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STATE OF NEW HAMPSHIRE
DEPARTMENT OF HEALTH AND HUMAN SERVICES
DIVISION OF COMMUNITY BASED CARE SERVICES

Bureau of Drug and Alcohol Services

Nicholas A. Toumpas
Commissioner

105 PLEASANT STREET, CONCORD, NH 03301
603-271-6110 1-800-804-0909

Kathleen A. Dunn
Associate
Commissioner

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September 28, 2015

The Honorable Neal M. Kurk, Chairman
Fiscal Committee of the General Court, and

Her Excellency, Governor Margaret Wood Hassan
and the Honorable Executive Council
State House
Concord, New Hampshire 03301

[Signature]
Approved by Fiscal Committee Date

REQUESTED ACTION

Pursuant to RSA 14:30-a, VI, authorize the Department of Health and Human Services, Office of Medicaid Business and Policy, Bureau of Drug & Alcohol Services to accept and expend New Hampshire Partnerships for Success Initiative (PFS2) federal funds from the Substance Abuse and Mental Health Services Administration in the amount of \$2,231,951 effective upon date of Fiscal Committee and Governor and Executive Council approval, through September 29, 2016, and further authorize the funds to be allocated as follows:

05-95-49-491510-24070000 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVCS, HHS: DIV OF COMM BASED CARE SVC, BUREAU OF DRUG & ALCOHOL SVCS, PFS2 GRANT

Class/Object	Class Title	Current Authorized Budget	Increase/(Decrease) Amount	Revised Modified Budget
SFY 2016				
000-400146	Federal Funds	\$0	\$1,674,026	\$1,674,026
Total Revenue		\$0	\$1,674,026	\$1,674,026
020-500200	Current Expenses	\$0	\$986	\$986
041-500801	Audit Fund Set Aside	\$0	\$1,855	\$1,855
070-500704	In-State Travel	\$0	\$250	\$250
080-500710	Out-of-State Travel	\$0	\$2,500	\$2,500
102-500731	Contracts for Program Svcs	\$0	\$1,668,435	\$1,668,435
Total Expense		\$0	\$1,674,026	\$1,674,026

05-95-49-491510-24070000 HEALTH AND SOCIAL SERVICES, DEPT OF HEALTH AND HUMAN SVCS, HHS: DIV OF COMM BASED CARE SVC, BUREAU OF DRUG & ALCOHOL SVCS, PFS2 GRANT

Class/Object	Class Title	Current Authorized Budget	Increase/(Decrease) Amount	Revised Modified Budget
SFY 2017				
000-400146	Federal Funds	\$0	\$557,925	\$557,925
Total Revenue		\$0	\$557,925	\$557,925
020-500200	Current Expenses	\$0	\$329	\$329
041-500801	Audit Fund Set Aside	\$0	\$618	\$618
070-500704	In-State Travel	\$0	\$200	\$200
080-500710	Out-of-State Travel	\$0	\$634	\$634
102-500731	Contracts for Program Svcs	\$0	\$556,144	\$556,144
Total Expense		\$0	\$557,925	\$557,925

EXPLANATION

The Department of Health and Human Services, Division of Community Based Care Services, Bureau of Drug & Alcohol Services seeks approval to accept and expend New Hampshire Partnerships for Success Initiative funds in the amount of \$2,231,951.00 from the Substance Abuse and Mental Health Services Administration. This request represents year 1 of a multi-year grant (September 30, 2015 – September 29, 2020). This grant does not have a matching funds requirement. This request represents ¾ of Grant year 1 in SFY 16 and SFY 17 represents the remaining Year 1 grant funds. A copy of the grant award is attached.

The New Hampshire Partnerships for Success Initiative will allow the Bureau of Drug & Alcohol Services to leverage the state's existing prevention system, its resources and capacities to effect change in priority substance abuse areas among high need and high risk populations in the communities where those populations reside. Specifically, this grant seeks to 1) prevent and reduce underage and high risk drinking and prescription drug misuse among persons aged 12 to 20; and 2) prevent and reduce underage and high risk drinking, prescription drug misuse and abuse, particularly prescription opioid misuse and heroin among persons aged 18 to 25.

Funds will be used for:

- Class 020 Related program costs associated with the grant.
- Class 041 Audit fund set aside expense.
- Class 070 Travel around the State for program and Stakeholder meetings.
- Class 080 Travel to required grant meetings.

