude of the disaster, how the Grantee and providers propose to provide services during the RSP, and the nature and location of the proposed services. Please include a description of the length of time services will be required and describe how long-term cases will be handled. Please describe the nature of psychological and social problems observed and the types of mental health problems encountered by disaster survivors.

Given the rurality of Vermont, as well as the variable needs and ability to access services, this FTE count better depicts the ability to serve these communities. Washington County was impacted most significantly, and while parts of Chittenden county (the largest county) were impacted it is more spread out in parts of the county instead of every part of the region. Populations impacted include children; adolescents; older adults; individuals with disabilities; cultural needs; access and functional needs; lower income populations; first responders; etc. The State will work with the Community Mental Health Center, Specialized Service Agencies, and other peer-operated organizations that have an established relationship with the State to provide mental health and respite services to these counties, which will allow for accessible CCP support to the populations they serve. They will work within their existing programs that provide services across the age span and expand to outreach to provide Crisis Counseling support to all impacted Vermonter. They will utilize translation and interpreter services as appropriate to best communicate with the Vermonters they serve with language access concerns. There has been a tremendous effort by all emergency management and first responder agencies across the State. It is anticipated that the need to serve this population will be great and will need to involve increased outreach to make the services readily available to Vermonters in the aftermath of such a significant disaster response.

While the application offers suggested ratios of staffing to the impacted population, we determined that the need would be much greater than the 300:1 ratio would support. This is in part due to the rurality of the state, particularly in the impacted regions, and the expanse of the damage caused by this disaster. This staffing model will allow for support to be provided in multiple areas throughout a county or region without being spread too thin or requiring disaster survivors to travel significant distances to access Crisis Counseling. Only accessing a single community with a single team of CCP providers at time would not provide sufficient support to Vermonters. In addition, the staffing model follows the approach that includes the recommended teams of two. While the table evaluates staffing as FTEs, this will not necessarily equate to the number of individuals needed to staff the positions. More likely, in a county that has 2 FTE of direct staff, we would expect to see two teams of two serving the area: $4 \times 0.5 = 2$ FTE. This is outlined in the budget narrative as well.

The State is also planning to hire a Provider Project Manager that would provide oversight to the provider operations in coordination with the State CCP Program Director. They would work with a Data Evaluation Specialist and Administrative/Fiscal Support that would ensure accuracy and completeness in reporting.

The state is entering into contractual agreements within the parameter of Administrative Bulletin 3.5, which outlines the state procurement and contracting procedures.

PART III: GEOGRAPHIC AREAS AND NEEDS ASSESSMENT

12. Estimated Population to be served:

OPTION A: Federal award applicants may opt to use their own method for determining the estimated population to be served. Please cite data sources used. Please also list the proposed providers and the number of direct and non-direct staff anticipated.

OPTION B: Use the following table to estimate the impacted population for each requested service area (county, parish, tribal land, etc.). Populate the table using census data for the total population for each designated service area. Please select a "Percentage Impact Factor" between .75% (multiply the "Total Census Population by 0.0075) and 2% (multiply the "Total Census Population" by 0.02) to determine "Estimated Population to be Served". Please also list the number of direct and direct support staff anticipated. Provide a brief justification for the "Percentage Impact Factor" chosen in the box below. Please also list the proposed providers and the number of direct and support staff anticipated.

Service Provider Name (if known) and Requested Declared Service Areas	Total Census Population in Requested Declared Service Areas	Percentage Impact Factor (.75%)	Estimated Population to be Served during the RSP	Number of Direct Staff FTE's (Crisis Counselors, Team Leads) (Typically a 300:1 ratio)	Number of Non-Direct Staff FTE's (Admin., Fiscal, Data etc.) Typically 15-20%
Clara Martin Center (Orange)	29846	0.75%	224	2.00	0.25
Howard Center (Chittenden)	169301	0.75%	1270	4.00	0.50
HCRS (Windsor & Windham)	103984	0.75%	780	7.00	0.50
Lamoille County Mental Health	26090	0.75%	196	2.00	0.25
NKHS (Caledonia & Orleans)	58245	0.75%	436	4.00	0.50
Rutland Mental Health Services	60366	0.75%	453	4.00	0.50
Washington County MH	60048	0.75%	450	5.00	0.50
TOTALS:	507880	-	3809	28	3

