File No. 12009	90
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Committee Item	No <u>.</u>	3_	
Board Item No.	*		

COMMITTEE/BOARD OF SUPERVISORS

AGENDA PACKET CONTENTS LIST

Committee:	Budget and Finance Committee	Date: February 15, 2012
Board of Su	pervisors Meeting	Date
Cmte Boa	rd	
	Motion Resolution Ordinance Legislative Digest Budget & Legislative Analyst Repo Ethics Form 126 Introduction Form (for hearings) Department/Agency Cover Letter a MOU Grant Information Form Grant Budget Subcontract Budget Contract/Agreement Award Letter	
OTHER	Application (Use back side if additional space	is needed)
		te: February 10, 2012

An asterisked item represents the cover sheet to a document that exceeds 25 pages. The complete document is in the file.

[Accept and Expend Grant - Centers for Disease Control and Prevention Kenya- Monitoring and Evaluation - \$256,846]

Resolution authorizing the San Francisco Department of Public Health to retroactively accept and expend a grant in the amount of \$256,846 from the University of California San Francisco, to participate in a program entitled "Centers for Disease Control and Prevention Kenya-Monitoring and Evaluation" for the period of September 30, 2011, through September 29, 2012.

WHEREAS, University of California San Francisco is the recipient of a grant award from the Centers for Disease Control and Prevention supporting the Centers for Disease Control and Prevention Kenya – Monitoring and Evaluation; and,

WHEREAS, With a portion of these funds, University of California San Francisco has subcontracted with San Francisco Department of Public Health (DPH) in the amount of \$256,846 for the period of September 30, 2011 through September 29, 2012; and,

WHEREAS, As a condition of receiving the grant funds, University of California San Francisco requires the City to enter into an agreement (the "Agreement"), a copy of which is on file with the Clerk of the Board of Supervisors in File No. 120090; which is hereby declared to be a part of this resolution as if set forth fully herein; and,

WHEREAS, The purpose of this project is to provide technical assistance and training to Kenyan in-country partners around most-at-risk populations size estimations; and,

WHEREAS, An Annual Salary Ordinance amendment is not required as the grant partially reimburses DPH for three existing positions, one Senior Supervising Physician Specialist (Job Class No. 2232) at .40 FTE, one Manager I (Job Class No. 0922) at .10 FTE, and one Epidemiologist II (Job Class No. 2803) at 1.0 FTE for the period of September 30, 2011 through September 29, 2012; and,

WHEREAS, A request for retroactive approval is being sought because DPH did not receive notification of the award until November 29, 2011 for a project start date of September 30, 2011; and,

WHEREAS, The budget includes a provision for indirect costs in the amount of \$27,519; now, therefore, be it

RESOLVED, That DPH is hereby authorized to accept and expend a grant retroactively in the amount of \$256,846 from University of California San Francisco; and, be it

FURTHER RESOLVED, That DPH is hereby authorized to retroactively accept and expend the grant funds pursuant to San Francisco Administrative Code section 10.170-1; and, be it

FURTHER RESOLVED, That the Director of Health is authorized to enter into the agreement on behalf of the City.

RECOMMENDED:

Barbara A. Garcia, MPA Director of Health

Office of the Controller

APPROVED:

Office of the Mayor

City and County of San Francisco

Department of Public Health



Edwin M. Lee Mayor Barbara A. Garcia, MPA Director of Health

TO:	Angela Calvillo, Clerk of the Board of Supervisors
FROM:	Barbara A. Gareia, MPA Director of Health
DATE:	January 9, 2012
SUBJECT:	Grant Accept and Expend
GRANT TITLE:	Centers for Disease Control and Prevention Kenya- Monitoring and Evaluation - \$256,846
Attached please fi	nd the original and 4 copies of each of the following:
	ant resolution, original signed by Department
	nation form, including disability checklist -
Budget and Budget and	Budget Justification
in the projec	ation: Not Applicable. No application submitted. Asked to participated. Award Letter
Other (Expla	ain):
Special Timeline F	Requirements:
Departmental rep	presentative to receive a copy of the adopted resolution:
Name: Richelle-L	ynn Mojica Phone: 255-3555
	ddress: Dept. of Public Health, Office of Quality Management for ams, 1380 Howard St.
Certified copy req	uired Yes 🗌 No 🖂

File Number:(Provided by Clerk	of Board of Supervisors)		
		t Information Form ective March 2005)	
Purpose: Accompanies	proposed Board of Supervisor	s resolutions authorizing a Dec	partment to accept and expend grant
funds.		3 -	9 9 9 9 9 9
The following describes	the grant referred to in the ac	companying resolution:	
1. Grant Title: Centers	for Disease Control and Preve	ention (CDC) Kenya – Monitorir	ng and Evaluation (M&E)
2. Department:	Department of Public Health AIDS Office HIV Epidemiology Section		
3. Contact Person: He	enry Fisher Raymond	Telephone: (415) 554-9093	3
4. Grant Approval Statu	us (check one):		
[X] Approved by	y funding agency	[] Not yet approved	
6a. Matching Funds Reb. Source(s) of matchi7a. Grant Source Agend	ng funds (if applicable): N/A cy: Department of Health and		Disease Control and Prevention (CDC
8. Proposed Grant Pro The project will provide	oject Summary: technical Assistance (TA) and ze estimations. TA includes tra	training to Kenyan in-country p	
9. Grant Project Sched	ule, as allowed in approval do	cuments, or as proposed:	
Start-Date: S	September 30, 2011	End-Date: Septeml	ber 29, 2012
10a. Amount budgeted	for contractual services: N/A		
b. Will contractual se	rvices be put out to bid? N/A		
c. If so, will contract	services help to further the go	als of the department's MBE/W	BE requirements? N/A
d. Is this likely to be	a one-time or ongoing request	for contracting out? N/A	
11a. Does the budget ir	nclude indirect costs?	[X] Yes [] No	
b1. If yes, how much b2. How was the amo	? \$27,519 ount calculated? 12% of total i	modified direct costs	
	ect costs not included? N/A by granting agency e explain):	[] To maximize use of gran	t funds on direct services

12. Any other significant grant requirements or comments:

We respectfully request for approval to accept and expend these funds retroactive to September 30, 2011. The Department received the subcontract agreement on November 29, 2011. Grant index code: HCHPDHIVSVGR Grant code: HCAO14 **Disability Access Checklist*** 13. This Grant is intended for activities at (check all that apply): [X] Existing Site(s) [X] Existing Structure(s) [X] Existing Program(s) or Service(s) [] Rehabilitated Site(s) [] Rehabilitated Structure(s) [] New Program(s) or Service(s) [] New Site(s) [] New Structure(s) 14. The Departmental ADA Coordinator and/or the Mayor's Office on Disability have reviewed the proposal and concluded that the project as proposed will be in compliance with the Americans with Disabilities Act and all other Federal, State and local access laws and regulations and will allow the full inclusion of persons with disabilities, or will require unreasonable hardship exceptions, as described in the comments section: Comments: Departmental or Mayor's Office of Disability Reviewer: Jason Hashimoto Date Reviewed Department Approval: Barbara A. Garcia, MPA Director of Public Health (Signature)

San Francisco Department of Public Health (SFDPH)

