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STATE OF VERMONT JOINT FISCAL OFFICE

MEMORANDUM

To: Joint Fiscal Committee members

From: Sorsha Anderson, Staff Associate

Date: October 8, 2019

Subject: Grant Request – JFO #2974

Enclosed please find one (1) item, which the Joint Fiscal Office has received from the Administration.

JFO #2974 – \$172,505 Centers for Disease Control and Prevention to the VT Agency of Human Services - Department of Health. The department will utilize the funding to create the Vermont Violent Death Reporting System, which will collect and disseminate surveillance data on all violent deaths in Vermont. This grant would establish two (2) limited-service positions entitled *Public Health Analyst I* and *Public Health Analyst II* to complete the data collection and analysis.

Note: The Public Health Analyst I position will be fully funded through the grant at .6 FTE. The Public Health Analyst II position will be a 1 FTE position with .85 FTE funded through this grant and .15 FTE funded through the Opioid Data to Action grant.

[*JFO received 10/3/19*]

Please review the enclosed materials and notify the Joint Fiscal Office (Sorsha Anderson at (802) 828-5622; <u>ddickerson@leg.state.vt.us</u>) if you have questions or would like an item held for legislative review. Unless we hear from you to the contrary by <u>October 21, 2019</u>, we will assume that you agree to consider as final the Governor's acceptance of these requests.

#2974

SVERMONT

Business	Office	[phone] 802-863-7736	Agency of Human Services
Burlington,	Street – PO Box 70 VT 05402-0070 rmont.gov		RECEIVED OCT 0 3 2019
		MEMORANDU	JM JOINT FISCAL OFFICE
То:	Sarah Clark, AHS CFO		SALOFFICE
From:	Paul Daley, Financial D	irector	Dathey
Re:	Grant Acceptance of Co Death Reporting Syste	-	h Information Using the National Violent

Date: September 3, 2019

The Department of Health has received a new grant award from the Centers of Disease Control and Prevention. Funding was awarded under CFDA 93.136 for a project titled: Collecting Violent Death Information Using the National Violent Death Reporting System (NVDRS).

The objective of this project is the creation and use of the Vermont Violent Death Reporting System (VTVDRS), which will collect and disseminate accurate, timely and comprehensive surveillance data on all violent deaths in Vermont.

Data from electronic death certificates, investigative data, autopsy reports, toxicology test results, law enforcement reports, and medical records will be abstracted and entered into the CDC web-based data entry system for the purposes of informing violence prevention efforts and reducing morbidity and mortality related to violence in Vermont.

This grant has a three-year project period; Vermont has received a first year award in the amount of \$172,505. The Health Department is requesting approval to accept this award and to establish two limited service positions to be funded by the grant.

I am enclosing for your review and approval by AHS a Request for Grant Acceptance (AA-1) and a Limited Service Position Request Form, along with supporting materials.

When your review is complete, kindly forward this material in its entirety to DHR-Classification for their review.

Please let me know if you have questions or need additional information

S.VERMONT

State of Vermont Department of Finance & Management 109 State Street, Pavilion Building Montpelier, VT 05620-0401

[phone] 802-828-2376 [fax] 802-828-2428

STATE OF VERMONT FINANCE & MANAGEMENT GRANT REVIEW FORM

Grant Summary:		The objective of this project is the creation and use of the Vermont Violent Death Reporting System (VTVDRS), which will collect and disseminate accurate, timely and comprehensive surveillance data on all violent deaths in Vermont.				
Date:		9/3/2019				
Department:		Agency of Human Ser	vices – Depai	rtment of Health		
Legal Title of Gran	t:	Collecting Violent Death Information Using the National Violent Death Reporting System (NVDRS)				
Federal Catalog #:		93.136 - Injury Prevention and Control Research and State and Community Based Programs				
Grant/Donor Nam	e and Address:	Centers for Disease Control and Prevention 2939 Brandywine Road; Atlanta, GA 30341				
Grant Period:	5	9/1/2019 - 8/31/2020 (Project Period through 8/31/2022)				
Grant		\$172,505				
	SFY 20	SFY 2	SFY 3	Total	Comments	
Grant Amount	\$131,158	\$41,347				
-		# Positions	Explanations/Comments			
Position Information		2	Public Health Analyst II; Public Health Analyst I			
Additional Comments		See attached grant abstract * 2,394 variance between avect + marriet ros				
		on budget and NOI	A allowable	in the STr	5	

Department of Finance & Management		ANG	(Initial)
Secretary of Administration		BAT	(Initial)
Sent to Joint Fiscal Office		10219	Date _{-i}
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Department of Finance & Management Version 1.1 – 10/15/08	SEP 2 4	<u>}</u>	······································

Agency of Administration

Funding Abstract

The Department of Health has received a new grant award from the Centers of Disease Control and Prevention. Funding was awarded under CFDA 93.136 for a project titled: Collecting Violent Death Information Using the National Violent Death Reporting System (NVDRS).

