



BOARD OF SUPERVISORS AGENDA ITEM REPORT **CONTRACTS / AWARDS / GRANTS**

☐ Award ☐ Contract ☒ Grant

Requested Board Meeting Date: October 4, 2022

*** = Mandatory, information must be provided**

or Procurement Director Award ☐

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

Centers for Disease Control and Prevention (CDC)

***Project Title/Description:**

Racial and Ethnic Approaches to Community Health (REACH) Pima Partnership

***Purpose:**

The REACH Pima Partnership brings together entities with a history of successful collaboration on health and wellness issues among American Indian (AI) and Mexican-American (MA) populations throughout Pima County. The partners build on existing Community Action Coalitions to develop and implement culturally and socioeconomically tailored interventions that specifically engage MA and AI communities in Pima County.

The Notice of Award being processed as Amendment #6 provides a total of \$1,151,882 in funding for the period 09/30/2022 - 09/29/2023. This amount includes the addition of \$708,688 for the "regular" REACH program. The CDC is carrying forward \$53,997, making the total "regular" funding for Year 5 \$762,685, the same amount as Year 4. In addition, supplemental funds in the amount of \$443,194 are being added for the coming year.

***Procurement Method:**

This Grant is a non-procurement contract and not subject to Procurement rules.

***Program Goals/Predicted Outcomes:**

The "regular" project aims to improve health, prevent chronic diseases, and reduce health disparities among our population at the highest risk/burden of chronic diseases including hypertension, heart disease, Type 2 diabetes, and obesity. The program addresses tobacco use, access to care, and physical inactivity, with a specific focus on school-aged children and their families.

The supplemental REACH funds received in recent years aim to work with communities to identify and address drivers of vaccine hesitancy, identify influential community messengers and partners, educate and empower these trusted voices in the community to support vaccine education and delivery through educational media and events, and increase vaccination opportunities by building partnerships between vaccination providers, trusted messengers and the community to increase the number, range, and diversity of opportunities for vaccination.

***Public Benefit:**

The regular program benefits target communities by reducing the risk of chronic disease and decreasing health disparities. The supplemental program seeks to have as many County residents vaccinated against the flu and COVID as possible. This will help reduce the onset of chronic conditions, not to overcrowd hospitals with COVID cases, and reduce the spread of respiratory illnesses.

***Metrics Available to Measure Performance:**

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

***Retroactive:**

Yes, by a few days. The October 4, 2022 BOS meeting is the earliest we could get the award to the BOS but the term for the amendment begins 09/29/2022.

6mT approves 9/16/22 (pu)

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 or ☐ 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 ☒ AmendmentDocument Type: GTAM Department Code: HD Grant Number (i.e.,15-123): 23-022Commencement Date: 09/30/2022 Termination Date: 09/29/2023 Amendment Number: 06☐ Match Amount: \$ _____ ☒ Revenue Amount: \$ 1,151,882.00***All Funding Source(s) required:** Centers for Disease Control and Prevention (CDC) (Department of Health and Human Services)***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 GovernmentContact: Sharon GrantDepartment: HealthTelephone: 724-7842Department Director Signature/Date: [Signature] 9/13/22Deputy County Administrator Signature/Date: [Signature] 12 Sep 2022County Administrator Signature/Date: [Signature] 9/19/2022
(Required for Board Agenda/Addendum Items)



DEPARTMENT OF HEALTH AND HUMAN SERVICES

Centers for Disease Control and Prevention

Notice of Award

Award# 5 NU58DP006600-05-00

FAIN# NU58DP006600

Federal Award Date: 07/28/2022

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

03

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

Dr. Francisco Garcia
Program Director
Francisco.Garcia@Pima.gov
520-724-7733

8. Authorized Official

Dr. Donald Gates
Business Operations Manager
Donald.Gates@Pima.gov
520-724-7843

Federal Agency Information

CDC Office of Financial Resources

9. Awarding Agency Contact Information

Thelma Jackson
Grants Management Specialist
TJackson12@cdc.gov
770.488.2823

10. Program Official Contact Information

Everett Jackson
Public Health Advisor
pvw4@cdc.gov
1111111111

Federal Award Information

11. Award Number

5 NU58DP006600-05-00

12. Unique Federal Award Identification Number (FAIN)

NU58DP006600

13. Statutory Authority

317(K)(2) 42 USC 247B(K)(2)

14. Federal Award Project Title

REACH Pima Partnership

15. Assistance Listing Number

93.738

16. Assistance Listing Program Title

PPHF 2012: Racial and Ethnic Approaches to Community Health Program financed solely by 2012 Public Prevention and Health Funds

