



BOARD OF SUPERVISORS AGENDA ITEM REPORT  
AWARDS / CONTRACTS / GRANTS

Award  Contract  Grant

Requested Board Meeting Date: December 3, 2024

or Procurement Director Award:

\* = Mandatory, information must be provided

**\*Contractor/Vendor Name/Grantor (DBA):**

Department of Health and Human Services, Centers for Disease Control and Prevention (CDC)

**\*Project Title/Description:**

PimaREACH (Racial and Ethnic Approaches to Community Health) Coalition: Restoring Cultures of Health Among Native American and Hispanic/Latinx Communities in Pima County, Arizona.

**\*Purpose:**

Amendment #1 provides the budget for Year 2 of the grant period, \$680,038.00. Amendment #1 also adds language having to do with substantial involvement by the CDC and allows carryover of unobligated balances from Year 1. The Pima County Health Department will work with community partners to improve health and quality of life in Pima County by working with Latinx and Native American communities to develop strategies related to: food and nutrition security, safe and accessible physical activity and nutrition and physical activity in early care and education settings.

**\*Procurement Method:**

This grant amendment is a non-Procurement contract and not subject to Procurement rules. The grant amendment was reviewed by PCAO.

**\*Program Goals/Predicted Outcomes:**

REACH aims to improve health, prevent chronic diseases, and reduce health disparities among the Pima County population at the highest risk/burden of chronic diseases including hypertension, heart disease, Type 2 diabetes, and obesity. The program addresses food and nutrition security, safe and accessible physical activity and nutrition and physical activity in early care and education settings.

**\*Public Benefit:**

The REACH program benefits target communities by reducing the risk of chronic disease and decreasing health disparities.

**\*Metrics Available to Measure Performance:**

The work plan submitted as part of the proposal includes outcome measures such as number of community support actions, number trained tribal and Latino community spokespersons, materials distributed to community-based organizations and other partners, and number of partnerships formed.

**\*Retroactive:**

Yes. This amendment begins 09/30/2024. If not accepted, PCHD will not be able to continue with the important work funded by this grant.

6 MTD apprv's  
PCHD 11/15/24

THE APPLICABLE SECTION(S) BELOW MUST BE COMPLETED

Click or tap the boxes to enter text. If not applicable, indicate "N/A". Make sure to complete mandatory (\*) fields

Contract / Award Information

Document Type: Department Code: Contract Number (i.e., 15-123):
Commencement Date: Termination Date: Prior Contract Number (Synergen/CMS):
Expense Amount \$ Revenue Amount: \$

\*Funding Source(s) required:

Funding from General Fund? Yes No If Yes \$ %

Contract is fully or partially funded with Federal Funds? Yes No

If Yes, is the Contract to a vendor or subrecipient?

Were insurance or indemnity clauses modified? Yes No
If Yes, attach Risk's approval.

Vendor is using a Social Security Number? Yes No
If Yes, attach the required form per Administrative Procedure 22-10.

Amendment / Revised Award Information

Document Type: Department Code: Contract Number (i.e., 15-123):
Amendment No.: AMS Version No.:
Commencement Date: New Termination Date:
Prior Contract No. (Synergen/CMS):
Expense Revenue Increase Decrease
Amount This Amendment: \$

Is there revenue included? Yes No If Yes \$

\*Funding Source(s) required:

Funding from General Fund? Yes No If Yes \$ %

Grant/Amendment Information (for grants acceptance and awards)

Award Amendment

Document Type: Grant Amendment Department Code: HD Grant Number (i.e., 15-123): 70325
Commencement Date: 09/30/2024 Termination Date: 09/29/2025 Amendment Number: 01
Match Amount: \$ Revenue Amount: \$ 680,038.00

\*All Funding Source(s) required: U.S. Dept. of Health and Human Services, Centers for Disease Control and Prevention

\*Match funding from General Fund? Yes No If Yes \$ %

\*Match funding from other sources? Yes No If Yes \$ %

\*Funding Source:

\*If Federal funds are received, is funding coming directly from the Federal government or passed through other organization(s)?
Directly from the Federal government

Contact: Sharon Grant

Department: Health

Telephone: 724-7842

Department Director Signature: Date: 11-8-24
Deputy County Administrator Signature: Date: 15 Nov 2024
County Administrator Signature: Date: 11/18/2024



DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Notice of Award

Award# 5 NU58DP007752-02-00

FAIN# NU58DP007752

Federal Award Date: 09/09/2024

Recipient Information

1. Recipient Name

PIMA COUNTY
3950 S Country Club Rd STE 100
Tucson, AZ 85714-2226
[NO DATA]