The objective of this project is the creation and use of the Vermont Violent Death Reporting System (VTVDRS), which will collect and disseminate accurate, timely and comprehensive surveillance data on all violent deaths in Vermont.

Data from electronic death certificates, investigative data, autopsy reports, toxicology test results, law enforcement reports, and medical records will be abstracted and entered into the CDC webbased data entry system for the purposes of informing violence prevention efforts and reducing morbidity and mortality related to violence in Vermont.

This grant has a three-year project period; Vermont has received a first year award in the amount of \$172,505. The Health Department is requesting approval to accept this award and to establish two limited service positions to be funded by the grant.

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STATE OF VERMONT REQUEST FOR GRANT (*) ACCEPTANCE (Form AA-1)

BASIC GRANT INFORM	Human Services						
1. Agency:							
2. Department:	Department of Health						
3. Program:	Vermont Violent Death	Vermont Violent Death Reporting System					
4. Legal Title of Grant:	Collecting Violent Death Information Using the National Violent Death Reporting System (NVDRS)						
5. Federal Catalog #:	93.136 - Injury Prevention and Control Research and State and Community Based Programs						
6. Grant/Donor Name and				•			
	Control and Prevention, 292			<u> </u>			
	rom: 9/1/2019		/2020				
Project Period F 8. Purpose of Grant:	From: 9/1/2019	To: 8/31/	/2022	***************************************			
will collect and disseminate 9. Impact on existing prog The project could n 10. BUDGET INFORMAT	ram if grant is not Accepte not proceed						
10. BUDGET INFORMAT							
	SFY 1	SFY 2	SFY 3	Comments			
Expenditures:	FY 20	FY 21	FY				
Personal Services	\$86,831	\$28,944					
Operating Expenses	\$7,114						
Grants	\$0	ABO 044					
Tot	tal \$93,945	\$28,944					
Revenues:			······				
State Funds:	\$0						
Cash	\$0						
In-Kind	\$0	•					
Federal Funds:	\$131,158	\$41,347					
(Direct Costs)	\$93,945	\$28,944					
(Statewide Indirect)	\$1,861	\$620					
	\$35,352	\$11,783					
(Departmental Indirect)	455,552	Ψ11,705					
(Departmental Indirect)	<u> </u>						
(Departmental Indirect)		\$41,347		· · · · · · · · · · · · · · · · · · ·			
Tot	tal \$131,158	\$41,347					
Tot Appropriation No: 3	tal \$131,158 420010000		\$22,979				
Tot Appropriation No: 3	tal \$131,158	\$41,347	\$22,979 \$108,179				
Tot Appropriation No: 3	tal \$131,158 420010000	\$41,347					

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STATE OF VERMONT REQUEST FOR GRANT (*) ACCEPTANCE (Form AA-1)

PERSONAL SERVICE INFORMATION					
11. Will monies from this grant be used to fund one or more Personal Service Contracts? [] Yes [] No					
	If "Yes", appointing authority must initial here to indicate intent to follow current competitive bidding process/policy.				
Appointing Authority Name	: by:	(initial)			
12. Limited Service				3	
Position Information:	# Positions	· · · ·	Title	· · · · · · · · · · · · · · · · · · ·	
а на се по се п А	1		Public Health Public Health		· · · · · · · · · · · · · · · · · · ·
		••			***************************************
Total Positions	2		······		
12a, Equipment and space positions:	for these .	X Is present	ly available.	Can be obtained with	available funds.
				·	•
13. AUTHORIZATION AC		MIGN I	<u>ors en cuit</u>		
I/we certify that no funds beyond basic application	Signature:	11-72			Date: 7/7/19
preparation and filing costs	Title: Commissio	oner			
have been expended or committed in anticipation of				٠	
Joint Fiscal Committee	Signature:	NA	D		Date:
approval of this grant, unless previous notification was	Titler	ATM	(14/13/19
made on Form AA-1PN (if			8.4		• •
applicable):	Jurain 1	Septety	Jacka	<u>u</u> '	
SI4 SECRETARY OF ADM				Q	
Approved:	(Secretary or designee s	signature)	5		Date: 9/05/15
	- Juant	fare			<u> </u>
15. ACTION BY GOVERN	IOR /	MARAN, TE JACE			
Check One Box:					
	(Governor Skilmature)	NI T	· .		Date: / / / / 0
Rejected	I IKX/C	eg			10/1/19
16 DOCUMENTATIONS	EQUIRED			a shere the start the start	and drawing
	Requi	ired GRAN	l' Documenta	tion	
🛛 Request Memo			ice of Donatic		
Dept. project approval (if 🛛 Notice of Award	applicable)			imeline (if applicable) Ision (if applicable)	
Grant Agreement				tached (if applicable)	
Grant Budget			and a second second second		
		End For		Cuplus to he accorded be-	
(*) The term "grant" refers to any grant, gift, loan, or any sum of money or thing of value to be accepted by any agency, department, commission, board, or other part of state government (see 32 V.S.A. §5).					