AIDS Office HIV Epidemiology Section

CDC Kenya – Monitoring and Evaluation (M&E)

Budget Justification 9/30/2011 – 9/29/2012

A. PERSONNEL & MANDATORY FRINGE

	The second secon
1. 0.40 FTE 2232 – Senior Physician Specialist: S. Sch Annual Salary \$183,092 x 0.40 FTE = \$73,237 Mandatory Fringe Benefits (@ 26.80%) = \$19,627	nwarcz \$ 92,864
2. 0.10 FTE 0922 – Manager I: H. Raymond III	
Annual Salary \$108,888 x 0.10 FTE = \$10,889	
Mandatory Fringe Benefits (@ 26.80%) = \$2,918	\$ 13,807
3. 1.0 FTE 2803 – Epidemiologist II: T Kellogg	
Annual Salary \$92,222 x 1.0 FTE = \$\$92,222 Mandatory Fringe Benefits @ 33% = \$30,433	\$122,655
Employees will provide technical assistance and training	to Kenya in-country partners
around most-at-risk populations (MARs) size estimation	
TOTAL PERSONNEL:	\$229,327
B. TRAVEL	\$0
C. EQUIPMENT	\$0
D. MATERIALS AND SUPPLIES	\$0
E. CONTRACTUAL	\$0
F. OTHER	\$0
G. INDIRECT COSTS (12% of total modified direct costs)	\$ 27,519
TOTAL BUDGET:	\$256,846

SAN FRANCISCO DEPARTMENT OF PUBLIC HEALTH
AIDS Office - HIV Epidemiology Section
CDC Kenya - Monitoring and Evaluation (M&E)
September 30, 2011 - September 29, 2012

HPH-03 2S/CHS/GNC HCHPDHIVSVGR

HCAO14 1200 Dept / Div. Fund Group: Index Code: Grant Code: Grant Detail:

		26.80%									
CATEGORY/LINE ITEM	Annual	_	Total Annual % OF Sal/Frin Ben TIME	% OF TIME	% OF FTE	Monthly Rate	Mth	Salary Budget	Frin Ben Budget	Total Budget	
		.1									
A PERSONNEL HIV SEROEPIDEMIOLOGY	-										•
1. Sr. Physician Specialist 2232 7 S. Schwarcz	183,092	49,067	232,159	40%	0.40	15,258	5	73,237	19,627	.92,864	
2. Manager I 0922 5 H Fisher Raymond	108,888	29,181	138,069	10%	0.10	9,074	12	10,889	2,918	13,807	
3. Epidemjologist II 2803 5 T. Kellogg	92,222	24,900	117,122	100%	1.00	7,685	. 12	92,222	30,433	122,655	
4. COLA 4%		- 2							-	+	
5. STEP Increases 5%							21	D	,	0	

176,348 52,979 229,327 229,327 52,979 176,348 1.50 487,351 103,149 384,202

Sub Total CONTRACTS F. CONTRACTUAL SERVICES (02789)
1. UCSF
2. PHFE

Sub Total SUPPLIES

E. MATERIALS AND SUPPLIES
1. Office Supplies (04951)
2. Food (04699)
3. Laboratory Supplies (04431)
4. Educational Supplies

D. EQUIPMENT
1. Non Inventorial Equipment
Sub Total EQUIPMENT

SUB TOTAL

O C. TRAVEL

N 1 Local Travel (02301)

Q 2. Out-of-Jurisdiction Travel (02101)

Sub Total TRAVEL

00101 SALARIES 00103 FRNG BN SUB TOTAL

TOTAL SALARY/FRINGE

SAN FRANCISCO DEPARTMENT OF PUBLIC HEALTH
AIDS Office - HIV Epidemiology Section
CDC Kenya - Monitoring and Evaluation (M&E)
September 30, 2011 - September 29, 2012

6	CDC Kenya - Monitoring and Evaluation (M&E)	September 30, 2011 - September 29, 2012			
	HPH-03	2S/CHS/GNC	HCHPDHIVSVGR	: HCA014	11: 1200

Dept / Div: Fund Group: Index Code: Grant Code: Grant Detail:

TOTAL BUDGET AWARD

Amendme	nt to Subaward	
Prime Awardee	Subawardee	
Institution/Organization ("UNIVERSITY") Name: The Regents of the University of Califor Address: Office of Sponsored Research Division of Contracts and Grants University of California, San Francisco 3333 California Street, Suite 315 San Francisco, CA 94143-0962 University's PI: Dr. George W. Rutherford Prime Award Number: U2 GPS001814-03S1 UCSF DPA / Fund Numbers: 444250 / 24092 CFDA Number: 93.067	Institution/Organization ("COLLABORATOR") Name: City and County of San Francisco Department of Public Health Address: 1380 Howard Street, 4 th Floor San Francisco, CA 94103 EIN: 94-6000417 DUNS: 96-073-9449 Collaborator's PI: Dr. William McFarland Subcontract: 5745sc Amendment: 6	
Awarding Agency: DHHS - CDC - National Center	r for HIV, Viral Hepatitis, STDS and TB Prevention	
Subaward Period of Performance: Amount Funded this Action: Est. Total Project 9/30/2011 through 9/29/20112 \$256,846.00 Est. Total Project Budget: \$550,000.00		
Project Title: CDC Kenya – Monitoring and Eva	luation (M&E)	
	Terms and Conditions for this period of performance as included as Attachment A.	
The Amendment 6 period of p9/29/2012.	performance is 9/30/2011 through	

- Amendment 6 allocates \$256,846.00, as itemized in Attachment B, for the period of performance stated above. This amount will not be exceeded without prior written approval of the University's Principal Investigator and a subsequent formal amendment to Agreement.
- Applicable provisions of the current Award are hereby incorporated. The Notice of Award is included as Attachment C.

All other terms and conditions of this Agreement remain the same.

IN WITNESS WHEREOF, the parties hereto have executed this Amendment on the month, day and year specified below.

By an Authorized Official of UNIV	ERSITY:	By an	Authorized	d Official of L	INIVERSIT'	f: OPH
Kut M. Ega	<u>u 22 u</u>	Nama		 	سن خوشن ساستند	
Manager, Contracts & Grants Office of Sponsored Research	Date	Name: Title:)ate

5745sc

11 29 11

Scope of Work SFDPH September 30, 2011 — September 29, 2012

SFDPH will support UCSF in providing technical assistance and training on various activities within UCSF's Kenya Surveillance Cooperative Agreement. Dr. Sandy Schwarcz is the faculty lead on all Kenya Surveillance projects. Mr. Tim Kellogg will be based in Kenya through March 31, 2011.

Activities:

Activity 1: Kenya AIDS Indicator Survey (KAIS II)

Provide technical assistance to CDC-GAP Kenya and the Government of Kenya (GoK) on coordination of the second Kenya AIDS Indicator Survey (KAIS II)

- 1. Actively participate in the KAIS II TWG and all TWG subcommittees
- 2. Draft and monitor implementation master plan for KAIS II
- 3. Support GoK in planning for field implementation and logistics
- Complete report and analysis plan, including a timeline for release of preliminary and final reports
- 5. Pilot KAIS field pilot and finalize all survey materials based on pilot
- in collaboration with NASCOP and other partners, coordinate and co-facilitate training of all KAIS survey staff
- 7. Support launch and field implementation of KAIS II
- 8. Conduct scientific, technical and logistical monitoring of field implementation, through routine communication with field staff and supervision visits
- Check and clean survey data, merge laboratory test data with survey data, and determine sampling weights
- 10. Prepare final dataset & conduct data analysis
- 11. Prepare preliminary report

Activity 2: Case Reporting

Provide technical assistance to CDC-GAP Kenya in the development and implementation of HIV case reporting for national HIV surveillance.

