

COUNTY OF HUMBOLDT

AGENDA ITEM NO.

C19

For the meeting of: October 17, 2017

Date: October 10, 2017

To: Board of Supervisors

From: William Damiano, Chief Probation Officer, *sub ser*

Subject: Request for authority to apply for the Probation Specialized Supervision Program Grant

RECOMMENDATION(S):

That the Board of Supervisors:

1. Authorizes the Chair of the Board to sign the Certificate of Assurance of Compliance (Attachment 1) with the Violence Against Women Act (VAWA); and
2. Authorizes the Chief Probation Officer to sign the application to California Office of Emergency Services (Cal OES) Victim Services Division for the Probation Specialized Supervision Program for fiscal year (FY) 2017-18 application (Attachment 2) and the Certificate of Assurance of Compliance (Attachment 1), and any subsequent grant paperwork, related to the Probation Specialized Supervision Program for the FY 2017-18 grant year; and
3. Directs Clerk of the Board to return the executed Certificate of Assurance of Compliance (Attachment 2) to the Chief Probation Officer

Prepared by Elisha Hardison, Legal Office Business Manager

CAO Approval *[Signature]*

REVIEW:	<i>KPD</i>	County Counsel	<i>WAD</i>	Personnel		Risk Manager		Other	
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TYPE OF ITEM:

Consent

Departmental

Public Hearing

Other

BOARD OF SUPERVISORS, COUNTY OF HUMBOLDT

Upon motion of Supervisor *Wilson* Seconded by Supervisor *Sundberg*

Ayes *Wilson, Sundberg, Bass, Bohn, Fennell*

Nays

Abstain

Absent

PREVIOUS ACTION/REFERRAL:

Board Order No. B-1, C-14, C-10, C-16, C-18

Meeting of: 10/22/13, 1/7/14 & 9/23/14, 9/15/15, 10/4/16

and carried by those members present, the Board hereby approves the recommended action contained in this Board report.

Dated: 10/17/17

By: *[Signature]*
Kathy Hayes, Clerk of the Board

SOURCE OF FUNDING:

The federal Violence Against Women Act (VAWA) Services*Training*Officers*Prosecutors (S*T*O*P) Formula Grant supports the Probation Specialized Supervision Program that is administered in California by the Governor's Office of Emergency Services (Cal OES), Victim Services Division.

DISCUSSION:

On October 22, 2013, the Board of Supervisors approved the Probation Department's request to apply for the federal VAWA S*T*O*P Grant. In California, the grant is administered by the Cal OES, Victim Services Division. At this time, the Probation Department would like to continue its work with the grant. The Probation Department is submitting the fifth such application to Cal OES to continue its work supervising domestic violence offenders on formal probation.

At this time, the Probation Department seeks approval to submit grant paperwork to Cal OES for the continuance of the Probation Specialized Supervision Program. The extension of the grant will allow the Probation Department to continue to provide intensive supervision to domestic violence offenders. With this program, Probation hired a Senior Probation Officer to supervise these offenders. This program also supports offender participation in Court-ordered Batterer's Intervention Programs (BIP) where previously delays in service left offenders untreated for months. Assistance provided through the grant addresses this service gap.

The first Request for Application (RFA) for this grant was competitive. Upon the initial approval, the Probation Department had the option of applying for two additional annual grant periods, on a non-competitive basis as the grant program was a three (3) year funded program. Humboldt County Probation has applied for the grant, and been approved, in both of the non-competitive years. The grant was supposed to become competitive again in FY 2016-17 but due to an unexpected excess of funds, the grant was opened non-competitively for an additional year. Humboldt County Probation once again, applied and was approved. This year, as with last year, the grant was opened non-competitively. The Probation Department is currently requesting authorization to submit an application for the fifth grant year. This grant period runs from October 1, 2017 through September 30, 2018.

The Probation Department requests that the Board of Supervisors authorize the Chief Probation Officer to sign and submit Cal OES' Probation Specialized Supervision Program FY 2017-18 application (Attachment 1) and any subsequent grant paperwork. In addition, staff recommends that the Board of Supervisors authorize the Chair of the Board to sign the Certificate of Assurance of Compliance (Attachment 2) as required for the VAWA.

FINANCIAL IMPACT:

In preparing the Probation Specialized Supervision Program FY 2017-18 application, the Probation Department requested funding from the Governor's Office of Emergency Services (Cal OES), Victim Services Division for \$100,000. The grant includes a required twenty-five percent county match. The Probation Department would be required to provide funding in the amount of \$33,333 as a match for the grant award. The Probation Department will utilize monies from its trust fund, 3782-000-80800, which has a current balance of \$938,971, to subsidize the match amount. Since the grant period runs from October 1, 2017 through September 30, 2018, the impact to the department's budget is demonstrated with the existing budget of 1100-235-52654, with 100 percent of the total \$100,000 being represented.

Further budget impacts related to this grant period will be allocated in the FY 2018-19 budget. With this grant, the Probation Department has been able to support the Board's strategic framework by providing a program that creates opportunities for improved safety and health within the community.

OTHER AGENCY INVOLVEMENT:

Community-Based Organizations – Batterer Intervention Programs

ALTERNATIVES TO STAFF RECOMMENDATIONS:

No alternatives are recommended. However if not approved, the Probation Department will not be able to continue its Specialized Supervision Program. This would result in loss in domestic violence offender services and the discontinuance of the program that addresses this identified need.

ATTACHMENTS:

1. Probation Specialized Supervision Grant Application
2. Certificate of Assurance of Compliance with the Violence Against Women Act (VAWA)

Attachment I



Application Cover Sheet

RFA PROCESS

PROBATION SPECIALIZED SUPERVISION (PU) PROGRAM

Submitted by:
Humboldt County Probation Department
Shaun M. Brenneman, Assistant Chief Probation Officer
2002 Harrison Avenue
Eureka CA, 95501

GRANT SUBAWARD FACE SHEET INSTRUCTIONS

Cal OES Section: The top portion of the form contains blocks for four (4) important numbers.
Please do not fill in these blocks. These numbers will be entered by Cal OES.

1. Subrecipient

The Subrecipient is the unit of government or community based organization (CBO) that will have legal responsibility for these grant funds (e.g. County of Alameda, City of Fresno or Women's Place of Merced). Enter the legal title of the Subrecipient.

1a. Federal DUNS Number (Subrecipient)

Enter the full 9-digit Federal Data Universal Numbering System (DUNS) ID number for the Subrecipient. If the Subrecipient does not yet have a DUNS number assigned, one may be obtained by contacting Dun & Bradstreet at 866-705-5711 or at www.dnb.com. This requirement applies to federally funded grants only. Your DUNS # must be current and active in the System for Award Management (SAM) at the time of your Award.

2. Implementing Agency

Enter the complete name of the agency responsible for the day-to-day operation of the grant (e.g. Sheriff, Police Department, or Department of Public Works). If the Implementing Agency is the same as the Subrecipient, enter the same title again.

2a. Federal DUNS Number (Implementing Agency)

Enter the full 9-digit Federal Data Universal Numbering System (DUNS) ID number for the Implementing Agency. If the Implementing Agency does not yet have a DUNS number assigned, one may be obtained by contacting Dun & Bradstreet at 866-705-5711 or at www.dnb.com. This requirement applies to federally funded grants only. Your DUNS # must be current and active in the System for Award Management (SAM) at the time of your Award.

3. Implementing Agency Address

Enter the address of the Implementing Agency. Provide the complete nine digit zip code (Zip+4).

4. Location of Project

Enter the City and County/Operational Area where the project is located. Provide the complete nine digit zip code (Zip+4).

5. Disaster/Program Title

Enter the name of the Disaster or Program providing the funds for this Grant Subaward. A disaster may be referred by the federal declaration number. Program titles should be complete without the use of acronyms.

6. Performance Period

Enter beginning and ending dates of the performance period for the Grant Subaward. (mm/dd/yy)

7. Indirect Cost Rate

Indicate whether you are using the 10% de minimis rate based on Modified Total Direct Costs (MTDC) or your cognizant agency approved indirect cost rate agreement. A copy of the approved ICR Negotiation Agreement must be enclosed with your application. Indicate N/A if you will not be claiming indirect costs under the award. *Indirect costs may or may not be allowable under all Federal fund sources.*

8A – 12G. Fund Allocations and Total Project Cost

For each fund source used in the program, select the correct grant year and acronym from the drop down lists, the amount of state or federal funds requested, the amount of cash *and/or* in-kind match contributed and the resulting totals. Please do not enter both state and federal on the same line. Block 12G should correspond to the total project cost specified in the budget.

13. Certification Paragraph

Please review the certification paragraph.