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 <u>must</u> be obtained <u>prior to</u> 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 <u>must</u> be attached to this form. Please attach additional pages as necessary to provide enough detail.

Agency/Department: Agency of Human Services Department of Health Date:
Name and Phone (of the person completing this request):
Request is for: ☑ Positions funded and attached to a new grant. ☑ Positions funded and attached to an existing grant approved by JFO #
1. Name of Granting Agency, Title of Grant, Grant Funding Detail (attach grant documents):
Centers for Disease Control and Prevention, National Center for Injury Prevention and Control Collecting Violent Death Information Using the National Violent Death Reporting System, State of Vermont
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 <u>only</u> after JFC final approval:
Title* of Position(s) Requested # of Positions Division/Program Grant Funding Period/Anticipated End Date
Public Health Analyst II, 1, Health Surveillance/Public Health Statistics, 9/1/2019 - 8/31/2022 Public Health Analyst I, 1, Health Surveillance/Public Health Statistics, 9/1/2019 - 8/31/2022
 *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. Justification for this request as an essential grant program need:
This grant requires data collection, abstraction, and data analysis on all violent deaths taking place in Vermont. VDH does not currently have analysis available to complete the wide range of data collection and analysis required for case entry, completion and inclusion in a complete data set. These PHAI and PHAII positions will enable these statistically advanced grant activities to be completed in compliance with the grant's requirements and time-line.
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) Q/13/19 AUG 2 9 2019
Signature of Agency or Department Head Date
Approved/Depied by Department of Human Resources Date
I allow pulsion 24 Soot 19
Approved/Denied by Finance and Management Date
9/25/19
Approved Defined by Secretary of Administration Date
Approved Denied by 2019 Leg. Session) Date
Comments:

UHR-08/12/2019 CVF 9/1/1/07

O'Connell, Tracy E

From:	Harrison, Connie
Sent:	Tuesday, September 10, 2019 7:57 AM
То:	O'Connell, Tracy E; Daley, Paul
Cc:	Small, Sara; Clark, Sarah
Subject:	Re: Health Department AA-1 package for AHS review - National Violent Death Reporting System

Good morning,

The .15 will be funded through our Opioid Data to Action grant. The second position will be filled at the .6 FTE only.

Thanks, Connie

From: O'Connell, Tracy E <Tracy.OConnell@vermont.gov> Sent: Monday, September 9, 2019 4:13:46 PM To: Daley, Paul <Paul.Daley@vermont.gov>; Harrison, Connie <Connie.Harrison@vermont.gov> Cc: Small, Sara <Sara.Small@vermont.gov>; Clark, Sarah <Sarah.Clark@vermont.gov> Subject: RE: Health Department AA-1 package for AHS review - National Violent Death Reporting System

Hi Paul, Connie

For the two positions being requested from this grant, I noticed that they are not budgeted as full FTEs in the award. The grant award has one as .85 FTE and the other .60 FTE. What is the remaining funding source which will round out the full costs of these positions?

Thank you, Tracy

Tracy O'Connell Financial Director State of Vermont Agency of Human Services (802) 236-2919 (cell) tracy.oconnell@vermont.gov

From: Daley, Paul <Paul.Daley@vermont.gov> Sent: Wednesday, September 04, 2019 4:13 PM To: Clark, Sarah <Sarah.Clark@vermont.gov> Cc: O'Connell, Tracy E <Tracy.OConnell@vermont.gov>; Small, Sara <Sara.Small@vermont.gov>; Harrison, Connie <Connie.Harrison@vermont.gov> Subject: Health Department AA-1 package for AHS review - National Violent Death Reporting System

Hi Sarah,

I'm enclosing an AA-1 package for your review. This includes position requests, so the package should be sent to DHR-Classification after the AHS approval signatures are secured on the AA-1 and the Limited Service Position Request. Please let us know if you want the hard-copy of this package sent to you. Connie will be tracking this while I'm out until Tuesday.

