

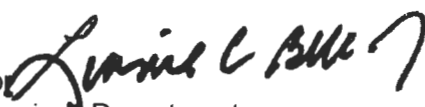


Interoffice Memorandum

September 16, 2021

AGENDA ITEM

TO: Mayor Jerry L. Demings
-AND-
County Commissioners

THRU: Lonnie C. Bell, Jr., Director 
Community and Family Services Department

FROM: Donna Wyche, MS, CAP, Manager
Mental Health and Homelessness Division
Contact: (407) 836-7608

SUBJECT: **Consent Agenda Item – September 28, 2021**
Substance Abuse and Mental Health Services Administration (SAMHSA)
Comprehensive Community Mental Health Services for Children with Serious
Emotional Disturbances Grant Award

In February 2021, the Mental Health and Homelessness Division, with the Grants Oversight Committee approval, submitted an application for the "Grants for Expansion and Sustainability of the Comprehensive Community Mental Health Services for Children with Serious Emotional Disturbances" from the Substance Abuse and Mental Health Services Administration (SAMHSA). The grant will allow for expansion of the Youth Mental Health Commission Breakthrough Project of early childhood evidence-based practices for children from birth to age eight in Orange County. Additionally, the grant will allow for the expansion of home visiting nurses for women in need. Both early childhood evidence-based practices and home visiting nurses were identified as community needs in the Orange County Gaps Analysis of the behavioral health system of care.

SAMHSA notified Orange County of a full award in the amount of \$4,000,000 on August 27, 2021. The four-year grant for \$1,000,000 a year for four years begins on August 31, 2021. The grant requires a match in the amount of \$333,333 for years one through three and \$1,000,000 for year four. Funding for the match is a reallocation of dollars from the Citizens' Commission for Children Division.

ACTION REQUESTED: Acceptance of Department of Health and Human Services Substance Abuse and Mental Health Services Administration Center for Mental Health Services Award Number 1H79SM084165-01 in the amount of \$1,000,000 per year for four years. A match in the amount of \$333,333 for years one through three and \$1,000,000 for year four is required.

DW/as:jamh

Attachment

c: Carla Bell Johnson, AICP, Assistant County Administrator



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

Notice of Award
FAIN# H79SM084165
Federal Award Date
08/27/2021

Recipient Information

- 1. Recipient Name**
ORANGE, COUNTY OF
201 S ROSALIND AVE 5TH FL

ORLANDO, FL 32801
- 2. Congressional District of Recipient**
07
- 3. Payment System Identifier (ID)**
1596000773A5
- 4. Employer Identification Number (EIN)**
596000773
- 5. Data Universal Numbering System (DUNS)**
064797251
- 6. Recipient's Unique Entity Identifier**
- 7. Project Director or Principal Investigator**
Anne Marie Sheffield

annemarie.sheffield@ocfl.net
407-836-1587
- 8. Authorized Official**
Mr. Darren Gray
OMBGrantsInfo@ocfl.net
407-836-7390

Federal Agency Information

- 9. Awarding Agency Contact Information**
Troy Valladares

Center for Mental Health Services
TROY.VALLADARES@SAMHSA.HHS.GOV
240-276-1967
- 10. Program Official Contact Information**
Emily Hassey

Center for Mental Health Services
Emily.Hassey@samhsa.hhs.gov
240-276-1403

Federal Award Information

- 11. Award Number**
1H79SM084165-01
- 12. Unique Federal Award Identification Number (FAIN)**
H79SM084165
- 13. Statutory Authority**
Sect. 561-565 (PHS Act) & Sect. 10001 (21st Cent. Cures Act)
- 14. Federal Award Project Title**
Breakthrough Project
- 15. Assistance Listing Number**
93.104
- 16. Assistance Listing Program Title**
Comprehensive Community Mental Health Services for Children with Serious Emotional Disturbances (SED)
- 17. Award Action Type**
New Competing
- 18. Is the Award R&D?**
No