14. CA Public Records Act

Please review, and if applicable, provide the necessary documentation.

15. Official Authorized to sign for the Subrecipient

Enter the name, title, telephone number, and e-mail address of the official authorized to enter into the Grant Subaward for the Subrecipient as stated in Block 1 of the Grant Subaward Face Sheet (Cal OES 2-101). Enter the Payment Mailing Address where grant funds should be sent.

16. Federal Employer ID Number

Enter the 9-digit Federal Employer Identification Number for the Agency.

Provide an original signature of the authorized official. The use of white out or tape is prohibited and will invalidate the signature on the Grant Subaward Face Sheet.

(Cal OES Use Only)

Cal OES#	FIPS#	VS #	Subaward #
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CALIFORNIA GOVERNOR'S OFFICE OF EMERGENCY SERVICES GRANT SUBAWARD FACE SHEET

The California Governor's Office of Emergency Services (Cal OES), makes a Grant Subaward of funds set forth to the following:

1. **Subrecipient:** COUNTY OF HUMBOLDT **1a. DUNS#:** 034150203
2. **Implementing Agency:** HUMBOLDT COUNTY PROBATION DEPARTMENT **2a. DUNS#:** 785383985
3. **Implementing Agency Address:** 2002 HARRISON AVENUE EUREKA 95501+3212
Street City Zip+4
4. **Location of Project:** EUREKA HUMBOLDT 95501+3212
City County Zip+4
5. **Disaster/Program Title:** PROBATION SPECIALIZED UNIT PROGRAM **6. Performance Period:** 10/01/2017 to 9/30/2018
7. **Indirect Cost Rate:** N/A; 10% de minimis; Federally Approved ICR _____ %

Grant Year	Fund Source	A. State	B. Federal	C. Total	D. Cash Match	E. In-Kind Match	F. Total Match	G. Total Project Cost
2017	8. VAWA		\$ 100,000		\$ 33,333		\$ 33,333	\$ 133,333
Select	9. Select						\$ 0	\$ 0
Select	10. Select						\$ 0	\$ 0
Select	11. Select						\$ 0	\$ 0
Select	12. Select						\$ 0	\$ 0
	TOTALS	\$ 0	\$ 100,000	\$ 100,000	\$ 33,333	\$ 0	\$ 33,333	12. G Total Project Cost: \$ 133,333

13. **Certification** - This Grant Subaward consists of this title page, the application for the grant, which is attached and made a part hereof, and the Assurances/Certifications. I hereby certify I am vested with the authority to enter into this Grant Subaward, and have the approval of the City/County Financial Officer, City Manager, County Administrator, Governing Board Chair, or other Approving Body. The Subrecipient certifies that all funds received pursuant to this agreement will be spent exclusively on the purposes specified in the Grant Subaward. The Subrecipient accepts this Grant Subaward and agrees to administer the grant project in accordance with the Grant Subaward as well as all applicable state and federal laws, audit requirements, federal program guidelines, and Cal OES policy and program guidance. The Subrecipient further agrees that the allocation of funds may be contingent on the enactment of the State Budget.

14. **CA Public Records Act** - Grant applications are subject to the California Public Records Act, Government Code section 6250 et seq. Do not put any personally identifiable information or private information on this application. If you believe that any of the information you are putting on this application is exempt from the Public Records Act, please attach a statement that indicates what portions of the application and the basis for the exemption. Your statement that the information is not subject to the Public Records Act will not guarantee that the information will not be disclosed.

15. **Official Authorized to Sign for Subrecipient:** WILLIAM DAMIANO **16. Federal Employer ID Number:** 946000513
- Name: WILLIAM DAMIANO Title: CHIEF PROBATION OFFICER
- Telephone: 7072683308 (area code) FAX: 7074437139 (area code) Email: bdamiano@co.humboldt.ca.us
- Payment Mailing Address: 2002 HARRISON AVENUE City: EUREKA Zip+4: 95501+3212
- Signature: _____ Date: _____

[FOR Cal OES USE ONLY]

I hereby certify upon my own personal knowledge that budgeted funds are available for the period and purposes of this expenditure stated above.

Cal OES Fiscal Officer	Date	Cal OES Director (or designee)	Date
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PROJECT CONTACT INSTRUCTIONS

1. Provide the name, title, address, telephone number, fax number and e-mail address for the **Project Director** for the project.
2. Provide the name, title, address, telephone number, fax number and e-mail address for the **Financial Officer** for the project.
3. Provide the name, title, address, telephone number, fax number and e-mail address for the **person** having **routine programmatic responsibility** for the project.
4. Provide the name, title, address, telephone number, fax number and e-mail address for the **person** having **routine fiscal responsibility** for the project.
5. Provide the name, title, address, telephone number, fax number and e-mail address for the **Executive Director** of a Community-Based Organization or the **Chief Executive Officer** (e.g. chief of police, superintendent of schools) for the implementing agency.
6. Provide the name, title, address, telephone number, fax number and e-mail address for the **person** who is the **Official Authorized** to enter into the Grant Subaward for the City/County or Community-Based Organization, as stated in Section 14 of the Grant Subaward Face Sheet (Cal OES 2-101).
7. Provide the name, title, address, telephone number, fax number and e-mail address for the **Chair** of the **governing body** of the subrecipient.

PROJECT CONTACT INFORMATION

Subrecipient: COUNTY OF HUMBOLDT

Subaward #: PU 17 05 0120

Provide the name, title, address, telephone number, and e-mail address for the project contacts named below. **NOTE: If you use a PO Box address, a street address is also required for package delivery and site visit purposes.**

1. The **Project Director** for the project:

Name: SHAUN BRENNEMAN Title: ASSISTANT CHIEF PROBATION OFFICER
Telephone #: 7074440644 Fax#: 7074437139 Email Address: sbrenneman@co.humboldt.ca.us
Address/City/Zip: 2002 HARRISON AVENUE, EUREKA CA 95501

2. The **Financial Officer** for the project:

Name: ELLISHA HARDISON Title: LEGAL OFFICE BUSINESS MANAGER
Telephone #: 7072683304 Fax#: 7074437139 Email Address: ehardison@co.humboldt.ca.us
Address/City/Zip: 2022 HARRISON AVENUE, EUREKA CA 95501

3. The **person** having **Routine Programmatic** responsibility for the project:

Name: SHAUN BRENNEMAN Title: ASSISTANT CHIEF PROBATION OFFICER
Telephone #: 7074440644 Fax#: 7074437139 Email Address: sbrenneman@co.humboldt.ca.us
Address/City/Zip: 2002 HARRISON AVENUE, EUREKA CA 95501

4. The **person** having **Routine Fiscal Responsibility** for the project:

Name: ELLISHA HARDISON Title: LEGAL OFFICE BUSINESS MANAGER
Telephone #: 7072683304 Fax#: 7074437139 Email Address: sbrenneman@co.humboldt.ca.us
Address/City/Zip: 2002 HARRISON AVENUE, EUREKA CA 95501

5. The **Executive Director** of a Community Based Organization or the **Chief Executive Officer** (i.e., chief of police, superintendent of schools) of the implementing agency:

Name: WILLIAM DAMIANO Title: CHIEF PROBATION OFFICER
Telephone #: 7072683308 Fax#: 7074437139 Email Address: bdamiano@co.humboldt.ca.us
Address/City/Zip: 2002 HARRISON AVENUE, EUREKA CA 95501

6. The **Official Designated** by the Governing Board to enter into the Grant Subaward for the City/County or Community-Based Organization, as stated in Section 14 of the Grant Subaward Face Sheet:

Name: WILLIAM DAMIANO Title: CHIEF PROBATION OFFICER
Telephone #: 7072683308 Fax#: 7074437139 Email Address: bdamiano@co.humboldt.ca.us
Address/City/Zip: 2002 HARRISON AVENUE, EUREKA CA 95501

7. The **chair** of the **Governing Body** of the subrecipient:

Name: VIRGINIA BASS Title: HUMBOLDT COUNTY SUPERVISOR
Telephone #: 7074762394 Fax#: _____ Email Address: vbass@co.humboldt.ca.us
Address/City/Zip: 825 5th STREET, ROOM 111, EUREKA , CA 95501

SIGNATURE AUTHORIZATION INSTRUCTIONS

The Project Director and Financial Officer are **REQUIRED** to sign this form and submit it with the Grant Subaward Forms package. The Subrecipient may request signature authority in addition to the designated Project Director and/or Financial Officer. Space is provided for the addition of up to five (5) additional authorizations for the Project Director or Financial Officer.