Paul Daley Financial Director Vermont Department of Health 108 Cherry Street, Burlington VT 05402 (802) 863-7284 http://healthvermont.gov/

1. DATE ISSUED MM/DD/YYYY 1a. SUPERSEDES AWARD NOTICE dated 08/28/2019 except that any additions or restrictions previously imposed remain in effect unless specifically rescinded 2. CFDA NO. 93.136 - Injury Prevention and Control Research and State and Community Based Programs					DEPARTMENT OF HEALTH AND HUMAN SERVICES Centers for Disease Control and Prevention CDC Office of Financial Resources			
3. ASSISTANCE TYPE Cooper	ative Agreement				2030	Brandwine De	ad	
4. GRANT NO. 1 NU17CE9249		5. TYPE OF AW	ARD			Brandywine Ro Inta, GA 30341		
Formerly		Other						
4a. FAIN NU17CE924945		5a. ACTION TYP	E New					
6. PROJECT PERIOD M	M/DD/YYYY		MM/DD/YYYY		NOTIC	CE OF AW	ARD	
	9/01/2019	Through	08/31/2022		AUTHORIZATI	ON (Legislation	n/Regulations)	
_	M/DD/YYYY	Therewalk	MM/DD/YYYY		317(K) OF PI	IS ACT(42USC	C247B(K))	
8. TITLE OF PROJECT (OR PR State of Vermoni	0/01/2019 OGRAM)	Through	08/31/2020					
9a. GRANTEE NAME AND ADD	RESS			9b. GRANT	EE PROJECT DIRECTOR			
Human Services, Vermont / 280 Slale Dr Waterbury, VT 05671-9501	Agency Of			280 S Health Water	Innifer Hicks late Dr I Surveillance bury , VT 05871-9501 ; 802-863-7264			
10a. GRANTEE AUTHORIZING Mr. Bryan O'Connor 280 STATE DR WATERBURY, VT 05671-9 Phone: 802-863-7384				Mr, Ja 4770 F-63 NCIP0	IAL PROJECT OFFICER mes Diggs Buford Hwy C-Division of Violence Prevention a, GA 30341			
			ALL AMOUNTS ARE					
11. APPROVED BUDGET (Exclusion of the Financial Assistance from the Finance from the Finance fro					COMPUTATION of Federal Financial Assistance (fro	m itam 11m)	172,505.00	
Il Total project costs including gr.	-		ation		bligated Balance From Prior Budg	-	0,00	
a. Salaries and Wages			80,934.00		ulative Prior Award(s) This Budge		0.00	
b. Fringe Benefits		********	32,374,00	d, AMOUN'	OF FINANCIAL ASSISTANCE T	HIS ACTION	172,505.00	
		***************			leral Funds Awarded to Date for	Project Period	172,505.00	
c. Total Personnel Cos	its	7	113,308.00		NENDED FUTURE SUPPORT he availability of funds and satisfac	lory progress of the	project):	
d. Equipment	**************	********	1,500 00		p		-	
e. Supplies	32++ + + + + + + + + + + + + + + + + + +		610.00	YEAR	TOTAL DIRECT COSTS	YEAR d. 5	TOTAL DIRECT COSTS	
f. Travel	******	*******	3,076.00	b, 3		. 6		
g. Construction	**************	******	0.00	c. 4		f. 7	·	
h. Other	7#60+6++×+×+×+×	9= : ****** * * *** ******	2,000.00	15. PROGRAM ALTERNATIVE	INCOME SHALL BE USED IN ACCORD WIT	H ONE OF THE FOLLOW	ING	
I. Contractual	********	** *** **************	0.00	a .	DEDUCTION		Ь	
j. TOTAL DIRECT CC			120,494,00	b, c. đ,	ADDITIONAL COSTS MATCHING OTHER RESEARCH (Add / Deduct Option)			
1			52,011.00	e,	OTHER (See REMARKS)			
k. INDIRECT COSTS	JDGET		172,505.00	ON THE ABOVE	TITLED PROJECT AND IS SUBJECT TO THE NGE IN THE FOLLOWING: The grant program legislation The grant program regulations.	TERMS AND CONDITION		
m. Federal Share			172,505.00	c d.	This award notice including terms and conditi Federal administrative requirements, cost print	nciples and audit requirem	ents applicable to this grant.	
n. Non-Federal Share			0.00	prevail, Accep	re are conflicting or otherwise inconsister ance of the grant terms and conditions is the grant payment system.	t policies applicable lo l acknowledged by the gr	he grant, the above order of precedence shall antee when funds are drawn or otherwise	
REMARKS (Other Terms	and Conditions At	lached -	۲es C	No)				

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GRANTS MANAGEMENT OFFICIAL: Brownie Anderson-Rana, Grants Management Officer 2939 Flowers Road Malistop TV2 Atlanta, GA 30341-5509 Phone: 770-488-2771

17.0BJ CLASS	41.51	18a. VENDOR CODE	1036000264D4	18b. EIN	036000264	19. DUNS	8 09376155	20, CONG. DIST.	0Q
FY-ACC	OUNT NO.	DOCUI	AENT NO.		ADMINISTRATIVE CODE	AMT	ACTION FIN ASST	APPROPRIAT	ION
21. a. s	9-939ZSPT	b. 19NU1	7CE924945	c.	CE	d.	\$172,505.00	e. 75	5-19-0952
22. a.		b,		C.	-	đ,		e.	
23. a.		b.		C.		d		е,	

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NOTICE OF AWARD (Continuation Sheet)	PAGE 2 of 3 DATE ISSUED 06/28/2019		
,	GRANT NO. 1	NU17CE924945-01-00	