- Work with CDC headquarters and other East African countries with the interest and/or
 experience in case reporting to develop regional recommendations and plans for initiating HIV
 case reporting.
- 2. Assess the steps needed to implement case reporting
- 3. In collaboration with GoK partners, develop/refine a National Action Plan for case reporting.
- 4. Identify a clinical site (PMTCT and/or ART) for pilot testing case reporting
- S. Develop a template case reporting form.
- 6. Develop an operational manual for case reporting
- 7. Develop training and evaluation materials for case reporting.
- Develop a draft protocol for piloting testing HIV case reporting in at least one health care facility

Project Name	Kenya Survelliance FY03
Subcontractor	SFDPH
Start Date	9/30/2011
End Date	9/29/2012
Budget Duration (months)	2.
Indirect Rate	12%
	San Francisco Department of Public Health Subcontract
	Budget Period: 9/30/2011-9/29/2012

\$92,864 \$122,655 \$13,807 \$229,327 \$19,627 \$19,627 \$30,433 \$2,918 \$52,979 \$73,237 \$92,222 \$10,889 \$176,348 #mos, Salary 27 0 Current Salar % effort i \$183,092 40% \$92,222 100% \$108,888 10% 40% 10% 150% Sr. Technical Advisor Sr. Statistician Sr. Technical Advisor Position Title Schwarcz, Sandra Raymond, Henry Total Personnel Kellogg, Tim Personnel

Budget Name: Kenya Surveillance FY03

\$27,519 \$256,846 \$229,327 Total Direct Costs Overhead at 12% **Grand Total**

Notice of Award
Issue Date:



COOPERATIVE AGREEMENTS

Department of Health and Human Services Centers for Disease Control and Prevention

NATIONAL CENTER FOR HIV, VIRAL HEPATITIS, STDS AND TB PREVENTION



ATTACHMENT C

10/28/2011

Grant Number: 3U2GPS001814-03S1

Principal Investigator(s):

GEORGE WILLIAMS RUTHERFORD, MD

Project Title: CDC KENYA - MONITORING AND EVALUATION (M&E)

CONTRACTS & GRANTS OFFICER
THE REGENTS OF THE UNIV CALIFORN
OFFICE OF SPONSORED RESEARCH
3333 CALIFORNIA ST, SUITE 315
SAN FRANCISCO, CA 941430962

Award e-mailed to: cgrasteam@ucsf.edu

Budget Period: 09/30/2011 - 09/29/2012 **Project Period:** 09/30/2009 - 09/29/2014

Dear Business Official:

The Centers for Disease Control and Prevention hereby awards a grant in the amount of \$1,871,500 (see "Award Calculation" in Section I and "Terms and Conditions" in Section III) to UNIVERSITY OF CALIFORNIA-SAN FRANCISCO in support of the above referenced project. This award is pursuant to the authority of Section 307 Public Health Service Act,42U.S.C.Section 2421 and is subject to the requirements of this statute and regulation and of other referenced, incorporated or attached terms and conditions.

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 the individual(s) referenced in Section IV.

Sincerely yours,

STEWARD NICHOLS
Grants Management Officer
Centers for Disease Control and Prevention

Additional information follows

SECTION I - AWARD DATA - 3U2GPS001814-03S1

Award Calculation (U.S. Dollars)

Federal Direct Costs			•	\$1,642,193
Federal F&A Costs				\$229,307
Approved Budget			A	\$1,871,500
Federal Share		•		\$1,871,500
TOTAL FEDERAL AWA	RD AMOUNT			\$1,871,500
EQUITE CHECK CHARLES				

AMOUNT OF THIS ACTION (FEDERAL SHARE)

\$1,871,500

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

04 \$0 05 \$0

Fiscal Information:

CFDA Number: EIN: Document Number: 93.067

1946036493A1 UPS001814A

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ka H			DROZI RT		· .	51	1.871.500	}	
(31)			POULLE !				.,		* * * * * * * * * * * * * * * * * * *

SUMMARY TOTAL FEDERAL AWARD AMOUNT YEAR (3)				
GRANT NUMBER	TOTAL FEDERAL AWARD AMOUNT			
3U2GPS001814-03S1	\$1,871,500			
5U2GPS001814-03	\$240,500			
TOTAL	\$2,112,000			

F	SUMMARY TOTAL	S FOR ALL YEARS
YR	THIS AWARD	CUMULATIVE TOTALS
3	\$1,871,50	00 \$2,112,000
4		\$400,000
5		\$400,000

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

CDC Administrative Data:

PCC: N / OC: 4141 / Processed: NICHOLSST 10/28/2011

SECTION II - PAYMENT/HOTLINE INFORMATION - 3U2GPS001814-03S1

For payment information see Payment Information section in Additional Terms and Conditions.

INSPECTOR GENERAL: The HHS Office 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 histips@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. This note replaces the Inspector General contact information cited in previous notice of award.

SECTION III - TERMS AND CONDITIONS - 3U2GPS001814-03S1

This award is based on the application submitted to, and as approved by, CDC on the abovetitled project and is subject to the terms and conditions incorporated either directly or by reference in the following:

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.

45 CFR Part 74 or 45 CFR Part 92 as applicable.

 The HS Grants Policy Statement, including addenda in effect as of the beginning date of the budget period.

e. This award notice, INCLUDING THE TERMS AND CONDITIONS CITED BELOW.

This award is funded by the following list of institutes. Any papers published under the auspices of this award must cite the funding support of all institutes.

Coordinating Office Of Global Health (GH)

Treatment of Program Income: Additional Costs

SECTION IV - PS Special Terms and Conditions - 3U2GPS001814-03S1

Funding Opportunity Announcement (FOA) Number: PS09-990

Award Number: PS001814-03 Approval List Number: I0008K12

The purspoes of this amended Notice of Award are as follows:

NOTE 1: The purpose of the amended Notice of Award is to award funds in the amount of \$1,871,500 for activities in Kenya. The awarded funds are the remaining partial funds for budget period 03. The amount of \$240,500 was awarded in the Notice of Award dated August 29, 2011. This action represents the final award of the approved budget of \$2,112,000 for budget period 73

NOTE 2. Removal of Restricted Costs:

The purpose of this amendment is to release the human subjects restrictions in the amount of \$120,000 from budget year 02, Note 3, based on the grantee's response dated August 16, 2011. These restrictions are referenced in the human subjects memorandum dated June 24, 2010.

NOTE 3. Of the total year three award, \$53,477 (contractural budget) is restricted until protocols describing the process are submitted to CDC GAP/Atlanta for review of human subject issues and a determination of research or non-research, or protocol approval has been received.

