

ACL FALLS PREVENTION PROGRAM SUBAWARD AGREEMENT

This ACL Falls Prevention Subaward Agreement (“**Agreement**”) is made and entered into on August 1, 2020 (the “**Effective Date**”), by and between Partners In Care Foundation, a California nonprofit public benefit corporation (“**Partners**”), and Humboldt County Department of Health and Human Services – Public Health, with a unique entity identifier of DUNS: 79-316-5098 (“**Subrecipient**”).

RECITALS

A. Partners is a transforming presence, an innovator and advocate shaping the future of health care with a focus on home and community based care. Partners addresses social and environmental determinants of health to broaden the impact of medicine.

B. Partners is the recipient of an AOA Evidence-Based Falls Prevention (“**Falls**”) State Grant from the Department of Health and Human Services, Administration for Community Living (“**ACL**”), Grant No. 90FPSG0034-01-00, CFDA No. 93.761, a Cooperative Agreement, Building a Long-Term Falls Prevention Network for California’s Elders (BALNCE) – Circle of Care, with a project period commencing August 1, 2020 and ending July 31, 2023 (the “**Award**”). The Federal Award date is May 21, 2020. The Award is not for research and development.

C. The total amount of Federal funds awarded is \$1,185,721.00 over the Award period, and the total amount of Federal funds to be paid to Subrecipient is as set forth in Exhibit D, attached hereto and incorporated by reference herein.

D. Partners desires to engage in subaward agreements to collaborate with one or more separate legal entities to engage in the ACL-approved activities pursuant to the Award (the “**Program**”), including entering into a subaward agreement with Subrecipient (“**Subaward**”), as set forth in Partners’ final narrative proposal submitted to, and approved by, ACL. The purpose of this Agreement is to ensure that Partners and Subrecipient fulfill their obligations pursuant to the Notice of Award, the U.S. Department of Health & Human Services Grants Policy Statement (“**HHS GPS**”), and other applicable laws, regulations, and guidance.

AGREEMENT

In consideration of the mutual covenants contained herein, and other good and valuable consideration, Partners and Subrecipient agree as follows:

1. Subrecipient’s Services.

1.1 Services. Subrecipient agrees to work cooperatively and in good faith with Partners, the California Healthier Living Coalition, ACL, and other partners- or ACL-designated entities involved in the development, implementation and evaluation of the Program. Subrecipient is required to post A Matter of Balance, Tai Chi for Arthritis, Tai Ji Quan: Moving for Better Balance, EnhanceFitness, Bingocize, SAIL, and/or CAPABLE workshops to the California Healthier Living Website (<http://www.cahealthierliving.org>) at least ten (10) business

days) prior to the start of said workshop. Subrecipient shall comply with and adhere to the work plan in substantially the form set forth in Exhibit A, and pursuant to the timeframes set forth in Exhibit A, attached hereto and incorporated herein by reference, including any required budget or program revisions (the “**Work Plan**”). The Work Plan will include timelines, staff assignments, work locations and areas that require Partners’ review and/or prior approval. Partners or Subrecipient may propose a revision in the final Work Plan upon reasonable prior notice to the other party. Any changes in the Work Plan will require the approval of Partners.

1.2 Project Director/Responsible Personnel. Subrecipient has designated a liaison who shall be primarily responsible for the Subrecipient’s activities related to the Program, as well as other responsible individuals involved in the Program, along with the roles and responsibilities of each such individual, as set forth in Exhibit B, attached hereto and incorporated herein by reference. Partners roles and responsibilities are set forth in Exhibit E.

1.3 Consultation. Subrecipient agrees to participate in the California Healthier Living Coalition and any applicable sub-committees or other subgroups, and to attend all scheduled meetings and events to plan, implement, assess, review, or otherwise evaluate status of the Work Plan and progress with respect to the related goals, and participate in all technical assistance calls as designated by Partners. Subrecipient shall maintain regular contact with Partners’ Senior Program Director, Program Director, and Program Manager (the “**Partners Staff**”), and share with the Partners Staff all material projects, reports, and results produced due to its participation in the Program pursuant to this Agreement.

1.4 Cooperation with Federal and State Research Efforts. Subrecipient agrees to cooperate with federal and state research efforts related to the Program, to the extent permitted by law, including participation in surveys, interviews, other data collection activities, cross-site evaluations, and case studies. Subrecipient shall fully cooperate with any data collection efforts for possible health services utilization and/or outcomes evaluations, which may include the collection of personally identifiable information from Program participants, to the extent permitted by law.

2. Subrecipient’s Covenants.

2.1 Compliance with Applicable Laws, Policies, and Guidance. During the term of this Agreement, Subrecipient shall perform the obligations pursuant to this Agreement in accordance with:

(a) All applicable federal laws, regulations and policies, including, without limitation, compliance with 45 C.F.R. Part 75 and 2 C.F.R. Part 200, as applicable, any other applicable statutory or regulatory requirements, any applicable appropriations acts, as well as all applicable state and local laws, regulations and ordinances, as amended from time to time;

(b) All Standard Terms and Conditions included in the Notice of Award as set forth in Exhibit G;

(c) All terms and conditions applicable to Subrecipient as set forth in the HHS Grants Policy Statement, available at

<http://www.hhs.gov/asfr/ogapa/aboutog/hhsgps107.pdf>, as updated or amended from time to time; and

(d) All other terms and conditions applicable to Subrecipient as a result of use of the Award funds, including compliance with HHS requirements regarding travel reimbursement, salaries, and fringe benefits.

Without limiting the generality of the foregoing, Subrecipient shall comply with all terms and conditions, as applicable, set forth in Exhibit C, attached hereto and incorporated by reference herein.

2.2 Compliance with Training and Licensing Requirements. Subrecipient shall meet, and ensure that all applicable personnel meet, all training, licensing, fees or other requirements associated with the Program, such as compliance with training and licensing requirements related to A Matter of Balance, Tai Chi for Arthritis and/or Tai Ji Quan: Moving for Better Balance, if applicable.

2.3 Lobbying Certification. Subrecipient hereby certifies that no federal appropriated funds received pursuant to this Agreement will be paid to any person for influencing or attempting to influence an officer or an employee of any agency, a member of Congress, an officer or employee of Congress, or an employee of a member of Congress with respect to the award, extension, continuation, renewal, amendment, or modification of any federal grants, cooperative agreements, contracts or loans, as prohibited pursuant to 31 U.S.C. § 1352, and Subrecipient shall be responsible for reporting the use of non-appropriated funds for such purposes, as set forth in the HHS Grants Policy Statement.

2.4 Notice. Subrecipient will comply with all terms and conditions pursuant to this Agreement, including, without limitation, this Section 2 and Section 5, for the duration of this Agreement. Subrecipient will give Partners written notice immediately upon any breach of this Agreement, including, without limitation, failure to comply with any of the covenants and certifications set forth in this Section 2.

2.5 Cooperation with Partners. Subrecipient hereby agrees to cooperate with Partners to assist Partners in meeting its requirements as the recipient of the Award, as reasonably requested by Partners, including, without limitation, cooperation related to Partners' monitoring and oversight responsibilities and final close-out of the Subaward as set forth in 2 C.F.R. § 200.331.

3. Partners' Responsibilities. Partners retains overall responsibility and accountability for the direction of the Program pursuant to the Award, and shall monitor the activities of Subrecipient as necessary to ensure that the Subaward is used for authorized purposes, in compliance with Federal statutes, regulations, and the terms and conditions of this Agreement, and that the Subaward performance goals are achieved. Without limiting the foregoing, Partners reserves the right to audit Subrecipient's activities and expenditures from time to time, pursuant to 2 C.F.R. § 200.501, as Partners deems necessary, to ensure such compliance. Partners will coordinate and manage all data collection and evaluation processes and reports required by ACL in conjunction with the Award. Without limiting the foregoing,

Partners shall engage in the following monitoring and oversight of Subrecipient with respect to performance under this Agreement: (1) reviewing financial and performance reports; (2) following-up to ensure Subrecipient takes timely and appropriate action on all deficiencies detected through audits, on-site reviews, and other means; and (3) issuing a management decision for audit findings.

4. Reimbursement of Costs.

4.1 As full compensation for the Services, Partners will pay Subrecipient pursuant to Exhibit D, attached hereto and incorporated by reference herein.

4.2 Except as otherwise provided herein, Subrecipient will be responsible for all costs and expenses incurred by Subrecipient in rendering the services set forth in the Work Plan and in undertaking this Agreement.

5. Reporting and Auditing Requirements.

5.1 Reporting Requirements.

(a) Subrecipient shall provide a project work plan, budget, progress reports, or other required documents to the Partners Staff within the timeframe requested by Partners, including, without limitation:

- (1)** progress report updating the status of the project and priorities;
- (2)** initial and revised budget and work plan;
- (3)** initial and revised budget narrative that provides a justification for the funds requested;
- (4)** periodic progress reports updating and tracking the fiscal expenditures related to the Program;
- (5)** notification to Partners if any financial management problems with respect to the appropriated funds are discovered; and
- (6)** any other reports required to assist Partners with meeting its requirements to submit financial reports, progress reports, and other reports required by ACL.

(b) Subrecipient shall submit copies of analytic data file(s) with appropriate documentation representing the data developed/used in end-product analyses generated under the award at any phase of the Program, including at or after the Program's conclusion, if requested by the Partners Staff. The analytic file(s) may include primary data collected, acquired or generated under the Award and/or data furnished by or to the ACL. The content, format, documentation and schedule for production of the data file(s) will be mutually agreed upon by Subrecipient and the Partners Staff. The negotiated format(s) could include both

file(s) that would be limited to ACL's internal use and file(s) that the ACL could make available to the general public.

5.2 Auditing Requirements. Subrecipient and Partners shall comply with the applicable audit requirements of 2 C.F.R. § 200.501 et seq., or other audit requirements applicable to Subrecipient, including permitting Partners and auditors to have access to Subrecipient's records and financial statements as necessary to ensure Partner's compliance with the applicable regulations set forth in 2 C.F.R. Part 200 and 45 C.F.R. Part 75.

