MEMORANDUM

To: Joint Fiscal Committee members
From: Daniel Dickerson, Fiscal Analyst
Date: December 1, 2016
Subject: Limited-Service Position Request #2868- #2872

Enclosed please find five (5) items, including twelve (12) limited-service positions, which the Joint Fiscal Office has received from the administration.

**JFO #2868 – Two (2) limited-service positions** within the Agency of Agriculture, Food and Markets. The two positions would both be titled Agricultural Engineer I and would help the Agency address anticipated increases in requests from farmers for engineering assistance for implementing agricultural best management practices as part of the State’s water quality improvement initiatives. Funding for the positions would come from a sub-grant from the Dept. of Environmental Conservation of funding received through the EPA 319 Non-Point Source Pollution Grant.

[JFO received 11/28/16]

**JFO #2869 – One (1) limited-service position** in the Department of Health. The position would be titled Infectious Disease Program Physician and would help enhance the Department’s capacity to detect and respond to healthcare-associated infections and antimicrobial resistant bacteria. Funding would be provided from a continuing grant from the Centers for Disease Control and Prevention (CDC) through July 31, 2019.

[JFO received 11/28/16]

**JFO #2870 – One (1) limited-service position** in the Military Department. The position would be titled Military Maintenance Specialist and would provide required maintenance to a recently constructed military vehicle and equipment maintenance facility located in North Hyde Park. The position would be funded through a Federal/State cooperative agreement and would not require State funds. The position would be funded through September 30, 2019.

[JFO received 11/28/16]

**JFO #2871 – Two (2) limited-service positions** within the Department of Health. The individual positions would be titled Substance Abuse Program Manager and Public Health Analyst II respectively. The positions would support grant and program management activities related to Strategic Prevention Initiative for Prescription Drugs initiative. The positions would be 50% funded with ongoing grant funding from the U.S. Dept. of Health and Human Services. The remaining funding for the Program Manager the prescription drug disposal program authorized
in Act 173 and the remaining funds for the Analyst would come from an ongoing CDC prescription drug overdose prevention grant. The project period for these positions would end on August 31, 2021.

[JFO received 11/28/16]

**JFO #2872 – Six (6) limited-service positions** within the Military Department. One position would be titled Assistant Security Guard and the remaining five positions would be titled Security Guard. The positions are needed due to a change in security classification for two military facilities starting in Federal FY17, the Camp Ethan Allen Training Site in Jericho and the Army Aviation Support Facility in South Burlington. All positions are Federally funded through September 30, 2019.

[JFO received 11/28/16]

Please review the enclosed materials and notify the Joint Fiscal Office (Daniel Dickerson at (802) 828-2472; ddickerson@leg.state.vt.us) if you have questions or would like an item held for legislative review. Unless we hear from you to the contrary by December 16, 2016 we will assume that you agree to consider as final the Governor’s acceptance of these requests.
MEMORANDUM

To: Sarah Clark, AHS CFO

From: Paul Daley, Financial Director

Re: Limited Service Position Requests for the Strategic Prevention Framework for Prescription Drugs (SPF Rx) Grant

Date: 11/8/16

The Health Department is requesting approval of two new limited service positions to be funded from the Strategic Prevention Framework for Prescription Drugs initiative, a grant we’ve just received, the third in the SPF series of grants. The funding source for this grant was originally approved in 2013 through JFO #2606. One limited service position was authorized.

The project period of this grant is 9/1/16 thru 8/31/21. The goal of the grant is to apply the existing state-wide Strategic Prevention Framework (SPF) infrastructure to prevent prescription drug misuse by increasing public knowledge of the risks of misuse and by increasing the role and skills of pediatricians in reducing access among youth and young adults. Prescription drug monitoring program (PDMP) data will be included in community needs assessments and inform the evaluation of current and future prevention programming. The purpose of the grant is to increase awareness of safe use, storage, and proper disposal of prescription medication and decrease prescription drug misuse and abuse among Vermonters age 12-17 and 18+. The grant is providing 50% funding for each of the positions. For the Substance Abuse Program Manager position, the balance of funding will come from the new prescription drug disposal program authorized and funded by Act 173. For the Public Health Analyst position, the balance of funding will come from a CDC prescription drug overdose prevention grant. Funding for these costs is included in each program. Future funding is expected to continue through the balance of the project period.