17. Award Action Type

Non-Competing Continuation

18. Is the Award R&D?

No

Summary Federal Award Financial Information

19. Budget Period Start Date 09/30/2022 - End Date 09/29/2023

20. Total Amount of Federal Funds Obligated by this Action \$1,151,882.00

20a. Direct Cost Amount \$1,096,254.00

20b. Indirect Cost Amount \$109,625.00

21. Authorized Carryover \$0.00

22. Offset \$53,997.00

23. Total Amount of Federal Funds Obligated this budget period \$0.00

24. Total Approved Cost Sharing or Matching, where applicable \$0.00

25. Total Federal and Non-Federal Approved this Budget Period \$1,151,882.00

26. Period of Performance Start Date 09/30/2018 - End Date 09/29/2023

27. Total Amount of the Federal Award including Approved Cost Sharing or Matching this Period of Performance \$4,999,125.00

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

03

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	\$394,631.00
b. Fringe Benefits	\$138,117.00
c. Total Personnel Costs	\$532,748.00
d. Equipment	\$0.00
e. Supplies	\$11,500.00
f. Travel	\$3,338.00
g. Construction	\$0.00
h. Other	\$38,279.00
i. Contractual	\$510,389.00
j. TOTAL DIRECT COSTS	\$1,096,254.00
k. INDIRECT COSTS	\$109,625.00
l. TOTAL APPROVED BUDGET	\$1,205,879.00
m. Federal Share	\$1,205,879.00
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
2-9390AG1	18NU58DP006600	DP	41.51	93.738	\$708,688.00	75-22-0948
2-9390GR3	18NU58DP006600C5	DP	41.51	93.738	\$443,194.00	75-2124-0943



DEPARTMENT OF HEALTH AND HUMAN SERVICES Notice of Award

Centers for Disease Control and Prevention

Award# 5 NU58DP006600-05-00

FAIN# NU58DP006600

Federal Award Date: 07/28/2022

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
Total	\$0.00	\$0.00	\$0.00

AWARD ATTACHMENTS

PIMA COUNTY

5 NU58DP006600-05-00

1. Terms and Conditions

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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 **DP18-1813, entitled, Racial and Ethnic Approaches to Community Health (REACH)**, and application dated **April 11, 2022** as may be amended, which are hereby made a part of this Non-research award, hereinafter referred to as the Notice of Award (NoA).

Approved Funding: Funding in the amount of **\$1,205,879.00** is approved for the **Year 05** budget period, which is **September 30, 2022 through September 29, 2023**.

Use of Unobligated Funds: This NoA includes use of **Year 03** unobligated funds in the amount of **\$53,997.00**, which has been applied as an offset to the currently approved funding level for this budget period. The use of unobligated funds is approved based on **Year 04** Federal Financial Report (FFR) dated **March 31, 2022**. The amount of this NoA will be subject to reduction if the final amount of unobligated funds is less than the amount of unobligated funds reported on the referenced FFR.

CORE Funding	\$708,688.00
COVID-19 Supplement Funding	\$443,194.00
Combined Totals	\$1,151,882.00

Coronavirus Disease 2019 (COVID-19) Funds: A recipient of a grant or cooperative agreement awarded by the Department of Health and Human Services (HHS) with funds made available under the Coronavirus Preparedness and Response Supplemental Appropriations Act, 2020 (P.L. 116-123); the Coronavirus Aid, Relief, and Economic Security Act, 2020 (the "CARES Act") (P.L. 116-136); and/or the Paycheck Protection Program and Health Care Enhancement Act (P.L. 116-139) agrees, as applicable to the award, to: 1) comply with existing and/or future directives and guidance from the Secretary regarding control of the spread of COVID-19; 2) in consultation and coordination with HHS, provide, commensurate with the condition of the individual, COVID-19 patient care regardless of the individual's home jurisdiction and/or appropriate public health measures (e.g., social distancing, home isolation); and 3) assist the United States Government in the implementation and enforcement of federal orders related to quarantine and isolation. In addition, to the extent applicable, Recipient will comply with Section 18115 of the CARES Act, with respect to the reporting to the HHS Secretary of results of tests intended to detect SARS-CoV-2 or to diagnose a possible case of COVID-19. Such reporting shall be in accordance with guidance and direction from HHS and/or CDC. HHS laboratory reporting guidance is posted at: <https://www.hhs.gov/sites/default/files/covid-19-laboratory-data-reporting-guidance.pdf>. Further, consistent with the full scope of applicable grant regulations (45 C.F.R. 75.322), the purpose of this award, and the underlying funding, the recipient is expected to provide to CDC copies of and/or access to COVID-19 data collected with these funds, including but not limited to data related to COVID19 testing. CDC will specify in further guidance and directives what is encompassed by this requirement. This award is contingent upon agreement by the recipient to comply with existing and future guidance from the HHS Secretary regarding control of the spread of COVID-19. In addition, recipient is expected to flow down these terms to any subaward, to the extent applicable to activities set out in such subaward.