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Class 102 Contracts to support a number of sub recipients for direct prevention services specifically designed to impact the high-risk individuals identified above. In addition funds will help support a centralized contract providing training and technical assistance to sub recipients to ensure the standards are met for evidence-based practices, quality of programming, and evaluation. Funds will be used to support the continuation of the State Epidemiology Outcome Workgroup that works to serve the Partnership for Success grant. Lastly a portion of these funds will be used to support the maintenance and hosting of the New Hampshire Web Infrastructure Prevention Performance Data System in the collection of process measures at community sub recipient level on 100% of numbers served, evidence-based programs, policies, and/or practices implemented.

Area served: Statewide.

Source of Funds: 100% Federal Substance Abuse and Mental Health Services Administration.

In the event that federal funds become no longer available, general funds will not be requested to support the program expenditures.

Respectfully submitted,



Kathleen A. Dunn, MPH
Associate Commissioner

Approved by:



Nicholas A. Toumpas
Commissioner

Enclosures

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Division of Community Based Care Services
Bureau of Drug & Alcohol Services

New Hampshire Partnership for Success Initiative (PFS2)

Fiscal Situation
05-95-49-491510-24070000

FFY 2016 Grant Award	\$2,472,608.00
Allocated Cost Adjustment	(\$240,657.00)
Available to Accept	\$2,231,951.00
Amount of this Request AU 24070000	
SFY 2016	\$1,674,026.00
SFY 2017	<u>\$557,925.00</u>
Total	\$2,231,951.00



Notice of Award

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

Issue Date: 06/18/2015

Grant Number: 1U79SP020796-01
FAIN: SP020796

Program Director:
Valerie Morgan

Project Title: New Hampshire Partnership for Success Initiative (PFS2)

Grantee Address	Business Address
BUREAU OF DRUG AND ALCOHOL SERVICES Dept of Health and Human Svcs 105 Pleasant Street Main Building Concord, NH 033013852	Director NH DHHS, Bureau of Drug and Alc Svcs 105 Pleasant Street Main Building Concord, NH 03301

Budget Period: 09/30/2015 – 09/29/2016
Project Period: 09/30/2015 – 09/29/2020

Dear Grantee:

The Substance Abuse and Mental Health Services Administration hereby awards a grant in the amount of \$2,472,608 (see "Award Calculation" in Section I and "Terms and Conditions" in Section III) to BUREAU OF DRUG AND ALCOHOL SERVICES 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 (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 – 1U79SP020796-01

Award Calculation (U.S. Dollars)

Salaries and Wages	\$58,487
Fringe Benefits	\$28,492
Personnel Costs (Subtotal)	\$86,979
Supplies	\$1,315
Consortium/Contractual Cost	\$2,224,579
Travel Costs	\$3,584
Other	\$156,151
Direct Cost	\$2,472,608
Approved Budget	\$2,472,608
Federal Share	\$2,472,608
Cumulative Prior Awards for this Budget Period	\$0
AMOUNT OF THIS ACTION (FEDERAL SHARE)	\$2,472,608

SUMMARY TOTALS FOR ALL YEARS	
YR	AMOUNT
1	\$2,472,608
2	\$2,472,608
3	\$2,472,608
4	\$2,472,608
5	\$2,472,608

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

Fiscal Information:

CFDA Number: 93.243
 EIN: 1102600618A1
 Document Number: 15SP20796A
 Fiscal Year: 2015

IC	CAN	Amount
SP	C96V014	\$2,472,608

IC	CAN	2015	2016	2017	2018	2019
SP	C96V014	\$2,472,608	\$2,472,608	\$2,472,608	\$2,472,608	\$2,472,608

SP Administrative Data:

PCC: PFS 2015 / OC: 4145

SECTION II – PAYMENT/HOTLINE INFORMATION – 1U79SP020796-01

Payments under this award will be made available through the HHS Payment Management System (PMS). PMS is a centralized grants payment and cash management system, operated by the HHS Program Support Center (PSC), Division of Payment Management (DPM). Inquiries regarding payment should be directed to: The Division of Payment Management System, PO Box 6021, Rockville, MD 20852, Help Desk Support – Telephone Number: 1-877-614-5533.

The HHS Inspector General maintains a toll-free hotline for receiving information concerning

fraud, waste, or abuse under grants and cooperative agreements. The telephone number is: 1-800-HHS-TIPS (1-800-447-8477). The mailing address is: Office of Inspector General, Department of Health and Human Services, Attn: HOTLINE, 330 Independence Ave., SW, Washington, DC 20201.

SECTION III – TERMS AND CONDITIONS – 1U79SP020796-01

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

SECTION IV – SP Special Terms and Conditions – 1U79SP020796-01

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 budget submitted on March 9, 2015 as part of the application.