No single individual may be authorized to sign for both the Project Director and the Financial Officer. **The Project Director and/or Financial Officer authorize the person(s) identified on the form to sign on their behalf on all grant-related matters.**

SIGNATURE AUTHORIZATION

Subaward #: PU 17 05 0120

Subrecipient: COUNTY OF HUMBOLDT

Implementing Agency: HUMBOLDT COUNTY PROBATION DEPARTMENT

***The Project Director and Financial Officer are *REQUIRED* to sign this form.**

***Project Director:** SHAUN BRENNEMAN

Signature: _____

Date: _____

***Financial Officer:** ELLISHA HARDISON

Signature: _____

Date: _____

The following persons are authorized to sign for the
Project Director

Signature

WILLIAM DAMIANO

Print Name

Signature

JODY GREEN

Print Name

Signature

Print Name

Signature

Print Name

Signature

Print Name

The following persons are authorized to sign for the
Financial Officer

Signature

MITZI WHITLEY

Print Name

Signature

TIM TOSTE

Print Name

Signature

Print Name

Signature

Print Name

Signature

Print Name

Project Narrative

PROBLEM STATEMENT:

The PSSP program has been fully operational throughout the grant period. As of the writing of this grant application 91 of the 1038 formal probationers currently under supervision by the Probation Department are offenders convicted for domestic violence. The program allows the Department to supervise just under 50% of the target population.

PLAN:

OBJECTIVE:	ACTIVITIES:
<p>1. Provide intensive probation services to 40 probationers</p>	<p>1.1 Probationers will be assigned to PSSP officer based on PSSP criteria. Responsibility: Adult Field Supervisor Completion: Ongoing through 10/1/2017 to 9/30/2018</p> <p>1.2 PSSP Officer will provide supervision to probationers in the program that will include:</p> <ul style="list-style-type: none"> • Weekly contact with probationers split between office and field contacts. • Contacts with probationers will utilize the CBT based model EPICS designed by the University of Cincinnati. • Testing for drug and alcohol use will be utilized where indicated. • Contact with the victims of the probationers. This will occur on the onset of the probationers entry into the program and monthly thereafter. The PSSP Officer will refer and link victims to services where needed. • Probationers will be referred to a certified Batterer's Intervention Program (BIP). If the PSSP Officer identifies a barrier due to cost of the BIP, the probationer's participation will be subsidized by the PSSP. • PSSP officer will coordinate with BIP to ensure participation in programs. <p>Responsibility: PSSP officer Completion: Ongoing through 10/1/2017 to 9/30/2018</p>

OBJECTIVE:	ACTIVITIES:
<p>2. Complete weekly contacts with probationers at a minimum of one per week via telephone, office contact, and/or field contact</p>	<p>2.1 PSSP officer will make 2 office contacts and 2 field contacts with each probationer assigned to the program.</p> <ul style="list-style-type: none"> • Contacts and reasonable efforts to make contacts will be documented in the case management system. <p>Responsibility: PSSP Officer Completion: Ongoing through 10/1/2017 to 9/30/2018</p> <p>2.2 Monthly Case Review to ensure PSSP offenders are being met per PSSP guidelines.</p> <p>Responsibility: Adult Field Supervisor Completion: Monthly through 9/30/2018</p>
OBJECTIVE:	ACTIVITIES:
<p>3. Ensure Caseload does not exceed 40 probationers with no more than 20% inactive</p>	<p>3.1 Adult Field Supervisor will maintain a hard cap of 40 probationers on the PSSP caseload. This will be monitored through the case management system.</p> <p>Responsibility: Adult Field Supervisor Completion: Ongoing through 9/30/2018</p> <p>3.2 Monthly Caseload review to ensure PSSP probationers are receiving intensive services and jailed/absconded probationers are removed from the program.</p> <p>Responsibility: Adult Field Supervisor Completion: Monthly through 9/30/2018</p>

OBJECTIVE:	ACTIVITIES:
<p>4. Report Average numbers of probationers on each caseload.</p>	<p>4.1 Records regarding entry and termination from the program will be kept in the Case Management System and updated in a timely manner. Responsibility: Adult Field Supervisor Completion: Ongoing through 9/30/2018</p> <p>4.2 Average Number of Probationers on each caseload will be calculated utilizing a SQL report and reported to Cal OES in progress reports Responsibility: Program Director Completion: Quarterly through 9/30/2018</p>
OBJECTIVE:	ACTIVITIES:
<p>5. Report how many probationers reoffend by category:</p> <ul style="list-style-type: none"> • Domestic Violence • Sexual Assault • Dating Violence • Stalking 	<p>5.1 PSSP officer will record any conviction information into the Recidivism portion of the case management system. Responsibility: PSSP officer Completion: Ongoing through 9/30/2018</p> <p>5.2 Recidivism counts will be tabulated utilizing a SQL report based on information entered into case management system. The result will be reported to Cal OES in progress reports Responsibility: Program Director Completion: Quarterly through 9/30/2018</p>

OBJECTIVE:	ACTIVITIES:
<p>6. Report Number of project-specific probationers that were searched using the Automated Firearms System(AFS)</p>	<p>6.1 All probationers will be searched in the AFS system as a necessary step in assigned the probationer to the PSSP caseload. Results of the AFS search will be forwarded to the PSSP officer. Responsibility: Adult Clerical Support Completion: Ongoing through 9/30/2018</p> <p>6.2 Average Number of Probationers on each caseload will be calculated utilizing a SQL report and reported to Cal OES in progress reports Responsibility: Program Director Completion: Quarterly through 9/30/2018</p>
OBJECTIVE:	ACTIVITIES:
<p>7. Report how many probationers were found in possession of firearms and , if applicable, detail the removal of a firearm from a probationer's possession</p>	<p>7.1 PSSP officer will record any firearms seized during program implementation in an excel spreadsheet. Support documentation will be maintained in case management system. Responsibility: PSSP officer Completion: Ongoing through 9/30/2018</p> <p>7.2 Counts of firearms removed will be reported to Cal OES in progress reports Responsibility: Program Director Completion: Quarterly through 9/30/2018</p>

OBJECTIVE:	ACTIVITIES:
<p>8. Report the number of educational materials distributed to which recipients.</p>	<p>8.1 Every probationer assigned to the PSSP program will or will have already receive an advisement of their prohibition to own/possess a firearm. Responsibility: PSSP officer Completion: Ongoing through 9/30/2018</p> <p>8.2 Outside recipients will be maintained in an excel spreadsheet. Responsibility: Program Director Completion: Ongoing through 9/30/2018</p> <p>8.3 Number will be tabulated through case management records and spreadsheet data. Counts will be provided to CAL OES in progress reports. Responsibility: Program Director Completion: Ongoing through 9/30/2018</p>
OBJECTIVE:	ACTIVITIES:
<p>9. Send one or more officers assigned to the project determined by Cal OES.</p>	<p>9.1 Training Manager will coordinate, PSSP officer's travel, lodging and enrollment in Cal OES identified training. Responsibility: Training Manager Completion: Contingent upon training schedule.</p> <p>9.2 PSSP officer will attend training as assigned. Responsibility: PSSP Officer Completion: Contingent upon training schedule.</p>

BUDGET CATEGORY AND LINE ITEM DETAIL

Subrecipient: County of Humboldt - Probation Department		Subaward #: PU 17 05 0120	
B. Operating Expenses	Cash Match	VAWA Funds	COST
Contract Services - BIP Subsidy			
Clients x Sessions x Rate			
HFSC - 15 clients for 3 months	\$518	\$5,332	\$5,850
15 x 1 x \$65 = \$975			
15 x 13 x \$25 = \$4,875			
MEND/WEND - 35 clients for 4 months	\$17,885	\$0	\$17,885
35 x 1 x \$60 = \$2,100			
35 x 2 x \$50 = \$3,500			
35 x 13 x \$27 = \$12,285			
Client Travel (to and from BIP)	\$2,618	\$0	\$2,618
Bus Tickets \$1.70 one-way x 2 x 770 (total BIP sessions)			
In-County Travel	\$2,520	\$0	\$2,520
700/mi per month x 12 months @ \$.30 per mile			
Training	\$696	\$0	\$696
California Probation Officers Specialized Training by CPOC			
1 staff to attend training in Sacramento			
Hotel - \$95/night x 2 nights + room tax = \$213			
Mileage - 630 miles round trip @ \$.54 mile = \$340			
Per Diem - 3 days x \$46/day = \$138			
Parking - \$5.00			
Indirect Cost	\$9,096	\$0	\$9,096
10% de Minimis			
10% of Salary & Benefit Cost (\$90,961 x 10%)			
Operating Section Totals	\$33,333	\$5,332	\$38,665
OPERATING SECTION TOTAL			\$38,665

BUDGET CATEGORY AND LINE ITEM DETAIL

Subrecipient: County of Humboldt - Probation Department		Subaward #: PU 17 05 0120	
C. Equipment	Cash Match	VAWA Funds	COST
N/A			\$0
			\$0
			\$0
			\$0
			\$0
			\$0
			\$0
			\$0
			\$0
			\$0
			\$0
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			\$0
			\$0
			\$0
			\$0
			\$0
			\$0
			\$0
	Equipment Section Totals	\$0	\$0
EQUIPMENT SECTION TOTAL			\$0
Category Totals			
<i>Same as Section 12G on the Grant Subaward Face Sheet</i>	\$33,333	\$100,000	
Total Project Cost			\$133,333

PROJECT SERVICE AREA INFORMATION

1. **COUNTY OR COUNTIES SERVED:** Enter the name(s) of the county or counties served by the project. Put an asterisk where the project's principal office is located.