Data collection activities, evaluations or assessments, examination of patient records done for the purpose of research, evaluation or surveillance will require protocol submission, review and approval or determination from CDC/Atlanta prior to implementation. Also, any impact evaluation that would involve surveys, interviews, focus groups, etc. would need protocols in advance for human subject review and approval. Any local IRB approvals, IRB-exempt determinations or institutional non-research determinations already obtained that relate to project activities should be submitted to CDC GAP/Atlanta, Funding for activities that are clearly service delivery may proceed without restrictions.

NOTE 4. The purpose of this amendment is to grant retroactive approval of the redirection of \$9,611 for budget year 2 in response to the grantee's request dated August 16, 2011. Funds were redirected from the Indirect and Travel cost categories to the Contractural cost category.

NOTE 5. Please be advised that grantee must exercise proper stewardship over Federal funds by ensuring that all costs charged to their cooperative agreement are allowable, allocable, necessary and reasonable.

NOTE 6. All the other terms and conditions issued with the original award remain in effect throughout the budget period unless otherwise changed, in writing, by the Grants Management Officer.

PLEASE PLACE YOUR FUNDING OPPORTUNITY NUMBER AND AWARD NUMBER ON ALL CORRESPONDENCE.

Funding Opportunity Announcement (FOA) Number: PS09-990 Award Number: PS001814-03 Approval List Number: I06734K11

TERMS AND CONDITIONS OF THIS AWARD

NOTE 1: INCORPORATION: Funding Opportunity Announcement Number PS09-990 entitled, ? Strengthening HIV Strategic Information Activities in the Republic of Kenya under the President?s Emergency Plan for AIDS Relief (PEPFAR) and the revised application dated May 2, 2011, as amended, is made a part of this Non-Research Continuation award by reference.

NOTE 2: GOVERNING REGULATIONS, POLICIES AND PROCEDURES: Title 45 Code of Federal Regulation Part 74, 2 CFR Part 45 Uniform Administrative Requirements for Grants and Other Agreements with Institutions of Higher Education, Hospitals, Other Nonprofit Organizations and 2 CFR 230 Cost Principles for Non-Profit organizations.

NOTE 3: APPROVED FUNDING: Funding in the amount of \$2,112,000 is approved for the Year 03 twelve month budget period, which is through September 29. All funding for future years will be based on satisfactory programmatic progress and the availability of funds.

NOTE 4: This action awards partial funds in the amount of \$240,500 for Budget period 03 from September 30, 2011 to September 29, 2012. The project end date is September 29, 2014. The remaining funds of \$1,871,500 will be disbursed based on the availability of funds.

NOTE 5: TECHNICAL REVIEW RESPONSE REQUIREMENT: The Technical Review comments on the strengths and weaknesses of the proposal and is provided as part of this award. A response to the weaknesses in these comments must be submitted to and then approved, in writing, by the Grants Management Specialist as noted in the CDC Contact section of this Notice of Award, not later than October 31, 2011. The response should include a revised plan of action prioritizing activities to fit within the funds available. Should these terms not be satisfactorily adhered to, it may result in denial of your authority to expend additional funds.

NOTE 6: HUMAN SUBJECTS DATA COLLECTION:

Of the year two award, \$120,000 is restricted from the ?Salaries? and ?Travel? cost categories per the funding memo dated June 27, 2010. The unobligated balance of \$250,000 cannot be carried over to year three until this restriction is lifted.

Data collection activities, evaluations or assessments, examination of patient records done for the purpose of research, evaluation or surveillance will require protocol submission, review and approval or determination from CDC/Atlanta prior to implementation. Also, any impact evaluation that would involve surveys, interviews, focus groups, etc. would need protocols in advance for human subject review and approval. Any local IRB approvals, IRB-exempt determinations or institutional non-research determinations already obtained that relate to project activities should be submitted to CDC GAP/Atlanta. Funding for activities that are clearly service delivery may proceed without restrictions.

NOTE 7. RESTRICTED FUNDS ? PROGRAMMATIC: Restrictions are placed in the Consultants cost category in the amount of \$8,252.61 upon demonstration of a competitive selection process or a solid justification for sole sourcing.

RESTRICTED FUNDS MAY NOT BE USED UNLESS A NOTICE OF AWARD LIFTING THE RESTRICTIONS HAS BEEN SENT TO THE GRANTEE FROM THE GRANTS MANAGEMENT OFFICER.

NOTE 8. INDIRECT COSTS: Indirect costs are approved based on the Indirect Cost Rate Agreement dated August 28, 2009, which calculates indirect costs as follows: a provisional rate is approved at a rate of 26% of the base, which include the modified total direct costs, consisting

of all salaries and wages, fringe benefits, materials, supplies, services, travel and subgrants and subcontracts up to the first \$25,000 of each subgrant or subcontract (regardless, of the period covered by the subgrant or subcontract).

Modified total direct costs shall exclude equipment, capital expenditures, charges for patient care, student tuition remission, rental costs of off-site facilities, scholarships, and fellowships as well as the portion of each subgrant and subcontract in excess of \$25,000.

NOTE 9. ANNUAL FINANCIAL STATUS REPORT (FSR, SF 269 or SF 269A)/FEDERAL FINANCIAL REPORT (FFR):

Disclaimer: As of February 1, 2001, current Financial Status Report (FSR) requirements will be obsolete. Existing practices will be updated to reflect changes for implementation of the new Federal Financial Reporting (FFR) requirements.

a) ANNUAL FINANCIAL STATUS REPORT:

Disclaimer: As of February 1, 2001, current Financial Status Report (FSR) requirements will be obsolete. Existing practices will be updated to reflect changes for implementation of the new Federal Financial Reporting (FFR) requirements.

a) ANNUAL FINANCIAL STATUS REPORT:

The Annual Financial Status Report (FSR) is required and must be submitted 90 days after the end of each budget period. The FSR for this budget period is due to the Grants Management Specialist by December 31st, 2012. Reporting timeframe is September 30, 2011 to September 29, 2012. The FSR should only include those funds authorized and disbursed during the timeframe covered by the report. If the FSR is not finalized by the due date, an interim FSR must be submitted, marked ?NOT FINAL.? and an amount of un-liquidated obligations should be annotated to reflect unpaid expenses.

Electronic versions of the form can be downloaded into Adobe Acrobat and completed on-line by reviewing, http://www.whitehouse.gov/omb/grants/sf269a.pdf

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 submit a letter explaining the reason and date by which the Grants Officer will receive the information.

The FSR is a requirement of this cooperative agreement and must be submitted and finalized every year of the project. The finalized FSR must be submitted within 12 months of the due date and should only be submitted electronically.

b) PROGRESS REPORTING:

SEMI-ANNUAL PROGRESS REPORTING

Semi-annual progress reports are a requirement of this program.

The Interim Progress Report (IPR) will serve as the non-competing continuation application and is due no less than 90 days before the end of the budget period. IPR reporting timeframe is September 30, 2011 through February 28, 2012. A due date and specific IPR guidance will be provided at a later date.