Please find enclosed a Position Request Form, RFR’s with Organization Charts, and a copy of the grant award document.

After review by your office and approval from the Secretary’s Office, please forward to Molly Paulger at DHR.

We appreciate your support in moving this request forward. Please let me know if you have questions or need additional information. Thank you.
STATE OF VERMONT
Joint Fiscal Committee Review
Limited Service - Grant Funded
Position Request Form

This form is to be used by agencies and departments when additional grant funded positions are being requested. Review and approval by the Department of Human Resources must be obtained prior to review by the Department of Finance and Management. The Department of Finance will forward requests to the Joint Fiscal Office for JFC review. A Request for Classification Review Form (RFR) and an updated organizational chart showing to whom the new position(s) would report must be attached to this form. Please attach additional pages as necessary to provide enough detail.

Agency/Department: AHS / Health
Date: 11/4/16

Name and Phone (of the person completing this request): Paul Daley, 802-663-7284

Request is for:
☒ Positions funded and attached to an existing grant approved by JFO # 2606 (1/17/13)
☐ Positions funded and attached to a new grant.

1. Name of Granting Agency, Title of Grant; Grant Funding Detail (attach grant documents):
   Department of Health & Human Services, Substance Abuse & Mental Health Services Administration; Strategic Prevention Framework for Prescription Drugs; grant # 1U79SF022165-01.

2. List below titles, number of positions in each title, program area, and limited service end date (information should be based on grant award and should match information provided on the RFR) position(s) will be established only after JFC final approval:

<table>
<thead>
<tr>
<th>Title* of Position(s) Requested</th>
<th># of Positions</th>
<th>Division/Program</th>
<th>Grant Funding Period/Anticipated End Date</th>
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<tbody>
<tr>
<td>Substance Abuse Program Manager</td>
<td>1</td>
<td>ADAP</td>
<td>9/1/16 - 8/31/21</td>
</tr>
<tr>
<td>Public Health Analyst II</td>
<td>1</td>
<td>ADAP</td>
<td>9/1/16 - 8/31/21</td>
</tr>
</tbody>
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*Final determination of title and pay grade to be made by the Department of Human Resources Classification Division upon submission and review of Request for Classification Review.

3. Justification for this request as an essential grant program need:
   These positions will provide grant management and program support to the new Strategic Prevention Framework for Prescription Drugs funding as described in the budget justification as part of the federal application and approved by the granting Agency.

I certify that this information is correct and that necessary funding, space and equipment for the above position(s) are available (required by 32-VSA Sec. 5(b)).

Signature of Agency or Department Head

Date

Approved/Denied by Department of Human Resources

Date

Approved/Denied by Finance and Management

Date

Approved/Denied by Secretary of Administration

Date

Comments:

NOV 18 2016
### Request for Classification Action

**New or Vacant Positions**

**EXISTING Job Class/Title ONLY**

**Position Description Form C/Notice of Action**

*For Department of Personnel Use Only*

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### Position Information:

**Incumbent: Vacant or New Position**

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<tr>
<th>Supervisor’s Name, Title and Phone Number:</th>
<th>Director of Clinical Services, VACANT (Interim Cindy Thomas, Division Director, 802-651-1550)</th>
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### Check the type of request (new or vacant position) and complete the appropriate section.

- **New Position(s):**
  a. **REQUIRED**: Allocation requested: Existing Class Code: **526301** Existing Job/Class Title: **Substance Abuse Program Manager**
  b. Position authorized by:

1. List the anticipated job duties and expectations; include all major job duties: Serve as program manager for the Vermont Department of Health (VDH), Division of Alcohol and Drug Abuse Programs (ADAP), Strategic Prevention Framework for Prescription Drugs (SPF Rx) grant initiative which is a 5-year grant starting on 9/1/16 and ending on 8/31/21 to increase awareness of safe use, storage and proper disposal of prescription medications and decrease prescription misuse and abuse among Vermonters ages 12 and up, specifically focused on adolescents through well visits with Vermont pediatricians. While this position will be directly supervised by the Director of Prevention Services in ADAP, the position will work at a high level with ADAP's Deputy Commissioner, Division Director and Division Director. In addition, this position will be required to work collaboratively and plan with VDH's Health Surveillance Division, Office of Local Health (OLH), OLH's District Directors, Director of Maternal and Child Health, Project Director for the CDC Opiate Overdose Prevention grant, and Department of Vermont Health Access. Other agencies include the Department of Public Safety, Governor's Highway Safety, and the Vermont Academy of Pediatricians.