Describe any circumstances not captured in the table above that will have an impact on the need for and equitable delivery of crisis counseling services during the RSP. Include any high-risk groups or populations of concern (e.g., children; adolescents; older adults; individuals with disabilities; cultural needs; access and functional needs; lower income populations; first responders; etc.). Please include your plan to ensure the RSP is accessible.

See question 11.

We added the non-direct staff positions to the Providers to enable them to capture all the necessary documentation and coordination.

The State will also be contracting with an entity to provide project management support for 2.5 FTE, including Provider Project Manager, Data Evaluation Specialist, and Admin/Fiscal Specialist.

PART IV: RESOURCES AND CAPABILITIES

13. Describe the current mental health resources and explain why they cannot meet the disaster-related mental health needs caused or aggravated by this disaster.

Thus far the CMHC are:

- Responding to residential facilities that serve adult with SMI to move them out of flooded facilities to dry motels.
- Providing medication deliveries to individuals (in a boat) to ensure flooded individuals have their prescriptions.
- Providing Mental Health support to un-housed individuals that needed to move from camps into motel.
- Providing Mental Health supports to temporary emergency shelters that have opened in communities.
- Providing hotel rooms to staff that were not able to go home after their shift due to the flooding.
- Creating brochures for communities re: emotional response to flooding including crisis numbers/988.
- Providing extra staff resources to families in their homes of the youth that were scheduled to attend camps (cancelled).
- Staff that are available are working overtime in residential to cover shifts of those that are flooded and can't get into work.
- Providing disaster crisis counseling at shelters and other mass care sites.

The CMHC function to serve the designated population of Medicaid-enrolled individuals with mental illness. While they do also provide services to non-Medicaid-enrolled individuals and families, they do not serve the population as a whole. The unique nature of what CCP provides is access to support services to all disasters survivors in a designated region, regardless of their mental health status or prior need for services. This is also a unique program that is designed to provide direct outreach and support out in the community and get more individual awareness and access to the supports they may need. Often during disasters there is a notion that you should not seek services because there are others who need it more and not wanting to take away from the less fortunate. This CCP program helps address that by providing outreach and education services in the community.

14. Has the Federal award applicant received funds for mental health disaster response from any other source (i.e. Department of Education, Foundations, etc) ? If so, how much and how are these funds used?

There is no specific dollar amount to report, but the Department of Mental Health has been communicating with the Vermont Community Foundation (VCF) to determine how they can help provide funding to the impacted communities. They have been seeking to specifically support mental health efforts as it aligns with their mission. They are eager to support the CCP program if there are outstanding needs that would work alongside the CCP program that are otherwise not funded. We have not determined what activities or funds would be needed, but VCF is eager to provide support to those in need in the community if they are able to do so.

PART V: PROGRAM ADMINISTRATION

15. Will the State, Tribal Government or Territory be providing any direct crisis counseling services?

Yes No

16. Attach an overall organizational chart for this project

17. Provide a brief description of administrative oversight plans (supervision and monitoring of crisis counselors, team leads, data collection efforts, managing and monitoring staff stress, etc).

The DMH Director of Mental Health Services will be the State CCP Director and the lead on this statewide effort in coordination through the Community Mental Health Centers (CMHC). Teams leads will be assigned within the provider network to support these efforts. Reporting will be funneled up to the State. There will be supervision occurring on a regular basis with the crisis counselors to ensure that things are going well and that they are supported and managed their own response to the disaster. The State will be creating a virtual media campaign, using printed materials and flyers; print media; PSAs on radio and television; community contacts for the ISP period. Outreach to targeted vulnerable populations to include: Individuals with severe mental illness, Children and Youth; Refugees and Non-English speaking population; Caregivers; Elders; Homeless population; People living with food insecurity; Essential workers; People in congregate living settings.

