

OFFICE OF THE CITY ADMINISTRATIVE OFFICER
Review of Grant Award and Acceptance Determination

Recipient City Department: Office of the City Attorney		Award Notification Date: November 2014	
Grant Award Title: Underserved Victim Advocacy and Outreach Program FY 2014-15		Grant Amount: \$62,000 Prior Grant Award(s): \$129,733	
Awarding Agency: California Office of Emergency Services			
Grant Agreement Number/Reference:	Performance Start Date: October 1, 2014	Performance End Date: March 31, 2016	
Purpose: The Office of the City Attorney requests authority to accept grant funding from the California Office of Emergency Services. Funding in the amount of \$192,233 will provide for the Underserved Victim Advocacy and Outreach (UVAO) Program. The Council previously authorized the City Attorney to accept grant funding in the amount of \$125,000 (C.F. 15-0249) for the FY 2014-15. An additional \$4,733 was accepted by Council on August 19, 2015. This request is to accept an additional \$62,500 in grant funding for a total of \$192,233 for the FY 2014-15 UVAO Program and extend the program date through March 31, 2016.			

Checklist for Grant Acceptance:	Yes	No	N/A	Comments
1. Authority for Grant Acceptance				
• Department requests acceptance of the Grant	X			() Terms/Conditions outlined in Award Notice/Grantor Agreement
2. Match Requirement Review				
• Match Sources Identification completed			X	() Obtain match requirements from Award Notice/Grantor Agreement
• Additional Funds requested		X		() Submit to CAO for review
3. Charter Section 1022 Determination				
• Charter Section 1022 findings completed			X	() Submit to CAO for review and determination
4. Provisions for Grant-Funded Contracts				
• Standard and Grantor Provisions or equivalent language is included			X	() Incorporate Provisions or Language into proposed agreement
• Pro Forma Agreement RFP <input type="checkbox"/> MOU <input type="checkbox"/> PSA <input type="checkbox"/>			X	() Submit to City Attorney for review and approval; copy to CAO
5. Personnel Authorities				
• Department has submitted a request for position(s)		X		() Review documents and make determination
6. Grant Implementation Recommendations				
• Department has submitted grant implementation instructions	X			() Submit to CAO for review
7. Controller Instructions for Fund/Accounts Set-Up				
• Department has requested Funds/Accounts Set-up	X			
8. Governing Body Resolution/Certification				
• Department has submitted Resolution/Certification			X	() Submit to CAO and City Attorney for review
9. Fiscal Impact Analysis				
• Department has submitted Fiscal Impact Statement	X			() Submit to CAO for review and determination

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10. Grant Award Summary

The Office of the City Attorney requests authority to accept \$192,233 in grant funding for the Underserved Victim Advocacy and Outreach (UVAO) program. These funds originate from the Victims of Crime Act (VOCA) and pass through the California Office of Emergency Services (CalOES). The UVAO program provides services to victims of crime in the underserved lesbian, gay, bisexual and transgender (LGBT) community, with the goal of assisting victims in recovering from the psychological, emotional, and out-of-pocket financial losses incurred as a result of the crime, as well as increasing the victims' involvement in the criminal justice system. This new, additional amount reflects a subaward amendment to continue LGBT victim service through March 31, 2016 pending a new RFP that is being drafted for the next five year grant award cycle.

The total cost of the program is \$234,431, of which \$192,233 will be reimbursed to the City as follows: \$99,615 in salaries and \$36,569 in fringe benefits for one Witness Service Coordinator, \$2,685 for travel, \$46,771 for one full-time contracted victim advocate, \$2,362 for office supplies, \$2,231 for printing and binding and \$2,000 for the Victim Emergency Fund. The position authority for the Witness Service Coordinator is already provided through the 2014-15 Adopted Budget, therefore no additional position authorities are required.

The grant has a 20 percent matching requirement, which the City requested and was approved to be reduced to ten percent. Matching funds in the amount of \$29,308 will be satisfied through volunteer hours. In addition, the General Fund will have to bear \$12,890 in overhead costs, which includes \$4,174 for central services and \$8,716 for department administration, not reimbursed by the grant.