Summary Federal Award Financial Information

| 19. Budget Period Start Date 08/31/2021 – End Date 08/30/2022 | |
|--|-------------|
| 20. Total Amount of Federal Funds Obligated by this Action | \$1,000,000 |
| 20a. Direct Cost Amount | \$963,462 |
| 20b. Indirect Cost Amount | \$36,538 |
| 21. Authorized Carryover | \$0 |
| 22. Offset | \$0 |
| 23. Total Amount of Federal Funds Obligated this budget period | \$1,000,000 |
| 24. Total Approved Cost Sharing or Matching, where applicable | \$333,333 |
| 25. Total Federal and Non-Federal Approved this Budget Period | \$1,333,333 |
| 26. Project Period Start Date 08/31/2021 – End Date 08/30/2025 | |
| 27. Total Amount of the Federal Award including Approved Cost Sharing or Matching this Project Period | \$1,333,333 |

- 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.



Notice of Award

System of Care Expansion and Sustainability Grants
Department of Health and Human Services
Substance Abuse and Mental Health Services Administration

Issue Date: 08/27/2021

Center for Mental Health Services

Award Number: 1H79SM084165-01

FAIN: H79SM084165

Program Director: Anne Marie Sheffield

Project Title: Breakthrough Project

Organization Name: ORANGE, COUNTY OF

Authorized Official: Mr. Darren Gray

Authorized Official e-mail address: OMBGrantsInfo@ocfl.net

Budget Period: 08/31/2021 – 08/30/2022

Project Period: 08/31/2021 – 08/30/2025

Dear Grantee:

The Substance Abuse and Mental Health Services Administration hereby awards a grant in the amount of \$1,000,000 (see "Award Calculation" in Section I and "Terms and Conditions" in Section III) to ORANGE, COUNTY OF in support of the above referenced project. This award is pursuant to the authority of Sect. 561-565 (PHS Act) & Sect. 10001 (21st Cent. Cures Act) 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 – 1H79SM084165-01**Award Calculation (U.S. Dollars)**

| | |
|--|------------------------|
| Contractual | \$963,462 |
| Direct Cost | \$963,462 |
| Indirect Cost | \$36,538 |
| Approved Budget | \$1,333,333 |
| Federal Share | \$1,000,000 |
| Non-Federal Share | \$333,333 |
| Cumulative Prior Awards for this Budget Period | \$0 |
| AMOUNT OF THIS ACTION (FEDERAL SHARE) | \$1,000,000 |

| SUMMARY TOTALS FOR ALL YEARS | |
|------------------------------|-------------|
| YR | AMOUNT |
| 1 | \$1,000,000 |
| 2 | \$1,000,000 |
| 3 | \$1,000,000 |
| 4 | \$1,000,000 |

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

Fiscal Information:

CFDA Number: 93.104
EIN: 1596000773A5
Document Number: 21SM84165A
Fiscal Year: 2021

| | | |
|-----------|------------|---------------|
| IC | CAN | Amount |
| SM | C96J546 | \$1,000,000 |

| IC | CAN | Amount | 2022 | 2023 | 2024 |
|----|---------|-------------|-------------|-------------|-------------|
| SM | C96J546 | \$1,000,000 | \$1,000,000 | \$1,000,000 | \$1,000,000 |

SM Administrative Data:

PCC: CMHI21 / OC: 4145

SECTION II – PAYMENT/HOTLINE INFORMATION – 1H79SM084165-01

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 – 1H79SM084165-01

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 (FAPIS)). Full reporting requirements and procedures are found in Appendix XII to 45 CFR Part 75.

SECTION IV – SM SPECIAL TERMS AND CONDITIONS – 1H79SM084165-01

REMARKS

New Award

1. This Notice of Award (NoA) is issued to inform your organization that the application submitted through the funding opportunity ***SM-21-004: Grants for Expansion and Sustainability of the Comprehensive Community Mental Health Services for Children with Serious Emotional Disturbances (System of Care (SOC) Expansion and Sustainability Grants) - CMHI21*** has been selected for funding.

This award reflects approval of the budget submitted February 5, 2021 as part of the application by your organization.