5.3 Subrecipient A-133 Uniform Guidance Certification. See attached Exhibit F.

6. Subcontracting. Subject to the restrictions in this Agreement, Subrecipient shall have the right to enter into subcontracts with community benefit organizations or other persons or entities as needed to fulfill its obligations pursuant to this Agreement. Without limiting the foregoing, Subrecipient shall ensure that such subcontractors, if any, agree in writing to the same or more stringent restrictions and conditions that apply to Subrecipient pursuant to this Agreement, including, without limitation, Section 2 (Subrecipient's Covenants), Section 5 (Reporting and Auditing Requirements), Section 9 (Health Information Privacy), and Exhibit C, as applicable, except that no such subcontractor shall have the right to further subcontract the rights or responsibilities pursuant to this Agreement.

7. Term and Termination.

7.1 Term. This Agreement will be effective as of the Effective Date, and will continue through July 31, 2023, dependent on the availability of funds, and unless terminated sooner in accordance with the terms of this Agreement.

7.2 Termination in Connection with Award. This Agreement shall automatically terminate upon the termination of the Award for any cause or reason.

7.3 Termination for Breach. In the event a party ("**Breaching Party**") breaches the terms of this Agreement, the other party ("**Non-Breaching Party**") may provide its intent to terminate this Agreement by giving written notice to the Breaching Party at least thirty (30) calendar days before the effective date of termination stated in the notice. The notice shall state the circumstances of the alleged breach and may state a reasonable period, not less than seven (7) calendar days, during which the alleged breach may be cured. If such breach is not cured to the reasonable satisfaction of Non-Breaching Party within the cure period, the Non-Breaching Party shall have the right to immediately terminate this Agreement on the effective date of the termination stated in the notice.

7.4 Availability of Funds. The parties mutually agree that if ACL does not appropriate the amount of federal financial assistance to Partners for the Program as set forth in the Notice of Award in the current year or any subsequent years covered under this Agreement, this Agreement shall terminate, shall be of no further force and effect, and Partners shall have no liability to pay any funds whatsoever to Subrecipient or to furnish any other consideration pursuant to this Agreement, and Subrecipient shall not be obligated to perform any provisions of this Agreement after notice of such termination by Partners; provided, however, that if ACL

reduces, but does not eliminate, the amount federal financial assistance provided in the Notice of Award, Partners shall have the option to propose an amendment to this Agreement, to be mutually agreed upon by the parties, to reflect the reduced amount.

8. Insurance and Indemnification.

8.1 Insurance.

(a) Subrecipient will maintain the following insurance, or otherwise maintain a similar level of self-insurance, during the term of this Agreement:

(1) General liability of not less than \$1,000,000 per occurrence for bodily injury and property damage combined;

(2) If applicable, automobile liability including non-owned auto liability, of not less than \$1,000,000 for volunteers and paid employees providing services supported by this Agreement;

(3) Professional liability of not less than \$1,000,000 as it appropriately relates to the services rendered. Coverage shall include medical malpractice and/or errors and omissions;

(4) Workers' compensation liability, in accordance with the provisions of the Labor Code.

8.2 Indemnification.

(a) Subrecipient will indemnify and hold harmless Partners from and against all damages, claims, liabilities, and losses (including reasonable attorney's fees and related costs) resulting from Subrecipient's or any subcontractor of Subrecipient's negligence or willful misconduct committed in connection with the performance of Subrecipient's duties hereunder, except to the extent such damages are attributable to the negligence or willful misconduct of Partners or its agents, representatives, officers or employees.

(b) Partners will indemnify and hold harmless Subrecipient from and against all damages, claims, liabilities, and losses (including reasonable attorney's fees and related costs) resulting from Partners' negligence or willful misconduct committed in connection with the performance of Partners' duties hereunder, except to the extent such damages are attributable to the negligence or willful misconduct of Subrecipient.

9. Health Information Privacy. The parties agree to comply with all applicable privacy and security requirements of the Health Insurance Portability and Accountability Act of 1996, the Health Information Technology for Economic and Clinical Health Act of 2009, and the regulations promulgated thereunder, and all other applicable federal and state privacy laws, in the performance of the obligations pursuant to this Agreement.

10. Miscellaneous.

10.1 Relationship of Parties. The relationship between Subrecipient and Partners established by this Agreement is solely that of independent contractors. Neither party will be considered the legal representative or agent of the other, nor authorized or empowered to assume any obligation of any kind, implied or expressed, on behalf of the other party, except with the express prior written consent of the other party. Subrecipient shall be solely responsible for all taxes, if any, it incurs as a result of any payments it receives under this Agreement. No person acting on behalf of Subrecipient shall have any claims against Partners for compensation, overtime, vacation pay, sick-leave, retirement benefits, or employee benefits of any kind, and Subrecipient shall indemnify Partners and hold harmless with respect thereto.

10.2 Assignment; Binding Effect. This Agreement will be binding upon and inure to the benefit of the parties hereto and their respective successors and assigns; provided, however, that this Agreement will not be assignable by either party without the other party's written consent.

10.3 No Waiver. Neither the waiver by either party of any breach of or default under any of the provisions of this Agreement nor the failure of either party to enforce any of the provisions of this Agreement or to exercise any right hereunder will, hereafter, be construed as a waiver of any subsequent breach or default or a waiver of any rights or provision hereunder.

10.4 Governing Law. This Agreement will be governed by and construed in accordance with the laws of California. No provision of this Agreement will be applied to or construed in a manner inconsistent with applicable state and federal laws and regulations.

10.5 No Third-Party Beneficiaries. No person or entity other than the parties hereto will be entitled to bring any action to enforce any provision of this Agreement against a party hereto.

10.6 Severability. No provision of this Agreement which is in violation of any state or federal law or regulation will be effective; provided, however, if one or more provisions of the Agreement are hereinafter determined to be invalid and unenforceable, this will not operate to the detriment or invalidate the remainder of the Agreement unless the unenforceability or invalidity has the effect of substantially changing the terms and conditions of this Agreement or operates in such a manner as to invalidate or defeat the primary purposes or objectives of this Agreement.

10.7 Entire Agreement; Amendment. This Agreement is the entire agreement between the parties as to its subject matter, and all prior written or oral agreements, promises, or representations are incorporated herein. This Agreement may be amended only by a writing executed by the parties.

10.8 Counterparts. This Agreement may be executed in counterparts, each of which shall be considered to be an original; however, all such counterparts shall constitute but one and the same Agreement. This Agreement may be executed by facsimile or PDF signature, all of which taken together constitute a single agreement between the parties. Each signed counterpart, including a signed counterpart reproduced by reliable means (such as facsimile and PDF), will be considered as legally effective as an original signature.

10.9 Notices. Any notice required or permitted to be given under this Agreement will be in writing and will be hand delivered, sent by certified mail with return receipt requested, or delivered by overnight courier service providing written proof of delivery, addressed as follows:

If to Partners: Partners in Care Foundation, Inc.
732 Mott Street, Suite 150
San Fernando, CA 91340
Attn: June Simmons, Chief Executive Officer

If to Subrecipient: County of Humboldt – DHHS
Public Health – Healthy Communities
507 F St. Eureka, CA 95501
Attn: Fiscal Office

or to such other address as either party may designate by notice pursuant to this section.

10.10 Force Majeure. Neither party will be liable for delay in or for failure to perform its obligations under this Agreement (except for any payment obligations) to the extent that performance is delayed, prevented, restricted or interfered with as a result of any causes beyond its reasonable control, including acts of God, terrorism, labor action, fire, flood, earthquake, governmental acts, orders or restrictions, failure of third-party providers, denial of service attacks and other malicious conduct, utility failures or power outages.

10.11 Nuclear Free Humboldt County Ordinance Compliance. Partners certifies by its signature below that it is not a Nuclear Weapons Contractor, in that Partners is not knowingly or intentionally engaged in the research, development, production or testing of nuclear warheads, nuclear weapons systems or nuclear weapons components as defined by the Nuclear Free Humboldt County Ordinance. Partners agrees to notify Subrecipient immediately if it becomes a Nuclear Weapons Contractor as defined above. Subrecipient may immediately terminate this Agreement if it determines that the foregoing certification is false or if Partners subsequently becomes a Nuclear Weapons Contractor.

10.12 Interpretation. This Agreement, as well as its individual provisions, shall be deemed to have been prepared equally by both of the parties hereto, and shall not be construed or interpreted more favorably for one party on the basis that the other party prepared it.

10.13 Independent Construction. The titles of the sections, subsections and paragraphs set forth in this Agreement are inserted for convenience of reference only, and shall be disregarded in construing or interpreting any of the provisions of this Agreement.

10.14 Authority to Execute. Each person executing this Agreement represents and warrants that he or she is duly authorized and has legal authority to execute and deliver this Agreement. Each party represents and warrants to the other that the execution and delivery of this Agreement and the performance of such party's obligations hereunder have been duly authorized.

IN WITNESS WHEREOF, the parties hereto have executed this Agreement on the date set forth in the introductory paragraph, to be effective as of the Effective Date.

“PARTNERS”

**PARTNERS IN CARE FOUNDATION,
a California nonprofit
public benefit corporation**

“SUBRECIPIENT”

_____, a

By: _____
W. June Simmons
Its: Chief Executive Officer

By: _____
Name:
Its:

LIST OF EXHIBITS:

- Exhibit A – Work Plan
- Exhibit B – Project Director/Responsible Individuals
- Exhibit C – Terms and Conditions
- Exhibit D – Reimbursement of Costs
- Exhibit E – Partners Staff Contract Information
- Exhibit F – Subrecipient A-133 Uniform Guidance Certification Policy
- Exhibit G – Notice of Award

EXHIBIT A
WORK PLAN

Building a Long-Term Falls Prevention Network for California’s Elders (BALNCE) – Circle of Care

HUMBOLDT COUNTY DEPARTMENT OF HEALTH AND HUMAN SERVICES – PUBLIC HEALTH WORK PLAN: Year 1

Goal 1: Strengthen and expand *Partners’* integrated state and regional EBHP networks to address the social and behavioral determinants of health of older adults and adults with disabilities.