2. Responsible for the management of all aspects of the grant including, but not limited to, the following: manage a $371,616 thousand dollar/year annual budget, develop required strategic plan utilizing the Strategic Prevention Framework approach to comply with federal funding milestones and funding guidelines; identify and convene steering committee; development of educational media campaigns; oversee development of Behavioral Health Disparities Impact Statement, and translation of existing Vermont's Most Dangerous Leftovers campaign; Development of interagency coordination mechanisms and coordination of funding streams; write any community grants warrented, including development of the scope of work, performance measures and monitoring deliverables; monitor sub-grants through conducting site visits, review of quarterly progress reports and data; complete and submit federally required quarterly and yearly reports; and coordinate and write the yearly reapplication, including budget and work plan for submission.

3. The SPF Rx Manager is accountable to assure the success of the grant goals and objectives through the implementation of strategies and activities to improve pediatricians skills in addressing prescription drug misuse among adolescents through increasing the percent of Medicaid eligible adolescents (12-21) receiving annual well-care visits, increase the percentage of pediatricians including prescription
drug messaging during adolescent and young well-care visits, increasing the percentage of pediatricians registered to use, and those routinely using the Vermont Prescription Drug Monitoring System (VPMS), and decrease median daily Morphine Milligram Equivalent (MME) for opioids prescribed to 12-21 year olds. In addition, decrease adolescents past month/young adult past year non-medical use of presecription pain relievers; and use of stimulants. Decrease the rate of persons age 12 and older who need and do not receive illicit drug use treatment and prescription drug overdose deaths. This position is responsible for ensuring strategies and activities are implemented with fidelity, evaluation of said strategies are conducted, training and technical assistance needs are identified and met, monthly status updates provided and that all grant deliverables are met.

4. SPF Rx Program Manager will develop training and technical assistance (TTA) plan in collaboration with partners to meet the needs of the pediatricians and others working cooperatively with VDH/ADAP Workforce development director, and VPMS Program Manager. Oversight of TTA planning work group, evaluation of TTA and recommendations for improvements and development of written summary of trainings provided.

5. SPF Rx Program Manager will be representing the Department in all public speaking engagements, including formal presentations to state agencies, external partners, professional associations, legislature, and other audiences, that request information.

6. SPF Rx Program Manager will participate as a member of the Communications Work Group and oversee the development of an Educational Media Campaign to increase public awareness of safe use of opioid pain medication and to encourage safe and consistent collection and disposal of unused prescription drugs, and the development of a media toolkit for use by partners and the community.

7. SPF Rx Program Manager will be responsible to ensure the evaluation contractor's work plan deliverables are being met in a timely manner and will meet monthly with the evaluation contractor to oversee evaluation plan, writing of reports and ongoing planning and assessment of the progress of the grant.

2. Provide a brief justification/explanation of this request: The Vermont Department of Health, Division of Alcohol and Drug Abuse Programs has received a $1.8 million/5 year federal grant award from the Substance Abuse and Mental Health Services Administration. This position was requested as part of the application. The year 1 notice of grant award is attached.

3. If the position will be supervisory, please list the names and titles of all classified employees reporting to this position (this information should be identified on the organizational chart as well). N/A

Personnel Administrator's Section:

4. If the requested class title is part of a job series or career ladder, will the position be recruited at different levels? Yes □ No X

5. The name and title of the person who completed this form: Lori Uerz, Director of Prevention Services

6. Who should be contacted if there are questions about this position (provide name and phone number): Lori Uerz 802-652-4149

7. How many other positions are allocated to the requested class title in the department: 10

8. Will this change (new position added/change to vacant position) affect other positions within the organization? (For example, will this have an impact on the supervisor's management level designation; will
duties be shifted within the unit requiring review of other positions; or are there other issues relevant to the classification process.) No

Attachments:

☒ Organizational charts are required and must indicate where the position reports.
☒ Class specification (optional).
☒ For new positions, include copies of the language authorizing the position, or any other information that would help us better understand the program, the need for the position, etc.
☒ Other supporting documentation such as memos regarding department reorganization, or further explanation regarding the need to reallocate a vacancy (if appropriate).

