

State of Nevada

Department of Health and Human Services

Division of Child & Family Services (hereinafter referred to as the Department)

Agency Ref. #: 325011-26-003 Budget Account: 3250 Category: 11

GL: _____

Job Number: 32501126

NOTICE OF SUBAWARD

				TITALLE			
Program Name: Fund to Assist Former Foster Youth (FAFFY) DCFS Grants Management Unit DCFSGrants@dcfs.nv.gov				Subreciplent's Name Nashoe County Human Ser Pamela Abercrombie pabercrombie@washoecour			
Address:				Address:		-	
4126 Technology Way, 3rd Floor Carson City, NV 89706-2009				350 S. Center Street Reno, NV 89501-2103		10.00	
Subaward Period:				Subrecipient's:			
July 1, 2025, through June 30, 2026				EIN:	88-6000138		
				Vendor#: _	T40283400A		,
				Unique Entity ID:	GPR1NY74XPQ5		
Purpose of Award: WCHSA will provide case in a spiriture and determine						taff will pr	ovide
assistance to youth in achieving self-determined Region(s) to be served: □ Statewide ☒ Spi					se to addititiood.		
Approved Budget Categories:			-	E AWARD COMPUTATIO	N:		
	•	15.000.00	Total	Obligated by this Action:	_	\$	150,000.00
1. Personnel	\$	15,000.00	t I i was a	ulative Prior Awards this But		\$ \$	450,000,00
2. Travel/Training		\$0.00	11	State Funds Awarded to Da	ile.	Þ	150,000.00
3. Operating	į.	\$0.00		n Required □ Y ⋈ N			
4. Equipment \$0.00				unt Required this Action: unt Required Prior Awards:		\$ \$	0.00
5. Contractual/Consultant \$35,720.00				Match Amount Required:		\$	0.00
6. Other \$97,780.00				arch and Development (R&	O) 🗆 Y 🔯 N		
TOTAL DIRECT COSTS \$148,500.00				Budget Period: 5, through 6-30-26			
7. Indirect Costs \$1,500.00			State	Project Period:			
TOTAL APPROVED BUDGET \$150,000.00				5, through 6-30-26			
101AL AT 1107LD DODGET \$100,000.00			11				
			' I FOR	AGENCY USE. ONLY			
				AGENCY USE, ONLY			
Source of Funds		% Funds:	FOR CFDA:	AGENCY USE, ONLY FAIN:	Federal Grant #:		Grant Award
Source of Funds Account to Assist Persons Formerly in Foster C	are	<u>%</u> Funds:			Federal Grant #:	Date	Grant Award by Federal gency:
	are				Federal Grant #:	Date	by Federal
Account to Assist Persons Formerly in Foster C Agency Approved Indirect Rate: 0.00%	are	Funds:	CFDA:	FAIN: N/A		<u>Date</u>	by Federal gency:
Account to Assist Persons Formerly in Foster C Agency Approved Indirect Rate: 0.00% Terms and Conditions: In accepting these grant funds, it is understood 1. This award is subject to the availabilit 2. Expenditures must comply with any s 3. Expenditures must be consistent with 4. Subrecipient must comply with all app 5. Quarterly progress reports are due by grant administrator. 6. Financial Status Reports and Reques administrator.	that: y of appropri tatutory guide the narrative blicable Fede the 15 th of e	ate funds. elines, the Ia, goals and ral regulationach month	CFDA: N/A DHHS Gr I objectivous, following	FAIN: N/A Subrecipier ant Instructions and Require es, and budget as approved the end of the quarter, unle	N/A t Approved Indirect Rate: ments, and the State Admirand documented. ss specific exceptions are positions are provided in writing	1.01%	by Federal gency: N/A Manual. writing by the
Account to Assist Persons Formerly in Foster C Agency Approved Indirect Rate: 0.00% Terms and Conditions: In accepting these grant funds, it is understood 1. This award is subject to the availabilit 2. Expenditures must comply with any s 3. Expenditures must be consistent with 4. Subrecipient must comply with all app 5. Quarterly progress reports are due by grant administrator. 6. Financial Status Reports and Reques	that: y of appropri tatutory guide the narrative plicable Fede the 15 th of e ts for Funds s; f Work and E	ate funds. elines, the Isa, goals and ral regulatic ach month	CFDA: N/A DHHS Grid objectivens. following	FAIN: N/A Subrecipier ant Instructions and Require es, and budget as approved the end of the quarter, unle nonthly, unless specific exce	N/A t Approved Indirect Rate: ments, and the State Admirand documented. ss specific exceptions are p	1.01%	Manual. writing by the grant
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SECTION A