The report must contain the following:

- Status/Progress of Current Budget Period Goals and Objectives
- Also include key organizational changes, key staff changes, and an implementation plan for each activity.
- Current Budget Period Financial Progress and amount of estimated unobligated balances
- New Budget Period Program Proposed Activity Objectives and timelines
- Ensure Objectives are specific, measurable, appropriate, realistic, and time-phased.
- Measures of Effectiveness.
- Additional requested information.
 - Detailed Line-Item Budget and Justification.
- Use the SF424 forms: http://www.whitehouse.gov/omb/grants/grants_forms.html
- For the Budget details and justification follow the Budget Guidelines at:
 http://www.cdc.gov/od/pgo/funding/grantmain.htm

ii. The Annual Progress Report (APR) will be due 90 days following the end of the budget period September 29, 2012 on December 31, 2012. APR programmatic guidance will be provided at a later date. Reporting timeframe is September 29, 2011 through September 30, 2012.

A comparison of actual accomplishments to the goal established for the period;

The reasons for failure, if established goals were not met; and

 Other pertinent information including, when appropriate, analysis and explanation of performance costs significantly higher than expected.

iii. The Final Progress Report is required no later than 90 days after the end of the project period. All manuscripts published as a result of the work supported in part or whole by the cooperative agreement will be submitted with the progress reports.

NOTE: Recipient may send an electronic/email of the scanned reports to the Grants Management Specialist for approval by the Grants Management Officer by the due date noted. If that is not possible an original plus two (2) copies of the reports must be mailed to the Grants Management Specialist for approval by the Grants Management Officer by the DUE DATE noted. ENSURE THE AWARD AND FUNDING OPPORTUNITY ANNOUNCEMENT AND COOPERATIVE AGREEMETN NUMBER IS ON ALL REPORTS.

NOTE 10: OTHER REPORTING REQUIREMENTS

CENTRAL CONTRACTOR REGISTRATION AND UNIVERSAL IDENTIFIER REQUIREMENTS: All applicant organizations must obtain a DUN and Bradstreet (D&B) Data Universal Numbering System (DUNS) number as the Universal Identifier when applying for Federal grants or cooperative agreements. The DUNS number is a nine-digit number assigned by Dun and Bradstreet Information Services. An AOR should be consulted to determine the appropriate number. If the organization does not have a DUNS number, an AOR should complete the US D&B D-U-N-S Number Request Form or contact Dun and Bradstreet by telephone directly at 1-866-705-5711 (toll-free) to obtain one. A DUNS number will be provided immediately by telephone at no charge. Note this is an organizational number. Individual Program Directors/Principal Investigators do not need to register for a DUNS.

Additionally, all applicant organizations must register in the Central Contractor Registry (CCR) and maintain the registration with current information at all times during which it has an application under consideration for funding by CDC and, if an award is made, until a final financial report is submitted or the final payment is received, whichever is later. CCR is the primary registrant database for the Federal government and is the repository into which an entity must provide information required for the conduct of business as a recipient. Additional information about registration procedures may be found at the CCR internet site at www.ccr.gov. If an award is granted, the grantee organization must notify potential sub-recipients that no organization may receive a subaward under the grant unless the organization has provided its DUNS number to the grantee organization.

FEDERAL INFORMATION SECURITY MANAGEMENT ACT (FISMA):

All information systems, electronic or hard copy which contain federal data need to be protected from unauthorized access. This also applies to information associated with CDC grants. Congress and the OMB have instituted laws, policies and directives that govern the creation and implementation of federal information security practices that pertain specifically to grants and contracts. The current regulations are pursuant to the Federal Information Security Management Act (FISMA), Title III of the E-Government Act of 2002 Pub. L. No. 107-347.

FISMA applies to CDC grantees \only when grantees collect, store, process, fransmit or use information on behalf of HHS or any of its component organizations. In all other cases, FISMA is not applicable to recipients of grants, including cooperative agreements. Under FISMA, the grantee retains the original data and intellectual property, and is responsible for the security of this data, subject to all applicable laws protecting security, privacy, and research. If and when information collected by a grantee is provided to HHS, responsibility for the protection of the HHS copy of the information is transferred to HHS and it becomes the agency?s responsibility to protect that information and any derivative copies as required by FISMA. For the full text of the requirements under Federal Information Security Management Act (FISMA), Title III of the E-Government Act of 2002 Pub. L. No. 107-347, please review the following website: http://firwebgate.access.gpo.gov/cgi-bin/getdoc.cgi? dbname=107_cong_public_laws&docid=f:publ347.107.pdf

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NON-DELINQUENCY on FEDERAL DEBT

The Federal Debt Collection Procedures Act of 1990 (Act), 28 U.S.C. 3201(e), provides that an organization or individual that is indebted to the United States, and has a judgment lien filed against it, is ineligible to receive a Federal grant. CDC cannot award a grant unless the AOR of the applicant organization (or individual in the case of a Kirschstein-NRSA individual fellowship) certifies, by means of his/her signature on the application, that the organization (or individual) is not delinquent in repaying any Federal debt. If the applicant discloses delinquency on a debt owed to the Federal government, CDC may not award the grant until the debt is satisfied or satisfactory arrangements are made with the agency to which the debt is owed. In addition, once the debt is repaid or satisfactory arrangements made, CDC will take that delinquency into account when determining whether the applicant would be a responsible CDC grant recipient.

Anyone who has been judged to be in default on a Federal debt and who has had a judgment lien filed against him or her should not be listed as a participant in an application for a CDC grant until the judgment is paid in full or is otherwise satisfied. No funds may be used for or rebudgeted following an award to pay such an individual. CDC will disallow costs charged to awards that provide funds to individuals in violation of this Act.

These requirements apply to all types of organizations and awards, including foreign grants.

NOTE 11: PRIOR APPROVAL: All requests, which require prior approval, must bear the signature of an authorized official of the business office of the grantee organization as well as the principal investigator or program or project director named on this notice of award. The request must be postmarked no later than 120 days prior to the end date of the current budget period and submitted with an original plus two copies. Any requests received that reflect only one signature will be returned to the grantee unprocessed. Additionally, any requests involving funding issues must include an itemized budget and a narrative justification of the request.

Prior approval is required but is not limited to the following types of requests: 1) Use of unobligated funds from prior budget period (Carryover); 2) Lift funding restriction, withholding, or disallowance, 3) Redirection of funds, 4) Change in Contractor/Consultant; 5) Supplemental funds; 6) Response to Technical Review or Summary Statement, 7) Change in Key Personnel, or 8) Liquidation Extensions.

NOTE 12: AUDIT REQUIREMENT: An organization that expends \$500,000 or more in a year in Federal awards shall have a single or program-specific audit conducted for that year in accordance with the provisions of OMB Circular A-133, Audit of States, Local Governments, and Non-Profit Organizations. The audit must be completed along with a data collection form, and the reporting package shall be submitted within the earlier of 30 days after receipt of the auditor?s report(s), or nine months after the end of the audit period.

Office of Inspector General
Office of Audit Services
National External Audit Review Center
1100 Walnut St., Suite 850
Kansas City, MO 64106-2197

- a. Recipient fiscal year: July 1st ? June 30th
 - b. Report Submission: The earlier of
- (1) 30 days after receipt of the auditors report(s) or
- (2) Nine months after the end of the audit period ? March 30, 2013

It is very helpful to CDC managers if the recipient sends a courtesy copy of completed audits and any management letters on a voluntary basis to the following address.