[Signatures and dates]

* Note: Attach additional information or comments if appropriate.
## Request for Classification Action

**New or Vacant Positions**

**EXISTING Job Class/Title ONLY**

**Position Description Form C/Notice of Action**

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**Classification Analyst** [Date]  

**Comments:**

**Willis Rating/Components:**  

- **Knowledge & Skills:**  
- **Mental Demands:**  
- **Accountability:**  
- **Working Conditions:**  
- **Total:**

### Position Information:

**Incumbent:** **Vacant or New Position**

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<th>Position Number</th>
<th>Current Job/Class Title: <strong>Public Health Analyst II</strong></th>
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**Agency/Department/Unit:**  

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<th>Health / Health Surveillance/ Public Health Statistics / REE</th>
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**GUC:** **74306**

**Pay Group:**  

- **74A**

**Work Station:**  

- **Burlington**

**Zip Code:** **05401**

| Position Type:  
- Permanent  
- **Limited Service (end date):** **August 31, 2021**  

**Funding Source:**  

- **Core**  
- **Sponsored**  
- **Partnership. For Partnership positions provide the funding breakdown (% General Fund, % Federal, etc.)**  

- **100% Federal Grant**

**Supervisor’s Name, Title and Phone Number:**  

- **Jennifer Hicks, Research & Statistics Chief, 802-863-7264**

### Check the type of request (new or vacant position) and complete the appropriate section.

**☑ New Position(s):**

- **a.** REQUIRED: Allocation requested: Existing Class Code **027200**  
  Existing Job/Class Title: **Public Health Analyst II**

- **b.** Position authorized by:
Joint Fiscal Office – JFO # □ Approval Date: □

Legislature – Provide statutory citation (e.g. Act XX, Section XXX(x), XXXX session) □

Other (explain) – Provide statutory citation if appropriate. □

Vacant Position:

a. Position Number: □
b. Date position became vacant: □
c. Current Job/Class Code: □ Current Job/Class Title: □
d. REQUIRED: Requested (existing) Job/Class Code: □ Requested (existing) Job/Class Title: □
e. Are there any other changes to this position; for example: change of supervisor, GUC, work station? Yes □ No □ If Yes, please provide detailed information: □

For All Requests:

1. List the anticipated job duties and expectations; include all major job duties: Assess data related to prescription drug use and misuse, assist in the development of target populations via the analysis of related data; provide communities with data specific to the region; develop provider surveys to assess pedi- trician knowledge and understanding of best practices around prescription drug misuse prevention and assist with the evaluation of programs and grant activities. Evaluate the quality of existing data, and integrate it to ensure its usefulness for decision-making. Develop, implement and distribute data reports from the Vermont Prescription Monitoring System to assess use of the system by providers and dispensing of controlled substances to the target population. Coordinate among users and providers of data. Select statistical and epidemiological methods for analysis of data. Assist in the development and implementation of program evaluation criteria, techniques, and data needs. Support data collection and analytic needs of the SAMHSA "Vermont SPF-RX Drugs" grant. Perform related duties as required.

2. Provide a brief justification/explanation of this request: VDH / ADAP was recently awarded a SAMHSA grant titled "Vermont SPF-RX Drugs" which seeks to apply the Strategic Prevention Framework to the issue of prescription drug misuse. The work necessary under this grant can not be undertaken by current staff, in addition to their regular duties. Currently, VDH does not have an analyst that can produce the data needed to accomplish the work of this grant. The work required by the new grant is statistically advanced and requires the attention of a PHA II.

3. If the position will be supervisory, please list the names and titles of all classified employees reporting to this position (this information should be identified on the organizational chart as well). N/A

Personnel Administrator's Section:

4. If the requested class title is part of a job series or career ladder, will the position be recruited at different levels? Yes □ No □
5. The name and title of the person who completed this form: Jennifer Hicks, Research and Statistics Chief.

6. Who should be contacted if there are questions about this position (provide name and phone number): Jennifer Hicks, 802-863-7264.

7. How many other positions are allocated to the requested class title in the department: 5.

8. Will this change (new position added/change to vacant position) affect other positions within the organization? (For example, will this have an impact on the supervisor's management level designation; will duties be shifted within the unit requiring review of other positions; or are there other issues relevant to the classification process.) No.