GRANT CONDITIONS AND ASSURANCES

General Conditions

- 1. Nothing contained in this Agreement is intended to, or shall be construed in any manner, as creating or establishing the relationship of employer/employee between the parties. The Recipient shall at all times remain an "independent contractor" with respect to the services to be performed under this Agreement. The Department of Health and Human Services (hereafter referred to as "Department") shall be exempt from payment of all Unemployment Compensation, FICA, retirement, life and/or medical insurance and Workers' Compensation Insurance as the Recipient is an independent entity.
- The Recipient shall hold harmless, defend and indemnify the Department from any and all claims, actions, suits, charges and judgments whatsoever that arise out of the Recipient's performance or nonperformance of the services or subject matter called for in this Agreement.
- 3. The Department or Recipient may amend this Agreement at any time provided that such amendments make specific reference to this Agreement, and are executed in writing, and signed by a duly authorized representative of both organizations. Such amendments shall not invalidate this Agreement, nor relieve or release the Department or Recipient from its obligations under this Agreement.
 - The Department may, in its discretion, amend this Agreement to conform with federal, state or local governmental guidelines, policies
 and available funding amounts, or for other reasons. If such amendments result in a change in the funding, the scope of services, or
 schedule of the activities to be undertaken as part of this Agreement, such modifications will be incorporated only by written amendment
 signed by both the Department and Recipient.
- 4. Either party may terminate this Agreement at any time by giving written notice to the other party of such termination and specifying the effective date thereof at least 30 days before the effective date of such termination. Partial terminations of the Scope of Work in Section B may only be undertaken with the prior approval of the Department. In the event of any termination for convenience, all finished or unfinished documents, data, studies, surveys, reports, or other materials prepared by the Recipient under this Agreement shall, at the option of the Department, become the property of the Department, and the Recipient shall be entitled to receive just and equitable compensation for any satisfactory work completed on such documents or materials prior to the termination.
 - The Department may also suspend or terminate this Agreement, in whole or in part, if the Recipient materially fails to comply with any term of this Agreement, or with any of the rules, regulations or provisions referred to herein; and the Department may declare the Recipient ineligible for any further participation in the Department's grant agreements, in addition to other remedies as provided by law. In the event there is probable cause to believe the Recipient is in noncompliance with any applicable rules or regulations, the Department may withhold funding.

Grant Assurances

A signature on the cover page of this packet indicates that the applicant is capable of and agrees to meet the following requirements, and that all information contained in this proposal is true and correct.

- Adopt and maintain a system of internal controls which results in the fiscal integrity and stability of the organization, including the use of Generally Accepted Accounting Principles (GAAP).
- Compliance with state insurance requirements for general, professional, and automobile liability; workers' compensation and employer's liability; and, if advance funds are required, commercial crime insurance.
- 3. These grant funds will not be used to supplant existing financial support for current programs.
- 4. No portion of these grant funds will be subcontracted without prior written approval unless expressly identified in the grant agreement.
- 5. Compliance with the requirements of the Civil Rights Act of 1964, as amended, and the Rehabilitation Act of 1973, P.L. 93-112, as amended, and any relevant program-specific regulations, and shall not discriminate against any recipient or employee because of race, national origin, creed, color, sex, religion, age, disability or handicap condition (including AIDS and AIDS-related conditions).
- Compliance with the Americans with Disabilities Act of 1990 (P.L. 101-136), 42 U.S.C. 12101, as amended, and regulations adopted there under contained in 28 CFR 26.101-36.999 inclusive, and any relevant program-specific regulations.
- Compliance with the Clean Air Act (42 U.S.C. 7401–7671q.) and the Federal Water Pollution Control Act (33 U.S.C. 1251–1387), as amended—
 Contracts and subgrants of amounts in excess of \$150,000 must contain a provision that requires the non-Federal awardee to agree to comply with all applicable standards, orders or regulations issued pursuant to the Clean Air Act (42 U.S.C. 7401–7671q) and the Federal Water Pollution
 Control Act as amended (33 U.S.C. 1251–1387). Violations must be reported to the Federal awarding agency and the Regional Office of the Environmental Protection Agency (EPA).
- 8. Compliance with Title 2 of the Code of Federal Regulations (CFR) and any guidance in effect from the Office of Management and Budget (OMB) related (but not limited to) audit requirements for subrecipients that expend \$750,000 or more in Federal awards during the subrecipient's fiscal year must have an annual audit prepared by an independent auditor in accordance with the terms and requirements of the appropriate circular. To acknowledge this requirement, Section E of this notice of subaward must be completed.
- Certification that neither the Recipient nor its principals are presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this transaction by any Federal department or agency. This certification is made pursuant to regulations implementing Executive Order 12549, Debarment and Suspension, 28 C.F.R. pt. 67 § 67.510, as published as pt. VII of May 26, 1988, Federal Register (pp. 19150-19211).