2. Congressional District of Recipient

07

3. Payment System Identifier (ID)

1866000543A2

4. Employer Identification Number (EIN)

866000543

5. Data Universal Numbering System (DUNS)

144733792

6. Recipient's Unique Entity Identifier (UEI)

U8XUY58VDQS3

7. Project Director or Principal Investigator

Ms. Kimberly VanPelt
Deputy Director
Kimberly.VanPelt@pima.gov
520-724-7894

8. Authorized Official

Dr. Dorothee Harmon..
Division Manager/AOR
dorothee.harmon@pima.gov
520-576-6067

Federal Agency Information

CDC Office of Financial Resources

9. Awarding Agency Contact Information

Thelma Jackson
Grants Management Specialist
koy8@cdc.gov
770-488-2823

10. Program Official Contact Information

Ms. Dasheema Jarrett
Public Health Advisor
xkn9@cdc.gov
404-718-6686

Federal Award Information

11. Award Number

5 NU58DP007752-02-00

12. Unique Federal Award Identification Number (FAIN)

NU58DP007752

13. Statutory Authority

Public Health Service Act, as amended, Section 301(a) and Section 317K, 42 U.S.C. 241(a); 42 U.S.C. 247b-12

14. Federal Award Project Title

PimaREACH Coalition: Restoring Cultures of Health Among Native American and Hispanic/Latinx Communities in Pima County, Arizona

15. Assistance Listing Number

93.304

16. Assistance Listing Program Title

Racial and Ethnic Approaches to Community Health

17. Award Action Type

Non-Competing Continuation

18. Is the Award R&D?

No

Summary Federal Award Financial Information

Table with 2 columns: Item Number and Amount. Includes rows for Budget Period Start Date (09/30/2024 - End Date 09/29/2025), Total Amount of Federal Funds Obligated by this Action (\$680,038.00), Authorized Carryover (\$0.00), Total Amount of Federal Funds Obligated this budget period (\$0.00), Total Approved Cost Sharing or Matching, where applicable (\$0.00), Total Federal and Non-Federal Approved this Budget Period (\$680,038.00), Period of Performance Start Date (12/30/2023 - End Date 09/29/2028), Total Amount of the Federal Award including Approved Cost Sharing or Matching this Period of Performance (\$1,219,294.00).

28. Authorized Treatment of Program Income

ADDITIONAL COSTS

29. Grants Management Officer - Signature

Ms. Pamela Render
Grants Management Officer

30. Remarks



DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

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**Recipient Information**

**Recipient Name**  
PIMA COUNTY  
3950 S Country Club Rd STE 100  
Tucson, AZ 85714-2226  
[NO DATA]

**Congressional District of Recipient**  
07

**Payment Account Number and Type**  
1866000543A2

**Employer Identification Number (EIN) Data**  
866000543

**Universal Numbering System (DUNS)**  
144733792

**Recipient's Unique Entity Identifier (UEI)**  
U8XUY58VDQS3

**31. Assistance Type**  
Cooperative Agreement

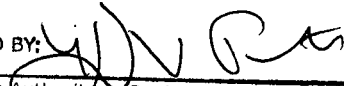
**32. Type of Award**  
Other

**33. Approved Budget**  
(Excludes Direct Assistance)

I. Financial Assistance from the Federal Awarding Agency Only	
II. Total project costs including grant funds and all other financial participation	
a. Salaries and Wages	\$299,373.00
b. Fringe Benefits	\$104,741.00
c. Total Personnel Costs	\$404,114.00
d. Equipment	\$0.00
e. Supplies	\$14,519.00
f. Travel	\$18,100.00
g. Construction	\$0.00
h. Other	\$108,529.00
i. Contractual	\$75,000.00
j. TOTAL DIRECT COSTS	\$620,262.00
k. INDIRECT COSTS	\$59,776.00
l. TOTAL APPROVED BUDGET	\$680,038.00
m. Federal Share	\$680,038.00
n. Non-Federal Share	\$0.00

**34. Accounting Classification Codes**

FY-ACCOUNT NO.	DOCUMENT NO.	ADMINISTRATIVE CODE	OBJECT CLASS	CFDA NO.	AMT ACTION FINANCIAL ASSISTANCE	APPROPRIATION
4-9390AG1	24NU58DP007752	DP	410Q	93.304	\$680,038.00	75-24-0948

REVIEWED BY: 

