



**Grant Number:** 1H79TI026408-01  
**FAIN:** TI026408

**Program Director:**  
 Nicholas Bridenback

**Project Title:** Elevate: Raising Problem Solving to Another Level

Grantee Address	Business Address
COUNTY OF PINELLAS  County Justice and Consumer Services 315 Court Street Clearwater, FL 337565165	Pinellas Count Justice & Consumer Services Director 631 Chestnut Street Clearwater, FL 33756

**Budget Period:** 09/30/2015 – 09/29/2016  
**Project Period:** 09/30/2015 – 09/29/2018

Dear Grantee:

The Substance Abuse and Mental Health Services Administration hereby awards a grant in the amount of \$324,858 (see “Award Calculation” in Section I and “Terms and Conditions” in Section III) to COUNTY OF PINELLAS in support of the above referenced project. This award is pursuant to the authority of 42 USC 3797u et seq. & 509 of the PHS Act, as amended and is subject to the requirements of this statute and regulation and of other referenced, incorporated or attached terms and conditions.

Award recipients may access the SAMHSA website at [www.samhsa.gov](http://www.samhsa.gov) (click on “Grants” then SAMHSA Grants Management), which provides information relating to the Division of Payment Management System, HHS Division of Cost Allocation and Postaward Administration Requirements. Please use your grant number for reference.

Acceptance of this award including the “Terms and Conditions” is acknowledged by the grantee when funds are drawn down or otherwise obtained from the grant payment system.

If you have any questions about this award, please contact your Grants Management Specialist and your Government Project Officer listed in your terms and conditions.

Sincerely yours,

Eileen Bermudez  
 Grants Management Officer  
 Division of Grants Management

See additional information below

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**SECTION I – AWARD DATA – 1H79TI026408-01****Award Calculation (U.S. Dollars)**

<b>Consortium/Contractual Cost</b>	\$324,858
<b>Direct Cost</b>	\$324,858
<b>Approved Budget</b>	\$324,858
<b>Federal Share</b>	\$324,858
<b>Cumulative Prior Awards for this Budget Period</b>	\$0
<b>AMOUNT OF THIS ACTION (FEDERAL SHARE)</b>	\$324,858

SUMMARY TOTALS FOR ALL YEARS	
YR	AMOUNT
1	\$324,858
2	\$324,978
3	\$324,518

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

**Fiscal Information:**

**CFDA Number:** 93.243  
**EIN:** 1596000800A8  
**Document Number:** 15TI26408A  
**Fiscal Year:** 2015

<b>IC</b>	<b>CAN</b>	<b>Amount</b>
TI	C96N292	\$324,858

IC	CAN	2015	2016	2017
TI	C96N292	\$324,858	\$324,978	\$324,518

**TI Administrative Data:**

**PCC:** EADC-SCT / **OC:** 4145

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**SECTION II – PAYMENT/HOTLINE INFORMATION – 1H79TI026408-01**

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

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

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**SECTION III – TERMS AND CONDITIONS – 1H79TI026408-01**

This award is based on the application submitted to, and as approved by, SAMHSA on the

above-title project and is subject to the terms and conditions incorporated either directly or by reference in the following:

- a. The grant program legislation and program regulation cited in this Notice of Award.
- b. The restrictions on the expenditure of federal funds in appropriations acts to the extent those restrictions are pertinent to the award.
- c. 45 CFR Part 75 as applicable.
- d. The HHS Grants Policy Statement.
- e. This award notice, INCLUDING THE TERMS AND CONDITIONS CITED BELOW.

**Treatment of Program Income:**  
Additional Costs

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## **SECTION IV – TI Special Terms and Conditions – 1H79TI026408-01**

### **REMARKS:**

As a reminder all SAMHSA official notifications will be electronically mailed to your organization's Business Official address identified in the HHS Checklist, Part C.

*This award reflects approval of the budget submitted on June 1, 2015 as part of the application.*

### **SPECIAL TERMS OF AWARD:**

#### **Disparity Impact Statement (DIS):**

By November 30, 2015, you must:

Submit an electronic copy of a disparity impact statement to the Government Project Officer (GPO) and Grants Management Specialist (GMS) as identified under Contacts on this notice of award. The disparity impact statement should be consistent with information in your application regarding access, \*service use and outcomes for the program and include three components as described below. Questions about the disparity impact statement should be directed to your GPO. Examples of disparity impact statements can be found on the SAMHSA website at <http://samhsa.gov/grants/grants-management/disparity-impact-statement>.