Measurable Outcome(s):

- Within the first year of the grant, 10 counties will adopt and expand evidence-based falls prevention programming and integrate these programs as an offering of the Partners at Home Network.
- By month 18 of the grant, the *Partners* TAC will develop and disseminate a toolkit to assist counties with procuring payer contracts.
- By the end of the three-year grant period, all 10 BALNCE – Circle of Care counties will work with their local Fire Departments and EMS to develop and implement a process for referring 911 falls callers into local evidence-based falls prevention workshops.
- By the end of the three-year grant period, at least four new payer contracts will be secured to spread and sustain falls prevention programming in California.

Major Objective 1.1: Members of the Partners at Home Network engaged in falls prevention initiatives will adopt and implement up to seven evidence-based falls prevention programs and will increase the total number of older adults and adults with disabilities served through BALNCE – Circle of Care, meeting 20% of participant deliverables in Year 1, 58% by the end of Year 2, and 100% by the end of Year 3.

Objective 1.1.1: Purposefully excluded. Tasks do not apply to Humboldt County Department of Health and Human Services – Public Health.

Objective 1.1.2: Incorporate falls prevention program continuum into all PAH Network offerings by executing PAH Network contracts with each subcontracted county to bring them into the Network, and including falls programs in regular communications, collateral materials, the statewide website that builds coordinated recruitment and greater public awareness (www.cahealthierliving.org), and statewide semi-annual meetings, building a mentorship network for entities implementing falls prevention programs.

Key Tasks	Lead Person	Start Date	End Date	Notes
a. Subcontracted counties take contract for internal review and approval to execute contract.	Click or tap here to enter text.	8/1/20	10/31/20	Click or tap here to enter text.

b. Submit articles, best practices, accomplishments, trainings, etc. to Partners for the semi-annual CA Healthier Living Coalition e-newsletter	Click or tap here to enter text.	December '20 June '21	December '20 June '21	Click or tap here to enter text.
c. Post falls prevention workshops and trainings to cahealthierliving.org to increase access to evidence-based falls prevention programming in each county, and to support the development of a referral network	Click or tap here to enter text.	Ongoing		Click or tap here to enter text.
<i>Objective 1.1.3: By month 18 and thereafter, develop a referral network within PAH Network counties to connect participants of evidence-based falls prevention programs with additional community resources to address their social and behavioral determinants of health challenges.</i>				
Key Tasks	Lead Person	Start Date	End Date	Notes
a. Outreach to potential referral sources (EMS, fire departments, emergency departments, geriatric and other primary care practices, care management services, etc.) to discuss potential referral models into county evidence-based falls prevention programs	Click or tap here to enter text.	2/1/21	7/31/21	Click or tap here to enter text.
b. Identify collateral materials that would be instrumental to facilitating referrals	Click or tap here to enter text.	2/1/21	7/31/21	Click or tap here to enter text.
c. Identify potential resources to address food security and transportation challenges; complete survey	Click or tap here to enter text.	2/1/21	4/30/21	Click or tap here to enter text.
<i>Major Objective 1.2: Target PAH Network Member sustainability initiatives to build partnerships with payers.</i>				
<i>Objective 1.2.1: Conduct semi-annual joint planning meetings among PAH Network members to identify and engage health care delivery system partners for funding arrangements.</i>				
Key Tasks	Lead Person	Start Date	End Date	Notes
a. Participate in semi-annual CA Healthier Living Coalition/PAH Network meetings (via webinar). Meeting agenda developed with input from Network Members/Coalition members.	Click or tap here to enter text.	November '20 June '21	November '20 June '21	Click or tap here to enter text.
<i>Objective 1.2.2: In Year 1 and thereafter, revise statewide sustainability plan, provide TA to Current Adopter Counties to refresh sustainability plans developed during prior ACL funding, and work with new PAH Network counties to develop their countywide sustainability plans to contract to deliver evidence-based falls prevention programs.</i>				

Key Tasks	Lead Person	Start Date	End Date	Notes
a. Participate in monthly technical assistance calls to discuss need(s) for support, monitor and track progress to project goals, share lessons learned, maintain quality assurance, and assess attainment of goals outlined in countywide sustainability plans.	Click or tap here to enter text.	Ongoing		Click or tap here to enter text.
b. Participate in <u>project-wide</u> quarterly calls/webinars with all Network Members	Click or tap here to enter text.	October '20 January '21 April '21 July '21	October '20 January '21 April '21 July '21	Click or tap here to enter text.
c. ALL BALNCE – CoC counties refresh/complete countywide sustainability plans using <i>Partners'</i> sustainability planning toolkit as a guide	Click or tap here to enter text.	11/1/20	7/31/21	Click or tap here to enter text.
<i>Objective 1.2.3: Purposefully excluded. Tasks do not apply to Humboldt County Department of Health and Human Services – Public Health.</i>				
<i>Objective 1.2.4: In Year 2 and thereafter, actively implement sustainability plans by conducting outreach to potential payers to develop contracts for sustainability.</i>				
<i>No activities during Year 1</i>				

Goal 2: Significantly increase the number of older adults and adults with disabilities at risk for falls who participate in evidence-based community programs to reduce falls and falls risks.

Measurable Outcome(s):

- By the end of the three-year grant period, 239 older adults and adults with disabilities will have participated in CAPABLE, A Matter of Balance (MOB), Tai Chi for Arthritis (Tai Chi), Tai Ji Quan: Moving for Better Balance (TJQMBB), EnhanceFitness (EF), Bingocize, and/or Stay Active and Independent for Life (SAIL) workshops, and at least 132 of them will have completed the workshops by attending a minimum of five (5) out of eight (8) sessions for A Matter of Balance, a minimum of sixteen (16) sessions for Tai Chi for Arthritis and Bingocize, thirty four (34) out of forty eight (48) sessions for Tai Ji Quan: Moving for Better Balance, and/or a minimum of thirteen (13) sessions for EnhanceFitness and SAIL.
- Of those workshop participants who complete a post-workshop survey:
 - 35% will report a reduced fear of falling,
 - 45% will report an improved ability to reduce falls, and
 - 95% will report feeling more comfortable increasing their physical activity.

Major Objective 2.1: Reach 239 older adults and adults with disabilities at risk of falls in low-income, rural, limited English-speaking areas of CA.

Objective 2.1.1: Purposefully excluded. Tasks do not apply to Humboldt County Department of Health and Human Services – Public Health.

Objective 2.1.2: Throughout the three-year grant period, plan/convene Regional Leader Trainings to increase statewide infrastructure for the chosen evidence-based falls prevention programs.

Key Tasks	Lead Person	Start Date	End Date	Notes
a. Network Members identify and select individuals for CAPABLE clinician training, MOB Master Training (if needed), Tai Chi leader certification, EF instructor training, and Bingocize leader training.	Click or tap here to enter text.	8/1/20	9/30/20	Click or tap here to enter text.
b. Network Members identify, screen, and select individuals for MOB <u>new leader</u> training. <i>Partners</i> will provide leader screening tools to support Network Members.	Click or tap here to enter text.	3/1/21	4/30/21	Click or tap here to enter text.
c. New MOB <u>leader</u> training held in counties that require additional program infrastructure, training at least 40 new MOB leaders statewide.	Click or tap here to enter text.	4/1/21	7/31/21	Click or tap here to enter text.

d. Selected individuals complete the online CAPABLE clinician training and Bingocize leader trainings.	Click or tap here to enter text.	9/1/20	10/31/20	Click or tap here to enter text.
e. Network Members will develop a tentative schedule of planned workshops for newly trained leaders to facilitate their first workshop	Click or tap here to enter text.	3/1/21	7/31/21	Click or tap here to enter text.

Objective 2.1.3: Throughout the three-year grant period, implement evidence-based falls prevention programs and collect participant enrollment data from implementation sites to monitor program reach in 10 counties.

Key Tasks	Lead Person	Start Date	End Date	Notes
a. Network Members utilize local partnerships to market, refer, and identify appropriate host sites and participants for MOB, Tai Chi, TJQMBB, EF, Bingocize, and SAIL workshops	Click or tap here to enter text.	Ongoing		Click or tap here to enter text.
b. Network Members identify and procure handyman/men to complete the home safety modifications under the CAPABLE program	Click or tap here to enter text.	1/1/21	3/31/21	Click or tap here to enter text.
c. Network Members utilize local partnerships to market to and identify appropriate participants for CAPABLE.	Click or tap here to enter text.	1/1/21	7/31/21	Click or tap here to enter text.
d. Network Members schedule workshops and utilize NCOA-required forms to assure enrollment and retention rates that meet program fidelity standards	Click or tap here to enter text.	Ongoing		Click or tap here to enter text.

Major Objective 2.2: Strengthen and sustain outcomes data collection, monitoring and reporting processes, and leader fidelity, implementing enhanced quality assurance processes throughout CoC.

Objective 2.2.1: In Year 1 create, and throughout the 3-year grant period deploy new program-specific fidelity checklists to ensure program implementation as developer designed; Conduct leader fidelity checks throughout the three-year grant.

Key Tasks	Lead Person	Start Date	End Date	Notes
a. Conduct workshop leader fidelity checks, utilizing the fidelity checklists for documentation, and providing feedback to workshop leaders to enhance program delivery	Click or tap here to enter text.	Ongoing		Click or tap here to enter text.