Appointing Authority or Designee  
Pima County Health Department



**DEPARTMENT OF HEALTH AND HUMAN SERVICES** Notice of Award

Centers for Disease Control and Prevention

Award# 5 NU58DP007752-02-00

FAIN# NU58DP007752

Federal Award Date: 09/09/2024

**Direct Assistance**

BUDGET CATEGORIES	PREVIOUS AMOUNT (A)	AMOUNT THIS ACTION (B)	TOTAL (A + B)
Personnel	\$0.00	\$0.00	\$0.00
Fringe Benefits	\$0.00	\$0.00	\$0.00
Travel	\$0.00	\$0.00	\$0.00
Equipment	\$0.00	\$0.00	\$0.00
Supplies	\$0.00	\$0.00	\$0.00
Contractual	\$0.00	\$0.00	\$0.00
Construction	\$0.00	\$0.00	\$0.00
Other	\$0.00	\$0.00	\$0.00
<b>Total</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>

# AWARD ATTACHMENTS

PIMA COUNTY

5 NU58DP007752-02-00

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1. Terms and Conditions NCC Year 2

## AWARD INFORMATION

**Incorporation:** In addition to the federal laws, regulations, policies, and CDC General Terms and Conditions for Non-research awards at <https://www.cdc.gov/grants/federalregulationspolicies/index.html>, the Centers for Disease Control and Prevention (CDC) hereby incorporates Notice of Funding Opportunity (NOFO) number **DP-23-0014 Racial and Ethnic Approaches to Community Health (REACH)**, and application dated **April 22, 2024** as may be amended, which are hereby made a part of this Non-research award, hereinafter referred to as the Notice of Award (NoA).

**Total Approved Funding is included in Summary Federal Award Financial Information on page 1 of the NOA.** All future year funding will be based on satisfactory programmatic progress and the availability of funds.

The federal award amount is subject to adjustment based on total allowable costs incurred and/or the value of any third party in-kind contribution when applicable.

**Financial Assistance Mechanism:** Cooperative Agreement.

**Summary Statement/Technical Review:** Within 5 days of this Notice of Award's (NOA) issue date, the Summary Statement/Technical Review will be accessible to the recipient in GrantSolutions Grant Notes. Contact the assigned Program Officer indicated in the NOA with any questions regarding this document or any follow up requirements and timelines set forth therein.

**Substantial Involvement by CDC:** This is a cooperative agreement and CDC will have substantial programmatic involvement after the award is made. Substantial involvement is in addition to all post-award monitoring, technical assistance, and performance reviews undertaken in the normal course of stewardship of federal funds.

CDC program staff will assist, coordinate, or participate in carrying out effort under the award, and recipients agree to the responsibilities therein, as detailed in the NOFO.

CDC activities to ensure the success of the project will include the following:

- Provide a data dictionary of required clinic data elements, related data collection forms, and a guidance document on measuring CRC screening rates;
- Provide a web-based system to enter clinic data;
- Provide training on the clinic data and how to use the web-based data entry system;
- Provide recipient results from CDC monitoring and evaluation activities including updates on key performance and outcome measures;
- Provide technical assistance to improve the quality of EBI implementation and data quality;
- Provide programmatic technical assistance;
- Assign a program consultant to each recipient;
- Work with recipients to solve challenges identified in evaluation and monitoring activities through conference calls, site visits, reverse site visits, and webinars;

- Provide resources to support EBI implementation and high-quality data collection;
- In person trainings and meetings.

CDC will provide opportunities for peer-to-peer information sharing between recipients regarding best practices, lessons learned, and evaluation results through meetings, webinars, sharing of success stories, teleconferences, sharing of materials via webpages, and other mechanisms as appropriate.

**Expanded Authority:** The recipient is permitted the following expanded authority in the administration of the award.

- Carryover of unobligated balances from one budget period to a subsequent budget period. Unobligated funds may be used for purposes within the scope of the project as originally approved. Recipients will report use, or intended use, of unobligated funds in Section 12 "Remarks" of the annual Federal Financial Report. If the GMO determines that some or all of the unobligated funds are not necessary to complete the project, the GMO may restrict the recipient's authority to automatically carry over unobligated balances in the future, use the balance to reduce or offset CDC funding for a subsequent budget period, or use a combination of these actions.

#### **FUNDING RESTRICTIONS AND LIMITATIONS**

**Indirect Costs:** The recipient's indirect costs are approved and based on a de minimis rate of ten (10) percent of modified total direct costs (MTDC) as defined in 45 CFR Part 75.2, effective 4/5/2023.

#### **PAYMENT INFORMATION**

**Payment Management System Subaccount:** Funds awarded in support of approved activities have been obligated in a subaccount in the PMS, herein identified as the " P Account". Funds must be used in support of approved activities in the NOFO and the approved application. All award funds must be tracked and reported separately.

The grant document number identified on the bottom of Page 2 of the Notice of Award must be known in order to draw down funds.