COVID-19 FFR Reporting: The recipient is required to report separately on the use of COVID-19 funds on the Federal Financial Report (FFR). REACH recipients receiving a COVID-19 Supplement are required to submit two (2) Federal Financial Reports (FFRs) in PMS: One that's inclusive of the Base Award and the Immunization Supplement (if applicable), and one that is inclusive of the COVID-19 Supplement Award. The COVID-19 funding is allocated in a designated subaccount. Please see payment information section.

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.

Note: Refer to the Payment Information section for Payment Management System (PMS) subaccount information.

Financial Assistance Mechanism: Cooperative Agreement.

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 ongoing technical assistance.
- Provide REACH implementation guidance to recipients on identifying and implementing strategies and activities.
- Facilitate collaborative opportunities with national partners.
- Information Sharing between recipients.
- Facilitate routine conference calls, webinars, and information exchange between recipients.
- Develop mechanism for documenting and sharing lessons learned.
- Convene recipients meetings.

CDC will:

1. Ensure that recipients have access to expertise found throughout NCCDPHP. For example, a team of subject matter experts could include, but is not limited to, the project officer, health scientists, epidemiologists, statisticians, policy analysts, communication specialists, health economists, and evaluators to provide technical assistance to recipients. Technical assistance teams will also work in collaboration with other programs and divisions across NCCDPHP to identify specific actions that improve efficiency and greater public health impact.
2. Collaborate with recipients to explore appropriate flexibilities needed to meet public health outcomes and goals. Flexibility in cooperative agreements includes recipient's ability to propose alternative methods to achieve the outcomes and goals of the cooperative agreement that align with recipient's opportunities for success, infrastructure, partner and stakeholder buy-in, demographics, and burden. This includes bringing together resources from multiple cooperative agreements to jointly advance the goals of each, and expanding the dialogue to bring in other CDC and recipient staff to reach a win/win solution.
3. Create greater efficiencies and consistency across NCCDPHP programs for recipients. Examples of how NCCDPHP divisions and programs work together to achieve this include but are not limited to:
 - Joint site visits that maximize the ability to do collaborative problem solving, offer insights and ideas to strengthen or augment recipient approaches, and increase understanding of recipient's context to accomplish chronic disease prevention and health promotion.
 - Jointly developed resources and tools that focus on cross-cutting functions, settings, domains, risk factors, conditions and diseases to ensure consistent messages and to meet recipient technical assistance needs.
 - Joint training and technical assistance opportunities that help recipients produce policies and programs that are more holistic and fully supportive of work in tobacco, nutrition, physical activity, chronic disease management and other strategies and topics, as appropriate. Continue and expand support for recipients to leverage NCCDPHP resources to address cross-cutting functions, domains, settings, risk factors and diseases.
4. Continue and expand support for recipients to leverage NCCDPHP resources to address cross-cutting functions, domains, settings, risk factors and diseases.

Budget Revision Requirement: By **October 28, 2022**, the recipient must submit a revised budget with narrative justification and SF424-A in GrantSolutions. Failure to submit the required information in a timely manner may adversely affect the future funding of this project. If the information cannot be provided by the due date, you are required to contact the GMS/GMO identified in the CDC Staff Contacts section of this notice before the due date.

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.

Program Income: Any program income generated under this grant or cooperative agreement will be used in accordance with the **Addition** alternative.

Addition alternative: Under this alternative, program income is added to the funds committed to the project/program and is used to further eligible project/program objectives.

Note: The disposition of program income must have written prior approval from the GMO.

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 9/29/2022.