\*Service use is inclusive of treatment services, prevention services as well as outreach, engagement, training and/or technical assistance activities.

The disparity impact statement, in response to the Special Term of Award, consists of three components:

1. Proposed number of individuals to be trained by subpopulations in the grant implementation area should be provided in a table that covers the entire grant period. The disparate population(s) should be identified in a narrative that includes a description of the population and rationale for how the determination was made.
2. A quality improvement plan for how you will use your program (GPRA) data on access, use and outcomes to monitor and manage program outcomes by race, ethnicity and LGBT status, when possible. The quality improvement plan should include strategies for how processes and/or programmatic adjustments will support efforts to reduce disparities for the identified sub-populations.

3. The quality improvement plan should include methods for the development and implementation of policies and procedures to ensure adherence to the Enhanced Culturally and Linguistically Appropriate Services (CLAS) Standards and the provision of effective care and services that are responsive to:
- a. Diverse cultural health beliefs and practices;
  - b. Preferred languages; and
  - c. Health literacy and other communication needs of all sub-populations within the proposed geographic region.

**DOMA:**

On June 26, 2013, in United States v. Windsor, the Supreme Court held that section 3 of the Defense of Marriage Act (DOMA), which prohibited federal recognition of same-sex spouses/marriages, was unconstitutional. As a result of that decision, SAMHSA is no longer prohibited from recognizing same sex marriages. Consistent with HHS policy and the purposes of SAMHSA programs, same-sex spouses/marriages are to be recognized in the Joint Adult Drug Courts program. This means that, as a recipient of SAMHSA Joint Adult Court funds you are required to treat as valid the marriages of same-sex couples whose marriage was legal when entered into. This applies regardless of whether the couple now lives in a jurisdiction that recognizes same-sex marriage or a jurisdiction that does not recognize same-sex marriage. Any same-sex marriage legally entered into in one of the 50 states, the District of Columbia, a U.S. territory or a foreign country will be recognized. However, this does not apply to registered domestic partnerships, civil unions or similar formal relationships recognized under state law as something other than a marriage.

**EPLS:**

SAMHSA's OFAS is conducting a review of one or more of the key staff listed in your organization's Application for Federal Assistance (SF424) because they had the same or a similar name to an individual in the System of Award Management Exclusions List. If OFAS's review determines that the individual(s) in question is(are) the same person(s), enforcement action will be taken, which may include terminating the grant or requiring the person be removed from working on the grant or at your organization in accordance with 2 CFR Part 180. Please note that by selecting "I agree" in § 21 of the SF424, the authorized representative certified that, to the best of his or her knowledge and belief, that the applicant and its principals were not presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from covered transactions by any federal department or agency.

**SPECIAL CONDITIONS OF AWARD:**

*None*

**STANDARD TERMS OF AWARD:**

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

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

**Nicholas Bridenback**, Project Director @ 15% level of effort (BJA match)

All changes in key staff including level of effort must be sent electronically to the GPO including a biographical sketch and other documentation and information as stated above who will make a recommendation for approval or disapproval to the assigned Grants Management Specialist. Only the GMO, SAMHSA may approve Key Staff Changes.

**REPORTING REQUIREMENTS:**

Submission of a Programmatic Semi-annual Report is due no later than the dates as follows:

1st Report – April 30, 2016  
2nd Report – October 31, 2016

**Please submit your Programmatic Semi-annual Report to [DGMPProgressReports@samhsa.hhs.gov](mailto:DGMPProgressReports@samhsa.hhs.gov) and copy your Program Official.**  
(HARD COPIES SUBMISSION IS NOT REQUIRED)

**Failure to comply with the above stated terms and conditions may result in suspension, classification as High Risk status, termination of this award or denial of funding in the future.**

All responses to special terms and conditions of award and post award requests may be electronically mailed to the Grants Management Specialist and to the Program Official as identified on your Notice of Award.

**It is essential that the Grant Number be included in the SUBJECT line of the email.**

**CONTACTS**

Jon Berg, Program Official  
**Phone:** (240) 276-1609 **Email:** Jon.Berg@samhsa.hhs.gov

Doug Lees, Grants Specialist  
**Phone:** (240) 276-1653 **Email:** Doug.Lees@samhsa.hhs.gov