Please note the following:

1. **University of Central Florida Evaluation** – \$125/hour multiplied by 1400 hours is incorrectly calculated as \$150,000 instead of \$175,000.
2. **Healthy Start Coalition of Orange County:**
 - a. **National NFP license fee \$6,000, Risk Mgmt Insurance \$597 and Human Resource services \$214-** These costs are generally included in “indirect costs” or “facilities and administrative costs”. Since there is already an Admin Cost allocation, separate

allocations for these items as direct costs are not allowed.

b. **Family Incentives-** Per the FOA of this grant, a recipient or treatment or prevention provider may provide up to \$30 non-cash incentive to individuals to participate in required data collection follow up. This amount may be paid for participation in each required follow-up interview. The use of incentives must be appropriate, judicious and conservative and that incentives do not provide an "undue inducement" that removes the voluntary nature of participation.

3. **Discretionary Funds \$20,000-** Funding Opportunity Announcement (FOA) for this grant, Recipients must utilize third party reimbursements and other revenue realized from provision of services to the extent possible and use SAMHSA grant funds only for services to individuals who are not covered by public or commercial health insurance programs, individuals for whom coverage has been formally determined to be unaffordable, or for services that are not sufficiently covered by an individual's health insurance plan. Recipients are also expected to facilitate the health insurance application and enrollment process for eligible uninsured clients. Recipients should also consider other systems from which a potential service recipient may be eligible for services (for example, the Veterans Health Administration or senior services), if appropriate for and desired by that individual to meet his/her needs. In addition, recipients are required to implement policies and procedures that ensure other sources of funding are utilized first when available for that individual.

2. **Recipients are expected to plan their work and ensure that funds are expended within the 12-month budget period reflected on this Notice of Award.** If activities proposed in the approved budget cannot be completed within the current budget period, SAMHSA cannot guarantee the approval of any request for carryover of remaining unobligated funding.
3. **All responses to award terms and conditions must be submitted as .pdf documents in eRA Commons.** For more information on how to respond to tracked terms and conditions or how to submit a post award amendment request please refer to <https://www.samhsa.gov/grants/grants-training-materials> under heading Grant Management Reference Materials for Grantees.
4. All Post-Award Amendments must be submitted in eRA Commons for prior approval.

Please refer to the SAMHSA website for specific SAMHSA guidance on how to submit a post-award amendment in eRA Commons: <https://www.samhsa.gov/grants/grants-management/post-award-amendments>

Prior approval is required for but is not limited to: change in key personnel and level of effort, budget revision, change in scope, formal carryover request, and no cost extension. Reference the full prior approval term on the SAMHSA website under Standard Terms and Conditions at: <https://www.samhsa.gov/grants/grants-management/notice-award-noa/standard-terms-conditions>.

Technical questions regarding the submission of a post-award amendment in eRA Commons should be directed to the eRA Service Desk: <http://grants.nih.gov/support/>

5. Key Staff

Key staff (or key staff positions, if staff has not been selected) are listed below:

Anne Marie Sheffield, Project Director @ 50% level of effort

Jennifer Tulloch , Lead Family Coordinator @ 75% level of effort

Key Staff and other grant-supported staff may not exceed 100% level of effort across all federal and non-federal funding sources.

Any changes to key staff including level of effort involving separation from the project for more than three months or a 25 percent reduction in time dedicated to the project requires prior approval and must be submitted as a post-award amendment in eRA Commons.

If you have not already done so, you must register the PD in eRA Commons to assign a Commons ID. You can find additional information about the eRA Commons registration process at https://era.nih.gov/reg_accounts/register_commons.cfm. The Commons ID of the proposed PD must be stated on Section 4 Applicant Identifier of the SF-424. In addition, the PD info must be entered in Section 8f of the SF-424. Please see [SAMHSA PD Account Creation Instructions \(PDF | 687 KB\)](#) for a quick step-by-step guide and [SAMHSA Grantee PD Account Creation Slides \(PDF | 987 KB\)](#) for additional information on the eRA Commons registration process for the PD.