HUMBOLDT COUNTY

2. **U.S. CONGRESSIONAL DISTRICT(S):** Enter the number(s) of the U.S. Congressional District(s) which the project serves. Put an asterisk for the district where the project's principal office is located.

CALIFORNIA - 2ND DISTRICT

3. **STATE ASSEMBLY DISTRICT(S):** Enter the number(s) of the State Assembly District(s) which the project serves. Put an asterisk for the district where the project's principal office is located.

CALIFORNIA - 2ND ASSEMBLY DISTRICT

4. **STATE SENATE DISTRICT(S):** Enter the number(s) of the State Senate District(s) that the project serves. Put an asterisk for the district where the project's principal office is located.

CALIFORNIA - 2ND SENATE DISTRICT

5. **POPULATION OF SERVICE AREA:** Enter the total population of the area served by the project.

134,623

**CALIFORNIA GOVERNOR'S OFFICE OF EMERGENCY SERVICES
SUBRECIPIENT GRANTS MANAGEMENT ASSESSMENT**

Subrecipient: Humboldt County Probation	DUNS #: 785383985	FIPS #: 06023
Grant Disaster/Program Title: Probation Specialized Units Program (PU)		
Performance Period: 10/1/2017 to 9/30/2018	Subaward Amount Requested: \$ 133,333	
Type of Non-Federal Entity (Check Box)	<input type="checkbox"/> State Gov. <input checked="" type="checkbox"/> Local Gov. <input type="checkbox"/> JPA <input type="checkbox"/> Non-Profit <input type="checkbox"/> Tribe	

Per Title 2 CFR § 200.331, Cal OES is required to evaluate the risk of noncompliance with federal statutes, regulations and grant terms and conditions posed by each subrecipient of pass-through funding. This assessment is made in order to determine and provide an appropriate level of technical assistance, training, and grant oversight to subrecipients for the award referenced above.

The following are questions related to your organization's experience in the management of grant awards. This questionnaire must be completed and returned with your grant application materials.

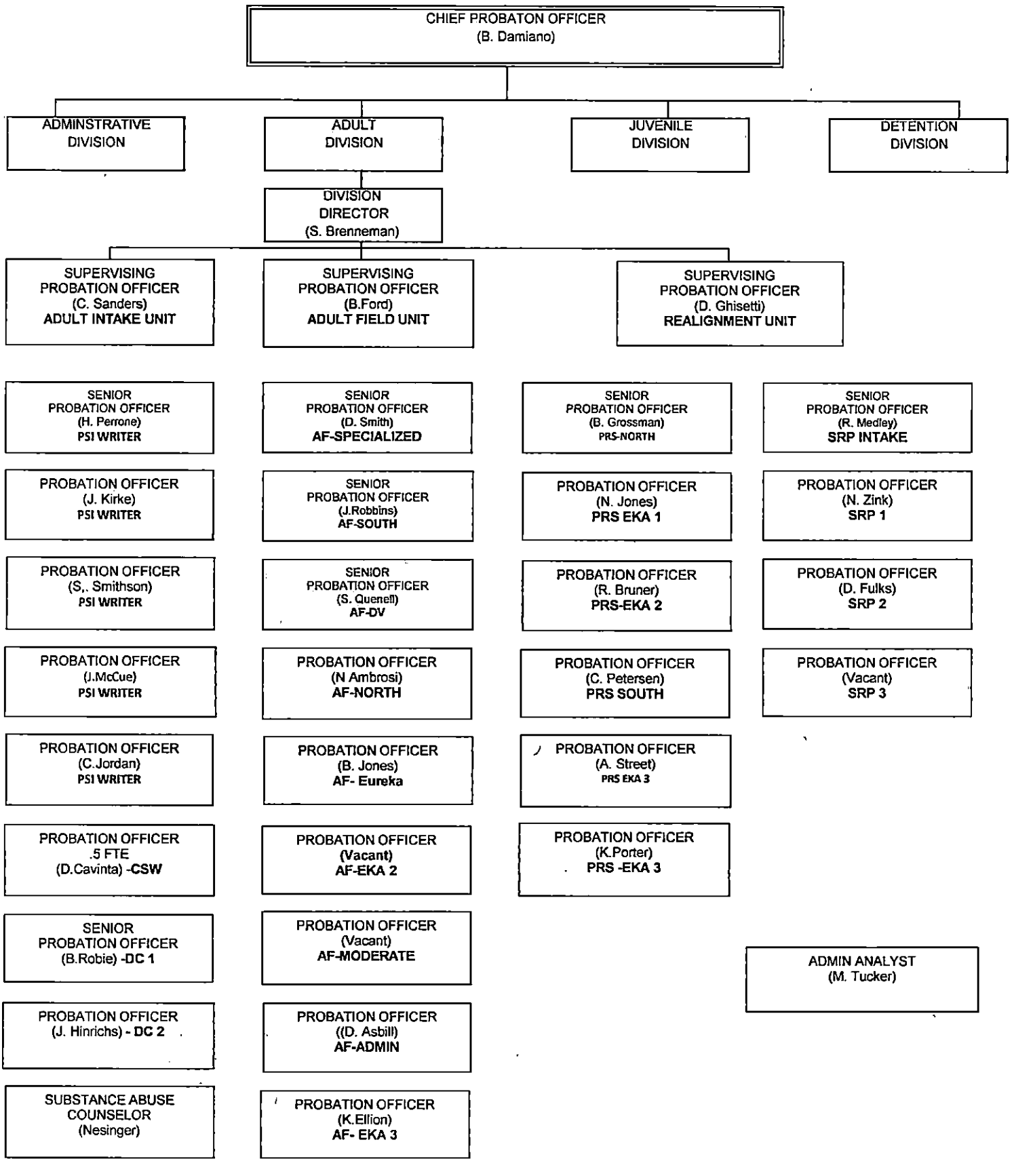
For purposes of completing this questionnaire, *grant manager* is the individual who has primary responsibility for day-to-day administration of the grant, *bookkeeper/accounting staff* means the individual who has responsibility for reviewing and determining expenditures to be charged to the grant award, and *organization* refers to the subrecipient applying for the award, or the governmental implementing agency, as applicable.

Assessment Factors	Response
1. How many years of experience does your current grant manager have managing grants?	3-5 years
2. How many years of experience does your current bookkeeper/accounting staff have managing grants?	<3 years
3. How many grants does your organization currently receive?	1-3 grants
4. What is the approximate total dollar amount of all grants your organization receive?	\$ 100,000
5. Are individual staff members assigned to work on multiple grants?	No
6. Do you use timesheets to track the time staff spend working on specific activities/projects?	No
7. How often does your organization have a financial audit?	Periodically
8. Has your organization received any audit findings in the last three years?	No
9. Do you have a written plan on how you charge costs to grants?	No
10. Do you have written procurement policies?	Yes
11. Do you get multiple quotes or bids when buying items or services?	Sometimes
12. How many years do you maintain receipts, deposits, cancelled checks, invoices, etc.?	>5 years
13. Do you have procedures to monitor grant funds passed through to other entities?	Yes

Certification: *This is to certify that, to the best of our knowledge and belief, the data furnished above is accurate, complete and current.*

Signature: (Authorized Agent)	Date:
Print Name: William Damiano	Print Title: Chief Probation Officer

HUMBOLDT COUNTY PROBATION DEPARTMENT



PROJECT SUMMARY INSTRUCTIONS

All of the necessary project information must be placed on the form in the space allowed. **Additional pages may not be added.** This is a summary of the project narrative:

1. **SUBAWARD NUMBER:**
Enter the Subaward # as it appears on the approved Grant Subaward Face Sheet.
2. **PROGRAM TITLE:**
Enter the program, title as it appears on the approved Grant Subaward Face Sheet
3. **PERFORMANCE PERIOD:**
Enter beginning and ending dates of the performance period for the Grant Subaward.
4. **SUBRECIPIENT:**
Enter the Subrecipient name as it appears on the approved Grant Subaward Face Sheet.
5. **GRANT AMOUNT:**
Enter the amount of grant funds requested. This must be the same amount used on the budget pages and block 12G on the Grant Award Face Sheet.
6. **IMPLEMENTING AGENCY:**
Enter the implementing agency as it appears on the approved Grant Subaward Face Sheet.
7. **PROGRAM DESCRIPTION:**
Provide a description of the specific area of service Cal OES is authorized to fund based upon state or federal legislation.
8. **PROBLEM STATEMENT:**
Describe the problem the project will address. Support the problem with data such as number of offenses, description of the target area, and local needs.
9. **OBJECTIVES:**
Include the quantifiable measurements which define a course of action in order to accomplish the program goals.
10. **ACTIVITIES:**
Describe activities you will perform to accomplish each objective (quantify where possible).
11. **EVALUATION:**
Describe how project performance will be measured, if applicable. Note who will conduct the evaluation, (e.g., project staff, government personnel, or outside consultants).
12. **NUMBER OF CLIENTS TO BE SERVED:**
Enter the number of clients, if applicable.
13. **PROJECT BUDGET:**
Amounts in each category must be the same as the Budget Pages amounts. The total must be the same as the total in box 12G on the Grant Award Face Sheet.