REPORTING REQUIREMENTS

Required Disclosures for Federal Awardee Performance and Integrity Information System (FAPIIS): Consistent with 45 CFR 75.113, applicants and recipients must disclose in a timely manner, in writing to the CDC, with a copy to the HHS Office of Inspector General (OIG), all information related to violations of federal criminal law involving fraud, bribery, or gratuity violations potentially affecting the federal award. Subrecipients must disclose, in a timely manner in writing to the prime recipient (pass through entity) and the HHS OIG, all information related to violations of federal criminal law involving fraud, bribery, or gratuity violations potentially affecting the federal award. Disclosures must be sent in writing to the CDC and to the HHS OIG at the following addresses:

CDC, Office of Grants Services
Thelma Jackson, Grants Management Specialist
Centers for Disease Control and Prevention
Chronic Diseases and Injury Prevention Branch 5
2939 Flowers Road South, MS TV-2
Atlanta, GA 30341-5507

Email: TJackson12@cdc.gov (Include "Mandatory Grant Disclosures" in subject line)

AND

U.S. Department of Health and Human Services
Office of the Inspector General
ATTN: Mandatory Grant Disclosures, Intake Coordinator
330 Independence Avenue, SW

Cohen Building, Room 5527
Washington, DC 20201
Fax: (202)-205-0604 (Include "Mandatory Grant Disclosures" in subject line) or
Email: MandatoryGranteeDisclosures@oig.hhs.gov

Recipients must include this mandatory disclosure requirement in all subawards and contracts under this award.

Failure to make required disclosures can result in any of the remedies described in 45 CFR 75.371. Remedies for noncompliance, including suspension or debarment (See 2 CFR parts 180 and 376, and 31 U.S.C. 3321).

CDC is required to report any termination of a federal award prior to the end of the period of performance due to material failure to comply with the terms and conditions of this award in the OMB-designated integrity and performance system accessible through SAM (currently FAPIIS). (45 CFR 75.372(b)) CDC must also notify the recipient if the federal award is terminated for failure to comply with the federal statutes, regulations, or terms and conditions of the federal award. (45 CFR 75.373(b))

PAYMENT INFORMATION

The HHS Office of the Inspector General (OIG) maintains a toll-free number (1-800-HHS-TIPS [1-800-447-8477]) for receiving information concerning fraud, waste, or abuse under grants and cooperative agreements. Information also may be submitted by e-mail to hhstips@oig.hhs.gov or by mail to Office of the Inspector General, Department of Health and Human Services, Attn: HOTLINE, 330 Independence Ave., SW, Washington DC 20201. Such reports are treated as sensitive material and submitters may decline to give their names if they choose to remain anonymous.

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.

COVID-19 Payment Management System Subaccount: COVID-19 funding is in Document Number: **18NU58DP006600C5**.

CLOSEOUT REQUIREMENTS

Recipients must submit all closeout reports identified in this section within 90 days of the period of performance end date. The reporting timeframe is the full period of performance. Failure to submit timely and accurate final reports may affect future funding to the organization or awards under the direction of the same Project Director/Principal Investigator (PD/PI).

Final Performance Progress and Evaluation Report (PPER): This report should include the information specified in the NOFO. At a minimum, the report will include the following:

- Statement of progress made toward the achievement of originally stated aims.
- Description of results (positive or negative) considered significant.
- List of publications resulting from the project, with plans, if any, for further publication.

All manuscripts published as a result of the work supported in part or whole by the cooperative grant must be submitted with the performance progress reports.

Final Federal Financial Report (FFR, SF-425): The FFR should only include those funds authorized and actually expended during the timeframe covered by the report. The Final FFR, SF-425 is required and must be submitted no later than 90 days after the period of performance end date.

The final report must indicate the exact balance of unobligated funds and may not reflect any unliquidated obligations. Should the amount not match with the final expenditures reported to the Department of Health and Human Services' PMS, you will be required to update your reports to PMS accordingly. Remaining unobligated funds will be de-obligated and returned to the U.S. Treasury.

Equipment and Supplies - Tangible Personal Property Report (SF-428): A completed Tangible Personal Property Report SF-428 and Final Report SF-428B addendum must be submitted, along with any Supplemental Sheet SF-428S detailing all major equipment acquired or furnished under this project with a unit acquisition cost of \$5,000 or more. Electronic versions of the forms can be downloaded by visiting:

<https://www.grants.gov/web/grants/forms/post-award-reporting-forms.html#sortBy=1>

If no equipment was acquired under an award, a negative report is required.

The recipient must identify each item of equipment that it wishes to retain for continued use in accordance with 45 CFR Part 75. The awarding agency may exercise its rights to require the transfer of equipment purchased under the assistance award. CDC will notify the recipient if transfer to title will be required and provide disposition instruction on all major equipment.

Equipment with a unit acquisition cost of less than \$5,000 that is no longer to be used in projects or programs currently or previously sponsored by the Federal Government may be retained, sold, or otherwise disposed of, with no further obligation to the Federal Government.