1. DATE ISSUED MM/DL	YYYYY 1a. SUPER	UPERSEDES AWARD NOTICE dated 03/27/2020			
06/19/2020	except th	except that any additions or restrictions previously imposed			
00/19/2020	remain in	remain in effect unless specifically rescinded			
2. CFDA NO.					
93.136 - Injury Preventio	n and Control Research	and State and Comm	nunity Based Programs		
, ,			, ,		
3. ASSISTANCE TYPE Co	operative Agreement				
4. GRANT NO. 6 NUF2CE	002490-02-02	5. TYPE OF AWARD Other			
Formerly					
4a. FAIN NUF2CE002490		5a. ACTION TYPE	Post Award Amendment		
6. PROJECT PERIOD	MM/DD/YYYY		MM/DD/YYYY		
From	02/01/2019	Through	01/31/2024		
7. BUDGET PERIOD	MM/DD/YYYY		MM/DD/YYYY		
Erom	00/04/0000	Thuasanh			

# DEPARTMENT OF HEALTH AND HUMAN SERVICES Centers for Disease Control and Prevention

2939 Brandywine Road Atlanta, GA 30341

## **NOTICE OF AWARD**

AUTHORIZATION (Legislation/Regulations)
Recipient is funded under Category" B" / Statutory Authority: 392(a)(1) of the PHS Act (42 USC § 280b-1(a)(1))

#### 8. TITLE OF PROJECT (OR PROGRAM)

Rape Prevention and Education: Using the best available evidence for Sexual Violence Prevention

9a. GRANTEE NAME AND	ADDRESS		9b. GRANT	EE PROJECT DIRECTOR				
HEALTH AND SENIOR SERVICES, MISSOURI DEPARTMENT OF				Ms. Mindy Laughlin				
920 Wildwood Dr			920 Wildwood Dr					
Missouri Dept. of Hea	Ith and Senior Services		Jeffers	on City, MO 65109-5796				
Jefferson City, MO 65	109-5796		Phone	5737516435				
10a. GRANTEE AUTHOR	ZING OFFICIAL		10b. FEDER	AL PROJECT OFFICER				
Ms. Marcia Mahaney			Kathry	n M Jones				
920 Wildwood Dr			4770 E	uford Hwy				
Jefferson City, MO 65	109-5796		DVP P	PTB				
Phone: 573-751-6014				, GA 30341				
			Phone	770-488-1118				
	А	LL AMOUNTS ARE	SHOWN IN U	SD				
11. APPROVED BUDGET	Excludes Direct Assistance)		12. AWARD 0	OMPUTATION				
I Financial Assistance from	n the Federal Awarding Agency Only		a. Amount o	f Federal Financial Assistance (from	item 11m)		1,075,424.00	
II Total project costs include	ling grant funds and all other financial participation		b. Less Uno	oligated Balance From Prior Budget	Periods		55,600.00	
a. Salaries and Wa	geS	73,802.00		c. Less Cumulative Prior Award(s) This Budget Period		930,289.00		
b. Fringe Benefits		44,281.00	0			89,535.00		
T. 115	10.	118,083.00	13. Total Federal Funds Awarded to Date for Project Period 1,950			1,950,113.00		
c. Total Personr	el Costs	0.00	(Subject to the evallability of funds and estimatory progress of the project):					
d. Equipment			VEAD	TOTAL DIRECT COSTS	VEAD	TOTAL	DIRECT COSTS	
e. Supplies		5,626.00	YEAR a. 3	TOTAL DIRECT COSTS	YEAR	TOTAL	DIRECT COSTS	
f. Travel		2,212.00	b. 4		e. 7			
g. Construction		0.00	c. 5		f. 8			
h. Other		4,920.00	15. PROGRAM	NCOME SHALL BE USED IN ACCORD WITH	ONE OF THE FOLLOW	VING		
i. Contractual		931,920.00	a. b.	DEDUCTION ADDITIONAL COSTS			b	
j. TOTAL DIRE	CT COSTS —	1,062,761.00	c. d. e.	MATCHING OTHER RESEARCH (Add / Deduct Option) OTHER (See REMARKS)				
k. INDIRECT COST	S	12,663.00		D IS BASED ON AN APPLICATION SUBMITTE	ED TO AND AS APPRO	OVED BY THE FE	DERAL AWARDING AGENCY	
i. TOTAL APPROV	ZED BUDGET	1,075,424.00	ON THE ABOVE	TITLED PROJECT AND IS SUBJECT TO THE T ICE IN THE FOLLOWING: The grant program legislation The grant program regulations.				
m. Federal Share		1,075,424.00	<ul> <li>This award notice including terms and conditions, if any, noted below under REMARKS.</li> </ul>			this grant.		
n. Non-Federal Share 0.00			In the event there are conflicting or otherwise inconsistent policies applicable to the grant, the above order of precedence shall prevail. Acceptance of the grant terms and conditions is acknowledged by the grantee when funds are drawn or otherwise obtained from the grant payment system.					
,	Ferms and Conditions Attached - g for COVID-19 and rape prevention.		No)					

