



GRANT AMENDMENT

Amendment #1

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GRA-STATE-19-0968-01-Y4
Statewide
QF Child Care Health Consultation

Early Childhood Health and
Development Board
(First Things First)
4000 North Central Avenue,
Suite 800
Phoenix, AZ 85012
(602) 771-5100

GRANTEE:

Cochise Health and Social Services

PURPOSE OF AMENDMENT:

The parties amend the Grant Agreement as follows:

1. Description of Services – With funding provided through the federal Child Care and Development Fund (CCDF) and the Arizona Department of Health Services (ADES), the purpose of this Amendment is to expand the number of providers participating in Quality First and receiving Child Care Health Consultation services as a result of participation in Quality First. The expansion of Quality First participation is to include additional child care and preschool providers statewide during the term of this Amendment, including all of the providers on the current 2021 waitlist.
2. Manner of Financing – The award is increased by \$11,580 and allows for the recruitment of up to 4 Centers and/or Homes. The revised award amount is \$100,500.
3. Contracted Service Units:
Lead Strategy: QF Child Care Health Consultation
Number of center based providers served: 27, Number of home based providers served: 6, Number of Non-QF Centers: 0
Number of Non-QF Homes: 0
Quality First Expansion: 4 Centers and/or Homes
4. For auditing purposes, we are required to supply the following information related to the Child Care and Development Block Grant funding:
Federal Award ID Number – 2101AZCDC6
CFDA # - 93.575
Total Federal Amount Awarded - \$11,580
5. All other terms and conditions remain unchanged and are according to the original award documents, clarification documents and renewal submission document

Approved by Grantee:

Signature

Ann English

Name

Chair, Board of Supervisors

Title

Date

Approved by First Things First and executed effective October 1, 2021 once signed and dated below:

Josh Allen
CFO/COO

Date

Line-Item Budget and Budget Narrative

SFY22 Line-Item Budget

Budget period: October 1, 2021 – June 30, 2022

Budget Category	Line Item Description	Requested Funds	Total Cost
PERSONNEL SERVICES		Personnel Services Sub Total	\$ 67,365.00
Salaries			
EMPLOYEE RELATED EXPENSES		Employee Related Expenses Sub Total	\$ 23,592.00
Fringe Benefits or Other ERE			
PROFESSIONAL AND OUTSIDE SERVICES		Professional & Outside Services Sub Total	\$
Contracted Services			
TRAVEL		Travel Sub Total	\$
In-State Travel			
Out-of-State Travel			
AID TO ORGANIZATIONS OR INDIVIDUALS		Aid to Organizations or Individuals Sub Total	\$
Subgrants or Subcontracts to organizations/agencies/entities			
OTHER OPERATING EXPENSES		Other Operating Expenses Sub Total	\$ 7,543.00
<ul style="list-style-type: none"> • Telephones/Communications Services • Internet Access • General Office Supplies • Food • Rent/Occupancy • Utilities • Furniture • Postage • Software (including IT supplies) • Dues/Subscriptions • Advertising • Printing/Copying • Equipment Maintenance • Professional Development (Staff Training, Conferences, Workshops, Training Fees for Staff) • Insurance • Program Materials • Program Supplies • Scholarships • Program Incentives 			
NON-CAPITAL EQUIPMENT		Non-Capital Sub Total	\$
Equipment \$4,999 or less in value			
Subtotal Direct Program Costs:			\$
ADMINISTRATIVE/INDIRECT COSTS		Total Admin/Indirect	\$ 2,000.00
Indirect/Admin Costs		\$	\$
Total		\$	\$ 100,500

Authorized Signature _____ Date _____

SFY22 Budget Narrative

The budget narrative should provide a clear and concise description of how amounts were determined, including calculations, for each proposed line item in the Line-Item Budget. If a budget category does not apply, either leave blank or delete the category.

<p>Personnel Services: <i>Include information such as position title(s), name of employee (if known), salary, time to be spent on this program (hours or %), number of months assigned to this program, etc. Explain how the salary rate for each position was determined. If salaries are expected to increase during the program year, indicate the percentage increases for each position and justify the percent of the salary increase.</i></p> <p>Andrea White, BSN, RN: 24 hours/week, 8 months @ \$30/hr Leslie Johns: 30 hours/week, 8 months @ 23.71/ hr</p>
<p>Employee Related Expenses: <i>Include a benefit percentage and what expenses make up employee benefit costs. Indicate any special rates for part-time employees, if applicable. Explain how the benefits for each position were determined. If using a fringe benefit rate, explain how this percentage is justified or approved by your agency/organization.</i></p> <p>OASI at 7.65% ASRS at 12.11% Worker's comp at .27% Health Insurance up to 7,000</p>
<p>Professional and Outside Services: <i>If professional consultants/services costs are proposed in the budget, define how the costs for these services were determined and the justification for the services related to the program. Explain how all contracts will be procured.</i></p> <p>None</p>
<p>Travel: <i>Separate in-state and out-of-state travel. Include a detailed breakdown of hotel, transportation, meal costs, etc. Indicate the location(s) of travel, the justification for travel, how many employees will attend and how the estimates have been determined. Applicants must use the State of Arizona Travel Policy on rates limitations for mileage, lodging, and meals (https://gao.az.gov/travel/welcome-gao-travel) for both in-state and out-of-state travel.</i></p> <p>None</p>
<p>Aid to Organizations or Individuals: <i>In the event that this application represents collaboration and you will be utilizing subcontractors (including subgrantees) to perform various components of the program, include a list of subcontractors, programmatic work each subcontractor will perform, and how costs for each subcontractor are determined.</i></p> <p>None</p>