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Direct Assistance

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BUDGET CATEGORIES	PREVIOUS AMOUNT (A)	AMOUNT THIS ACTION (B)	TOTAL (A + B)
Personnel	\$0.00	\$0.00	\$0 .00
Fringe Benefits	\$0.00	\$0.00	\$0.00
Travel	\$0.00	\$0.00	\$0.00
Equipment	\$0.00	\$0.00	\$0.00
Supplies	\$0.00	\$ 0.00	\$0.00
Contractual	\$0.00	\$0.00	\$0.00
Construction	\$0.00	\$0.00	\$0.00
Other	\$0.00	\$0.00	\$0.00
Tetal	\$0.00	\$0.00	\$0 .00

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NOTICE OF AWARD (Continuation Sheet)

PAGE	3 of 3	DATE ISSUED
		06/28/2019

GRANT NO. 1 NU17CE924945-01-00

Federal Financial Report Cycle			
Reporting Period Start Date	Reporting Period End Date	Reporting Type	Reporting Period Due Date
09/01/2019	08/31/2020	Annual	11/29/2020
09/01/2020	08/31/2021	Annual	11/29/2021
09/01/2021	08/31/2022	Annual	11/29/2022

Elmquist, Candace

From: Sent: To: Cc: Subject: Daley, Paul Tuesday, September 24, 2019 4:15 PM Elmquist, Candace O'Connor, Bryan; O'Connell, Tracy E; Clark, Sarah; Harrison, Connie RE: NVDRS Grant Question

Hi Candace,

I agree with your analysis that budget categories in the Notice of Award don't match our line items in the AA-1 or our budget narrative. Our total award of \$172,505 was less than the amount we applied for, and one of the conditions of this award is that we needed to respond with a revised budget by October 1. The budget you have in the package captioned "Post Award Budget Revision" is our revised budget.

So the total revised budget matches the total award, but there is a \$2,394 variance between budget categories. Sometimes we will receive a revised notice of award that resolves this variance, in other cases the federal project officer will opt not to do so when the variance is minimal. CDC grantees have general authority to vary up to 25% from budget in each category without the requirement to request an amended grant award. We don't expect to get a revised notice of award in this case because the variance is small and the indirect claims always vary from budget to some degree since they are claimed on the basis of the approved cost allocation plan.

Regards, Paul Daley 863-7284

From: Elmquist, Candace <Candace.Elmquist@vermont.gov> Sent: Tuesday, September 24, 2019 3:04 PM To: Daley, Paul <Paul.Daley@vermont.gov> Cc: O'Connor, Bryan <Bryan.OConnor@vermont.gov>; O'Connell, Tracy E <Tracy.OConnell@vermont.gov>; Clark, Sarah <Sarah.Clark@vermont.gov> Subject: NVDRS Grant Question

Hi Paul,

The budget line items in the NOA for the NVDRS CDC Grant do not match the budget that VDH submitted to the CDC and the budget listed on the AA-1. There is a \$2,394 variance swap between direct costs and indirect costs. Any idea why this is the case? Can you confirm via email with the CDC that your team has the ability to amend the budget line items?

Thanks,

Candace

Candace Elmquist Budget Analyst Department of Finance & Management 109 State Street, Montpelier, VT candace.elmquist@vermont.gov 802.622.4031

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Response to NOFO#: CDC-RFA-CE19-1905

Collecting Violent Death Information Using the National Violent Death Reporting System Budget Narrative - POST AWARD BUDGET REVISION

The State of Vermont requests a total of \$172,505 for the budget period September 1, 2019 through August 31, 2020. This funding request includes monies for regular operation of the VTVDRS for the first year. Below is more specific justification for the budget monies requested.

The State of Vermont requests a total of \$172,505 for the budget period September 1, 2019 through August 31, 2020. This funding request includes monies for a Public Health Analyst II (PHA II, the Program Manager at 0.85 FTE), and a Public Health Analyst I (PHA I, the Data Abstractor at 0.60 FTE). The budget also includes funding for: three staff members to travel to the NVDRS Reverse Site Visit, the purchase of one computer (VDH will provide the other computer needed), statistical software licensing, and other incidentals. Below is the specific justification for the funds requested.

A. Personnel (Salaries and Wages) (\$82,696): Money is requested to fund the VTVDRS Program Manager (0.85 FTE, PHA II) and a Data Abstractor (0.60 FTE, PHA I). The Program Manager will serve as the supervisor of day-to-day operations for the VTVDRS, facilitate the VTVDRS Advisory Group, conduct data quality checks, complete cases, conduct data analysis and oversee dissemination. The Data Abstractor will be responsible for initiating cases, abstracting data, and participating in data quality checks. Overall responsibility for the grant will be held by the Principal Investigator, Jennifer Hicks (0.0 FTE, Research, Epidemiology and Evaluation Unit Chief). Please see the attached job descriptions for more specific details on staff responsibilities.