<p>b. Work with <i>Partners</i> to develop and implement a Quality Assurance Program (QAP), to include QA standards, fidelity monitoring, and corrective action guidelines to ensure fidelity of implementation of the intended falls prevention programs. The QAP will include quality assurance elements supported by the Partners at Home Network and the CA Healthier Living Coalition.</p>	<p>Click or tap here to enter text.</p>	<p>11/1/20</p>	<p>7/31/21</p>	<p>Click or tap here to enter text.</p>
<p><u>Objective 2.2.2:</u> Throughout the three-year grant period, collect program participant and completer data using program-specific data forms to monitor evidence-based falls prevention program reach, outcomes, and retention rate.</p>				
<p>Key Tasks</p>	<p>Lead Person</p>	<p>Start Date</p>	<p>End Date</p>	<p>Notes</p>
<p>a. Network Members collect workshop participant data, review for accuracy, and submit to <i>Partners</i> for entry into the national database</p>	<p>Click or tap here to enter text.</p>	<p>Ongoing</p>		<p>Click or tap here to enter text.</p>
<p><u>Objective 2.2.3:</u> Purposefully excluded. Tasks do not apply to Humboldt County Department of Health and Human Services – Public Health.</p>				

Building a Long-Term Falls Prevention Network for California’s Elders (BALNCE) – Circle of Care

HUMBOLDT COUNTY DEPARTMENT OF HEALTH AND HUMAN SERVICES – PUBLIC HEALTH WORK PLAN: Year 2

Goal 1: Strengthen and expand *Partners’* integrated state and regional EBHP networks to address the social and behavioral determinants of health of older adults and adults with disabilities.

Measurable Outcome(s):

- Within the first year of the grant, 10 counties will adopt and expand evidence-based falls prevention programming and integrate these programs as an offering of the Partners at Home Network.
- By month 18 of the grant, the *Partners* TAC will develop and disseminate a toolkit to assist counties with procuring payer contracts.
- By the end of the three-year grant period, all 10 BALNCE – Circle of Care counties will work with their local Fire Departments and EMS to develop and implement a process for referring 911 falls callers into local evidence-based falls prevention workshops.
- By the end of the three-year grant period, at least four new payer contracts will be secured to spread and sustain falls prevention programming in California.

Major Objective 1.1: Members of the Partners at Home Network engaged in falls prevention initiatives will adopt and implement up to seven evidence-based falls prevention programs and will increase the total number of older adults and adults with disabilities served through BALNCE – Circle of Care, meeting 20% of participant deliverables in Year 1, 58% by the end of Year 2, and 100% by the end of Year 3.

Objective 1.1.1: *Purposefully excluded. Tasks do not apply to Humboldt County Department of Health and Human Services – Public Health.*

Objective 1.1.2: Incorporate falls prevention program continuum into all PAH Network offerings by executing PAH Network contracts with each subcontracted county to bring them into the Network, and including falls programs in regular communications, collateral materials, the statewide website that builds coordinated recruitment and greater public awareness (www.cahealthierliving.org), and statewide semi-annual meetings, building a mentorship network for entities implementing falls prevention programs.

Key Tasks	Lead Person	Start Date	End Date	Notes
a. Submit articles, best practices, accomplishments, trainings, etc. to Partners for the semi-annual CA Healthier Living Coalition e-newsletter	Click or tap here to enter text.	December ‘21 June ‘22	December ‘21 June ‘22	Click or tap here to enter text.
b. Post falls prevention workshops and trainings to cahealthierliving.org to increase access to evidence-based falls prevention programming in each county,	Click or tap here to enter text.	Ongoing		Click or tap here to enter text.

and to support the development of a referral network.				
<u>Objective 1.1.3:</u> By month 18 and thereafter, develop a referral network within PAH Network counties to connect participants of evidence-based falls prevention programs with additional community resources to address their social and behavioral determinants of health challenges.				
Key Tasks	Lead Person	Start Date	End Date	Notes
a. Outreach to potential resources to address food insecurity and transportation challenges	Click or tap here to enter text.	8/1/21	1/31/22	Click or tap here to enter text.
b. Initiate meetings with potential referral sources (EMS, fire departments, emergency departments, geriatric and other primary care practices, care management services, etc.) to plan for potential referral models into county evidence-based falls prevention programs	Click or tap here to enter text.	8/1/21	1/31/22	Click or tap here to enter text.
c. Develop collateral materials to be used to facilitate referrals	Click or tap here to enter text.	8/1/21	1/31/22	Click or tap here to enter text.
d. Pilot test referrals into county evidence-based falls prevention programs	Click or tap here to enter text.	2/1/22	7/31/22	Click or tap here to enter text.
<u>Major Objective 1.2:</u> Target PAH Network Member sustainability initiatives to build partnerships with payers.				
<u>Objective 1.2.1:</u> Conduct semi-annual joint planning meetings among PAH Network members to identify and engage health care delivery system partners for funding arrangements.				
Key Tasks	Lead Person	Start Date	End Date	Notes
a. Participate in semi-annual CA Healthier Living Coalition/PAH Network meetings (one in-person and one via webinar). Meeting agenda developed with input from Network Members/Coalition members.	Click or tap here to enter text.	November '21 June '22	November '21 June '22	Click or tap here to enter text.
<u>Objective 1.2.2:</u> In Year 1 and thereafter, revise statewide sustainability plan, provide TA to Current Adopter Counties to refresh sustainability plans developed during prior ACL funding, and work with new PAH Network counties to develop their countywide sustainability plans to contract to deliver evidence-based falls prevention programs.				

Key Tasks	Lead Person	Start Date	End Date	Notes
a. Participate in monthly technical assistance calls to discuss need(s) for support, monitor and track progress to project goals, share lessons learned, maintain quality assurance, and assess attainment of goals outlined in countywide sustainability plans.	Click or tap here to enter text.	Ongoing		Click or tap here to enter text.
b. Participate in <u>project-wide</u> quarterly calls/webinars with all Network Members	Click or tap here to enter text.	October '21 January '22 April '22 July '22	October '21 January '22 April '22 July '22	Click or tap here to enter text.
<i>Objective 1.2.3: Purposefully excluded. Tasks do not apply to Humboldt County Department of Health and Human Services – Public Health.</i>				
<i>Objective 1.2.4: In Year 2 and thereafter, actively implement sustainability plans by conducting outreach to potential payers to develop contracts for sustainability.</i>				
Key Tasks	Lead Person	Start Date	End Date	Notes
a. Deploy sustainability plan and “sales” toolkit to initiate discussions with potential payers for contracts for falls prevention programming	Click or tap here to enter text.	3/1/22	7/31/22	Click or tap here to enter text.

Goal 2: Significantly increase the number of older adults and adults with disabilities at risk for falls who participate in evidence-based community programs to reduce falls and falls risks.

Measurable Outcome(s):

- By the end of the three-year grant period, 239 older adults and adults with disabilities will have participated in CAPABLE, A Matter of Balance (MOB), Tai Chi for Arthritis (Tai Chi), Tai Ji Quan: Moving for Better Balance (TJQMBB), EnhanceFitness (EF), Bingocize, and/or Stay Active and Independent for Life (SAIL) workshops, and at least 132 of them will have completed the workshops by attending a minimum of five (5) out of eight (8) sessions for A Matter of Balance, a minimum of sixteen (16) sessions for Tai Chi for Arthritis and Bingocize, thirty four (34) out of forty eight (48) sessions for Tai Ji Quan: Moving for Better Balance, and/or a minimum of thirteen (13) sessions for EnhanceFitness and SAIL.
- Of those workshop participants who complete a post-workshop survey:
 - 35% will report a reduced fear of falling,
 - 45% will report an improved ability to reduce falls, and
 - 95% will report feeling more comfortable increasing their physical activity.

Major Objective 2.1: Reach 239 older adults and adults with disabilities at risk of falls in low-income, rural, limited English-speaking areas of CA.

Objective 2.1.1: Purposefully excluded. Tasks do not apply to Humboldt County Department of Health and Human Services – Public Health.

Objective 2.1.2: Throughout the three-year grant period, plan/convene Regional Leader Trainings to increase statewide infrastructure for the chosen evidence-based falls prevention programs.

Key Tasks	Lead Person	Start Date	End Date	Notes
a. Network Members identify, screen, and select individuals for MOB <u>new leader</u> training. <i>Partners</i> will provide leader screening tools to support Network Members.	Click or tap here to enter text.	8/1/21	10/31/21	Click or tap here to enter text.
b. New MOB <u>leader</u> training held in counties that require additional program infrastructure, training a total of at least 75 new MOB leaders statewide.	Click or tap here to enter text.	11/1/21	7/31/22	Click or tap here to enter text.

Objective 2.1.3: Throughout the three-year grant period, implement evidence-based falls prevention programs and collect participant enrollment data from implementation sites to monitor program reach in 10 counties.

Key Tasks	Lead Person	Start Date	End Date	Notes
a. Identify any needs for new/revised program marketing materials (flyers and brochures) for CAPABLE, TJQMBB, EF, Bingocize, and SAIL during monthly TA calls with individual counties	Click or tap here to enter text.	8/1/21	10/31/21	Click or tap here to enter text.
b. Network Members utilize local partnerships to market, refer, and identify appropriate host sites and participants for MOB, Tai Chi, TJQMBB, EF, Bingocize, and SAIL workshops	Click or tap here to enter text.	Ongoing		Click or tap here to enter text.
c. Network Members utilize local partnerships to market to and identify appropriate participants for CAPABLE.	Click or tap here to enter text.	11/1/21	7/31/22	Click or tap here to enter text.
d. Network Members schedule workshops and utilize NCOA-required forms to assure enrollment and retention rates that meet program fidelity standards	Click or tap here to enter text.	Ongoing		Click or tap here to enter text.

Major Objective 2.2: Strengthen and sustain outcomes data collection, monitoring and reporting processes, and leader fidelity, implementing enhanced quality assurance processes throughout CoC.

Objective 2.2.1: In Year 1 create, and throughout the 3-year grant period deploy new program-specific fidelity checklists to ensure program implementation as developer designed; Conduct leader fidelity checks throughout the three-year grant.

Key Tasks	Lead Person	Start Date	End Date	Notes
a. Conduct workshop leader fidelity checks, utilizing the fidelity checklists for documentation, and providing feedback to workshop leaders to enhance program delivery	Click or tap here to enter text.	Ongoing		Click or tap here to enter text.
b. Work with Partners to continue implementing Quality Assurance Program (QAP), to include QA standards, fidelity monitoring, and corrective action guidelines for Network Members to utilize to ensure fidelity of implementation of the intended falls prevention programs.	Click or tap here to enter text.	8/1/21	7/31/22	Click or tap here to enter text.