Centers for Disease Control and Prevention (CDC) ATTN: Audit Resolution, Mail Stop E-14 2920 Brandywine Road Atlanta, GA 30341-4146

NOTE 13: SUBGRANT/SUBRECIPIENT AWARDS: The grantee is to ensure that the subrecipients receiving CDC funds also meet these requirements (if total Federal grant or

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cooperative agreement funds received exceed \$500,000). The grantee must also ensure that appropriate corrective action is taken within six months after receipt of the sub-recipient audit report in instances of non-compliance with Federal law and regulations. The grantee is to consider whether sub-recipient audits necessitate adjustment of the grantee's own accounting records. If a sub-recipient is not required to have a program-specific audit, the Grantee is still required to perform adequate monitoring of sub-recipient activities. The grantee is to require each sub-recipient to permit independent auditors to have access to the sub-recipient's records and financial statements. The grantee should include this requirement in all sub-recipient contracts.

NOTE 14. ASSISTANCE AWARD CLOSEOUT REQUIREMENTS: Award recipient shall submit within 90 days after the last day of the final budget period the following final reports and other programmatic reports as required by the terms and conditions of the assistance award, Reporting timeframe is September 30, 2009 to September 29, 2014.

FINAL PROGRESS REPORT (FSR) (SF 269) is due 90 days after the end of the project period. An original and two copies are required. At a minimum it should include the following:

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

An original and two copies are required. The FSR/FFR should only include those funds authorized and actually expended during the timeframe covered by the report. Handwritten forms will not be accepted.

Electronic versions of the form can be downloaded into Adobe Acrobat and completed on-line by visiting: http://www.whitehouse.gov/omb/grants/sf269a.pdf.

This 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 Health and Human Services Payment Management System (PMS), you will be required to update your reports to PMS accordingly. Remaining unobligated funds will be deobligated and returned to the U.S. Treasury.

EQUIPMENT INVENTORY REPORT is due 90 days after the end of the budget period. An original and two copies of a complete inventory must be submitted for all major equipment acquired or furnished under this project with a unit acquisition cost of \$5,000 or more. The inventory list must include the description of the item, manufacturer serial and/or identification number, acquisition date and cost, percentage of Federal funds used in the acquisition of the item. You should also identify each item of equipment that you wish to retain for continued use in accordance with 45 CFR 74.37 or 45 CFR 92.50 for State and Local Governments. These requirements do apply to equipment purchased with non-federal funds for this program. The awarding agency may exercise its rights to require the transfer of equipment purchased under the assistance award referenced in the cover letter (45 CFR 74.34 or 45 CFR 92.32) for State and Local Governments. We will notify you 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. If no equipment was acquired under this award, a negative report is required.

FINAL INVENTION STATEMENT is due 90 days after the end of the budget period. An original and two copies of a Final Invention Statement are required. Electronic versions of the form can be downloaded by visiting http://www.hhs.gov/forms/hhs568.pdf. If no inventions were conceived under this assistance award, a negative report is required. This statement may be included in a cover letter.

If the final reports (Final Financial Status Report/Federal Financial Report and Final Progress Report) cannot be submitted within 90 days after the end of the project period, you must submit a letter requesting an extension that includes the reason(s) for the delay and state the expected date which the Procurement and Grants Office will receive the reports. All required documents may be mailed to the Grants contact as provided below in Section IV. Staff Contacts.

Disclaimer. Ensure all financial information is submitted for the last year of the budget period.

NOTE 15. SUBGRANT/SUBRECIPIENT AWARDS: Seed Grants/Sub-Grants are not authorized under this program or included in Program authorizing legislature. As a result, the recipient is not permitted to fund seed grants or sub-grants. Recipient must issue proposed funding as a procurement requirement per the organization's established procedures.

NOTE 16. TRAVEL COST: in accordance with Health and Human Services (HHS) Grants Policy Statement, travel is only allowable for personnel directly charged and approved on the grant/cooperative agreement. There must be a direct benefit imparted on behalf of the traveler as it applies to the approved activities of the Notice of Award. To prevent disallowance of cost, Recipient is responsible for ensuring that only allowable travel reimbursements are applied in accordance with their organization's established travel policies and procedures.

NOTE 17. FOOD AND MEALS. Costs associated with food or meals are NOT permitted unless included with per diem as a part of official travel.

NOTE 18. HIV PROGRAM REVIEW PANEL REQUIREMENT: All written materials, audiovisual materials, pictorials, questionnaires, survey instruments, websites, educational curricula and other relevant program materials must be reviewed and approved by an established program review panel. A list of reviewed materials and approval dates must be submitted to the CDC Grants Management Specialist.

NOTE 19: PRIOR APPROVAL: All requests, which require prior approval, must bear the signature of an authorized official of the business office of the grantee organization as well as the principal investigator or program or project director named on this notice of award. The request must be postmarked no later than 120 days prior to the end date of the current budget period and submitted with an original plus two copies. Any requests received that reflect only one signature will be returned to the grantee unprocessed. Additionally, any requests involving funding issues must include an itemized budget and a narrative justification of the request.

Prior approval is required but is not limited to the following types of requests: 1) Use of unobligated funds from prior budget period (Carryover); 2) Lift funding restriction, withholding, or disallowance, 3) Redirection of funds, 4) Change in Contractor/Consultant, 5) Supplemental funds; 6) Response to Technical Review or Summary Statement, 7) Change in Key Personnel, or 8) Liquidation Extensions.

NOTE 20. CORRESPONDENCE: ALL correspondence (including emails and faxes) regarding this award must be dated, identified with the AWARD NUMBER, and include a point of contact (name, phone, fax, and email). All correspondence should be addressed to the Grants Management Specialist listed below and submitted with an original plus two copies.

Kenya Anderson, Grants Management Specialist Centers for Disease Control, PGO, Branch VII 2920 Brandywine Road, Mail Stop K75 Atlanta, GA 30341-4146 Telephone: (770) 488-2487 Fax: (770) 488-2688

Email: Kenya.Anderson@cdc.hhs.gov

NOTE 21. INVENTIONS: Acceptance of grant-funds obligates recipients to comply with the standard patent rights clause in 37 CFR 401.14.

NOTE 22. PUBLICATIONS: Publications, journal articles, etc. produced under a CDC grant support project must bear an acknowledgment and disclaimer, as appropriate, for example:

This publication (journal article, etc.) was supported by the Cooperative Agreement Number above from The Centers for Disease Control and Prevention. Its contents are solely the responsibility of the authors and do not necessarily represent the official views of the Centers for Disease Control and Prevention.

NOTE 23, CANCEL YEAR. 31 U.S.C. 1552(a) Procedure for Appropriation Accounts Available for Definite Periods states the following, On September 30th of the 5th fiscal year after the period of availability for obligation of a fixed year appropriation account ends, the account shall be closed and any remaining balances (whether obligated or unobligated) in the account shall be canceled and thereafter shall not be available for obligation or expenditure for any purpose. An example is provided below:

FY 2005 funds will expire September 30, 2010. All FY 2005 funds should be drawn down and reported to Payment Management System (PMS) prior to September 30, 2010. After this date, corrections or cash requests will not be permitted.

NOTE 24. CONFERENCE DISCLAIMER AND USE OF LOGOS:

Disclaimer. If a conference is funded by a grant, cooperative agreement, sub-grant and/or a contract the recipient must include the following statement on conference materials, including promotional materials, agenda, and internet sites:

Funding for this conference was made possible (in part) by the Centers for Disease Control and Prevention. The views expressed in written conference materials or publications and by speakers and moderators do not necessarily do not reflect the official policies of the Department of Health and Human Services, nor does the mention of trade names, commercial practices, or organizations imply endorsement by the U.S. Government.