SPECIAL TERMS

Lobbying Restriction Reminder

Your application disclosed lobbying activities associated with your organization. Recipients of federal funds are not allowed to use federal funding to lobby federal, state, or local officials or their staff to receive additional funding or influence legislation. As a general matter, these lobbying restrictions preclude recipients from:

- Spending federal funds to influence an officer or employee of any agency or Congressional member/staff regarding federal awards;
- Failing to submit required certification and disclosure forms (i.e., SF-LLL);
- Using grants funds provided to non-profit organizations or institutions of higher education to influence an election, contribute to a partisan organization, or influence enactment or modification of any pending federal or state legislation; or
- Expending federal funds to influence federal, state, or local officials or legislation

Please reference the standard award term on lobbying for your award at <https://www.samhsa.gov/grants/grants-management/notice-award-noa/standard-terms-conditions>.

Risk Assessment

The Office of Financial Advisory Services (OFAS), SAMHSA may perform an administrative review of your organization's financial management system. If the review discloses material weaknesses or other financial management concerns, grant funding may be restricted in accordance with 45 CFR 75/2 CFR 200, as applicable. The restriction will affect your organization's ability to withdraw funds from the Payment Management System account, until the concerns are addressed.

Disparity Impact Statement (DIS)

By October 31, 2021, submit via eRA Commons.

The DIS should be consistent with information in your application regarding access, *service use and outcomes for the program and include three components as described below. Questions about the DIS should be directed to your GPO. Examples of DIS can be found on the SAMHSA website at: <https://www.samhsa.gov/grants/grants-management/disparity-impact-statement>

*Service use is inclusive of treatment services, prevention services as well as outreach, engagement, training, and/or technical assistance activities.

The disparity impact statement consists of three components:

1. Proposed number of individuals to be served and/or reached by subpopulations in the grant implementation area should be provided in a table that covers the entire grant period. The disparate population(s) should be identified in a narrative that includes a description of the population and rationale for how the determination was made.
2. A quality improvement plan for how you will use your program (GPRA) data on access, use and outcomes to monitor and manage program outcomes by race, ethnicity and LGBT status, when possible. The quality improvement plan should include strategies for how processes and/or programmatic adjustments will support efforts to reduce disparities for the identified sub-populations.
3. The quality improvement plan should include methods for the development and implementation of policies and procedures to ensure adherence to the Enhanced Culturally and Linguistically Appropriate Services (CLAS) Standards and the provision of effective care and services that are responsive to:
 - a. Diverse cultural health beliefs and practices;
 - b. Preferred languages; and
 - c. Health literacy and other communication needs of all sub-populations within the proposed geographic region.

All responses to award terms and conditions must be submitted as .pdf documents in eRA Commons. For more information on how to respond to tracked terms and conditions please refer to <https://www.samhsa.gov/grants/grants-training-materials> under heading **How to Respond to Terms and Conditions.**

SPARS

All SAMHSA recipients are required to collect and report certain data so SAMHSA can meet its obligation under the Government Performance Results Act (GPRA) Modernization Act of 2010. These data are gathered using SAMHSA's Performance and Accountability Reporting System (SPARS). CMHI recipients are required to collect and report two types of data: one data set (infrastructure or IPP) is reported on a quarterly basis; the second data set is for the national outcome measures (NOMS) and data are collected and reported at baseline (i.e., upon entry of each client into the project), at six-month follow-up and at discharge. Recipients are required to do the following:

1. Complete SPARS Annual Goals training and enter NOMS and IPP annual goals data into SPARS by November 30, 2021;
2. NOMS Data: begin entering NOMS baseline interview data into SPARS within 7 calendar days after completion of each intake interview; conduct a NOMs reassessment interview and enter these data into SPARS six months following the intake interview and every 6 months thereafter; and complete a Clinical Discharge NOMS interview and enter these data into SPARS at the time of client discharge;
3. IPP Data: collect and begin reporting IPP data into SPARS during the 2nd quarter (January - March 2022) and quarterly thereafter.