***Objective 2.2.2:* Throughout the three-year grant period, collect program participant and completer data using program-specific data forms to monitor evidence-based falls prevention program reach, outcomes, and retention rate.**

Key Tasks	Lead Person	Start Date	End Date	Notes
a. Network Members collect workshop participant data, review for accuracy, and submit to <i>Partners</i> for entry into the national database	Click or tap here to enter text.	Ongoing		Click or tap here to enter text.

Objective 2.2.3: Purposefully excluded. Tasks do not apply to Humboldt County Department of Health and Human Services – Public Health.

Building a Long-Term Falls Prevention Network for California’s Elders (BALNCE) – Circle of Care

HUMBOLDT COUNTY DEPARTMENT OF HEALTH AND HUMAN SERVICES – PUBLIC HEALTH WORK PLAN: Year 3

Goal 1: Strengthen and expand *Partners’* integrated state and regional EBHP networks to address the social and behavioral determinants of health of older adults and adults with disabilities.

Measurable Outcome(s):

- Within the first year of the grant, 10 counties will adopt and expand evidence-based falls prevention programming and integrate these programs as an offering of the Partners at Home Network.
- By month 18 of the grant, the *Partners* TAC will develop and disseminate a toolkit to assist counties with procuring payer contracts.
- By the end of the three-year grant period, all 10 BALNCE – Circle of Care counties will work with their local Fire Departments and EMS to develop and implement a process for referring 911 falls callers into local evidence-based falls prevention workshops.
- By the end of the three-year grant period, at least four new payer contracts will be secured to spread and sustain falls prevention programming in California.

Major Objective 1.1: Members of the Partners at Home Network engaged in falls prevention initiatives will adopt and implement up to seven evidence-based falls prevention programs and will increase the total number of older adults and adults with disabilities served through BALNCE – Circle of Care, meeting 20% of participant deliverables in Year 1, 58% by the end of Year 2, and 100% by the end of Year 3.

Objective 1.1.1: *Purposefully excluded. Tasks do not apply to Humboldt County Department of Health and Human Services – Public Health.*

Objective 1.1.2: Incorporate falls prevention program continuum into all PAH Network offerings by executing PAH Network contracts with each subcontracted county to bring them into the Network, and including falls programs in regular communications, collateral materials, the statewide website that builds coordinated recruitment and greater public awareness (www.cahealthierliving.org), and statewide semi-annual meetings, building a mentorship network for entities implementing falls prevention programs.

Key Tasks	Lead Person	Start Date	End Date	Notes
a. Submit articles, best practices, accomplishments, trainings, etc. to Partners for the semi-annual CA Healthier Living Coalition e-newsletter	Click or tap here to enter text.	December ‘22 June ‘23	December ‘22 June ‘23	Click or tap here to enter text.
b. Post falls prevention workshops and trainings to cahealthierliving.org to increase access to evidence-based falls prevention programming in	Click or tap here to enter text.	Ongoing		Click or tap here to enter text.

each county, and to support the development of a referral network				
<i>Objective 1.1.3:</i> By month 18 and thereafter, develop a referral network within PAH Network counties to connect participants of evidence-based falls prevention programs with additional community resources to address their social and behavioral determinants of health challenges.				
Key Tasks	Lead Person	Start Date	End Date	Notes
a. Pilot test partnerships with external resources to address food insecurity and transportation challenges	Click or tap here to enter text.	8/1/22	7/31/23	Click or tap here to enter text.
b. Assess the need for additional collateral materials to facilitate referrals	Click or tap here to enter text.	8/1/22	10/31/22	Click or tap here to enter text.
c. Develop collateral materials to be used to facilitate referrals, as needed	Click or tap here to enter text.	11/1/22	1/31/23	Click or tap here to enter text.
d. Disseminate new collateral materials to Network Members, as needed	Click or tap here to enter text.	February '23	February '23	Click or tap here to enter text.
e. Continue implementation of referrals into county evidence-based falls prevention programs	Click or tap here to enter text.	8/1/22	7/31/23	Click or tap here to enter text.
<i>Major Objective 1.2:</i> Target PAH Network Member sustainability initiatives to build partnerships with payers.				
<i>Objective 1.2.1:</i> Conduct semi-annual joint planning meetings among PAH Network members to identify and engage health care delivery system partners for funding arrangements.				
Key Tasks	Lead Person	Start Date	End Date	Notes
a. Participate in semi-annual CA Healthier Living Coalition/PAH Network meetings (one in-person and one via webinar). Meeting agenda developed with input from Network Members/Coalition members.	Click or tap here to enter text.	November '22 June '23	November '22 June '23	Click or tap here to enter text.
<i>Objective 1.2.2:</i> In Year 1 and thereafter, revise statewide sustainability plan, provide TA to Current Adopter Counties to refresh sustainability plans developed during prior ACL funding. Work with new PAH Network counties to develop their countywide sustainability plans to contract to deliver evidence-based falls prevention programs.				
Key Tasks	Lead Person	Start Date	End Date	Notes

a. Participate in monthly technical assistance calls to discuss need(s) for support, monitor and track progress to project goals, share lessons learned, maintain quality assurance, and assess attainment of goals outlined in countywide sustainability plans.	Click or tap here to enter text.	Ongoing		Click or tap here to enter text.
b. Participate in <u>project-wide</u> quarterly calls/webinars with all Network Members	Click or tap here to enter text.	October '22 January '23 April '23 July '23	October '22 January '23 April '23 July '23	Click or tap here to enter text.
<i>Objective 1.2.3: Purposefully excluded. Tasks do not apply to Humboldt County Department of Health and Human Services – Public Health.</i>				
<i>Objective 1.2.4: In Year 2 and thereafter, actively implement sustainability plans by conducting outreach to potential payers to develop contracts for sustainability.</i>				
Key Tasks	Lead Person	Start Date	End Date	Notes
a. Continue to utilize sustainability plan and “sales” toolkit to secure contracts with payers for falls prevention programming	Click or tap here to enter text.	8/1/22	7/31/23	Click or tap here to enter text.
b. Execute contracts with payers for falls prevention programming	Click or tap here to enter text.	8/1/22	7/31/23	Click or tap here to enter text.

Goal 2: Significantly increase the number of older adults and adults with disabilities at risk for falls who participate in evidence-based community programs to reduce falls and falls risks.

Measurable Outcome(s):

- By the end of the three-year grant period, 239 older adults and adults with disabilities will have participated in CAPABLE, A Matter of Balance (MOB), Tai Chi for Arthritis (Tai Chi), Tai Ji Quan: Moving for Better Balance (TJQMBB), EnhanceFitness (EF), Bingocize, and/or Stay Active and Independent for Life (SAIL) workshops, and at least 132 of them will have completed the workshops by attending a minimum of five (5) out of eight (8) sessions for A Matter of Balance, a minimum of sixteen (16) sessions for Tai Chi for Arthritis and Bingocize, thirty four (34) out of forty eight (48) sessions for Tai Ji Quan: Moving for Better Balance, and/or a minimum of thirteen (13) sessions for EnhanceFitness and SAIL.
- Of those workshop participants who complete a post-workshop survey:
 - 35% will report a reduced fear of falling,
 - 45% will report an improved ability to reduce falls, and
 - 95% will report feeling more comfortable increasing their physical activity.

Major Objective 2.1: Reach 239 older adults and adults with disabilities at risk of falls in low-income, rural, limited English-speaking areas of CA.				
<i>Objective 2.1.1: Purposefully excluded. Tasks do not apply to Humboldt County Department of Health and Human Services – Public Health.</i>				
Objective 2.1.2: Throughout the three-year grant period, plan/convene Regional Leader Trainings to increase statewide infrastructure for the chosen evidence-based falls prevention programs.				
Key Tasks	Lead Person	Start Date	End Date	Notes
a. Network Members identify, screen, and select individuals for MOB <u>new leader</u> training. <i>Partners</i> will provide leader screening tools to support Network Members.	Click or tap here to enter text.	8/1/22	10/31/22	Click or tap here to enter text.
b. New MOB <u>leader</u> training held in counties that require additional program infrastructure, training a total of at least 100 new MOB leaders statewide.	Click or tap here to enter text.	11/1/22	7/31/23	Click or tap here to enter text.
c. Conduct Tai Chi for Arthritis Recertification Training for Instructors who were trained in Year 1	Click or tap here to enter text.	8/1/22	10/31/22	Click or tap here to enter text.
d. Complete Bingocize Recertification training	Click or tap here to enter text.	8/1/22	10/31/22	Click or tap here to enter text.

***Objective 2.1.3:* Throughout the three-year grant period, implement evidence-based falls prevention programs and collect participant enrollment data from implementation sites to monitor program reach in 10 counties.**

Key Tasks	Lead Person	Start Date	End Date	Notes
a. Identify any needs for new/revised program marketing materials (flyers and brochures) for CAPABLE, TJQMBB, EF, Bingocize, and SAIL during monthly TA calls with individual counties	Click or tap here to enter text.	8/1/22	10/31/22	Click or tap here to enter text.
b. Network Members utilize local partnerships to market, refer, and identify appropriate host sites and participants for MOB, Tai Chi, TJQMBB, EF, Bingocize, and SAIL workshops	Click or tap here to enter text.	Ongoing		Click or tap here to enter text.
c. Network Members utilize local partnerships to market to and identify appropriate participants for CAPABLE.	Click or tap here to enter text.	11/1/22	7/31/23	Click or tap here to enter text.
d. Network Members schedule workshops and utilize NCOA-required forms to assure enrollment and retention rates that meet program fidelity standards	Click or tap here to enter text.	Ongoing		Click or tap here to enter text.