SPECIAL TERM(s) OF AWARD:

DISPARITY IMPACT STATEMENT (DIS)

By November 30, 2015, 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 [choose either: served, reached or trained] 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 TERMS OF AWARD

1. Eighty-five percent of the total grant award per year (direct and indirect) less SEOW dollars must be used for community level organization prevention sub-recipient contracts. States may use up to 15 percent of the total award per year (direct and indirect) for administrative purposes. These funds may also be used to enhance the state's prevention data infrastructure and the capacity to collect and analyze prevention data.

2. Seventy percent of the total grant award per year (direct and indirect) less SEOW dollars must be used for tribal community level organization prevention sub-recipient contracts. Tribal organizations and Tribal consortia must set aside 70 percent of funds for program implementation. Tribes and Tribal consortia may use 30 percent of the total grant award per year (direct and indirect) for administrative purposes. These funds may also be used to enhance the tribe's prevention data infrastructure and the capacity to collect and analyze prevention data.

3. The grantee is required to confirm that the epidemiological outcomes workgroup (SEOW) activities, including the grantee wide needs assessment, will be funded at the following levels: \$150,000 for States, \$75,000 for Pacific Jurisdictions and territories, and \$50,000 for tribal organizations. Grantees must subtract the SEOW funds listed above from the total award per year and split the balance between the 85/15 (States) or 70/30 (Tribes).

Tier 2 State Example:

Grant Award \$1,648,188 - \$150,000 SEOW = \$1,498,188. Grantees then divide remaining funds of \$1,498,188 into community and administrative allotments. Eighty-five percent = \$1,273,459 and 15 percent = \$224,728.

Tier 2 Tribal example:

Grant Award \$837,583 - \$50,000 SEOW = \$787,583. Grantees then divide remaining funds of \$787,583 into community and administrative allotments. 70 percent = \$551,308 and 30 percent = \$236,274.

4. **No more than 20 percent of the total grant award (less SEOW funds) may be used for evaluation and data collection.** No more than 20 percent of administrative and community dollars can be spent toward evaluation and data collection.

State Example:

Administrative - \$224,728 x 20 percent = \$44,945 may be used for evaluation and data collection.
Community - \$1,273,459 x 20 percent = \$254,691 may be used for evaluation and data collection.

Tribal Example:

Administrative - \$236,274 x 20 percent = \$47,254 may be used for evaluation and data collection.
Community - \$551,308 x 20 percent = \$110,261 may be used for evaluation and data collection.

SPECIAL CONDITIONS OF AWARD:

Programmatic Special Conditions of Award

Special Condition for Participation in the Cross Site for PFS 2015

All SAMHSA grantees are required to participate in the PFS 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.

Survey Data Response Rate Special Condition

In an effort to improve the validity and reliability of data required by SAMHSA for discretionary grant programs, **SAMHSA is requiring grantees with a state/tribal and /or community survey response rate of less than 70 percent to receive technical assistance***. The TA will be designed to assist states/tribes in improving their survey response rates, and in turn, to improve their data overall.

**SAMHSA document, May 1998: -- "How to Write and Submit Requests for OMB Review and Approval Under the Paperwork Reduction Act and 5 CFR 1320", p19, first sentence: "for most data collections, OMB requires that response rates be at least 75-80%."*

PFS 2015 Recipients are to meet the following milestones:

By October 30, 2015, Grantees must contact their Government Project Officer with the actual response rates and the challenges they face in obtaining a response rate of 70 percent or higher for both community and state level surveys. Response rates should be based on each individual location where the survey is administered (i.e. if a grantee has 10 communities and 7 have a response rate of 70 percent but 3 have a response rate of 50 percent, the grantee is required to obtain technical assistance to improve the response rates in the 3 communities at 50 percent.)

By November 27, 2015, if the survey response rate is less than 70 percent or unknown, grantees must work with their Government Project Officer to obtain technical assistance in developing a plan to increase survey response rates.

By December 31, 2015, grantees are required to submit one evaluation plan containing a sampling methodology and, if rates are less than 70 percent, a plan to increase response rates to 70 percent.

SAMHSA/CSAP will provide grantees an evaluation plan checklist containing criteria to be considered in developing their evaluation plans.

STANDARD TERMS OF AWARD:

Refer to the following SAMHSA website for Standard Terms of Award:
<http://www.samhsa.gov/grants/grants-management/notice-award-noa/standard-terms-conditions> **(COOPERATIVE AGREEMENT)**

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

Valerie Morgan, Program Director @ 15% level of effort
Jill Burke, Project Coordinator @75% 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 31, 2016
2nd Report - April 30, 2016
3rd Report - July 31, 2016
4th Report - October 31, 2016

**Please submit your Programmatic Quarterly Report to
DGMPProgressReports@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:

Andrea Harris, Program Official
Phone: (240) 276-2441 Email: andrea.harris@samhsa.hhs.gov Fax: (240) 276-2595

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