Attachments:

- Organizational charts are required and must indicate where the position reports.
- Class specification (optional).
- For new positions, include copies of the language authorizing the position, or any other information that would help us better understand the program, the need for the position, etc.
- Other supporting documentation such as memos regarding department reorganization, or further explanation regarding the need to reallocate a vacancy (if appropriate).

[Signatures and dates]

* Note: Attach additional information or comments if appropriate.
Notice of Award  

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

**Grantee Address**  
VERMONT STATE DEPARTMENT OF HEALTH  
108 Cherry Street  
P.O. Box 70  
Burlington, VT 054020070

**Business Address**  
Financial Administrator II  
Vermont Department of Health  
108 Cherry Street  
P.O Box 70  
Burlington, VT 054020070

**Grant Number:** 1U79SP022106-01  
**FEIN:** SP022106  
**Program Director:** Barbara Cimaglio

**Project Title:** Vermont SPF-RX Drugs

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**Budget Period:** 09/01/2016 – 08/31/2017  
**Project Period:** 09/01/2016 – 08/31/2021

**Dear Grantee:**

The Substance Abuse and Mental Health Services Administration hereby awards a grant in the amount of $371,616 (see "Award Calculation" in Section I and "Terms and Conditions" in Section III) to VERMONT STATE DEPARTMENT OF HEALTH in support of the above referenced project. This award is pursuant to the authority of Section 516 of the Public Health Service Act, as amended and is subject to the requirements of this statute and regulation and of other referenced, incorporated or attached terms and conditions.

Award recipients may access the SAMHSA website at [www.samhsa.gov](http://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 – 1U79SP022106-01

Award Calculation (U.S. Dollars)

Salaries and Wages $54,635
Fringe Benefits $21,853
Personnel Costs (Subtotal) $76,488
Supplies $1,668
Consortium/Contractual Cost $248,948
Travel Costs $3,536

Direct Cost $330,640
Indirect Cost $40,976
Approved Budget $371,616
Federal Share $371,616
Cumulative Prior Awards for this Budget Period $0

AMOUNT OF THIS ACTION (FEDERAL SHARE) $371,616

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

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EIN: 103600264E7
Document Number: 16SP22106A
Fiscal Year: 2016

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SP Administrative Data:
PCC: SPF RX / OC: 4145

SECTION II — PAYMENT/HOTLINE INFORMATION – 1U79SP022106-01

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-
SECTION III – TERMS AND CONDITIONS – 1U79SP022106-01

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:
Additional Costs

In accordance with the regulatory requirements provided at 45 CFR 75.113 and Appendix XII to 45 CFR Part 75, recipients that have currently active Federal grants, cooperative agreements, and procurement contracts with cumulative total value greater than $10,000,000 must report and maintain information in the System for Award Management (SAM) about civil, criminal, and administrative proceedings in connection with the award or performance of a Federal award that reached final disposition within the most recent five-year period. The recipient must also make semiannual disclosures regarding such proceedings. Proceedings information will be made publicly available in the designated integrity and performance system (currently the Federal Awardee Performance and Integrity Information System (FAPIIS)). Full reporting requirements and procedures are found in Appendix XII to 45 CFR Part 75.

SECTION IV – SP Special Terms and Conditions – 1U79SP022106-01

REMARKS:
As a reminder all SAMHSA official notifications will be electronically mailed to your organization's Business Official address as identified in the HHS Checklist, Part C.

This award reflects approval of the revised budget submitted on July 15, 2016 by your authorized representative in response to the application request.

SPECIAL TERM(s) OF AWARD:

DOMA:

On June 26, 2013, in United States v. Windsor, the Supreme Court held that section 3 of the Defense of Marriage Act (DOMA), which prohibited federal recognition of same-sex spouses/marriages, was unconstitutional. As a result of that decision, SAMHSA is no longer prohibited from recognizing same sex marriages. Consistent with HHS policy and the purposes of SAMHSA programs, same-sex spouses/marriages are to be recognized in SPF-RX. This means that, as a recipient of SAMHSA funding SPF-RX, you are required to treat as valid the marriages of same-sex couples whose marriage was legal when entered into. This applies regardless of whether the couple now lives in a jurisdiction that recognizes same-sex marriage or a jurisdiction that does not recognize same-sex marriage. Any same-sex marriage legally entered into in one of the 50 states, the District of Columbia, a U.S. territory or a foreign country will be recognized. However, this does not apply to registered domestic partnerships, civil unions or similar formal
relationships recognized under state law as something other than a marriage.