Other Operating Expenses: Explain each item to be purchased, how the costs were determined and justify the need for the items. All purchases should be made through competitive bid or using established purchasing procedures. Items can only be categorized in the following line items: Telephones /Communications Services, Internet Access, General Office Supplies, Food, Rent/Occupancy, Utilities, Furniture, Postage, Software (including IT supplies), Dues/Subscriptions, Advertising, Printing/Copying, Equipment Maintenance, Professional Development (Staff Training, Conferences, Workshops, and Training Fees for Staff), Insurance, Program Materials, Program Supplies, Scholarships, and Program Incentives.

Program materials: Additional funds allocated under "Other Operating Expenses" will be used to purchase infant mannequins and instructional supplies to teach CPR and First Aid to participating childcare centers' employees. Our current childcare consultant is a certified CPR and First Aid instructor. The remaining funds will continue to be supplying education materials like books, handwashing supplies, and educational materials for children and staff.

Non-Capital Equipment: For items with a unit cost less than \$5,000 and an initial estimated useful life beyond a single year, explain each item to be purchased, how the costs were determined and justify the need for the items. All purchases should be made through competitive bid or using established purchasing procedures. For example, items such as computers, printers, projectors, etc. each with a unit cost less than \$5,000.

None

Administrative/Indirect Costs: Administrative costs are general or centralized expenses of overall administration of an agency/organization that receives grant funds and does not include particular program costs. Such costs are generally identified with the agency/organization's overall operation and are further described in 2 CFR 220, 2 CFR 225, and 2 CFR 230.

Indirect costs are costs of an organization that are not readily assignable to a particular program, but are necessary to the operation of the organization and the performance of the program. The cost of operating and maintaining facilities, depreciation, and administrative salaries are examples of the types of costs that are usually treated as indirect.

Applicants must list either Option A or Option B and provide proper justification for expenses included:

XOption A - Administrative Costs: with proper justification, applicants may include an allocation for administrative costs for up to 10% of the total direct costs requested of the grant request. Administrative costs may include allocable direct charges for: costs of financial, accounting, auditing, contracting or general legal services; costs of internal evaluation, including overall management improvement costs; and costs of general liability insurance that protects the agency/organization(s) responsible for operating a program, other than insurance costs solely attributable to the program. Administrative costs may also include that portion of salaries and benefits of the program's director and other administrative staff not attributable to the time spent in support of a specific program.

OR

Option B - Federally Approved Indirect Costs: If your agency/organization has a federally approved indirect cost rate agreement in place, applicants may include an allocation for indirect costs for up to 10% of the direct costs. **Applicants must provide a copy of their federally approved indirect cost rate agreement.**

Authorized Signature _____ Date _____



Program Personnel Table

Key Personnel - those individuals directly responsible for program implementation/services and are fully or partially funded through the proposed program.				
Name/ Position Title	Background/Expertise* <small>Must include qualifications that align with the Standards of Practice (SOP)</small>	Key Roles and Responsibilities	Meets the SOP Staffing Qualifications Yes/No**	FTEs funded through the program
<i>Vicky King, MN, RN Director of Nursing and Clinical Services</i>	<i>MN, RN, (Master’s Degree in Nursing Education.) Background with community clinic nursing and patient education.</i>	<i>Supervisor for staff working in program. Main contact for grant</i>	Yes	<i>No (General Health Dept. funded)</i>
<i>Andrea White, BSN, RN</i>	<i>Registered Nurse- Labor and delivery/ OB nursing background. Has pediatric nursing experience and inpatient pediatric experience as well. Recently completed all coursework for BSN.</i>	<i>CCHC roles and responsibilities</i>	Yes	0.5FTE
<i>Leslie Johns</i>	<i>Public health educator experience with emphasis in pediatric population. Currently working on bachelor’s degree.</i>	<i>CCHC roles and responsibilities</i>	<i>No, Waiver Approved</i>	0.75FTE
<i>Maria Mena</i>	<i>Administrative coordinator for the Nursing Division. Oversees budget management</i>	<i>Budget monitor</i>	Yes	<i>No (General Health Dept. funded)</i>
Additional Personnel - those individuals partially funded through the proposed program but who do not directly implement or have direct program oversight of the program.				
			Program Total:	

* Resumes and/or job descriptions for key personnel may be requested at any time but unless otherwise indicated, they do not need to be submitted.

** By signing this document, I assure that all key personnel meet the Personnel/Staff Qualifications outlined in the FTF Standards of Practice or if any personnel do not meet the Staff Qualification standards, they have been approved through the FTF Request for Exemption from Staff Qualification process prior to hire.

Name/Title

Date