The State will seek a Provider Project Manager for direct oversight of the providers and serve as the conduit back to the State CCP Director. We will also have a Data Evaluation Specialist and Fiscal Administrator to support timely and complete reporting and documentation. The State will also employ Community Liaisons to serve as cultural brokers where needed.

The Provider Project Manager will be meeting with the providers on a weekly basis, which may involve the State CCP Director as well initially. The Project Manager will also meet with the providers on an as needed basis. Meetings may become bi-weekly as time goes on, depending on need.

18. How will the Federal award applicant monitor the organization and deployment of crisis counseling teams? If more than one provider agency will be delivering services, please describe the plan to coordinate services. If more than one provider will cover a service area, please include a map that shows how the responsibility for that service area will be divided.

The State will be contracting with a Provider Project Manager to provide the direct oversight of the provider and coordinate with the State CCP Coordinator to ensure things are on track. They will be responsible for checking in with each of the seven provider organizations regularly, reviewing their data, providing quality assurance, and supporting documentation management. Each of the seven providers will cover the populations in the counties they serve as Community Mental Health Centers. Two of the providers will cover two counties in their region, which is they there are seven providers for nine counties.

19. Describe the Federal award applicant's plan for quality control methods to ensure appropriate services reach survivors.

This will be managed by our Provider Project Manager reviewing the data, the number of contacts, and having regular check-ins with the providers to ensure the operations are running smoothly and all towns in the county are having access to services.

The data will be reviewed in scheduled meeting with each of the CCP sites. These meetings will involve the State CCP Director, as well.

ODCES entry approval will be managed by the Provider Project Manager or their data evaluation specialist. Approval may be granted to teams leads over time, but initially this will be centrally managed.

20. With what organizations and community stakeholders will you partner? Select all that apply:

- Community Mental Health and Substance Abuse Centers
- Schools
- Faith-Based Organizations
- First Responders
- Community-Based Cultural Organizations
- Law Enforcement
- Local Elected Officials
- Long-Term Recovery Groups
- Other: Charitable Foundation, VT 211

21. Briefly describe how you will engage with the partners identified above.

Community Mental Health Centers will be the providers for CCP services. VT 211 will be the advertised call center to connect Vermonters to the appropriate provider for their region.

We are also looking to involve the Vermont Language Justice Project to increase awareness and access to the CCP services through the production of videos describing the services and reasons to seek them; they will be translated into multiple languages to reduce language as a barrier.

CCP providers will also work with schools and first response organization in their impacted counties to provide support as requested at meetings and events related to flood impacts and recovery.

22. What primary CCP services will you provide? Please select all that apply.

- Individual crisis counseling
- Group crisis counseling
- Brief educational or supportive contact
- Public education
- Assessment, referral, and resource linkage
- Community networking and support

23. What secondary CCP services will you provide? Please select all that apply.

- Development and distribution of educational materials
- Media and public service announcements

24. **State Staffing Plan.** Please provide information on the staffing at the Grantee level. Include leadership positions and direct staff if the State, Territory or Tribe is providing any direct services. Do not include provider-level staff.

Type of Staff	Grant Funded		Projected In-Kind	
	# of Staff Members	# of FTE's (based on 40 hours per week)	# of Staff Members	# of FTE's (based on 40 hours per week)
Senior leadership			2	0.25
Communications			2	0.1
TOTALS:	0	0	4	0.35

25. Describe the Federal award applicant's plan to ensure clear program identity (educational materials, wellness messaging, logos, etc.) and market the program (including website, hotline, social media, public service announcements, etc.)

The State is seeking bids from out marketing contractors to support this brand identity and media campaign. This will include public services announcements; media buys; radio ads; print and digital media; earned media and more. We will be reviving the branding used for Tropical Storm Irene in 2012: Starting Over Strong VT. We will advertise 211 as the place to call, and locally people will know to contact the provider directly, if not referred from 211. We will have a web page on our website to provide overview information, but this will direct people to contract their local providers.