#### GRANTS MANAGEMENT OFFICIAL:

Valencia Williams, Lead Grant Management Specialist 1600 Clifton Rd

Atlanta, GA 30333 Phone: 404.498.3260

17.OBJ CL	<b>ASS</b> 41.51	18a. VI	ENDOR CODE	18b. E	IN	19. D	UNS 878092600	20.	CONG. DIST.	03
F	Y-ACCOUNT NO.		DOCUMENT NO.		ADMINISTRATIVE CODE		AMT ACTION FIN ASST		APPROPRIATI	ION
21. a.	0-9390EWQ	b.	19NUF2CE002490C3	C.	CE	d.	\$65,286.00	e.	75-20	024-0943
22. a.	0-939ZSFL	b.	19NUF2CE002490	C.	CE	d.	\$24,249.00	e.	75-	-20-0952
23. a.		b.		C.		d.		e.		

## NOTICE OF AWARD (Continuation Sheet)

PAGE 2 of 3		DATE ISSUED 06/19/2020
GRANT NO.	6 NU	F2CE002490-02-02

### **Direct Assistance**

BUDGET CATEGORIES	PREVIOUS AMOUNT (A)	AMOUNT THIS ACTION (B)	TOTAL (A + B)
Personnel	\$0.00	\$0.00	\$0.00
Fringe Benefits	\$0.00	\$0.00	\$0.00
Travel	\$0.00	\$0.00	\$0.00
Equipment	\$0.00	\$0.00	\$0.00
Supplies	\$0.00	\$0.00	\$0.00
Contractual	\$0.00	\$0.00	\$0.00
Construction	\$0.00	\$0.00	\$0.00
Other	\$0.00	\$0.00	\$0.00
Total	\$0.00	\$0.00	\$0.00

## NOTICE OF AWARD (Continuation Sheet)

PAGE 3 of 3		DATE ISSUED 06/19/2020
GRANT NO.	6 NU	F2CE002490-02-02

Federal Financial Report Cycle					
Reporting Period Start Date	Reporting Period End Date	Reporting Type	Reporting Period Due Date		
02/01/2019	01/31/2020	Annual	04/30/2020		
02/01/2020	01/31/2021	Annual	05/01/2021		

## **AWARD ATTACHMENTS**

## Missouri Department of Health

6 NUF2CE002490-02-02

- 1. Terms and Conditions
- 2. COVID-19 Technical Review
- 3. Administrative Technical Review

#### ADDITIONAL TERMS AND CONDITIONS OF AWARD

**Supplemental Funding:** The purpose of this amendment is to approve supplemental funding in the amount of \$89,535 for the year 02 budget period 02/01/2020 – 01/31/2021. This funding is approved based on the recipient's applications submitted 05/11/2020 and 05/29/2020. The breakdown of funding is as follows:

Rape Prevention Supplement: \$24,249

COVID-19 Supplement: \$65,286

Additional funds are authorized and distributed as indicated below:

	Year 02 Base Award	Rape Prevention Supplement	COVID-19 Supplement	Total Approved Budget
Salaries and Wages	\$73,802.00	\$	\$	\$73,802.00
Fringe Benefits	\$44,281.00	\$	\$	\$44,281.00
Equipment	\$	\$	\$	\$5,626.00
Supplies	\$5,626.00	\$	\$	\$
Travel	\$2,212.00	\$	\$	\$2,212.00
Construction	\$	\$	\$	\$
Other	\$4,920.00	\$	\$	\$4,920.00
Contractual	\$842,385.00	\$24,249	\$65,286	\$931,920.00
Consultant	\$	\$	\$	\$
<b>Total Direct</b>	\$973,226.00	\$24,249	\$65,286	\$1,062,761.00
Cost				
Indirect	\$12,663.00	\$0	\$0	\$12,663.00
Costs				
Total Award	\$985,889.00	\$24,249	\$65,286	\$1,075,424.00

Note: COVID-19 funds are one-time funding and must be expended within a 7-month budget period of June 1, 2020 – 01/31/2021

Coronavirus Disease 2019 (COVID-19) Funds: A recipient of a grant or cooperative agreement awarded by the Department of Health and Human Services (HHS) with funds made available under the Coronavirus Preparedness and Response Supplemental Appropriations Act, 2020 (P.L. 116-123); the Coronavirus Aid, Relief, and Economic Security Act, 2020 (the "CARES Act") (P.L. 116-136); and/or the Paycheck Protection Program and Health Care Enhancement Act (P.L. 116-139) agrees, as applicable to the award, to: 1) comply with existing and/or future directives and guidance from the Secretary regarding control of the spread of COVID-19; 2) in consultation and coordination with HHS, provide, commensurate with the condition of the individual, COVID-19 patient care regardless of the individual's home jurisdiction and/or appropriate public health measures (e.g., social distancing, home isolation); and 3) assist the United States Government in the implementation and enforcement of federal orders related to quarantine and isolation.

In addition, to the extent applicable, Recipient will comply with Section 18115 of the CARES Act,

with respect to the reporting to the HHS Secretary of results of tests intended to detect SARS—CoV–2 or to diagnose a possible case of COVID–19. Such reporting shall be in accordance with guidance and direction from HHS and/or CDC. HHS laboratory reporting guidance is posted at: <a href="https://www.hhs.gov/sites/default/files/covid-19-laboratory-data-reporting-guidance.pdf">https://www.hhs.gov/sites/default/files/covid-19-laboratory-data-reporting-guidance.pdf</a>. Further, consistent with the full scope of applicable grant regulations (45 C.F.R. 75.322), the purpose of this award, and the underlying funding, the recipient is expected to provide to CDC copies of and/or access to COVID-19 data collected with these funds, including but not limited to data related to COVID-19 testing. CDC will specify in further guidance and directives what is encompassed by this requirement.

This award is contingent upon agreement by the recipient to comply with existing and future guidance from the HHS Secretary regarding control of the spread of COVID-19. In addition, recipient is expected to flow down these terms to any subaward, to the extent applicable to activities set out in such subaward.

**Rape Prevention Indirect Costs:** Indirect Costs are not applicable for the Rape Prevention Program. However; In accordance with Congressional legislation, the recipient may not use more than five percent of the total approved funding for administrative costs.

**COVID-19 Indirect Costs:** Not Applicable/None requested.

**COVID-19 FFR Reporting:** the recipient is required to report separately on the use of COVID-19 funds on the Federal Financial Report (FFR). The recipient must submit an annual FFR as indicated in the Reporting Requirements section of the General Terms and Conditions, and the recipient must attach a document to their FFR submission to reflect expenditures by subaccount.