***Major Objective 2.2:* Strengthen and sustain outcomes data collection, monitoring and reporting processes, and leader fidelity, implementing enhanced quality assurance processes throughout CoC.**

***Objective 2.2.1:* In Year 1 create, and throughout the 3-year grant period deploy new program-specific fidelity checklists to ensure program implementation as developer designed; Conduct leader fidelity checks throughout the three-year grant.**

Key Tasks	Lead Person	Start Date	End Date	Notes
a. Conduct workshop leader fidelity checks, utilizing the fidelity checklists for documentation, and providing feedback to workshop leaders to enhance program delivery	Click or tap here to enter text.	Ongoing		Click or tap here to enter text.
b. Work with Partners to continue implementing Quality Assurance Program (QAP), to include QA standards, fidelity monitoring, and corrective action guidelines for Network Members to utilize to ensure	Click or tap here to enter text.	8/1/22	7/31/23	Click or tap here to enter text.

<p>fidelity of implementation of the intended falls prevention programs.</p>				
<p><u>Objective 2.2.2:</u> Throughout the three-year grant period, collect program participant and completer data using program-specific data forms to monitor evidence-based falls prevention program reach, outcomes, and retention rate.</p>				
<p>Key Tasks</p>	<p>Lead Person</p>	<p>Start Date</p>	<p>End Date</p>	<p>Notes</p>
<p>a. Network Members collect workshop participant data, review for accuracy, and submit to <i>Partners</i> for entry into the national database</p>	<p>Click or tap here to enter text.</p>	<p>Ongoing</p>		<p>Click or tap here to enter text.</p>
<p><u>Objective 2.2.3:</u> Purposefully excluded. Tasks do not apply to Humboldt County Department of Health and Human Services – Public Health.</p>				

EXHIBIT B

PROJECT DIRECTOR/RESPONSIBLE INDIVIDUALS

Role	Name	Title	Email	Phone Number
Program Director	Dana Murguia	Senior Program Manager	<u>dmurguia@co.humboldt.ca.us</u>	(707) 441-5086
Program Manager	Mellody Mallick	Senior Health Education Specialist	<u>mmallick@co.humboldt.ca.us</u>	(707) 441-5549
Fiscal Director	Jessica Bradbury	Administrative Analyst	<u>Jbradbury2@co.humboldt.ca.us</u>	(707) 441-5433
Program Staff	Alyse Dorman	Health Education Specialist	<u>adorman@co.humboldt.ca.us</u>	(707) 445-6044
Fiscal Staff	Mike Moehnke	Senior Fiscal Assistant	<u>mmoehnke@co.humboldt.ca.us</u>	(707) 441-5548
Fiscal Staff	Mychal Evenson	Administrative Analyst	<u>Mevenson2@co.humboldt.ca.us</u>	(707) 441-5563

EXHIBIT C

TERMS AND CONDITIONS

Subrecipient certifies the following:

1. Subrecipient: (a) is not presently debarred, suspended, proposed for disbarment, declared ineligible, or voluntarily excluded from receipt of HHS grant funds by a federal department or agency; (b) has not, within a three-year period preceding this Agreement, been convicted of or had a civil judgment rendered against them for commission of fraud or a criminal offense in connection with obtaining, attempting to obtain, or performing a public (federal, state, or local) transaction or contract under a public transaction, violation of federal or State antitrust statutes or commission of embezzlement, theft, forgery, bribery, falsification or destruction of records, making false statements, or receiving stolen property; (c) is not presently indicted or otherwise criminally or civilly charged by a governmental entity (federal, State, or local) with commission of any of the offenses enumerated in this Section 1; (d) has not within a three-year period preceding this Agreement had one or more public transactions (federal, State, or local) terminated for cause or default; and (e) is not excluded on the Excluded Parties Listing System maintained by GSA.
2. Subrecipient will give the awarding agency, the Comptroller General of the United States and, if appropriate, the state, through any authorized representative, access to and the right to examine all records, books, papers or documents related to the award, and will establish a proper accounting system in accordance with generally accepted accounting standards or agency directives.
3. Subrecipient will acknowledge federal funding when issuing any statements, press releases, requests for proposals, bid invitations, or other documents describing projects or programs funded in whole or in part with federal funds, including the requisite statements regarding percentage and dollar amounts, as set forth in the HHS Grants Policy Statements.
4. Subrecipient has, or will establish, safeguards to prohibit employees from using their positions for a purpose that constitutes or presents the appearance of personal or organizational conflicts of interest or personal gain, pursuant to the HHS Grants Policy Statements.
5. Subrecipient will complete the work specified in the Work Plan within the applicable time frame.
6. Subrecipient will comply, as applicable, with the requirements of the following federal statutes and regulations, as amended from time to time:
 - (a) all federal statutes relating to nondiscrimination, including without limitation Title VI of the Civil Rights Act of 1964 (P.L. 88-352), Title IX of the Education Amendments of 1972, as amended (20 U.S.C. §§ 1681-1683, and 1685-1686), Section 504 of the Rehabilitation Act of 1973, as amended (29 U.S.C. § 794), the Age Discrimination Act of 1975, as amended (42 U.S.C. §§ 6101-6107);

- (b) Titles II and III of the Uniform Relocation Assistance and Real Property Acquisition Policies Act of 1970 (P.L. 91-646);
- (c) The provisions of the Hatch Act (5 U.S.C. §§ 1501-1508 and 7324-7328);
- (d) Section 106(g) of the Trafficking Victims Protection Act of 2000, as amended (22 U.S.C. § 7104);
- (e) Consolidated and Further Appropriations Act, 2015, Pub. L. 113-235, signed into law on Dec. 16, 2014;
- (f) Pilot Program for Enhancement of Contractor Whistleblower Protections, Section 828 of the National Defense Authorization Act for Fiscal Year 2013 (Pub. L. 112-239, enacted January 2, 2013);
- (g) The Uniting and Strengthening America by Providing Appropriate Tools Required to Intercept and Obstruct Terrorism Act (USA PATRIOT Act), amending 18 U.S.C. § 175-175(c);
- (h) The Public Health Security and Bioterrorism Preparedness and Response Act of 2002, 42 U.S.C. § 201;
- (i) The Bayh-Dole Act and the Technology Transfer Commercialization Act of 2000, and otherwise comply with invention reporting and disclosure rights, as set forth in the HHS Grants Policy Statement.

7. Subrecipient shall not knowingly use appropriated funds provided pursuant to this Agreement: (a) to support activities that promote the legalization of any drug or other substance included in Schedule I of the schedule of controlled substances established by section 202 of the Controlled Substances Act, 21 U.S.C. § 812; (b) for an abortion; (c) to carry out any program of distributing sterile needles or syringes for the hypodermic injection of any illegal drug; or (d) the purchase of any property, except upon prior approval of Partners and in compliance with the terms and conditions of the HHS Grants Policy Statement.

8. Subrecipient agrees to recognize any same-sex marriage legally entered into in a U.S. jurisdiction that recognizes their marriage, including one of the 50 states, the District of Columbia, or a U.S. territory, or in a foreign country so long as that marriage would also be recognized by a U.S. jurisdiction. This applies regardless of whether or not the couple resides in a jurisdiction that recognizes same-sex marriage. However, this does not apply to registered domestic partnerships, civil unions or similar formal relationships recognized under the law of the jurisdiction of celebration as something other than a marriage. Accordingly, Subrecipient has reviewed and revised, as needed, any policies and procedures which interpret or apply federal statutory or regulatory references to such terms as “marriage,” “spouse,” family,” “household member” or similar references to familial relationships to reflect inclusion of same-sex spouse and marriages. Any similar familial terminology references in HHS statutes, regulations, or policy transmittals will be interpreted to include same-sex spouses and marriages legally entered into as described herein.

9. Subrecipient shall comply with the Intellectual Property, Rights in Data, Access to Research Data, Publications, and Patents and Inventions set forth in the HHS Grants Policy Statement, II-68 through II-71, with respects to any results and accomplishments of the Program.

10. Subrecipient is registered in the Central Contract Registry (“**CCR**”), and shall maintain an active CCR registration with current information at all times during which it receives federal funding pursuant to this Agreement, as well as a unique entity identifier.

EXHIBIT D

REIMBURSEMENT OF COSTS

1. **Total Amount of Federal Funds.** The total amount of Federal funds to be paid to Subrecipient for participation in the Program, pursuant to the terms and conditions of this Agreement, is not more than \$3,238.26 in Year 1, \$5,014.08 in Year 2 and \$5,536.38 in Year 3.

2. **Limitation on Costs.** Partners shall reimburse allowable costs for participants who have completed a minimum of five (5) out of eight (8) sessions for A Matter of Balance, a minimum of sixteen (16) sessions for Tai Chi for Arthritis and Bingocize, thirty four (34) out of forty eight (48) sessions for Tai Ji Quan: Moving for Better Balance, a minimum of thirteen (13) sessions for EnhanceFitness and SAIL, and one (1) CAPABLE intervention (“Completers”). Subrecipient, pursuant to the agreed upon budget, which shall be submitted and subject to approval by *Partners*, and the requirements of Exhibit A of this Agreement, shall receive:

\$104.46 per Completer across all three grant years

Partners is not liable for any payment in excess of the amount identified in the budget and as outlined in Sections 1 and 2 of this Exhibit D, or as otherwise mutually agreed to by the parties, and in compliance with the Notice of Award and prior approval of ACL, as required.

3. **Payment.** Subrecipient shall submit invoices for services provided. Subrecipient may choose to submit invoices at the completion of every workshop or monthly, or at minimum, quarterly (refer to Table 1 for quarterly due dates). Invoices shall be provided to Partners within 15 calendar days of the end of the period for which they are billing. Invoices shall be submitted using Partners’ template or Subrecipient’s standard invoice, which include the number of Completers as outlined in Exhibit A, the Work Plan, the period for which services were provided, and certification as to truth and accuracy of the invoice. Subrecipient shall also provide a spreadsheet with the invoice listing the start and end date of each workshop, location and number of participants, number of completers.