PROJECT SUMMARY

1. Subaward #: PU 17 05 0120		3. PERFORMANCE PERIOD	
2. PROJECT TITLE PROBATION SPECIALIZED UNIT PROGRAM		10/1/2017 to 9/30/2018	
4. SUBRECIPIENT		5. GRANT AMOUNT (this is the same amount as 12G of the Grant Subaward Face Sheet)	
Name:	COUNTY OF HUMBOLDT	Phone:	7074457266
Address:	825 5TH STREET	Fax #:	7074457299
City:	EUREKA	Zip:	95501
6. IMPLEMENTING AGENCY			
Name:	HUMBOLDT COUNTY PROBATION	Phone:	7074457401
Address:	2002 HARRISON AVENUE	Fax #:	7074437139
		City:	EUREKA
		Zip:	95501
7. PROGRAM DESCRIPTION			
<p>The Probation Department utilizes the grant monies to maintain a specialized caseload of offenders on formal probation for a conviction of domestic violence, sexual assault, dating violence, and/or stalking. The grant provides for 1.0 FTE Senior Probation Officer. The caseload itself is capped at 40 offenders at any given time. Grant monies are also used to subsidize offender participation in certified batterers intervention programs.</p>			
8. PROBLEM STATEMENT			
<p>The program addresses two fundamental problems in Humboldt County. First, due to scarcity of supervision resources, many DV offenders were placed on bank or low contact caseloads. The grant monies will allow the Probation Department to move these offenders back under intensive supervision.</p> <p>Second, there is a high level of poverty in Humboldt County. Many of the offenders on probation do not have money to participate in treatment. Grant monies will allow offenders to access BIP treatment.</p>			
9. OBJECTIVES			
<ol style="list-style-type: none">1. Administer an intensive supervision caseload for DV offenders. The caseload will have a cap of 40 individuals at any given time. Contacts standards will be set at weekly face to face contacts with 50% of contacts to be completed in the field.2. The PSSP officer will contact the victim(s) of the offenders on a monthly basis (when their location is known) and provide them linkage to services as needed.3. Offenders on the program will be run through the Automated Firearm System (AFS) and any registered firearms will be removed from their possession.4. Offenders will be referred to BIP treatment and if unable to pay, will be subsidized to facilitate immediate entry.			

10. ACTIVITIES

1. Employ 1.0 FTE Senior Probation Officer
2. Senior Probation Officer will make reasonable efforts to see every offender on the caseload on a weekly basis with 50% of those contacts being in the field.
3. The Senior Probation Officer will contact victims of the the offenders assigned to the caseload where possible and refer them to community based services.
4. Supervising Probation Officer overseeing PSSP will conduct monthly case load reviews to ensure contact standards are met, and the population cap is followed.
5. The Probation Department support staff will check every offender assigned to the PSSP program through the Automated Firearm system and provide said information to the Senior Probation Officer.

11. EVALUATION (if applicable)

Offender contacts, victim contacts, recidivism, searches, and arrests will be tracked in the Department's case management system. Said information will be provided to CAL OES utilizing SQL queries.

12. NUMBER OF CLIENTS

(if applicable)

50

13. PROJECT BUDGET

(these are the same amounts as on Budget Pages)

	Personal Services	Operating Expenses	Equipment	TOTAL
Senior PO Salary	\$60,961			\$60,961
Senior PO Fringe Benefits	\$33,707			\$33,707
Batterer Intervention Program Subsidy and Client Travel Subsidy (for BIP)		\$26,353		\$26,353
Senior PO Out of County Travel		\$2,520		\$2,520
Senior PO In County Travel		\$696		\$696
Administrative Overhead (10% deM)		\$9,096		\$9,096
Totals:	\$94,668	\$38,665	\$0	\$133,333

**NONCOMPETITIVE BID REQUEST
CHECKLIST**

Has the Applicant/Subrecipient met the following requirements of the *Subrecipient Handbook*:

	Check appropriate box: Yes	No
<u>Section 3511</u>		
Do conditions exist that require a sole/single-source contract?	<input checked="" type="radio"/>	<input type="radio"/>
<u>Section 3521.1</u>		
Is a brief description of the program or project included?	<input checked="" type="radio"/>	<input type="radio"/>
<u>Section 3521.2</u>		
Was it necessary to contract noncompetitively?	<input checked="" type="radio"/>	<input type="radio"/>
Did the contractor submit his/her qualifications?	<input checked="" type="radio"/>	<input type="radio"/>
Is the reasonableness of the cost justified?	<input checked="" type="radio"/>	<input type="radio"/>
Were cost comparisons made with differences noted for similar services?	<input checked="" type="radio"/>	<input type="radio"/>
Is a justification provided regarding the need for contract?	<input checked="" type="radio"/>	<input type="radio"/>
<u>Section 3521.3</u>		
Is an explanation provided for the uniqueness of the contract?	<input checked="" type="radio"/>	<input type="radio"/>
<u>Section 3521.4</u>		
Are there time constraints impacting the project?	<input checked="" type="radio"/>	<input type="radio"/>
Were comparisons made to identify the time required for another contractor to reach the same level of competence?	<input checked="" type="radio"/>	<input type="radio"/>

OTHER FUNDING SOURCES

Complete this form to report the total funds available to support the activities related to accomplishing the goals and objectives of the Grant Subaward. In the "Grant Funds" column, report the Cal OES funds requested by category. In the "Other Funds" column, report all other funds available to support the project by category and then calculate the totals by category in the "Program Total" column. Total each column to arrive at the total program funds available.

OTHER FUNDING SOURCES			
			(Enter numbers without \$ or decimal points.)
BUDGET CATEGORY	GRANT FUNDS <i>(Use only the grant funds identified in the preceding budget pages.)</i>	OTHER FUNDS	PROGRAM TOTAL
Personal Services	94,668	0	\$94,668
Operating Expenses	5,332	33,333	\$38,665
Equipment	0		\$0
TOTAL	\$100,000	\$33,333	\$133,333

PRIOR, CURRENT AND PROPOSED Cal OES FUNDING

List all currently funded Cal OES projects and all Cal OES grants subawarded to the applicant during the last five fiscal years. Include the fiscal year of operation, the grant number and the amount of Cal OES funding. For current and proposed grants that include positions funded by more than one Cal OES grant, list these personnel by title and the percentage of the position funded by Cal OES. The percentage of funding must not exceed 100 percent for any one individual.

Example				
FISCAL YEAR	GRANT NUMBER	GRANT AMOUNT	PERSONNEL BY TITLE	PERCENTAGE PAID BY Cal OES
2014-15	DV14120010	\$50,000	Project Director	25%
2014-15	RC14210010	\$67,000	Project Director	25%
2014-15	AT14100010	\$68,000	Project Director	50%

PRIOR, CURRENT AND PROPOSED Cal OES FUNDING				
FISCAL YEAR	GRANT NUMBER	GRANT AMOUNT	PERSONNEL BY TITLE	% of Cal OES FUNDING
2012/13	N/A	N/A	N/A	N/A
2013/14	PU 13 01 0120	89,272	Sr. Probation Officer	100%
2014/15	PU 14 02 0120	89,272	Sr. Probation Officer	99%
2015/16	PU 15 03 0120	100,000	Sr. Probation Officer	100%
2016/17	PU 16 04 0120	\$100,000	Sr. Probation Officer	99%

PROJECT SERVICE AREA INFORMATION

1. COUNTY OR COUNTIES SERVED: Enter the name(s) of the county or counties served by the project. Put an asterisk where the project's principal office is located.