DISPARITY IMPACT STATEMENT (DIS):

By November 30, 2016 you must:

Submit an electronic copy of a disparity impact statement to the Government Project Officer (GPO) and Grants Management Specialist (GMS) as identified under Contacts on this notice of award. The disparity impact statement 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 disparity impact statement should be directed to your GPO. Examples of disparity impact statements can be found on the SAMHSA website at http://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, in response to the Special Condition of Award, consists of three components:

1. Proposed number of individuals to be 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.

PROGRAMMATIC CONDITIONS OF AWARD:

Year 1

Strategic Plan

Grantees may take up to one year to strategically plan for a data driven approach to effectively utilize PDMP data and design a plan to evaluate prescription drug efforts.

- Strategic Plans will be due by March 1, 2017.
- Strategic Plans may be up to 25 pages.

SAMHSA/CSAP will provide grantees a strategic plan checklist containing criteria to be used during the development of their strategic plans.
Funding Caps

- There is no administrative cap on funding during year 1.
- No more than 20% of the total grant award may be used for data collection, performance measurement, and performance assessment.

State and Tribal
$371,616 X (20%) = 74,323 (or less may be used for data collection, etc.)

Years 2 through 4

Public Education Plan

Development of a community-based public education plan to increase awareness of prescription drug misuse issues, the need for a coordinated approach, and to promote increased use of PDMP data.

- Public Education Plans will be due by October 1, 2017.
- Public Education Plans may be up to 5 pages.

SAMHSA/CSAP will provide grantees with a public education plan checklist containing criteria to be used during the development of their outreach plans.

Evaluation Plan

Development of a local evaluation plan and implement evaluation activities based on year one and year two assessment and planning activities.

- Evaluation plan will be due by December 31, 2017.
  SAMHSA/CSAP will provide grantees with an evaluation plan checklist containing criteria to be used during the development of their evaluation plans.

Funding Caps

1. State Grantees may use up to 15% of the total award for state-level administrative costs (direct and indirect) and state-level performance activities, including building capacity or providing training and technical assistance (TA) at the state level to fill gaps in their current prevention infrastructure and systems.

   $371,616 X (15%) = $55,742 (or less may be used for administrative purposes)

2. Tribal Grantees may use up to 30% of the total award for tribal-level administrative costs (direct and indirect) and tribal-level performance activities, including building capacity or providing training and TA at the tribal level to fill gaps in their current prevention infrastructure and systems.

   $371,616 X (30%) = $111,484 (or less may be used for administrative purposes)

3. No more than 20% of the total grant award may be used for data collection, performance measurement, and performance assessment.
State and Tribal
$371,616 X (20%) = 74,323 (or less may be used for data collection, etc.)

Year 5

Development of an evaluation report on the SPF Rx program’s activities, goals, and objectives.

- Evaluation report will be due 90 days after the grant end date.

Funding Caps

Year 5 funding caps are consistent with Years 2 through 4.

General

All SAMHSA grantees are required to participate in the SPF Rx cross site evaluation. This includes using the cross site evaluation common measures and instruments in the collection and reporting of certain data so that SAMHSA can monitor performance, evaluate its programs and meet its obligations under the Government Performance and Reporting Modernization Act of 2010 (GPRAMA).

The collection of these data will enable CSAP to report on the National Outcome Measures (NOMs) and other priority indicators, and help identify best practices in terms of improved outcomes and cost, which SAMHSA/CSAP has defined as key priority areas relating to the prevention of substance use.

SPECIAL CONDITIONS OF AWARD:

PARTICIPANT PROTECTION:

By October 1, 2016, you must submit your written response regarding the Participant Protection concerns raised by the Initial Review Group (IRG) as stated in your review summary statement. Be sure you have submitted your sample consent forms (i.e., informed consent for participation in treatment services, informed consent for participation in the data collection activities (e.g., GPRA), and informed consent form for disclosure/exchange of confidential information - either grantee releasing confidential information to another party or requesting confidential information from another party). All grant funds are available for this project except for those funds directly related to Participant Protection issues as outlined in the FOA. Currently, only activities that do not directly involve Participant Protection issues (i.e., are clearly severable and independent from those activities that do involve Participant Protection issues) may be conducted under this award. This restriction of funds will be lifted only if the Participant Protection issues are appropriately addressed by the grantee and resolved to the satisfaction of the designated Government Project Officer and approved by the Grants Management Officer, SAMHSA, by issuance of a Notice of Award.