Table 1: Quarterly Billing Due Dates				
	Quarter 1 August 1-October 31	Quarter 2 November 1-January 31	Quarter 3 February 1-April 30	Quarter 4 May 1-July 31
	<i>Last Date Billing Accepted by Partners</i>	<i>Last Date Billing Accepted by Partners</i>	<i>Last Date Billing Accepted by Partners</i>	<i>Last Date Billing Accepted by Partners</i>
2020-2021 Grant Year	November 15, 2020	February 15, 2021	May 15, 2021	August 15, 2021
2021-2022 Grant Year	November 15, 2021	February 15, 2022	May 15, 2022	August 15, 2022
2022-2023 Grant Year	November 15, 2022	February 15, 2023	May 15, 2023	August 15, 2023

If Subrecipient is not on target to reach the agreed-upon deliverables outlined in Exhibit A, after sufficient support has been provided to Subrecipient, Partners reserves the right to reallocate funds to other Subrecipients. If Subrecipient exceeds the target outlined in Exhibit A, Partners is not obligated to make additional payments. This is a fixed grant award as outlined in Section 1 above. Invoices and questions concerning invoice receipt or payment should be directed to Partners' Accounts Payable office: accountspayable@picf.org. All payments shall be considered provisional and subject to adjustment within the total estimated cost, in the event such adjustment is necessary as a result of an adverse audit finding. Partners reserves the right to reject an invoice.

4. **Cost Principles.** Subrecipient shall comply with the applicable cost principles regarding allowability of costs and any guidance re cost accounting treatment of costs, as set forth in 2 C.F.R. § 400 et seq. and pursuant to Exhibit 4, Selected Items of Cost, pursuant to the HHS Grants Policy Statement. Without limiting the foregoing, "allowable costs" are those costs expended to carry out a portion of the Program, as further described in the HHS Grants Policy Statement, II-28 et seq.
5. **No Fees/No Indirect Costs.** Subrecipient acknowledges and agrees that this Agreement is for a cost-reimbursable subaward, and Subrecipient is entitled only to those allowable costs expended to carry out a portion of the program. Subrecipient is not entitled to any other fees for participation in the Program. In addition, pursuant to the Notice of Award, Subrecipient is not entitled to reimbursement for any indirect costs, as further described in the HHS Grants Policy Statement, II-26.
6. **Program Income.** Subrecipient shall only use program income, if any, in compliance with 2 C.F.R. § 200.307. "Program income" is defined as gross income directly generated by the grant-supported activity or earned as a result of the Award.
7. **Interest Earned on Advances of Funds.** Subrecipient shall promptly, and at least quarterly, remit to the Payment Management System, operated by the HHS Department of Payment Management, any interest earned on advances of federal funds pursuant to this Agreement that, in the aggregate, exceeds Five Hundred Dollars (\$500) per fiscal year, except as provided in 2 C.F.R. § 200.305.
8. **Reporting and Training Requirements.**
 - (a) Each county shall require staff from their Finance Department and the County Coordinator to participate in required Finance Training provided by Partners in Care Foundation's Finance Department.
 - (b) The Final Grant Report will be due no later than October 30, 2023.**

EXHIBIT E

PARTNERS STAFF CONTACT INFORMATION

Falls Prevention Program (BALNCE) – Circle of Care

Vice President: Dianne Davis

ddavis@picf.org

(818) 837-3775, x116

Senior Director: Christy Lau

clau@picf.org

(818) 837-3775, x159

Program Director: Allison Goforth

agoforth@picf.org

(818) 837-3775, x136

Project Manager: Cassandra Manfre

cmanfre@picf.org

(818)837-3775, x146

Project Manager: Kathryn Keogh

kkeogh@picf.org

(818)837-3775, x117

Contracts

Director of Contracts: Anne Ly

aly@picf.org

(818) 837-3775, x153

Finance

VP of Finance: Alexis Cisneros

acisneros@picf.org

(818) 837-3775, x107

Accounts Payable

accountspayable@picf.org

Information Technology

IT Manager: Irma Shirvanian

ishirvanian@picf.org

(818) 837-3775, x168

Christy Lau, clau@picf.org should be included on ALL e-mail communications with Partners in Care Foundation contacts related to the Falls Prevention Program

**A-133 OMB /Uniform Guidance Certification Questionnaire
Partners in Care Foundation**

INTERNAL USE ONLY

Grant Name: _____

Grant # _____

CFDA#: _____

Reviewed by Partners in Care Staff:

Date Received: _____

PLEASE COMPLETE THE FOLLOWING:

Subrecipient Name: County of Humboldt Department of Health and Human Services

Address: 529 I St
Eureka, CA 95501

Federal Tax ID: 94-6000513

Subrecipient Fiscal Year-end: June 30

Total disbursements made using Federal Funds (received directly from a U.S. government agency or indirectly through a pass-through entity) for the current fiscal year, including sub-awards received from Partners in Care: \$5,377,729

All written communications from the Certified Public Accountant engaged under #1 and #2 below, given to the sub-grantee including those in compliance with or related to Statement of Auditing Standards Number 112 (SAS 112) “*Communicating Internal Control Related Matters in an Audit*” (and communications made under SAS 115) must be provided by the sub-recipient to Partners in Care within 30 days of receipt.

Check either box as applicable:

- #1 - We expect to expend less than \$750,000 from all Federal Financial Assistance sources during the current fiscal year. Therefore we are not subject to the audit requirement of OMB Circular A-133.

- #2 - We expect to expend more than \$750,000 from all Federal Financial Assistance sources during the current fiscal year. Therefore we are subject to the audit requirement of OMB Circular A-133. Accordingly, we have engaged a certified public accounting firm to perform an audit in accordance with OMB Circular A-133 and will submit the audit upon completion to the Federal Audit Clearinghouse within the time prescribed by OMB Circular A-133. **We also understand that it is our responsibility to submit a copy of the audit reports and related attachments under OMB Circular A-133 to Partners in Care.**

By signing below, I certify that I have read the above requirements, that the responses above are true and accurate to the best of my knowledge and belief, and that the required reports will be forwarded to Partners in Care within the deadline above.

Completed By: _____
Signature

Name: _____

Title: _____

Date: _____

EXHIBIT G
Notice of Award

**Department of Health and Human Services
Administration For Community Living**

330 C Street, SW
Washington, DC 20201

NOTICE OF AWARD

AUTHORIZATION (Legislation/Regulations)
Title IV of the Older Americans Act and with funding provided for in the
Patient Protection and Public Health Fund (PPHF)(42 U.S.C. § 300u-11)

1. DATE ISSUED MM/DD/YYYY 05/21/2020		1a. SUPERSEDES AWARD NOTICE dated except that any additions or restrictions previously imposed remain in effect unless specifically rescinded	
2. CFDA NO. 93.761 - Evidence-Based Falls Prevention Programs			
3. ASSISTANCE TYPE Cooperative Agreement			
4. GRANT NO. 90FSPG0034-01-00 Formerly		5. TYPE OF AWARD Demonstration	
4a. FAIN 90FSPG0034		5a. ACTION TYPE New	
6. PROJECT PERIOD	MM/DD/YYYY	Through	MM/DD/YYYY
From	08/01/2020	Through	07/31/2023
7. BUDGET PERIOD	MM/DD/YYYY	Through	MM/DD/YYYY
From	08/01/2020	Through	07/31/2023
8. TITLE OF PROJECT (OR PROGRAM) Building a Long-Term Falls Prevention Network for California's Elders – Circle of Care			

9a. GRANTEE NAME AND ADDRESS Partners In Care Foundation, Inc. 732 Mott St Ste 150 San Fernando, CA 91340-4241	9b. GRANTEE PROJECT DIRECTOR Ms. Dianne Davis 732 MOTT ST STE 150 SAN FERNANDO, CA 91340 Phone: 818) 837-3775
10a. GRANTEE AUTHORIZING OFFICIAL W. June Simmons 732 Mott Street, Suite 150 San Fernando, CA 91340-4212 Phone: 818-837-3775	10b. FEDERAL PROJECT OFFICER Ms. Shannon Skowronski Switzer Building 330 C Street, SW Washington, DC 20201-0003 Phone: 202-795-7438

**ALL AMOUNTS ARE
SHOWN IN USD**

11. APPROVED BUDGET (Excludes Direct Assistance)		12. AWARD COMPUTATION	
I Financial Assistance from the Federal Awarding Agency Only <input type="checkbox"/>		a. Amount of Federal Financial Assistance (from item 11m) 1,185,721.00	
II Total project costs including grant funds and all other financial participation		b. Less Unobligated Balance From Prior Budget Periods 0.00	
a. Salaries and WageS	328,791.00	c. Less Cumulative Prior Award(s) This Budget Period 0.00	
b. Fringe Benefits	92,063.00	d. AMOUNT OF FINANCIAL ASSISTANCE THIS ACTION 1,185,721.00	
c. Total Personnel Costs	420,854.00	13. Total Federal Funds Awarded to Date for Project Period 1,185,721.00	
d. Equipment	0.00	14. RECOMMENDED FUTURE SUPPORT	
e. Supplies	4,800.00	<i>(Subject to the availability of funds and satisfactory progress of the project):</i>	
f. Travel	44,279.00	YEAR	TOTAL DIRECT COSTS
g. Construction	0.00	a. 2	d. 5
h. Other	145,980.00	b. 3	e. 6
i. Contractual	483,790.00	c. 4	f. 7
j. TOTAL DIRECT COSTS	1,099,703.00	15. PROGRAM INCOME SHALL BE USED IN ACCORD WITH ONE OF THE FOLLOWING ALTERNATIVES:	
k. INDIRECT COSTS	107,792.00	a. DEDUCTION	
l. TOTAL APPROVED BUDGET	1,207,495.00	b. ADDITIONAL COSTS	
m. Federal Share	1,185,721.00	c. MATCHING	
n. Non-Federal Share	21,774.00	d. OTHER RESEARCH (Add / Deduct Option)	
		e. OTHER (See REMARKS)	
		16. THIS AWARD IS BASED ON AN APPLICATION SUBMITTED TO, AND AS APPROVED BY, THE FEDERAL AWARING AGENCY ON THE ABOVE TITLED PROJECT AND IS SUBJECT TO THE TERMS AND CONDITIONS INCORPORATED EITHER DIRECTLY OR BY REFERENCE IN THE FOLLOWING:	
		a. The grant program legislation	
		b. The grant program regulations.	
		c. This award notice including terms and conditions, if any, noted below under REMARKS.	
		d. Federal administrative requirements, cost principles and audit requirements applicable to this grant.	
		In the event there are conflicting or otherwise inconsistent policies applicable to the grant, the above order of precedence shall prevail. Acceptance of the grant terms and conditions is acknowledged by the grantee when funds are drawn or otherwise obtained from the grant payment system.	