26. Briefly describe the facilities to be utilized and your plan for securing office space for this project.

There will be no centralized office space for this work. The organization involved will use their own existing office space in-kind and the work itself will be done primarily out in the community. The state-level contractor will work out of their existing office space in Montpelier, VT, unless they need to travel to meet with providers or the State in Waterbury, VT.

27. The CCP requires mandatory training during the RSP as described in the CCP guidance. Please describe the proposed training program for project staff, indicating the number of workers needing such training. Also include additional training (if any) that you plan to provide and the rationale for such training.

Vermont Department of Mental Health will contract with an eligible trainer to complete the mandatory trainings for trainings listed below:

- Core Content Training – Virtual training will be provided for any staff hired for CCP work, including 211 staff, and project manager. Approximately 15-20 staff however more if the agencies experience turnover during the RSP period.
- Transition to RSP Training – 1.5-day training to assist CCP staff to transition to RSP. Approximately 30-35 staff will need to be trained depending on timing of the RSP award. Attendees will include Project Manager.
- RSP mid-program Training – 1 day training to assist CCP staff to discuss program successes and challenges and identify ongoing needs. Approximately 30-35 staff will need to be trained. Attendees will include the Project Manager.
- Disaster Anniversary Training – 1 day training to help CCP staff anticipate and respond to disaster anniversary reactions. Approximately 30-35 staff will need to be trained. Attendees will include the Project Manager.
- RSP Phasedown Training – 1 day training to recognize the work that the CCP program has accomplished and reassess the community needs. Approximately 30-35 staff will need to be trained. Attendees will include the Project Manager.
- CCP data forms and App training – Trainings will be scheduled as needed to meet the needs of the staff that are currently trained and/or will be trained in CCP.
- Psychological First Aid – 2-day training. Vermont is interested in providing this valuable training to the Community Mental Health Centers (CCP staff). Approximately 35-50 staff will be trained.

DMH Leadership will continue to monitor of ongoing need for trainings and assess if trainings will be held in person or virtually.

28. Does the State, Territory or Tribe have any experienced trainers who can provide training on the CCP model?

Yes No

PART VI: BUDGET

29. Attach a Standard Form 424: Request for Federal Assistance (SF-424) and Standard Form 424a: Budget Information - Non-Construction Programs (SF-424a). These forms should include all projected operating costs.
30. Attach a budget narrative explaining each line item on the SF-424a.

PART VII: ASSURANCES

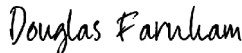
31. Please indicate whether the following assurances have been completed and submitted with this application:

- a. SF-LLL Disclosure of Lobbying Activities Yes No
- b. Disbarment and Suspension and other Responsibility Matters Yes No
- c. HHS Project Site Location/Key Contacts Form Yes No

32. The Governor or Chief Tribal Executive or their authorized representative agrees to and/or certifies that:

- The requirements are beyond the State, local, Territory, or Tribal government's capabilities.
- The program, if approved, will be implemented according to the plan contained in the application approved by the Assistant Administrator for the Recovery Directorate.
- The State, Tribal Government or Territory will maintain close coordination with and provide reports to the Regional Administrator, the Assistant Administrator for the Recovery Directorate and the Secretary.
- The State, Tribal Government or Territory's emergency plan, prepared under Title II of the Stafford Act, will include disaster mental health planning.

33. By signing below, the Governor's Authorized Representative (GAR) or the Chief Tribal Executive affirms that the foregoing questions have been answered correctly and truthfully to the best of their knowledge.

DocuSigned by:

 41948B1C0A36415...

9/21/2023

Signature

Date

PART VIII: APPLICATION CHECKLIST

34. The following documents are being submitted with this grant application:

- a. Completed RSP Application Yes No
- b. Request for Federal Assistance (SF-424) Yes No
- c. Budget Information - Non-Construction Programs (SF-424a) Yes No
- d. Assurances for Non-Construction Programs (SF-424b) Yes No
- e. Budget Narrative Yes No
- f. Organizational Chart Yes No
- g. Assurance forms from question 31 above Yes No