Information about SPARS training and data reporting will be provided upon award.

SPECIAL CONDITIONS

Project Director (PD) and Lead Family Coordinator (LFC) Job/Position Descriptions

By September 30, 2021, submit via eRA Commons,

- Provide job/position descriptions for the key personnel positions of **Project Director (PD)** and **Lead Family Coordinator (LFC)** which should be inclusive of but not limited to the following:
 - a. Title of position
 - b. Description of duties and responsibilities. At a minimum, the duties and responsibilities should align with those stated for the key personnel position in the Funding Opportunity Announcement (FOA).
 - c. Qualifications for position
 - d. Supervisory relationships
 - e. Skills and knowledge required
 - f. Amount of travel and any other special conditions or requirements
 - g. Salary range
 - h. Hours per day or week

All responses to award terms and conditions must be submitted as .pdf documents in eRA Commons. For more information on how to respond to tracked terms and conditions please refer to <https://www.samhsa.gov/grants/grants-training-materials> under heading **How to Respond to Terms and Conditions**.

Detailed Breakdowns for Matching Contributions

By September 30, 2021, submit via eRA Commons,

- **Detailed Breakdowns for Matching Requirement:** Matching funds must meet the same test of allowability as costs charged to federal grants, therefore your budget should facilitate a determination of whether matching costs are reasonable, allowable or allocable. Provide detailed breakdowns of the materials, quantities, number of persons, cost per unit/hour, number of hours/levels of effort, or other relevant basis to show how matching contributions will be utilized towards achieving the goals and objectives of the grant.
 - a. **Healthy Start Coalition of Orange County- \$90,000**
 - b. **Spirit, Inc. \$75,000-** Since the narrative indicates that this is for Software License, Maintenance and Support for a county-wide Management Information System, also provide calculations to show how you arrived at the matching contribution attributable to this grant.
 - c. **AdventHealth for Children- Building renovations (\$60K)-** Renovation costs to existing facilities may be considered Alterations and Renovations (A&R) but you will need to provide additional information to justify. **Indicate:** Whether programs other than this SAMHSA grant will be using this facility? If so, then provide calculations to show how you arrived at the matching contribution attributable to this grant.

Also submit the following: estimates obtained by licensed and insured vendors on letterhead, signed and dated; a detailed budget justification; and a detailed narrative that clearly explains why the A&R is needed.

Note that HHS defines alteration and renovation as “Work that changes the interior arrangements or other physical characteristics of an existing facility or installed equipment so that it can be used more effectively for its currently designated purpose or adapted to an alternative use to meet a programmatic requirement.

Alteration and renovation may include work referred to as improvements, conversion, rehabilitation, remodeling, or modernization, but is distinguished from construction and large-scale permanent improvements. Only Minor Alteration and Renovation (Minor A&R) is allowed, as against Major Alteration and Renovation (Major A&R) which involves a structural change (e.g., to the foundation, roof, floor, or exterior or load-bearing walls of a facility, or extension of an existing facility) to achieve the following: Increase the floor area; and/or, change function and purpose of the facility. A&R may involve:

- i. changes to interior dimensions, surfaces, or finishes;
- ii. changes to the internal environment (temperature, humidity, ventilation, and acoustics);
- iii. changes to utility services (plumbing, electricity, gas, vacuum, and other laboratory fittings);
- iv. installation of fixed equipment (including casework, fume hoods, large autoclaves, biological safety cabinets);
- v. replacement, removal, or reconfiguration of walls, doors, frames, or windows in order to place equipment in a permanent location;
- vi. making unfinished shell space suitable for purposes other than human or vertebrate animal occupancy, such as storage of pharmaceuticals; or,
- vii. alterations to meet requirements for accessibility by individuals with physical disabilities.

- d. **AdventHealth for Children- Building lease (\$20K)-** The terms of the lease must be compatible with the A&R proposed and cover the duration of the project period. Again, if the rented facility will be used to benefit multiple programs, provide the methodology used for arriving at the matching contribution attributable to this grant. Also provide the lease and floor plan (including common areas) for the space to be used and review and respond to the Rent Questionnaire on the SAMHSA webpage: Rent Questions Worksheet (<https://www.samhsa.gov/sites/default/files/rentquestionsworksheet.docx>).