- 10. No funding associated with this grant will be used for lobbying.
- 11. Disclosure of any existing or potential conflicts of interest relative to the performance of services resulting from this grant award.
- 12. Provision of a work environment in which the use of tobacco products, alcohol, and illegal drugs will not be allowed.
- 13. An organization receiving grant funds through the Nevada Department of Health and Human Services shall not use grant funds for any activity related to the following:
 - Any attempt to influence the outcome of any federal, state or local election, referendum, initiative or similar procedure, through in-kind or cash contributions, endorsements, publicity or a similar activity.
 - Establishing, administering, contributing to or paying the expenses of a political party, campaign, political action committee or other
 organization established for the purpose of influencing the outcome of an election, referendum, initiative or similar procedure.
 - Any attempt to influence:
 - o The introduction or formulation of federal, state or local legislation; or
 - The enactment or modification of any pending federal, state or local legislation, through communication with any member or employee of Congress, the Nevada Legislature or a local governmental entity responsible for enacting local legislation, including, without limitation, efforts to influence State or local officials to engage in a similar lobbying activity, or through communication with any governmental official or employee in connection with a decision to sign or veto enrolled legislation.
 - Any attempt to influence the introduction, formulation, modification or enactment of a federal, state or local rule, regulation, executive
 order or any other program, policy or position of the United States Government, the State of Nevada or a local governmental entity
 through communication with any officer or employee of the United States Government, the State of Nevada or a local governmental
 entity, including, without limitation, efforts to influence state or local officials to engage in a similar lobbying activity.
 - Any attempt to influence:
 - o The introduction or formulation of federal, state or local legislation;
 - o The enactment or modification of any pending federal, state or local legislation; or
 - The introduction, formulation, modification or enactment of a federal, state or local rule, regulation, executive order or any other program, policy or position of the United States Government, the State of Nevada or a local governmental entity, by preparing, distributing or using publicity or propaganda, or by urging members of the general public or any segment thereof to contribute to or participate in any mass demonstration, march, rally, fundraising drive, lobbying campaign or letter writing or telephone campaign.
 - Legislative liaison activities, including, without limitation, attendance at legislative sessions or committee hearings, gathering information
 regarding legislation and analyzing the effect of legislation, when such activities are carried on in support of or in knowing preparation for
 an effort to engage in an activity prohibited pursuant to subsections 1 to 5, inclusive.
 - Executive branch liaison activities, including, without limitation, attendance at hearings, gathering information regarding a rule, regulation, executive order or any other program, policy or position of the United States Government, the State of Nevada or a local governmental entity and analyzing the effect of the rule, regulation, executive order, program, policy or position, when such activities are carried on in support of or in knowing preparation for an effort to engage in an activity prohibited pursuant to subsections 1 to 5, inclusive.
- 14. An organization receiving grant funds through the Nevada Department of Health and Human Services may, to the extent and in the manner authorized in its grant, use grant funds for any activity directly related to educating persons in a nonpartisan manner by providing factual information in a manner that is:
 - Made in a speech, article, publication, or other material that is distributed and made available to the public, or through radio, television, cable television or other medium of mass communication; and
 - Not specifically directed at:
 - Any member or employee of Congress, the Nevada Legislature or a local governmental entity responsible for enacting local legislation;
 - o Any governmental official or employee who is or could be involved in a decision to sign or veto enrolled legislation; or
 - Any officer or employee of the United States Government, the State of Nevada or a local governmental entity who is involved in introducing, formulating, modifying or enacting a Federal, State or local rule, regulation, executive order or any other program, policy or position of the United States Government, the State of Nevada or a local governmental entity.