Logos. Neither the HHS nor the CDC logo may be displayed if such display would cause confusion as to the conference source or give false appearance of Government endorsement. Use of the HHS name or logo is governed by U.S.C. 1320b-10, which prohibits misuse of the HHS name and emblem in written communication. A non-federal entity is unauthorized to use the HHS name or logo governed by U.S.C. 1320b-10. The appropriate use of the HHS logo is subject to review and approval of the Office of the Assistant Secretary for Public Affairs (OASPA). Moreover, the Office of the Inspector General has authority to impose civil monetary penalties for violations (42 C.F.R. Part 1003). Neither the HHS nor the CDC logo can be used on conference materials, under a grant, cooperative agreement, and contract or co-sponsorship agreement without the expressed, written consent of either the Project Officer or the Grants Management Officer. It is the responsibility of the grantee (or recipient of funds under a cooperative agreement) to request consent for use of the logo in sufficient detail to ensure a complete depiction and disclosure of all uses of the Government logos. In all cases for utilization of Government logos, the grantee must ensure written consent is received from the Project Officer and/or the Grants Management Officer.

NOTE 25. EQUIPMENT AND PRODUCTS: To the greatest extent practicable, all equipment and products purchased with CDC funds should be American-made. CDC defines equipment as tangible non-expendable personal property (including exempt property) charged directly to an award having a useful life of more than one year AND an acquisition cost of \$5,000 or more per unit. However, consistent with recipient policy, a lower threshold may be established. Please provide the information to the Grants Management Officer to establish a lower equipment threshold to reflect your organization's policy.

The grantee may use its own property management standards and procedures provided it observes provisions of the following sections in the Office of Management and Budget (OMB): Circular A-110 and 45 CFR Part 92:

- i. Office of Management and Budget (OMB) Circular A-110, Sections 31 through 37 provides the uniform administrative requirements for grants and agreements with institutions of higher education, hospitals, and other non-profit organizations. For additional information, please review: the following website: http://www.whitehouse.gov/omb/circulars/a110/a110.html
- ii. 45 CFR Parts 92.31 and 92.32 provides the uniform administrative requirements for grants and cooperative agreements to state, local and tribal governments. For additional information, please review the following website listed: http://www.access.gpo.gov/nara/cfr/waisidx_03/45cfr92_03.html

NOTE 26. PROGRAM INCOME: Any program income generated under this cooperative agreement will be used in accordance with the additional cost alternative. The disposition of program income must have written prior approval from the Grants Management Officer.

Additional Costs Alternative—Used for costs that are in addition to the allowable costs of the project for any purposes that further the objectives of the legislation under which the cooperative agreement was made. General program income subject to this alternative shall be reported on lines 10r and 10s, as appropriate, of the FSR (Long Form).

NOTE 27. KEY PERSONNEL: In accordance with 45 CFR 74.25(c)(2) & (3) CDC recipients shall obtain prior approvals from CDC for (1) change in the project director or principal investigator or other key persons—specified in the application or award document, and (2) the absence for more than three months, or a 25 percent reduction in time devoted to the project, by the approved project director or principal investigator.

NOTE 28. TRAFFICKING IN PERSONS. This award is subject to the requirements of Section 106 (g) of the Trafficking Victims Protection Act of 2000; as amended (22 U.S.C. 7104). For the full text of the award terms and conditions, please review the following website: http://www.cdc.gov/od/pgo/funding/grants/Award_Term_and_Condition_for_Trafficking_in_Persons.shtm

NOTE 29. ACKNOWLEDGMENT OF FEDERAL SUPPORT: When issuing statements, press releases, requests for proposals, bid solicitations and other documents describing projects or programs funded in whole or in part with Federal money, all awardees receiving Federal funds, including and not limited to State and local governments and recipients of Federal research grants, shall clearly state (1) the percentage of the total costs of the program or project which will be financed with Federal money, (2) the dollar amount of Federal funds for the project or program, and (3) percentage and dollar amount of the total costs of the project or program that will be financed by nongovernmental sources.

NOTE 30. PROHIBITION ON USE OF CDC FUNDS FOR CERTAIN GUN CONTROL ACTIVITIES:

Disclaimer: Omit this section if the award being processed is not associated with the National Center for Injury Prevention and Control at CDC.

The Departments of Labor, Health and Human Services, and Education, and Related Agencies. Appropriations Act, specifies that: None of the funds made available for the National Center for Injury Prevention and Control at CDC may be used to advocate or promote gun control.

Anti-Lobbying Act requirements prohibit lobbying Congress with appropriated Federal monies. Specifically, this Act prohibits the use of Federal funds for direct or indirect communications intended or designed to influence a Member of Congress with regard to specific Federal legislation. This prohibition includes the funding and assistance of public grassroots campaigns intended or designed to influence Members of Congress with regard to specific legislation or appropriation by Congress.

In addition to the restrictions in the Anti-Lobbying Act, CDC interprets the new language in the CDC's Appropriations Act to mean that CDC's funds may not be spent on political action or other activities designed to affect the passage of specific Federal, State, or local legislation intended to restrict or control the purchase or use of firearms.

For the full text of the award terms and conditions, please review the following CDC website: http://www.cdc.gov/od/pgo/funding/grants/additional_req.shtm#ar13

NOTE 31. HEALTH INSURANCE PORTABILITY AND ACCOUNTABILITY ACT (HIPAA): Pursuant to the Standards for Privacy of Individually Identifiable Health Information promulaated under the Health Insurance Portability and Accountability Act (HIPAA)(45 CFR Parts 160 and 164) covered entities may disclose protected health information to public health authorities authorized by law to collect or received such information for the purpose of preventing or controlling disease, injury, or disability, including, but not limited to, the reporting of disease, injury, vital events such as birth or death, and the conduct of public health surveillance, public health investigations, and public health interventions. The definition of a public health authority includes a person or entity acting under a grant of authority from or contract with such public agency. Through this agreement, the [Insert recipient Name] is acting under a grant of authority from CDC to carry out [Insert: Name of project/activity] which is authorized by [Insert: Statutory authority from Public Health Service Act, Comprehensive Environmental Response, Compensation, and Liability Act, or other legislation (this information should be provided by the awarding program)]. The CDC grants this authority to [Insert: partner name] for purposes of this project. Further, CDC considers this to be [Insert: type of public health activity, i.e. disease/injury reporting, vital events, surveillance, investigations, intervention, registry] for which disclosure of protected health information by covered entities is authorized by section 164.512(b)).

NOTE 32. COST RECOVERY CONDITIONS: The Comprehensive Environmental Response, Compensation and Liability Act of 1980 (CERCLA), as amended, by the Superfund Amendments

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and Reauthorization Act of 1986 (SARA), provides for the recovery of costs incurred at each Superfund site from potential responsible parties. The recipient agrees to maintain an accounting system that win keep an accurate, complete and current accounting of all financial transactions on a site specific basis, i.e., individual, time, travel, and associated costs including indirect costs, as appropriate for the site. The recipient will retain the documents and records to support these financial transactions, for possible use in a cost recovery case, for a minimum of ten (10) years after submission of a Financial Status Report (FSR)/Federal Financial Report (FFR), unless there is a litigation claim, negotiation, audit or other action involving the specific site, then the records will be maintained until resolution of all issues on the specific site.