#### **COVID-19 Payment Management System Subaccount:**

COVID-19 funding is in Document Number: 19NUF2CE002490C3

## **Rape Prevention Payment Management System Subaccount:**

Rape Prevention funding is in Document Number: 19NUF2CE002490

#### **GMS Contact:**

LaKasa Wyatt, Grants Management Specialist

Telephone: 770-488-2728 Email: lgw5@cdc.gov

## National Center for Injury Prevention and Control Prevention Practice and Translation Branch

#### **Technical Review**

Recipient's Name:Missouri Department of Health and Senior Services
Recipient #: _CE002490 Budget Year:BY02
NOFO#: _ CDC-RFA-CE19-1902SUPCOVID2020Title:COVID-19 RPE Supplement
Requested Amount: \$65,286 Recommended Award Amount: \$65,286
1. Response to Technical Review (check one):
The awardee must submit a response to the weakness(es) and recommendations identified in the technical review within 30 days from receipt date of the notice of award. (Note: The awardee's response should be reflective only of the weaknesses identified, therefore, resubmission of the entire application is not required.)
X No response to Technical Review is required.
2. Work-plan (check one):
Revised Work-plan is required due to – (provide reason(s)):
X Revised Work-plan is <b>NOT</b> required.
3. Performance (check one):
XThe project officer certifies performance is satisfactory to date and continued funding is recommended.
The project officer certifies performance is not fully satisfactory to date and weaknesses and recommendations should be addressed, continued funding should be restricted until attached recommendations are met.
The project officer has determined performance to date has been less than satisfactory and continued funding is denied. The project officer's determination is based on below factual data as published in the announcement.
Project Officer's Name:
Kathryn M. Jones(Print Name)
Project Officer's Signature (mandatory):
Catingo

1

6/8/2020

Recipient's Name:	Missouri Department of Health and Senior Services			
Recipient #: CE	002490	Budget Year: BY02		

The review considered the evaluation criteria published in the notice of funding opportunity announcement. Based on the review, the followings were identified:

### **B.** COVID-19 Budget Period Proposal Objectives:

#### **Summary of the Project:**

The recipient intends to utilize the supplement funds to establish a contract with an organization to develop and distribute a marketing campaign focused on SV and IPV prevention. The contractor will collect and analyze data, engage youth on messaging, and develop, disseminate, and evaluate the campaign.

#### **Summary of Major Strengths:**

- The recipient's application was complete and thorough.
- The recipient provided excellent data and anecdotal evidence regarding the impact of COVID-19 on SV and IPV.

#### **Summary of Major Weaknesses:**

• No major weaknesses.

#### **Recommendations:**

• No recommendations.

#### **Other Relevant Comments:**

• The recipient will submit an itemized budget once the contract is in place.

2 6/8/2020

## National Center for Injury Prevention and Control Division of Violence Prevention Prevention Practice and Translation Branch

## **Technical Review**

Recipient's Name: _Missouri Department of Health and Senior Services
Recipient #: _CE002490-02 Budget Year:BY02- Admin Supplement
NOFO#: CE19-1902Title: Rape Prevention and Education
Requested Amount: \$24,249 Recommended Award Amount: \$24,249
Actual Unobligated Funds: \$N/A Estimated Unobligated Funds: \$N/A
1. Response to Technical Review (check one):
The recipient must submit a response to the weakness(es) and recommendations identified in the technical review within 30 days from receipt date of the notice of award. (Note: The recipient's response should be reflective only of the weaknesses identified, therefore, resubmission of the entire application is not required.)
X No response to Technical Review is required.
2. Work-plan (check one):
Revised Work-plan is required due to – (provide reason(s)):
X Revised Work-plan is <b>NOT</b> required.
3. Performance (check one):
_XThe project officer certifies performance is satisfactory to date and continued funding is recommended.
The project officer certifies performance is not fully satisfactory to date and weaknesses and recommendations should be addressed, continued funding should be restricted until attached recommendations are met.
The project officer has determined performance to date has been less than satisfactory and continued funding is denied. The project officer's determination is based on below factual data as published in the announcement.
Project Officer's Name:Kathryn M. Jones(Print Name)
Project Officer's Signature (mandatory):  Date: 5/18/2020

1 5/18/2020

Recipient's Name:Missouri Departm	nent of Health and Ser	nior Services
Recipient #: CE002490-02	Budget Year: _	_BY02 Admin Supplement
		ies has been performed. The review considered the announcement. Based on the review, the followings
A. New Admin Supplement Ac	etivities:	
recipients. The contractor will provide	TA and support to sub	ovide additional evaluation support to RPE-funded subo-recipients to help them develop their own evaluation ze indicator data for the evaluation of the RPE
Summary of Major Strengths: The funded activity aligns with existing support will further strengthen the overs		For RPE for the state. The addition of this evaluation .
Summary of Major Weaknesses: No major weaknesses.		
Recommendations: No recommendations.		
Other Relevant Comments:		

No relevant comments.

2 5/18/2020