Position Title and Name:	Research, Epidemiology and Evaluation Unit Chief, Jennifer Hicks (Principal Investigator)
Annual Salary:	\$93,309
Time	0.0 FTE (0%)
Months:	12 Months
Amount Requested:	\$0 ·
Position Title and Name:	Public Health Analyst II, TBD (Program Manager)
Annual Salary:	\$60,196
Time	0.85 FTE (85%)
Months:	12 Months
Amount Requested:	\$48,688
Position Title and Name:	Public Health Analyst I, TBD (Data Abstractor)
Annual Salary:	\$56,680
Time	0.60 FTE (60%)
Months:	12 Months
Amount Requested:	\$34,008

These positions will be responsible for the work related to the VTVDRS. While the specific Data Abstractor is unnamed above, VDH currently has three Data Abstractors working on SUDORS case abstraction for the Opioid Crisis Grant which ends 8/31/2019. We are hoping to transition a trained abstractor from that project to the VTVDRS. VDH will submit a change of personnel notification to our Project Officer as soon as the Data Abstractor is officially hired. This will be done via Grant Solutions.

B. Fringe Benefits (\$33,078): The State of Vermont uses a 40% rate to calculate fringe. This translates into \$33,078 based on the salary noted above.

C. Consultant Costs: Not applicable.

D. Equipment (\$1,500): Money is requested to purchase one new computer. The PI and the Program Manager currently have computers. As the abstractor will be a new position for VDH, we will need to purchase a new computer. The computers currently being used to enter SUDORS data is specifically designated for VDH interns and temporary employees. Therefore, in order for the abstractor to execute their job tasks, a new computer must be purchased.

E. Supplies (\$1,000): Money is requested for office supplies and printing costs.

F: Travel (\$4,614): Out of State Travel: Money is requested for the Principal Investigator, the Program Manager and the Data Abstractor to attend the required reverse site visit each year. Costs to attend the reverse site visit are estimated at \$1,538 per person.

G. Other: Not Applicable.

H. Contractual Costs: Not Applicable.

Total Direct Costs (sum of A-H): \$122,888

J. Indirect Costs (\$49,617): The Vermont Department of Health uses a Cost Allocation Plan, not an indirect rate. The Vermont Department of Health is a department of the Vermont Agency of Human Services, a public assistance agency, which uses a Cost Allocation Plan in lieu of an indirect rate agreement as authorized by OMB Circular A-87, Attachment D. This Cost Allocation Plan was approved by the US Department of Health and Human Services effective October 1, 1987. A copy of the most recent approval letter is attached. The Cost Allocation Plan summarizes actual, allowable costs incurred in the operation of the program. These costs include items which are often shown as direct costs, such as telephone and general office supply expenses, as well as items which are often included in an indirect rate, such as the cost of office space and administrative salaries. These costs are allocated to the program based on the salaries and wages paid in the program. Because these are actual costs, unlike an Indirect Cost Rate, these costs will vary from quarter to quarter and cannot be fixed as a rate. Based on costs allocated to similar programs during recent quarters, we would currently estimate these allocated costs at 64% of the direct salary line item, yielding a total cost of \$49,617 for the period.

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March (Station 1983)

Vermont Response to RFA-CE19-1905

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A. Salaries and Wages	\$82,696
B. Fringe Benefits	\$33,078
C. Consultant Costs	
D. Equipment	
E. Supplies	\$1,500
F. Travel to RSV	\$4,614
G. Other – SAS license, etc.	\$1,000
H. Contractual Costs	
I. Total Direct Costs (sum A-H)	\$122,888
j. Indirect Costs	\$49,617
k. TOTAL (sum of i and j)	\$172,505

\$

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Request for Classification Action Position Description Form C Page 1

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

				n an An an an An	Date Rec	eived (St	amp)
Notice of Action #		and a substantion of the second s					
Action Taken:		h e y b					
New Job Title		•		· · ·	· . ·		
Current Class Code		New Class Code					· .
Current Pay Grade		New Pay Grade		••••••••	. :	··· ·	·
Current Mgt Level	B/U OT Cat	EEO Cat	FLSA			e.	
New Mgt Level	B/UOT Cat.	EEO Cat	FLSA	: ·		14 H 1	,
Classification Analyst		Date		Effect	ve Date:		ing Banka na
Comments:				1.1.1	Processed		
Willis Rating/Componen	its: Knowledge &	Skills:M	ental Deman	ds:	Account	ability:	
		litions: T					

Position Information:

Incumbent: Vacant or New Position

Position Number: Current Job/Class Title: Public Health Analyst II

Agency/Department/Unit: Human Services/Health/Health Surveillance/Public Health Statistics/REE GUC: [74306]

Pay Group: W40 Work Station: Burlington Zip Code: 05401

Position Type: Permanent X Limited Service (end date) 08/31/2022

Funding Source: Core Sponsored Partnership. For Partnership positions provide the funding breakdown (% General Fund, % Federal, etc.)