HUMBOLDT COUNTY

2. U.S. CONGRESSIONAL DISTRICT(S): Enter the number(s) of the U.S. Congressional District(s) which the project serves. Put an asterisk for the district where the project's principal office is located.

CALIFORNIA - 2ND DISTRICT

3. STATE ASSEMBLY DISTRICT(S): Enter the number(s) of the State Assembly District(s) which the project serves. Put an asterisk for the district where the project's principal office is located.

CALIFORNIA - 2ND ASSEMBLY DISTRICT

4. STATE SENATE DISTRICT(S): Enter the number(s) of the State Senate District(s) that the project serves. Put an asterisk for the district where the project's principal office is located.

CALIFORNIA - 2ND SENATE DISTRICT

5. POPULATION OF SERVICE AREA: Enter the total population of the area served by the project.

134,623



**Human Resources/Risk Management
County of Humboldt
825 5th Street, Room 100
Eureka, CA 95501
(707) 476-2349**

REFERENCE: State of California Department of Fair Employment and Housing	PAGE 1 OF 5
BOARD APPROVED: June 7, 2016	POLICY: Equal Employment Opportunity

PURPOSE

The purpose of this policy is to express Humboldt County's strong commitment to providing equal employment opportunities to all employees, and to advise employees on the procedures to report incidents of perceived discriminatory treatment. This policy also sets forth a procedure for investigating and resolving complaints of such conduct.

APPLICABILITY

This policy prohibits all Humboldt County employees, appointing officials, and elected officials from making discriminatory employment decisions based on any protected characteristic or any perception thereof.

POLICY

- A. The County is an equal opportunity employer. We enthusiastically accept our responsibility to make employment decisions without regard to race, religion or religious creed, color, age (over 40), sex (including gender identity and expression, pregnancy, childbirth and related medical conditions), sexual orientation (including heterosexuality, homosexuality and bisexuality), national origin, ancestry, marital status, medical condition (including cancer and genetic characteristics), mental or physical disability (including HIV status and AIDS), military service, or any other classification protected by federal, state, or local laws or ordinances.
- B. Our management is dedicated to ensuring the fulfillment of this policy with respect to hiring, placement, promotion, transfer, demotion, layoff, termination, recruitment advertising, pay, and other forms of compensation, training, and general treatment during employment.

RESPONSIBILITIES**I. EMPLOYEE RESPONSIBILITIES**

- A. It is the responsibility of all Humboldt County employees to know and follow this policy.

- B. This policy will be reviewed with employees during their annual performance evaluations. Employees will be given the opportunity to review the policy and ask questions of their supervisors during this time.
- C. All employees are expected to fully cooperate with any County-initiated investigations to examine any perceived violation of this policy. This includes, but is not limited to, maintaining an appropriate level of discretion regarding the investigation and disclosing any and all information that may be pertinent to the investigation consistent with each individuals constitutionally provided rights.

II. MANAGEMENT RESPONSIBILITIES

A. Duty to implement policy

All Department Heads, other managers, and supervisors have the duty to implement and enforce this policy.

B. Educate, investigate, and cure

All Department Heads, other managers, and supervisors have the responsibilities, as appropriate for their level in the organization, to:

- Ensure all employees are aware that:
 - This policy prohibits discriminatory conduct.
 - They have a right to complain about behavior they believe violates this policy.
 - Anyone involved in the complaint process will be protected from retaliation.
 - Incidents should be reported to help ensure they will not recur.
 - Prompt and appropriate follow-up action will be taken to stop behavior that violates this policy.
 - Violations of this policy may lead to disciplinary action.
- Ensure that all employees are provided a copy of this policy.
- Promptly and thoroughly report any complaint under this policy to the Department Head, the Director of Human Resources, and/or Risk Manager.
- At the direction of the Director of Human Resources or Risk Manager, in appropriate circumstances, to take corrective action to stop substantiated inappropriate behavior.
- Ensure that all personnel with supervisory authority attend County-sponsored equal employment opportunity training on a bi-annual basis.
- Take appropriate preventative action to ensure compliance with this policy.
- Maintain the confidentiality of all complaints by limiting dissemination of information to a "need-to-know" basis.

C. Responsibilities of the Director of Human Resources

The Director of Human Resources has the responsibility for:

- Advising Department Heads on how to handle complaints under this policy.
- Accepting claims from County officers, elected officials, and employees who believe they are being subjected to discrimination or retaliation.
- Investigating and attempting to resolve complaints.
- Advising all parties about the limited confidentiality of the complaints and the investigative process.

III. COMPLAINTS AND INVESTIGATIONS

A. Reporting

1. If an employee believes someone has violated this policy, the employee should bring the matter to the attention of one of the following designated persons:
 - Any manager or supervisor,
 - Any Department Head,
 - The Humboldt County Director of Human Resources, or
 - The Humboldt County Risk Manager.
2. The employee should choose the person from the above list with whom he or she feels most comfortable and report the incident. The employee need only make one report. If an employee submits a complaint and does not receive a response within five business days, the employee should immediately notify the County Administrative Officer.
3. Any supervisor who learns of any potential violation of this policy must immediately report the matter to the Director of Human Resources or the Risk Manager.

B. Management's Response to Complaints

1. Investigate

- a. All reports will be promptly and thoroughly investigated by the Director of Human Resources or Risk Manager.
 - i. The Director of Human Resources or Risk Manager may delegate the investigation to an appropriate designee.
 - ii. The depth of the investigation will vary depending upon the circumstances of each case, but management personnel will be sensitive and respectful of all persons involved in the incident during investigations.

- iii. To the extent possible, the County will endeavor to keep the reporting employee's concerns confidential.

2. Document

- a. All designated persons receiving complaints must document the allegations reported.
- b. All investigations must be thoroughly documented.
- c. All interviews must be recorded by Humboldt County investigators.

3. Take action

- a. The County will take appropriate corrective action, depending upon the circumstances. This may range from participation in mandatory training, up to and including discharge from County employment consistent with Humboldt County Merit System Rules.
- b. All claims, whether substantiated or not, will result in the re-education of the parties involved by providing them with a copy of this policy, or other educational measures determined by the Director of Human Resources or Risk Manager to be appropriate under the circumstances.
- c. Department Heads must forward a copy of all reports, investigations, and resolutions of policy violations to the EEO Compliance Officer (Director of Human Resources), unless the Director of Human Resources is the subject of the report, in which case the Department Head will forward it to the Risk Manager.

- 5. If the Director of Human Resources or Risk Manager receives the initial complaint, he/she will forward the results of the investigation to the Department Head of the complaining employee, except and unless the Department Head is the person accused of the prohibited conduct.

- 6. In the case of a Department Head being the accused, the results of the investigation will be forwarded to the appropriate authority for resolution. Under no circumstances may a Department Head alleged to have engaged in prohibited conduct investigate the complaint.

IV. RETALIATION

- A. No one will be subject to, and the County prohibits, any form of discipline or retaliation for reporting perceived violations of this policy, pursuing any such complaint, or cooperating in any way in the investigation of such complaint. If an employee believes someone has violated this policy against retaliation, the employee

should contact the Director of Human Resources, Risk Manager, or County Administrative Officer immediately.

V. DISTRIBUTION

This policy, including any revisions, will be distributed to all County employees, including elected officials, managers, supervisors, and employees.

BOARD APPROVED:



MARK LOVELACE, Board Chairperson

6-7-2016
Date

Pursuant to Board Order C-10 Dated June 7, 2016

I have read and understand this policy on Equal Employment Opportunity. And I was given the opportunity to ask questions or express concerns regarding this policy.

Employee Signature

Date

Attachment II

CERTIFICATION OF ASSURANCE OF COMPLIANCE
With Statutory Requirements of the Violence Against Women Act (VAWA) Fund As Amended,
Services*Training*Officers*Prosecutors (STOP) Formula Grant Program

The applicant must complete a Certification of Assurance of Compliance-VAWA (Cal OES 2-104g), which includes details regarding Federal Grant Funds, Equal Employment Opportunity Program, Drug Free Workplace Compliance, California Environmental Quality Act, Lobbying, Debarment and Suspension requirements, Proof of Authority from City Council/Governing Board, Civil Rights Compliance, and the special conditions for Subaward with the above mentioned fund. The applicant is required to submit the necessary assurances and documentation before finalization of the Grant Subaward. In signing the Grant Subaward Face Sheet, the applicant formally notifies Cal OES that the applicant will comply with all pertinent requirements.