This provision does not prohibit a recipient or an applicant for a grant from providing information that is directly related to the grant or the application for the grant to the granting agency.

To comply with reporting requirements of the Federal Funding and Accountability Transparency Act (FFATA), the subrecipient agrees to provide the Department with copies of all contracts, sub-grants, and or amendments to either such documents, which are funded by funds allotted in this agreement.

15. Data Ownership - The Business Associate acknowledges that Business Associated or its agents or subcontractors have no ownership rights with respect to the protected health information it accesses, maintains, creates, retains, modifies, records, store, destroys, or otherwise holds, transmits, uses discloses. The Division of Child and Family Services maintains ownership of all data collected by the Business Associate and can receive access to such data without limitation.

16. Reporting -The subrecipient is also required to submit any or other reporting as defined and requested by DCFS. The subrecipient agrees to participate in reporting all required data and information to the evaluation team as required

SECTION B

Description of Services, Scope of Work and Deliverables SFY-2026

<u>Washoe County Human Services Agency</u>, hereinafter referred to as Subrecipient, agrees to provide the following services and reports according to the identified time frame.

Goal 1: Former foster youth recipients between 18-21 years of age will have financial, housing, counseling, employment, education, financial management, and other appropriate support services that complement their own efforts to achieve self-sufficiency and will recognize and accept personal responsibility for preparing for and then making the transition from adolescence to adulthood. Foster youth who are 17.5 years of age and youth in an intensive care facility will also be provided support to assist with their transition.

<u>Objective</u>	Activities	<u>Due Date</u>	Documentation	How will this Goal be
			Needed	measure
				(quantitative)
To provide case management and financial support to	1a. Youth seeking service will complete an assessment of need and participate in the	Ongoing through 6/30/2026	1. UNITY case file and case notes.	Number of youth provided case management who also
help 35 youth aging out of foster care	development of an action/transition plan.	0/30/2020		develop a transition plan.
achieve their goals identified in their self-sufficiency plan.	1b. Assistance with housing for youth needing intensive support, basic needs, food vouchers, counseling, services to reduce high risk behaviors, child care and parenting needs, employment readiness, personal and professional readiness, educational assistance, transportation/driving needs, medical/behavioral assistance, travel for relationship connections,	Ongoing through 6/30/2026	1. Spreadsheet with youth name and service delivered as well as UNITY IL services window record of activity delivered. 1. UNITY Independent Living services record of activity delivered.	1. Number of services and resources provided.
	stipends for youth participation in policy meetings, and other appropriate supports for youth aged out of foster care.		1. Spreadsheet tracking financial assistance expenses include dollar amount, type of activity, number of youth served.	

2. To provide up to	2a. Contract with Nevada	Ongoing	2a. Fully executed	2. Number of youth
10 youth monthly with rep-payee services to assist youth with financial stability and achieve	Fiduciary representative payee services.	through 6/30/2026	contract with service provider and contractor's invoice for services.	receiving rep-payee services.
greater independence.	2b. Track youth receiving services.	Ongoing through 6/30/2026	2b. Case notes from UNITY on youth receiving services.	
3. To provide up to 2 youth with attorneys to assist with public guardian	3a. Contract with attorneys to provide legal services.	Ongoing through 6/30/2026	3a. Fully executed contract with service provider and contractor's invoice for services.	3. Number of youth receiving legal services.
applications and/or immigration assistance.	3b. Track youth receiving services.	Ongoing through 6/30/2026	3b. Case notes from UNITY on youth receiving services	
4. To provide up to 4 youth with mentoring, housing and supportive services through Monai Village.	4a. Contract with MonaiVillage to provide mentoring, housing and supportive services for youth.4b. Track youth receiving services.	Ongoing through 6/30/2026 Ongoing through 6/30/2026	4a. Fully executed contract with service provider and contractor's invoice for services. 4b. Case notes from UNITY on youth receiving services.	4. Number of youth receiving services.