11. Recommendations

Pursuant to a review of departmental recommendations for this grant, please provide a complete list of necessary actions for implementation including acceptance of the award by the City, Controller instructions for fund and accounts set-up, coordination of project activities, etc.

That the Council, subject to the approval of the Mayor:

1. Approve and authorize the City Attorney, or his designee, to execute an amendment to the contract between the City and the California Office of Emergency Services (Cal OEs) for the Fiscal Year 2014-2015 Underserved Victim Advocacy and Outreach Program (FY 2014-15 UVAO), to increase the contract amount by \$62,500 from \$129,733 to \$192,233 for the period of October 1, 2014 to March 31, 2016, subject to the approval of the City Attorney as to form and legality;
2. Authorize the City Attorney, or his designee, to accept additional grant funding in the amount of \$62,500 from the Cal OES for the FY 2014-15 UVAO;
3. Authorize the Controller to :
 - a. Increase the receivable in the amount of \$62,500 within Fund 368, Department 12;
 - b. Increase appropriation account 12L401 - UV Program \$62,500;
4. Authorize the City Attorney to prepare Controller instructions for any necessary technical adjustments subject to the approval of the City Administrative Officer and authorize the Controller to implement the instructions.

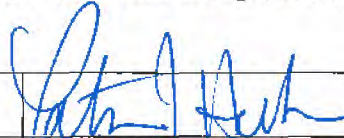
12. Fiscal Impact Statement


Yes This Office finds that the Grant complies with City financial policies as follows (see below):
 No This Office finds that the Grant does not comply with City financial policies as follows (see below):

The total cost of the Underserved Victim Advocacy and Outreach Program is \$234,431, of which \$192,233 will be reimbursed by the California Office of Emergency Services for salaries, fringe benefits and expenses. The General Fund impact will be \$12,890 for overhead costs (central services and department administration), which are not reimbursed by the grant. The grant's match requirement of \$29,308 will be met through volunteer hours. The recommendations in this report are in compliance with the City's Financial Policies in that budgeted appropriations will be balanced against receipts expected from this grant.


CAO Analyst


Chief


CAO/Assistant CAO


Date

CALIFORNIA GOVERNOR'S OFFICE OF EMERGENCY SERVICES

GRANT SUBAWARD AMENDMENT

SUBAWARD #:

Federal Grant # UV 14057250 FIPS# _____ Amendment# 23
 Project # _____ DUNS# 156092066 Performance Period 10/01/14 to 03/31/16

This amendment is between the California Governor's Office of Emergency Services, hereafter called Cal OES, and the Grant Subrecipient: _____

The Recipient agrees to the amendment of this Grant Award Agreement as specified below:

Grant Award Agreement UV 14057250 between the parties hereto is hereby amended to:

Increase the 15VOCA funds by \$ 62,502 from 0 to 62,500

Increase the 15VOCA match by \$ 15,626 from 13,683 to 29,308

Increase the Total Project Cost by \$ 78,125 from \$ 143,416 to \$ 221,541

Change the end date of the Grant Award from 9/30/15 to 3/31/16.

All other provisions of this agreement shall remain as previously agreed upon.

Subrecipient (Certification and Signature of Authorized Agent)

By (Authorized Signature)		Date	
Printed Name		Title	
<u>Michael N. Feuer</u>		<u>City Attorney</u>	
Address			
<u>200 N. Main St. Rm 800 CHE LA CA 90012</u>			
Governor's Office of Emergency Services (For Cal OES use only)			

By Director or Designee		Date	

Printed Name		Title	

Amount Encumbered by this Document	Program/Component	Match	Item

Prior Amount Encumbered	Fund Source	Chapter	Statute	Fiscal Year

Total Amount Encumbered to Date	PCA #	Project #	CFDA #

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

Signature of Cal OES Fiscal Officer		Date	