REMARKS (Other Terms and Conditions Attached - Yes No)
This award is issued as a cooperative agreement, a financial assistance mechanism in which substantial ACL programmatic involvement is anticipated. This award is subject to the awardee and collaborative requirements and responsibilities set forth in the Cooperative Agreement outlined in the program announcement under the funding opportunity HHS-2020-ACL-AOA-FPSG-0367 and are hereby incorporated by reference as special terms and conditions of this award.

GRANTS MANAGEMENT OFFICIAL:
Renee Carruthers, Grants
Management Officer 330 C Street,
SW
Washington, DC 20201-0001
Phone: 202-795-7407

17.OBJ CLASS 41.45	18a. VENDOR CODE 1953954057A1	18b. EIN 953954057	19. DUNS 122037161	20. CONG. DIST. 29
FY-ACCOUNT NO.	DOCUMENT NO.	ADMINISTRATIVE CODE	AMT ACTION FIN ASST	APPROPRIATION
21. a. 0-29969R0	b. 90FPSG003401	c. AOA	d. \$1,185,721.00	e. 75-X-0142
22. a.	b.	c.	d.	e.
23. a.	b.	c.	d.	e.

NOTICE OF AWARD (Continuation Sheet)

PAGE 2 of 4	DATE ISSUED 05/21/2020
GRANT NO.	90FPSG0034-01-00

Standard Administrative Terms

1. Standard Administrative Terms

1. This award is paid by DHHS Payment Management System (PMS). Please go to <https://pms.psc.gov/> for payment and reporting information.
2. Initial expenditure of funds by the grantee constitutes acceptance of this award. Any future support is subject to the availability of funds and programmatic priorities.
3. Matching Requirements - Grantees must provide the match listed in section 11n of the NOA in accordance with the program requirements and what was listed within the application submitted for this award.
4. This award is subject to the requirements of the HHS Grants Policy Statement (HHS GPS) that are applicable to you based on your recipient type and the purpose of this award. This includes requirements in Parts I and II of the HHS GPS (available as a pdf at this link <https://www.hhs.gov/sites/default/files/grants/grants/policies-regulations/hhsgps107.pdf>).
5. This award is subject to the requirements of Section 106 (g) of the Trafficking Victims Protection Act of 2000, as amended (22 U.S.C. 7104). For the full text of the award term, go to <https://acl.gov/grants/managing-grant>
6. Although consistent with the HHS GPS, any applicable statutory or regulatory requirements, including 45 CFR Part 75, directly apply to this award apart from any coverage in the HHS GPS. Also, the general provisions from “**Consolidated Appropriations Act, 2020** (Public Law 116-94), signed into law on December 20, 2019,, apply to this award and can be found on the ACL Website: <https://acl.gov/grants/managing-grant>

Salary Limitation:

The General Provisions in the **Consolidated Appropriations Act, 2020** (Public Law 116-94), signed into law on December 20, 2019, includes provisions for a salary rate limitation. The law limits the salary amount that may be awarded and charged to ACL grants and cooperative agreements. Award funds may not be used to pay the salary of an individual at a rate in excess of Executive Level II. The Executive Level II salary of the Federal Executive Pay scale is \$197,300. This amount reflects an individual’s base salary exclusive of fringe and any income that an individual may be permitted to earn outside of the duties to the applicant organization. This salary limitation also applies to subawards/subcontracts under an ACL grant or cooperative agreement. Note that these or other salary limitations will apply in FY 2020, as required by law.

7. Grantees are hereby given notice that the 48 CFR section 3.908, implementing section 828, entitled “Pilot Program for Enhancement of Contractor Whistleblower Protections,” of the National Defense Authorization Act (NDAA) for Fiscal Year (FY) 2013 (Pub. L. 112-239, enacted January 2, 2013), applies to this award. The effective date is for all grants and contracts issued on or after July 1, 2013, through January 1, 2017.

NOTICE OF AWARD (Continuation Sheet)

PAGE 3 of 4	DATE ISSUED 05/21/2020
GRANT NO.	90FPSG0034-01-00

8. All grantees are expected to recognize any same-sex marriage legally entered into in a U.S. jurisdiction that recognizes their marriage, including one of the 50 states, the District of Columbia, or a U.S. territory, or in a foreign country so long as that marriage would also be recognized by a U.S. jurisdiction. This applies regardless of whether or not the couple resides in a jurisdiction that recognizes same-sex marriage. However, this does not apply to registered domestic partnerships, civil unions or similar formal relationships recognized under the law of the jurisdiction of celebration as something other than a marriage. Accordingly, recipients must review and revise, as needed, any policies and procedures which interpret or apply Federal statutory or regulatory references to such terms as “marriage,” “spouse,” family,” “household member” or similar references to familial relationships to reflect inclusion of same-sex spouse and marriages. Any similar familial terminology references in HHS statutes, regulations, or policy transmittals will be interpreted to include same-sex spouses and marriages legally entered into as described herein.

9. Federal Awardee Performance and Integrity Information System (FAPIS):

If the total value of your currently active grants, cooperative agreements, and procurement contracts from all Federal awarding agencies exceeds \$10,000,000 for any period of time during the period of performance of this Federal award, then you as the recipient during that period of time must maintain the currency of information reported to the System for Award Management (SAM) that is made available in the designated integrity and performance system (currently the Federal Awardee Performance and Integrity Information System (FAPIS)) about civil, criminal, or administrative proceedings described in paragraph 2 of this award term and condition. This is a statutory requirement under section 872 of Public Law 110-417, as amended (41 U.S.C. 2313). As required by section 3010 of Public Law 111-212, all information posted in the designated integrity and performance system on or after April 15, 2011, except past performance reviews required for Federal procurement contracts, will be publicly available.

10. FFATA and FSRS Reporting -The Federal Financial Accountability and Transparency Act (FFATA) requires data entry at the FFATA Subaward Reporting System located at <http://www.FSRS.gov> for all sub-awards and sub-contracts issued for \$25,000 or more as well as addressing executive compensation for both grantee and sub-award organizations. Additional guidance is located at: http://www.acl.gov/Funding_Opportunities/Grantee_Info/FFATA.aspx

11. Grants Management Module - ACL discretionary grantees are required to use the Grants Management Module (GMM) for their end to end grants management services (tracking and receiving various award actions, submitting financial and progress reports, general correspondence, requests etc.). The grantee authorizing official identified in box 10a., and grantee project director identified in box 9b., must ensure they are registered with GMM and have the appropriate role assigned to them by their organization. Please follow the GMM grantee account registration information located at the following URL: <https://www.grantsolutions.gov/support/registration.html>. If you are unable to register or have questions associated with registration, contact your Grants Management Specialist (GMS).

12. Closeout Requirements – A final Federal Financial Report (SF-425), a Property Inventory and Disposition Statement, and a final Project Report are due within ninety (90) days after the expiration of the project period in box 6 of the Notice of Award. Submit all reports as a “note” using an authorized Grants Management Module account.

REPORTING REQUIREMENTS

1. Federal Financial Report (FFR) Updates

PAGE 4 of 4	DATE ISSUED 05/21/2020
GRANT NO.	90FPSG0034-01-00

Effective October 1, 2019, for all new awards issued in FY 2020, grant recipients that receive funding from Administration of Community Living (ACL) will be submitting the FFR in the Payment Management System (PMS) to reduce burden by eliminating the need to report duplicative information across multiple reporting sources and instead allow grant recipients to report/certify expenditure data once through a single entry point. For awards issued prior to FY2020, grant recipients should submit the FFR's based on the previous requirements set forth by the agency.

Financial Reporting - Grantees are required to submit quarterly and annual financial reports (SF 425), which are due 30 days following the reporting period.

1.
 1. Quarterly Reporting - Grantees are required to complete the federal cash transactions portion of the SF-425, lines 10 a through c within the Payment Management System for the calendar quarters ending 3/31, 6/30, 9/30, and 12/31 through the life of the award.
 2. Annual Reporting – This report is cumulative. The first report reflects the initial 12 month period. The report is due 30 days after the conclusion of each 12 month period. For example, awards issued on 9/1, the report period ends on 8/31 the following year and is due on 9/30. For each subsequent report, the end date and due date should be extended by one year. You must reconcile your cash accounts with your expenditures for the reporting period and submit a cumulative report each year. A final report is due 90 days after the expiration date of the project period. The FFR report must be submitted in the Payment Management System (PMS).

All grant awards issued prior to FY 2020 must adhere to their previously established report submission requirements, and use the Federal Financial Report (SF-425) form, located at: <https://acl.gov/grants/managing-grant>. The SF-425 form is downloadable as a PDF or can be copied to Excel. Complete all lines as appropriate.

Program Progress Reporting - Program Progress Reports are due semi-annually (within 30 days following each six month period), effective with the start date of the award. This report must be submitted as a “note” using an authorized GrantSolutions account.

2. Data Collection - Grantees must collect data on their Falls programs and participants using OMB- approved data collection instruments (available here: <https://www.ncoa.org/center-for-healthy-aging/falls-resource-center/falls-prevention-grantees-falls-resource-center/falls-prevention-grantees/>) and enter this data into an approved online data system within 30 days of program completion.

STAFF CONTACTS

1. If you need additional information, please consult the ACL website, <https://acl.gov/grants/managing-grant>. In addition, your assigned Grants Management Specialist and ACL Project Officer are always available to answer questions. For inquiries related to the negotiation of this award or interpreting the fiscal or administrative requirements, policies, or provisions, to the Grants Management Specialist, Kapua Hatch, (202) 795-7361 or Kapua.Hatch@acl.hhs.gov. If you have questions related to the program requirements, or if you require additional technical assistance, please contact the Program Officer listed in section 10b of the Notice of Award.