ACTION REQUIRED to RESOLVE PARTICIPANT PROTECTION ISSUES
The Committee reviewed the applicant organization's plans for ensuring confidentiality and SAMHSA participant protection and expressed concerns about the inadequacy of the discussion of the following:

- Protection of clients and staff from potential risks: The applicant organization states that the Vermont IRB will address any of the potential risks of any data collection. However, as there will be surveys conducted of youth and perhaps prescribers as well, it is not clear how it will protect the anonymity of the respondents to those surveys.
- Maintenance of privacy and confidentiality: The applicant organization does not adequately describe how it will ensure the privacy and confidentiality of surveys conducted in schools. Given the age of the respondents (e.g., 12-18 years of age) for the surveys, the process by which results are collected and stored is particularly important.

MARGINAL OR INADEQUATE:

Section A (Unacceptable): Statement of Need - Other than age, the applicant organization does not provide demographic information on race, ethnicity, culture, language, sex, gender identity, sexual orientation, socioeconomic status, or the population of focus. The applicant organization does not discuss the risk/protective factors for its targeted age group in the state and there is no data or discussion on the number of individuals in the state that will be impacted by its proposed initiative. The applicant organization does not provide details on how the state will coordinate with the POMP in developing an ongoing monitoring system to detect trends in prescription drug use or resource allocation for prevention/outreach campaigns. It also does not address how expertise will be developed in the use of the PDMP or discuss stakeholders or resources and how it will aid in capacity building. The applicant organization does not discuss how the state will utilize the POMP in the development of systematic monitoring of the states' progress in reducing prescription drug abuse, or how resources will be directed to accomplish its stated goals. There is no discussion on the establishment or usage of workgroups to collect and analyze community indicators or PDMP data. The applicant organization provides no information on whether a needs assessment for the state exists or if the proposed project seeks to develop one. The applicant organization did not label subsections as described in the FOA.

By October 1, 2016, grantee must address the following:

1. Provide a detailed response to address the deficiencies outlined above in reference to your proposed approach and statement of need.

Grantee must work collaboratively with its Government Project Officer to obtain specific guidance needed to best develop the content and approach for the items listed in this section.

Failure to comply with the above stated Special Condition may result in your grant being placed on high risk, suspension and/or termination or denial of funding in the future.

STANDARD TERMS OF AWARD:

Refer to the following SAMHSA website for Standard Terms of Award:

Key staff (or key staff positions, if staff has not been selected) are listed below:
Barbara Cimaglio, Project Director @ 5% level of effort
All changes in key staff including level of effort must be sent electronically to the GPO including a biographical sketch and other documentation and information as stated above who will make a recommendation for approval or disapproval to the assigned Grants Management Specialist. Only the GMO, SAMHSA may approve Key Staff Changes.

REPORTING REQUIREMENTS:
Submission of a Programmatic (quarterly) Report is due no later than the dates as follows:

1st Report - January 1, 2017  
2nd Report - April 1, 2017  
3rd Report - July 1, 2017  
4th Report - October 1, 2017

Please submit your programmatic (Quarterly) Report to DGMProgressReports@samhsa.hhs.gov and copy your Program Official.
(HARD COPIES SUBMISSION IS NOT REQUIRED)

Failure to comply with the above stated terms and conditions may result in suspension, classification as High Risk status, termination of this award or denial of funding in the future.

All responses to special terms and conditions of award and post award requests may be electronically mailed to the Grants Management Specialist and to the Program Official as identified on your Notice of Award.

It is essential that the Grant Number be included in the SUBJECT line of the email.

CONTACTS:

Kim Nesbitt, Program Official  
Phone: (240) 276-1742  Email: Kim.Nesbitt@samhsa.hhs.gov

Tomara Baker, Grants Specialist  
Phone: (240) 276-1407  Email: Tomara.Baker@samhsa.hhs.gov