- e. Federation of Families of Central Florida, Inc. \$8,333

All responses to award terms and conditions must be submitted as .pdf documents in eRA Commons. For more information on how to respond to tracked terms and conditions please refer to <https://www.samhsa.gov/grants/grants-training-materials> under heading **How to Respond to Terms and Conditions.**

Indirect Cost (IDC) rate Agreement or cost allocation plan

By September 30, 2021, submit via eRA Commons,

- **Indirect Cost (IDC) rate Agreement:** Submit your organization's current negotiated **Indirect Cost (IDC)** rate agreement or cost allocation plan with HHS or any other federal agency as it is required to support the charge of indirect costs to this grant. If your organization is currently renegotiating its IDC rate agreement and the rate is yet to be approved, please attach supporting documentation. Also ensure that you are applying the base specified in your rate agreement correctly when calculating indirect costs. A 10% de minimis rate may **ONLY** be used by recipients who have never had an approved federally negotiated IDC rate agreement. If you are eligible to charge the de minimis rate and elect to do so, then a clear statement must be made in your indirect cost narrative as follows: ***"XYZ Organization had never had a federally approved IDC rate agreement with HHS or any other federal agency and elects to use the de minimis rate of 10 percent***

of modified total direct costs (MTDC)”. In determining the MTDC base for application of the 10% de minimis rate, ensure the portion of each contract/ sub award in excess of \$25,000 from is excluded from your indirect cost calculation.

All responses to award terms and conditions must be submitted as .pdf documents in eRA Commons. For more information on how to respond to tracked terms and conditions please refer to <https://www.samhsa.gov/grants/grants-training-materials> under heading **How to Respond to Terms and Conditions**.

STANDARD TERMS AND CONDITIONS

Annual Federal Financial Report (FFR or SF-425)

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 Federal Financial Report (FFR or 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 no later than 90 days after the end of each Budget Period. The FFR should reflect cumulative amounts. Additional guidance to complete the FFR can be found at <http://www.samhsa.gov/grants/grants-management/reporting-requirements>. SAMHSA reserves the right to request more frequent submissions of FFRs. If so, the additional submission dates will be shown below.

Your organization is required to submit an FFR for this grant funding:

- **By November 30, 2022**, submit the Federal Financial Report (FFR)/(SF-425).

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.

Annual Programmatic Progress Report

By November 30, 2022, submit via eRA Commons.

The Programmatic Report is required on an annual basis and must be submitted as a .pdf to the View Terms Tracking Details page in the eRA Commons System no later than 90 days after

the end of each 12-month budget period.

The Annual Programmatic Report must, at a minimum, include the following information:

- Data and progress for performance measures as reflected in your application regarding goals and evaluation activities.
- A summary of key program accomplishments to-date.
- Description of the changes, if any, that were made to the project that differ from the application for this incremental period.
- Description of any difficulties and/or problems encountered in achieving planned goals and objectives including barriers to accomplishing program objectives, and actions to overcome barriers or difficulties.

Note: Recipients must also comply with the GPRA requirements that include the collection and periodic reporting of performance data as specified in the FOA or by the Grant Program Official (GPO). This information is needed in order to comply with PL 102-62, which requires that Substance Abuse and Mental Health Services Administration (SAMHSA) report evaluation data to ensure the effectiveness and efficiency of its programs.

The response to this term must be submitted as .pdf documents in eRA Commons. Please contact your Government Program Official (GPO) for program specific submission information.

For more information on how to respond to tracked terms and conditions please refer to <https://www.samhsa.gov/grants/grants-training-materials> under heading **How to Respond to Terms and Conditions**.

Additional information on reporting requirements is available at <https://www.samhsa.gov/grants/grants-management/reporting-requirements>.

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 Page 3 of 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>.

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.

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