

Government of the District of Columbia Department of Behavioral Health

64 New York Avenue, NE - 2nd Floor

Washington, DC 20002 Notice of Grant Award (NOGA) V.5



GRANTEE PROFILE		NOGA STATUS					
Organization:	Sherry's Center		New Award	\Box Continuation	☐ Modification		
DUNS UEI No.:	18-463-6759		AWARD PROFILE				
SAM UEI No.:	383S9		Current Maximum Award:	\$300,000.00			
Tax ID:	52-1594112		New Maximum Award:	\$300,000.00			
Address:	2933 Ontario Rd NW		PROJECT PERIOD	. ,			
City/State/Zip:	Washington, DC 20009			From:	10/1/2021	To:	9/29/2024
Agency Head:			CURRENT BUDGET				
Phone Number:	202-847-4247		Budget Option:	Year 1	Modification Number:	Select #:	
Email Address:	mgomez@sherryscenter.org		Budget Period 1: <u>\$</u>	From:	10/1/2021	To:	9/29/2022
Primary Contact:	George Seed		*Budget Period 2: \$	From:		To:	
Phone Number:	202-847-4277		*Budget period in Notice of	Select Fiscal Year:			FY22
Email Address:	gsaad@sherryscenter.org		Award MUST cross fiscal years.			\$	100,000.00
Fiscal Contact:	Kristian Tunnel				NEW AWARD		
Phone Number:	202-424-2897			Total:	\$ -	\$	100,000.00
Email Address:	ktunnl@sherryscenter.org		AUTHORIZATION				
DBH GRANTOR PROFIL	E		Director of DEHAuthority pursuant to the D.C. Official Code §7-1141.06(7) and Title 22A.D.C. Municipal Regulation, Chapter 44				
Program Contact:	Sharon Hunt		Fund Detail	Agency	Agency Object	PCA	Amount
Title:	SOR Project Director		8200	RM0	0506	6922F	\$ 100,000.00
Division/Administration:	Adult Services		Index	FY	Requisition #	Purc	hase Order #
Phone Number:			19SOR	FY22	RK168435	PO90120	
	sharon.hunt@dc.gov		Fund Detail		Agency Object	PCA	Amount
			runu Detan	Agency	Agency Object	ICA	Amount
	Lynne Saffell Program Monitor		Index	FY	Requisition #	Door	hase Order #
Phone Number:	Program Monitor		muex	r i	Requisition #	rurc	nase Order #
			Frond Date 9	A	A Ob.:4	DCA	A
SOURCE OF FUNDS	Email Address: lynne.saffell@dc.gov		Fund Detail	Agency	Agency Object	PCA	Amount
	uman Services, SAMHSA, State	Opioid	T., J.,	T/S/	D	D	h 0#
Department of Health and Human Services, SAMHSA, State Opioid Response		Index	FY	Requisition #	Purc	hase Order #	
DBH GRANT NUMBER			Fund Detail	Agency	Agency Object	PCA	Amount
21SORO/22				8 1	g,,	-	
CFDA NO.		Index	FY	Requisition #	Purc	hase Order #	
93.788							
SERVICE INFORMATION							
	r Research and Development (R	2&D)?	□ YES	✓ NO			
- J	1		_ 1E3	V 110			
Project Title: Service	Winter SUD Services Purpose	Ward(s)	Population Focus (check all t	hat annly)	Amount		Notes:
Provide SUD services for	To provide support and	All Wards	Substance Abuse Disorder (SUD)	<i>□</i>	\$100,000.00		1100001
adults.	services to adults experiencing		Substance Abuse Disorder (SOD)	⊻	, ,		
	SUD concerns.		Mental Health (MH)	~			
			Children (age 0-6 years)				
			Children/Youth (age 7-15 years)				
			Transition Age Youth (TAY)(age	16-25 yrs)			
			Adults (age 21 & older)	V			



NOGA Certification Form Cursor Here for Instructions

Grantee:	Sherry's Center	
Requisition No:	RK168435	
Project Title:	Winter SUD Services	
FY22 Award Amount:	\$	100,000.00
	Award Type:	
✓ New Award	☐ Continuation	☐ Modification

FISCAL YEAR ALLOCATION				
FY	AMOUNT			
Y1	\$	100,000.00		
Y2	\$	100,000.00		
Y3	\$	100,000.00		
Y4				
Y5				
TOTAL:	\$	300,000.00		
*See NOCA Modification for details				