Supervisor's Name, Title and Phone Number: Mallory Staskus, Public Health Analyst III, 802-651-1516

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:

		Request for Classification Action Position Description Form C
		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.
	Va	cant Position:
	a.	Position Number:
	b.	Date position became vacant:
٤	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: Oversee the collection of standard data elements provided by the Centers for Disease Control and Prevention (CDC) for all violent deaths in Vermont and ensure completion of case information into the National Violent Death Reporting System (NVDRS) in a timely manner. Work with VT NVDRS abstractor to complete data entry and completion into the NVDRS. Monitor and evaluate case completion and data quality for all violent deaths taking place in Vermont. Work with key data collection partners such as law enforcement and assistant medical examiners to improve data collected about violent deaths. Create and advance methodologies for analyzing the VT NVDRS data. Organize and facilitate a NVDRS advisory group for effective creation and dissemination of data products. Share key findings through meetings, presentations, reports and data briefs to key stakeholders and organizations working to prevent violence and resulting injuries.

2. Provide a brief justification/explanation of this request: VDH/HS was recently awarded a CDC grant from the grant program "Collecting Violent Dealth Information Using National Violent Death Reporting System" to collect and disseminate surveillance data on violent deaths to improve planning, implementation and evaluation of violence prevention programs. 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 \square No \boxtimes

Request for Classification Action Position Description Form C

Page 3

5. The name and title of the person who completed this form: Mallory Staskus, Public Health Analyst III

6. Who should be contacted if there are questions about this position (provide name and phone number): Mallory Staskus, 802-651-1516

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

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).

Personnel Administrator's Signature (required)*

Supervisor's Signature (required)*

Appointing Authority or Authorized Representative Signature (required)*

* Note: Attach additional information or comments if appropriate.

Date

AUG 2 9 2019

Date

Job Duties and Responsibilities

NVDRS Program Manager, PHA II – 0.85 FTE (EPI SURV Team)

Epidemiology, Surveillance, Analysis and Dissemination

- Oversee completion of all Vermont NVDRS cases
- Delegate, schedule and assist in case identification, initiation, entry, cross-checking and completion among data abstractors
- Abstract data from death certificates, medical examiner reports, toxicology reports, and law enforcement reports for NVDRS cases
- Conduct epidemiology, surveillance and data analysis for violent death surveillance in Vermont; as per the Collecting Violent Death Information Using the National Violent Death Reporting System (NVDRS) Grant.
- Examine, and execute when able, feasibility of linking additional data sources to NVDRS case information.
- Produce analytic products such as data pages, data/issue briefs related to program goals, data summaries, based on key insights and determine best methods of distribution. Create annual report on calendar year deaths
- Lead the analysis and reporting of measures related to violent deaths
- Create, facilitate and maintain NVDRS advisory committee manage schedule, participant list, agenda and meeting minutes
- Develop data presentations for meetings with community partners, steering committees and/or advisory groups, as requested
- Regularly attend Grant Specific calls and webinars
- Respond to data requests

Evaluation and Quality Improvement

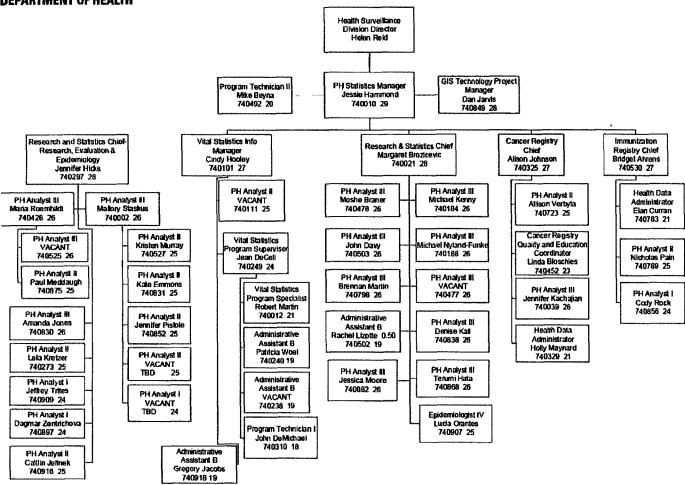
- Ensure VT NVDRS meets performance measures and deadlines outlined in the NVDRS Grant including meeting cases meeting national standards, updating project plan, timeliness of entry
- Improve timeliness and completeness of data collection
- Test strategies for improving timely data collection from providers, abstraction, entry and dissemination

HS REE Responsibilities

- Maintaining a positive working relationship with other VDH staff, most importantly, the program(s) you are assigned to work with
- Cross-checking data for quality control
- Staff Meetings 1 monthly full staff mtg; 1 bi-weekly team meeting; each ~1 hour
- BRFSS and YRBS Questionnaire Design committee participation
- Annual Workplan update
- Participation in the Health Operations Center, if needed during a public health emergency
- Other duties, as assigned