Resolutions are no longer required as submission documents. Cal OES has incorporated the resolution into the Certification of Assurance of Compliance, Section VII, entitled, "Proof of Authority from City Council/Governing Board." The Applicant is required to obtain written authorization (original signature) from the City Council/Governing board that the official executing the agreement is, in fact, authorized to do so, and will maintain said written authorization on file and readily available upon demand. This requirement does not apply to state agencies.

CERTIFICATION OF ASSURANCE OF COMPLIANCE
With Statutory Requirements of the Violence Against Women Act (VAWA) Fund As Amended,
Services*Training*Officers*Prosecutors (STOP) Formula Grant Program

I, WILLIAM DAMIANO hereby certify that
(official authorized to sign Subaward; same person as Section 15 on Subaward Face Sheet)

SUBRECIPIENT: COUNTY OF HUMBOLDT
IMPLEMENTING AGENCY: HUMBOLDT PROBATION DEPARTMENT
PROJECT TITLE: PROBATION SPECIALIZED UNIT PROGRAM

is responsible for reviewing the *Subrecipient Handbook* and adhering to all of the Subaward requirements (state and/or federal) as directed by Cal OES including, but not limited to, the following areas:

I. Federal Grant Funds

Subrecipients expending \$750,000 or more in federal grant funds annually are required to secure an audit pursuant to OMB Uniform Guidance 2 CFR Part 200, Subpart F and are allowed to utilize federal grant funds to budget for the audit costs. See Section 8000 of the Subrecipient Handbook for more detail.

- The above named Subrecipient receives \$750,000 or more in federal grant funds annually.
- The above named Subrecipient does not receive \$750,000 or more in federal grant funds annually.

II. Equal Employment Opportunity – (*Subrecipient Handbook Section 2151*)

It is the public policy of the State of California to promote equal employment opportunity (EEO) by prohibiting discrimination or harassment in employment because of ancestry, age (over 40), color, disability (physical and mental, including HIV and AIDS), genetic information, gender, gender identity, gender expression, marital status, medical condition (genetic characteristics, cancer or a record or history of cancer), military, veteran status, national origin, race, religion (includes religious dress and grooming practices), sex (includes pregnancy, childbirth, breastfeeding and/or related medical conditions) sexual orientation, or request for family medical leave. **Cal OES-funded projects certify that they will comply with all state and federal requirements regarding equal employment opportunity, nondiscrimination and civil rights.**

Please provide the following information:

Equal Employment Opportunity Officer: LISA DEMATTEO
Title: DIRECTOR OF HUMAN RESOURCES
Address: 825 5TH STREET ROOM 100, EUREKA, CA 95501
Phone: 7074762349
Email: ldematteo@co.humboldt.ca.us

III. Drug-Free Workplace Act of 1990 – (Subrecipient Handbook, Section 2152)

The State of California requires that every person or organization subawarded a grant or contract shall certify it will provide a drug-free workplace.

IV. California Environmental Quality Act (CEQA) – (Subrecipient Handbook, Section 2153)

The California Environmental Quality Act (CEQA) (*Public Resources Code, Section 21000 et seq.*) requires all Cal OES funded projects to certify compliance with CEQA. Projects receiving funding must coordinate with their city or county planning agency to ensure that the project is compliance with CEQA requirements.

V. Lobbying – (Subrecipient Handbook Section 2154)

Cal OES grant funds, grant property, or grant funded positions shall not be used for any lobbying activities, including, but not limited to, being paid by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the making of any federal grant, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any federal grant or cooperative agreement.

VI. Debarment and Suspension – (Subrecipient Handbook Section 2155)

(This applies to federally funded grants only.)

Cal OES funded projects must certify that it and its principals are not presently debarred, suspended, proposed for debarment, declared ineligible, sentenced to a denial of federal benefits by a state or federal court, or voluntarily excluded from covered transactions by any federal department of agency.

VII. Proof of Authority from City Council/Governing Board

The above named organization (Applicant) accepts responsibility for and will comply with the requirement to obtain a signed resolution from the City Council/Governing Board in support of this program. The Applicant agrees to provide all matching funds required for said project (including any amendment thereof) under the Program and the funding terms and conditions of Cal OES, and that any cash match will be appropriated as required. It is agreed that any liability arising out of the performance of this Subaward, including civil court actions for damages, shall be the responsibility of the grant Subrecipient and the authorizing agency. The State of California and Cal OES disclaim responsibility of any such liability. Furthermore, it is also agreed that grant funds received from Cal OES shall not be used to supplant expenditures controlled by the City Council/Governing Board.

The Applicant is required to obtain a signed resolution from the City Council/Governing Board illustrating that the official executing this agreement is, in fact, authorized to do so. The Applicant is also required to maintain the signed resolution on-site, and a copy must be readily available upon request by Cal OES.

VIII. Civil Rights Compliance

The subrecipient complies will all laws that prohibit excluding, denying or discriminating against any person based on actual or perceived race, color, national origin, disability, religion, age, sex, gender identity, and sexual orientation in both the delivery of services and employment practices and does not use federal financial assistance to engage in explicitly religious activities.

IX. Special Condition for Grant Subaward with Violence Against Women Act (VAWA) Funds

1. Applicability of Part 200 Uniform Requirements

The Subrecipient agrees to comply with the Uniform Administrative Requirements, Cost Principles, and Audit Requirements in 2 C.F.R. Part 200, as adopted and supplemented by the Department of Justice (DOJ) in 2 C.F.R. Part 2800 (together, the "Part 200 Uniform Requirements").

2. Compliance with DOJ Grants Financial Guide

The Subrecipient agrees to comply with the Department of Justice Grants Financial Guide as posted on the OJP website (currently, the "2015 DOJ Grants Financial Guide"), including any updated version that may be posted during the period of performance.

3. Requirements Pertaining to Prohibited Conduct Related to Trafficking in Persons (including reporting requirements and OJP authority to terminate award)

The Subrecipient agrees to comply with all applicable requirements (including requirements to report allegations) pertaining to prohibited conduct related to the trafficking of persons, whether on the part of Subrecipient or individuals defined (for purposes of this condition) as "employees" of the Subrecipient.

The details of the Subrecipient's obligations regarding prohibited conduct related to trafficking in persons are posted on the OJP website at: <http://ojp.gov/funding/Explore/ProhibitedConduct-Trafficking.htm> (Award condition: Prohibited conduct by Subrecipients related to trafficking in persons (including reporting requirements and OJP authority to terminate award)), and are incorporated by reference here.

4. Compliance with Applicable Rules Regarding Approval, Planning, and Reporting of Conferences, Meetings, Trainings, and Other Events

The Subrecipient agrees to comply with all applicable laws, regulations, policies, and official DOJ guidance (including specific cost limits, prior approval and reporting requirements, where applicable) governing the use of federal funds for expenses related to conferences (as that term is defined by DOJ), including the provision of food and/or beverages at such conferences, and costs of attendance at such conferences.

Information on the pertinent DOJ definition of conferences and the rules applicable to this award appears in the DOJ Grants Financial Guide (currently, as section 3.10 of "Postaward Requirements" in the "2015 DOJ Grants Financial Guide").

5. Effect of Failure to Address Audit Issues

The Subrecipient understands and agrees that the DOJ awarding agency (OJP or OVW, as appropriate) may withhold award funds, or may impose other related requirements, if (as determined by the DOJ awarding agency) the Subrecipient does not satisfactorily and promptly address outstanding issues from audits required by the Part 200 Uniform Requirements (or by the terms of this award), or other outstanding issues that arise in connection with audits, investigations, or reviews of DOJ awards.

6. Reporting Potential Fraud, Waste, Abuse, and Similar Misconduct

The Subrecipient agrees to promptly refer to the DOJ Office of the Inspector General (OIG) any credible evidence that a principal, employee, agent, contractor, subcontractor, or other person has, in connection with funds under this award (1) submitted a claim that violates the False Claims Act; or (2) committed a criminal or civil violation of laws pertaining to fraud, conflict of interest, bribery, gratuity, or similar misconduct.

Potential fraud, waste, abuse, or misconduct involving or relating to funds under this award should be reported to the OIG by:

- Mail: Office of the Inspector General,
U.S. Department of Justice, Investigations Division,
950 Pennsylvania Avenue, N.W. Room 4706,
Washington, DC 20530;
- E-mail: oig.hotline@usdoj.gov;
- DOJ OIG hotline (contact information in English and Spanish): (800) 869-4499; and/or
- DOJ OIG hotline fax: (202) 616-9881.

Additional information is available from the DOJ OIG website at <http://www.usdoj.gov/oig>.