*See NOGA Modification for details.					
	☑ New Award	- Competitive			
The requirements have been met, <i>Please check all that apply</i> .	certifying a fair and competitive RFA process upon which the award is based:	RFA No: SOR062820			
☑ Notice of Funding A	Availability published in the DC Register.				
Notice of Funding A websites.	Availability and Request for Application released on the Serve DC and Do	epartment of Behavioral Health			
The applications we	ere reviewed by an independent panel of at least three (3) qualified review	vers.			
☑ The sub-grant or gr	ant award is in agreement with the results of the review panel and authori	zed by the agency director.			
☐ The sub-grant or gr	☐ The sub-grant or grant award is in agreement with the written justication of the agency director.				
☐ New Award - Non-Competitive					
Please check all applicable j	justification criteria that has been met for this sole source award.				
☐ The authorization for	or the award designates the grantee (i.e. earmark).				
\Box The applicable law	defines eligibility in such a way that there is only one eligible applicant.				
There is a recognize targeted clientele.	ed coalition of service providers through which the broadest community p	participation may be obtained in serving			
Attach narrative justification to certification form.					



Project Title:	Winter SUD Services	
FY22 Award Amount:	\$	100,000.00
	Award Type:	
✓ New Award	☐ Continuation	☐ Modification

□ Continuation				
Please check all applicable justification criteria that has been met for this continuation request:				
☐ The funds are awarded as part of an extension of the original grant.				
\Box The unobligated funds are available from the original grant to apply to this continuation.				
\Box The terms of the grant allow the Agency to add or modify the grant award.				
Initial this section indicating that the criteria for authorizing this transaction has been met.				
Certification - The following criteria have been met for continuation of this NOGA:				
The continuation is authorized by the Request For Applications listed: RFA No:				
The continuation is authorized by a valid grant agreement with sub-grantee.				
The grantee submitted all required financial and programmatic reports under the terms of the existing NOGA.				
\Box The grantee satisfactorily met all performance objectives, \mathbf{OR}				
The grantee did not meet performance objectives but has submitted a corrective action plan, which the program has approved.				
Program Director Fiscal Monitor (initials) (initials)				
☐ Modification				
The modification request is for a(n): □ Increase □ Decrease □ Cost Extension □ No-Cost Extension □ Termination				
Please check all applicable justification criteria that has been met for this modification request:				
☐ The grantee has submitted new deliverables and budget for the additional award amount.				
☐ The grantee is on track to meet the performance deliverables agreed to in the governing sub-grant agreement.				
☐ The grantees grant period has been shortened or terminated.				
☐ The grantee is behind in meeting performance deliverables agreed to in the governing sub-grant agreement.				
Include completed NOGA Modification Tab to create the NOGA Modification Notice.				

Terms and Conditions

The District of Columbia Department of Behavioral Health grant recipients must comply with all terms and conditions outlined in this Notice of Grant Award, the General Terms and Conditions, the grants policy terms and conditions, and any DBH grants policy statements and memoranda released under the order of the DBH Director, the Executive Office of the Mayor or by local or federal statute and regulation. The assigned DBH personnel may set conditions of award in order for the Grantee to start or continue services for the initial award period and subsequent budget period. This grant is subject to the terms and conditions incorporated either directly or by reference in the following:

- 1. 2 CFR 200, Uniform Administrative Requirements, Cost Principles and Audit Requirements for Federal Awards
- 2. 45 CFR 75, Uniform Administrative Requirements, Cost Principles and Audit Requirements for HHS Awards
- 3. District of Columbia Budget Support Act by the most current, applicable fiscal year
- 4. Department of Behavioral Health Establishment Act (D.C. Code §§ 7-1141.01, et seq.)
- 5. Title 22-A, D.C. Municipal Regulations, Chapter 44, Mental Health Grants
- 6. District of Columbia City-Wide Grants Manual
- 7. Substance Abuse Mental Health Services Administration (SAMHSA) Award Standard Terms (for SAMHSA-funded grants)
- 8. United States Department of Health and Human Services Grants Policy Statement
- 9. DBH Grant Terms and Conditions Appendices and Attachments
- 10. The Grantee's budget and any amendment approved by DBH
- 11. District of Columbia Grant Administration Act of 2015; and
- 12. Grantee submissions that present as appendicies and attachments to the application or award as follows:
 - a) Approved Work Plan
 - b) Approved Budget and Narrative Justifications, including standard DBH forms for budgets, cost allocation, source of fund/use match
 - d) Fund Disbursement Plan and Schedule
 - e) Reporting Requirements
 - f) Special Program Provisions

Authorized Official, Grantee Organization

If there are conflicting or otherwise incorprecedence shall prevail.	onsistent laws, regulat	tions or policies applicable to this grant, the above order of
Barbara J. Bazron, Ph.D.	Date	_
Agency Director		
Department of Behavioral Health		

Date

ARTICLE I - AGREEMENT INTRODUCTION

This Agreement is entered into between **Sherry's Center** (hereinafter referred to as the "Grantee" or "Recipient") and the District of Columbia Department of Behavioral Health (hereinafter referred to as "DBH" or the "Grantor") to provide financial assistance for the provision of services, as described in the DBH Notice of Grant Award (NOGA), Article II Award Profile, and Appendix A - Scope of Work/Schedule of Deliverables. All modifications of the budget, spending plan, work plan, table/schedule of deliverables require prior approval by assigned DBH personnel. The funds awarded must be used for the purpose stated herein.