All purchases for equipment must be approved in writing prior to purchase and meet the following conditions:

- a. The equipment must be compatible with ATSDR hardware.
- b. The equipment must be returned to ATSDR in operable condition at the conclusion of the project period.

NOTE 33. THIRD PARTY AGREEMENTS - ATSDR: Applicant must justify the need to use a contractor. If contractors are proposed, the following must be provided: (1) name of contractor, (2) method of selection, (3) period of performance, (4) detailed budget, (5) justification for use of contractor, and (6) assurance of non-conflict of interest.

Project activities which are approved for contracting pursuant to the prior approval provisions shall be formalized in a written agreement that clearly establishes the relationship between the recipient and the third party.

The written agreement shall, at a minimum:

- a. State or incorporate by reference all applicable requirements imposed on the contractors under the terms of the grant and/or cooperative agreement, including requirements concerning technical review (ATSDR selected reviewers), ownership of data, and the arrangement for copyright when publications, data, or other copyrightable works are developed under or in the course of work under a PHS grant-supported project or activity.
- b. State that any copyrighted or copyrightable works shall be subject to a royalty-free, nonexclusive, and irrevocable license to the government to reproduce, publish, or otherwise use them, and to authorize others to do so for Federal government purposes.
- c. State that whenever any work subject to this copyright policy may be developed in the course of a grant by a contractor under a grant, the written agreement (contract) must require the contractor to comply with these requirements and can in no way diminish the government's right in that work.
- d. State the activities to be performed, the time schedule for those activities, the policies and procedures to be followed in carrying out the agreement, and the maximum amount of money for which the grantee may become liable to the third party under the agreement.
- State non-conflict of interest concerning activities conducted for ATSDR and site-remediation activities for other parties.

The written agreement required shall not relieve the recipient of any part of its responsibility or accountability to PHS under the cooperative agreement. The agreement shall, therefore, retain sufficient rights and control to the recipient to enable it to fulfill this responsibility and accountability.

NOTE 34. COMPLIANCE WITH EO13513, Federal Leadership on Reducing Text Messaging while Driving, October 1, 2009 is required. Grant recipients and sub-recipients of grant funds are prohibited from texting while driving a Government owned vehicle or when using Government furnished electronic equipment while driving any vehicle. This award is subject to the requirements of Executive Order (EO 13513). For the full text of the award term and condition, please review the following website: http://www.cdc.gov/od/pgo/funding/Addti_Reqmnts.htm.

NOTE 35. PAYMENT INFORMATION: Payment under this award will be made available through the Department of Health and Human Services (HHS) Payment Management System (PMS). PMS will forward instructions for obtaining payments.

 a.) PMS correspondence, mailed through the U.S. Postal Service, should be addressed as follows:

Director, Division of Payment Management, OS/ASAM/PSC/FMS/DPM P.O. Box 6021 Rockville, MD 20852

Phone Number (877) 614-5533 Email: PMSSupport@psc.gov

Website: http://www.dpm.psc.gov/grant_recipient/shortcuts/shortcuts.aspx?explorer.event=true

Please Note: To obtain the contact information of DPM staff within respective Payment Branches refer to the links listed below:

University and Non-Profit Payment Branch: http://www.dpm.psc.gov/contacts/dpm_contact_list/univ_nonprofit.aspx?explorer.event=true

Governmental and Tribal Payment Branch: http://www.dpm.psc.gov/contacts/dpm_contact_list/gov_tribal.aspx?explorer.event=true

Cross Servicing Payment Branch: http://www.dpm.psc.gov/contacts/dpm_contact_list/cross_servicing.aspx

International Payment Branch: Bhavin Patel (301) 443-9188

Note: Mr. Patet is the only staff person designated to handle all of CDC?s international cooperative agreements.

 b.) If a carrier other than the U.S. Postal Service is used, such as United Parcel Service, Federal Express, or other commercial service, the correspondence should be addressed as follows:

US Department of Health and Human Services PSC/DFO/Division of Payment Management 7700 Wisconsin Avenue ? 10th Floor Bethesda, MD 20814

To expedite your first payment from this award, attach a copy of the Notice of Grant/Cooperative Agreement to your payment request form.

NOTE 36. ACCEPTANCE OF THE TERMS OF AN AWARD:

By drawing or otherwise obtaining funds from the grant payment system, the recipient acknowledges acceptance of the terms and conditions of the award and is obligated to perform in accordance with the requirements of the award. If the recipient cannot accept the terms, the recipient should notify the Grants Management Officer.

NOTE 37. CERTIFICATION STATEMENT: By drawing down funds, Awardee certifies that proper financial management controls and accounting systems to include personnel policies and procedures have been established to adequately administer Federal awards and funds drawn down are being used in accordance with applicable Federal cost principles, regulations and Budget and Congressional intent of the President.

NOTE 38. ADDITIONAL REQUIREMENTS:

The Additional Requirements that apply to this grant or cooperative agreement are indicated below. The full text of the Additional Requirements may be found on the CDC web site at: http://www.cdc.gov/od/pgo/funding/grants/additional_req.shtm.

AR-4: HIV/AIDS Confidentiality Provisions

AR-6: Patient Care

AR-8: Public Health System Reporting Requirements

AR-9: Paperwork Reduction Act Requirements

AR-10: Smoke Free Workplace Requirements

AR-11: Healthy People 2010

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AR-12: Lobbying Restrictions

AR-14: Accounting System Requirements

AR-15: Proof of Non-profit Status

AR-21: Small, Minority, And Women-owned Business

AR 23: Compliance with 45 C.F.R. Part 87

AR-24: Health Insurance Portability and Accountability Act Requirements

AR-25: Release and Sharing of Data

NOTE 39. CDC CONTACTS:

Business and Grants Policy Contact Kenya Anderson, Grants Management Specialist Centers for Disease Control, PGO, Branch VII 2920 Brandywine Road, Mail Stop K75 Atlanta, GA 30341-4146 Telephone: (770) 488-2487

Fax: (770) 488-2688

Email: Kenya.Anderson@cdc.hhs.gov

Programmatic and Technical Contact Suzanne Theroux, Project Officer Global AIDS Program—Kenya Telephone: +254 (72) 4256809 Email: stheroux@ke.cdc.gov

STAFF CONTACTS

Grants Management Specialist: Kenya Anderson Center for Disease Control and Prevention CDC / ATSDR 2920 Brandywine Road Allanta, Ga 30341 Email: VFZ6@CDC.GOV Phone: 770-488-2487

Grants Management Officer: Steward Nichols
Centers for the Disease Control and Prevention
Procurement and Grant Office
Koger Center, Colgate Building
2920 Brandywine Road, Mailstop K&%
Atlanta, GA 30341

Email: snichols1@cdc.gov Phone: 770-488-2788 Fax: 770-488-2688

SPREADSHEET SUMMARY

GRANT NUMBER: 3U2GPS001814-03S1

INSTITUTION: UNIVERSITY OF CALIFORNIA SAN FRANCISCO