7. Compliance with General Appropriations-Law Restrictions on the Use of Federal Funds

The Subrecipient agrees to comply with all applicable restrictions on the use of federal funds set out in federal appropriations statutes. Pertinent restrictions, including from various "general provisions" in the Consolidated Appropriations Act, 2016, are set out at <http://ojp.gov/funding/Explore/FY2016-AppropriationsLawRestrictions.htm>, and are incorporated by reference here.

8. Restrictions and Certifications Regarding Non-Disclosure Agreements and Related Matters

The Subrecipient understands and agrees that no Subrecipient under this award, or entity that receives a procurement contract or subcontract with any funds under this award, may require any employee or contractor to sign an internal confidentiality agreement or statement that prohibits or otherwise restricts, or purports to prohibit or restrict, the reporting (in accordance with law) of waste, fraud, or abuse to an investigative or law enforcement representative of a federal department or agency authorized to receive such information.

The foregoing is not intended, and shall not be understood by the agency making this award, to contravene requirements applicable to Standard Form 312 (which relates to classified information), Form 4414 (which relates to sensitive compartmented information), or any other form issued by a federal department or agency governing the nondisclosure of classified information.

a. In accepting this award, the Subrecipient:

- Represents that it neither requires nor has required internal confidentiality agreements or statements from employees or contractors that currently prohibit or otherwise currently restrict (or purport to prohibit or restrict) employees or contractors from reporting waste, fraud, or abuse as described above; and
- Certifies that, if it learns or is notified that it is or has been requiring its employees or contractors to execute agreements or statements that prohibit or otherwise restrict (or purport to prohibit or restrict), reporting of waste, fraud, or abuse as described above, it will immediately stop any further obligations of award funds, will provide prompt written notification to the federal agency making this award, and will resume (or permit resumption of) such obligations only if expressly authorized to do so by that agency.

b. If the Subrecipient does or is authorized under this award to make subawards, procurement contracts, or both:

- It represents that (1) it has determined that no other entity that the Subrecipient's application proposes may or will receive award funds (whether through a subaward, procurement contract, or

subcontract under a procurement contract) either requires or has required internal confidentiality agreements or statements from employees or contractors that currently prohibit or otherwise currently restrict (or purport to prohibit or restrict) employees or contractors from reporting waste, fraud, or abuse as described above; and (2) it has made appropriate inquiry, or otherwise has an adequate factual basis, to support this representation; and

- It certifies that, if it learns or is notified that any Subrecipient, contractor, or subcontractor entity that receives funds under this award is or has been requiring its employees or contractors to execute agreements or statements that prohibit or otherwise restrict (or purport to prohibit or restrict), reporting of waste, fraud, or abuse as described above, it will immediately stop any further obligations of award funds to or by that entity, will provide prompt written notification to the federal agency making this award, and will resume (or permit resumption of) such obligations only if expressly authorized to do so by that agency.

9. Encouragement of Policies to Ban Text Messaging while Driving

Pursuant to Executive Order 13513, "Federal Leadership on Reducing Text Messaging While Driving," 74 Fed. Reg. 51225 (October 1, 2009), the Subrecipient understands that DOJ encourages Subrecipients to adopt and enforce policies banning employees from text messaging while driving any vehicle during the course of performing work funded by this award, and to establish workplace safety policies and conduct education, awareness, and other outreach to decrease crashes caused by distracted drivers.

10. Additional DOJ Awarding Agency Requirements

The Subrecipient agrees to comply with any additional requirements that may be imposed by the DOJ awarding agency (OJP or OVW, as appropriate) during the period of performance for this award, if the Subrecipient is designated as "high-risk" for purposes of the DOJ high-risk grantee list.

11. OVW Training Guiding Principles

The Subrecipient understands and agrees that any training or training materials developed or delivered with funding provided under this award must adhere to the OVW Training Guiding Principles for Grantees and Subgrantees, available at <https://www.justice.gov/ovw/grantees>.

12. Supplanting

The Subrecipient understands and agrees that funds must be used to supplement, not supplant, non-federal funds that would otherwise be available for the activities under this grant.

13. Statutory Requirements

The Subrecipient agrees to comply with all relevant statutory and regulatory requirements which may include, among other relevant authorities, the Violence Against Women Act of 1994, P.L. 103-322, the Violence Against Women Act of 2000, P.L. 106-386, the Omnibus Crime Control and Safe Streets Act of 1968, 42 U.S.C 3711 et seq., the Violence Against Women and Department of Justice Reauthorization Act of 2005, P.L. 109-162, the Violence Against Women Reauthorization Act of 2013, P.L. 113-4, and OVW's implementing regulations at 28 CFR Part 90.

14. Misuse of Award Funds

The Subrecipient understands and agrees that misuse of award funds may result in a range of penalties, including suspension of current and future funds, suspension or debarment from federal grants, recoupment of monies provided under an award, and civil and/or criminal penalties.

The Subrecipients understands and agrees that grant funds may be used only for the purposes in the Subrecipient's approved application.

15. Consultant Rates

The Subrecipient understands approval of this award does not indicate approval of any consultant rate in excess of \$650 per day or \$81.25 per hour. A detailed justification must be approved by the grantor prior to obligation or expenditure of such funds. Although prior approval is not required for consultant rates below these specified amounts, Subrecipients are required to maintain documentation to support all daily or hourly rates.

16. Materials and Publications

The Subrecipient understands and agrees that all materials and publications (written, visual, or sound) resulting from subgrant award activities shall contain the following statements: "This project was supported by Subgrant No. PU 17 05 0120 awarded by the state administering office for the STOP Formula Grant Program. The opinions, findings, conclusions, and recommendations expressed in this publication/program/exhibition are those of the author(s) and do not necessarily reflect the views of the state or the U.S. Department of Justice, Office on Violence Against Women."

17. Victim Safety

The Subrecipient understands and agrees that grant funds will not support activities that compromise victim safety and recovery, such as: procedures or policies that exclude victims from receiving safe shelter, advocacy services, counseling, and other assistance based on their actual or perceived sex, age, immigration status, race, religion, sexual orientation, gender identity, mental health condition, physical health condition, criminal record, work in the sex industry, or the age and/or sex of their children; procedures or policies that compromise the confidentiality of information and privacy of persons receiving OVW-funded services; pre-trial diversion programs not approved by OVW or the placement of offenders in such programs; mediation, couples counseling, family counseling or any other manner of joint victim-offender counseling; mandatory counseling for victims, penalizing victims who refuse to testify, or promoting procedures that would require victims to seek legal sanctions against their abusers (e.g., seek a protection order, file formal complaint); the placement of perpetrators in anger management programs; or any other activities outlined in the solicitation under which the approved application was submitted.

18. Copyright Approval

The Subrecipient understands advance written approval must be obtained to copyright any work that is subject to copyright and was developed, or for which ownership was acquired, under this award. In addition, the Subrecipient (or contractor or subcontractor) must comply with all conditions specified by the program manager in connection with an that approval, before: 1) using award funds to purchase ownership of, or a license to use, a copyrighted work; or 2) incorporating any copyrighted work, or portion thereof, into a new work developed under this award.

The Subrecipient understands and agrees the Office on Violence Against Women reserves a royalty- free, nonexclusive and irrevocable right to reproduce, publish or otherwise use the work, in whole or in part (including in the creation of derivative works), for Federal purposes, and to authorize others to do so.

The Subrecipient understands and agrees it is their responsibility (and of each contractor or subcontractor as applicable) to ensure that this condition is included in any subaward, contract, or subcontract under this award.

All appropriate documentation must be maintained on file by the project and available for Cal OES or public scrutiny upon request. Failure to comply with these requirements may result in suspension of payments under the grant or termination of the grant or both and the Subrecipient may be ineligible for subaward of any future grants if the Cal OES determines that any of the following has occurred: (1) The Subrecipient has made false certification, or (2) violates the certification by failing to carry out the requirements as noted above.

CERTIFICATION

I, the official named below, am the same individual authorized to sign the Subaward [Section 15 on Grant Subaward Face Sheet], and hereby swear that I am duly authorized legally to bind the contractor or grant Subrecipient to the above described certification. I am fully aware that this certification, executed on the date and in the county below, is made under penalty of perjury under the laws of the State of California.

Authorized Official's Signature: _____

Authorized Official's Typed Name: WILLIAM DAMIANO

Authorized Official's Title: CHIEF PROBATION OFFICER

Date Executed: _____

Federal Employer ID #: 94-6000513 Federal DUNS # 034150203

Current System for Award Management (SAM) Expiration Date: 03-04-2018

Executed in the City/County of: HUMBOLDT

AUTHORIZED BY: *(not applicable to State agencies)*

- City Financial Officer
- County Financial Officer
- City Manager
- County Manager
- Governing Board Chair

Signature: Virginia Bass

Typed Name: VIRGINIA BASS, Chair

Title: COUNTY SUPERVISOR