WHEREAS, DBH is the prime recipient of financial assistance from the federal or local source stated on the NOGA, and acting as a pass-through for financial assistance is authorized to issue this award; and

WHEREAS, as a result of the applicant for funding, the Grantee has been determined to be a sub-recipient of federal financial assistance or recipient of local District Appropriated funds from DBH; and

WHEREAS, DBH and the Grantee are responsible for complying with the appropriate federal and/or District of Columbia statutes, regulations policies and procedures in the performance of its activities pursuant to this Agreement;

WHEREAS, the Director of the Department of Behavioral Health has assigned the administration of funds and sub-granting oversight to:

Sharon Hunt

NOW THEREFORE, in consideration of the premises and mutual benefits to be derived therefrom, DBH and the Grantee do hereby mutually agree to the terms, conditions, requirements and schedules outlined in this Agreements and the documents attached hereto or hereafter incorporated by reference.

ARTICLE II - AWARD PROFILE

A. Scope of Services

1. Under the terms of this Agreement, the Grantee shall provide the services identified in Appendices A and B, which contain the scope of work, service areas and annual targets for services.

B. Funding, Budget and Spending Plan

- 1. The Project Period, Budget Period and allocations of funding in each period are outlined in the Notice of Grant Award (NOGA). The funding source is also stated in the NOGA.
- 2. The total obligation by DBH under this grant shall not exceed \$ 300,000.00 during the planned Project Period.
 - 3. The total amount shall be apportioned by the budget period as follows: \$ 100,000.00.
- 4. The Grantee shall not exceed the amount of the total award that is apportioned to the budget period. The Grantee's spending plan must reflect the funding obligations and approved apportionments for the Budget Period, unless Grantee submits a written request for a modification from the spending and such request has received approval from the assigned Program and Fiscal agents.
- 5. Option years beyond the planned Project Period may be considered for the award based on the availability of source funding, additional funding and the satisfactory performance of the Grantee.

C. Fund Disbursement

- 1. DBH shall establish a fund disbursement plan based on requirements outlined in the DBH Terms and Conditions, and as described in Appendix C.
- 2. The sum of monies paid to the Grantee for performance pursuant to this Grant Agreement shall not exceed the total amount contained in Article II or any revision thereto.

- 3. The Grantee shall account for and reimburse the District Government any interest earned on advance grant award payments no later than twenty (20) business days from the end of each DC Government Fiscal Year (September 30) and no later than thirty (30) business days after the expiration of this Agreement. All payments shall be made by check or money order made payable to the "D.C. Treasurer."
- 4. The Grantee shall account for any gross income that is earned by and directly generated by a supported activity, or, earned as a result of the Federal award during the period of performance. This further certifies that the Grantee is a:

Non-Profit Organization, reporting program income using the additive alternative.

- 5. DBH reserves the right to withhold any payments if the Grantee is found in non-compliance with the DBH NOGA or this Grant Agreement and fails to correct any deficiencies within a reasonable time frame as determined by DBH. DBH shall determine the amount of the payment to be withheld under this provision.
- 6. The grant agreement shall be subject to the availability of funding and appropriations of the program or grant funding which is the subject of the grant. This grant shall be subject to termination at any time, in whole or in part, if adequate funds are not made available or appropriated for the program in question. This grant shall be subject to termination at any time, in whole or in part, for the convenience of the government should DBH determine that such a termination is in the best interest of the public or the government.

APPENDICIES AND ATTACHMENTS

The District of Columbia Department of Behavioral Health incorporates by reference into this Notice of Grant Award, the following items, as approved by the assigned DBH personnel:

Appendix A – Scope of Work/Schedule of Deliverables

Appendix B – Grantee Submissions

- 1. Budget & Justification
- 2. Work Plan
- 3. Staffing Plan

Appendix C – Funds Disbursement and Payment Terms

Appendix D – Special Program Provisions (As applicable)

- 1. Data reporting schedule
- 2. Programmatic and Financial Reporting Schedule
- 3. Risk Assessment

Appendix E - Federal Notice of Award

Attachment 1 - General Terms and Conditions

Attachment 2 - Assurances, Certifications and Disclosures

Attachment 3 - Program Income and Financial Disclosure

Attachment 4 - DC Contribution and Solicitation Certification

Attachment 5 - Federal Assurances and Certifications

Attachment 6 - DC Tax Affidavit Certification

Attachment 7 - Sub-Grantee Single Audit Exemption Certification

Attachment 8 - DBH Grant Terms and Conditions