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Division of Health Surveillance – Public Health Statistics July 25, 2019



Request for Classification Action Position Description Form C Page 1

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

			Date Received (Stamp)
Notice of Action #			
Action Taken:		2015 2015	
New Job Title			
Current Class Code	New Clas	s Code	
Current Pay Grade	New Pay	Grade	
Current Mgt LevelB/U	OT CatEEO	CatFLSA _	
New Mgt Level B/U	OT CatEEO	CatFLSA	
Classification Analyst	(Sec. 8-	Date	Effective Date:
Comments:			
			Date Processed:
			nands: Accountability
Wo	rking Conditions:	Total:	

Position Information:

Incumbent: Vacant or New Position

Position Number: Current Job/Class Title: Public Health Analyst

Agency/Department/Unit: Human Services/Health/Health Surveillance/Public Health Statistics/REE GUC: 74306

Pay Group: W40 Work Station: Burlington Zip Code: 05401

Position Type: Permanent X Limited Service (end date) 08/31/2022

Funding Source: Core Sponsored Partnership. For Partnership positions provide the funding breakdown (% General Fund, % Federal, etc.)

Supervisor's Name, Title and Phone Number: Mallory Staskus, Public Health Analyst III, 802-651-1516

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

New Position(s):

- a. REQUIRED: Allocation requested: Existing Class Code 028000 Existing Job/Class Title: Public Health Analyst I
- b. Position authorized by:

		Position Description Form C
		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.
	Va	cant 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:

 List the anticipated job duties and expectations; include all major job duties: Complete data abstraction for Vermont occurent violent deaths for the Center for Disease Control's (CDC) National Violent Dealth Reporting System (NVDRS). Utilize data from from death scene investigations, autopsies, toxicology reports and police reports to complete all required fields for VT NVDRS cases. Initiate, enter, crosscheck and complete cases entered into VT NVDRS. Support quality control and CDC reporting and monthly calls. Clean NVDRS data and assist the NVDRS Program Manager with data analysis, improving analysis methodologies and creating data products for dissemination to key stakeholders. Perform related duties as required.

2. Provide a brief justification/explanation of this request: VDH/HS was recently awarded a CDC grant from the grant program "Collecting Violent Dealth Information Using National Violent Death Reporting System" to collect and disseminate surveillance data on violent deaths to improve planning, implementation and evaluation of violence prevention programs. The work necessary under this grant cannot be undertaken by current staff, in addition to their regular duties. Currently VDH does not have an analyst that can complete the data abstraction needed to accomplish the work of this grant. The work required significant understanding and abilities of data analysis and statistics and requires the attention of a PHA I.

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 \square No \boxtimes

5. The name and title of the person who completed this form: Mallory Staskus, Public Health Analyst III

Request for Classification Action Position Description Form C Page 3

6. Who should be contacted if there are questions about this position (provide name and phone number): Mallory Staskus, 802-651-1516

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

-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).

Personnel Administrator's Signature (required)*

Supervisor's Signature (required)*

Appointing Authority or Authorized Representative Signature (required)*

* Note: Attach additional information or comments if appropriate.

Date

AUG 2 9 2019

Date

Job Duties and Responsibilities

NVDRS Abstractor, PHA I – 0.6 FTE (EPI SURV Team)

Epidemiology, Surveillance, Analysis and Dissemination

- Abstract data from death certificates, medical examiner reports, toxicology reports, and law enforcement reports for NVDRS cases, including identification, initiation, entry, cross-checking can completion of cases
- Maintain spreadsheet of NVDRS case entry status
- Create analytic NVDRS datasets
- Produce analytic products such as data pages, data/issue briefs related to program goals, data summaries, in support or at the request of the NVDRS Program Manager
- Support analysis and reporting of measures related to violent deaths
- Participate in NVDRS advisory committee
- Develop data presentations for meetings with community partners, steering committees and/or advisory groups, as requested
- Regularly attend Grant Specific calls and webinars
- Respond to data requests, as requested
- Become familiar with related data sets such as vital statistics

Evaluation and Quality Improvement

- Support NVDRS Program Manager in assistance with performance measurement and reporting
- Ensure data collection adheres to national data standards
- Provide input and ideas on potential improvements for data collection process

HS REE Responsibilities

- Maintaining a positive working relationship with other VDH staff, most importantly, the program(s) you are assigned to work with
- Cross-checking data for quality control
- Staff Meetings 1 monthly full staff mtg; 1 bi-weekly team meeting; each ~1 hour
- BRFSS and YRBS Questionnaire Design committee participation
- Annual Workplan update
- Participation in the Health Operations Center, if needed during a public health emergency
- Other duties, as assigned

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