Goal 2: Support the room and board payment for youth opting into the Court Jurisdiction program

<u>Objective</u>	Activities	Due Date	<u>Documentation</u>	How will this Goal be
			Needed	measure (quantitative)
1. To provide room and board payments to approximately 10 youth meeting the goals of the court jurisdiction program.	1a. Youth on the court jurisdiction program will be assigned to a case manager. 1b. The Case Manager will have monthly contact with each youth to verify program compliance and ongoing eligibility.	Ongoing through 6/30/2026 Ongoing through 6/30/2026	1. UNITY case file and case notes including monthly and quarterly contacts, IL services delivery record data, and data on youth achievements.	1a. Number of youth provided case management. 1b. Number of youth provided with financial support.

1c. A budget will be	Ongoing	1c. Number of services
created for each youth	through	and resources provided.
to ensure their basic	6/30/2026	
needs are being met		
with the monthly		
payment.		
100 Miles (100 Miles (
	Oppoint	1d. Number of youth
1d. The Case Manager	Ongoing	who complete the
will review the youth's	through	The state of the s
self-sufficiency goals	6/30/2026	program.
during the quarterly	Name of the last o	
contact to make		
amendments,		
adjustments or referrals		
for services, as		
necessary.		

Goal 3: To support youth ages 18-21 who are aging out or likely to age out of the foster care system with youth voice opportunities.

<u>Objective</u>	Activities	Due Date	Documentation Needed	How will this Goal be measure (quantitative)
1. To provide approximately 15 youth ages 18-21 with monthly opportunities to participate on a Youth Advisory Committee.	1a. Youth will participate in monthly Youth Advisory Board meetings. 1b. Case Managers and Human Services Support Specialist (HSSS) will provide food for youth participation in the monthly Youth Advisory Board meetings.	Ongoing through 6/30/2026 Ongoing through 6/30/2026	1a. Monthly meetings youth sign-in sheets. 1b. Receipts for food, activities, and raffle prize.	1a. Number of youth who participated in meetings. 1b. Number of youth who participated in meetings.

SECTION C

Budget and Financial Reporting Requirements

Identify the source of funding on all printed documents purchased or produced within the scope of this subaward, using a statement similar to: "This publication (journal, article, etc.) was supported by the Nevada State Division of Child and Family Services from the Account to Assist Persons Formerly in Foster Care. Its contents are solely the responsibility of the authors and do not necessarily represent the official views of the Division nor the State of Nevada."

Any activities performed under this subaward shall acknowledge the funding was provided through the Division by the Account to Assist Persons Formerly in Foster Care.

Subrecipient agrees to adhere to the following budget:

BUDGET NARRATIVE - SFY26

Form 1

	9,720.00 nd expenses for	\$ ge income ar	nths \$ 9,720.00 to accurately manage income and expenses for		\$81.00 with p	outh ome sources and v	10 youth managing client income	Name of Contractor/Subreci <u>pient</u> . Nevada Fiduciary Solutions 10 youth \$81.00 12 m. Method of Selection: Existing service provider Period of Performance: July 1, 2025 - June 30, 2026 Scope of Work: Provide rep payee services for youth to assist with financial stability by managing client income sources and working with program staff sech client. (Goal #1)
35,720.00 Revise this formula as needed to include each his Contractor listed		s should expa t require spe	Total: ith multiple partners e included here, but	ive projects wi	ts. Collaborat er project or p	diem, or other cost omponent of a large	of labor, travel, per i-grants that are a cc	Contractual Total: \$ 35,720.00 Identify project workers who are not regular employees of the organization. Include costs of labor, travel, per diem, or other costs. Collaborative projects with multiple partners should expand this category to break out personnel, travel, equipment, etc., for each site. Sub-awards or mini-grants that are a component of a larger project or program may be included here, but require special justification as to the merits of the applicant serving as a "pass-through" entity, and its capacity to do so.
				69				Describe equipment
	her equipment	ई र्ज cost. All ot	Total: \$ chased regardless of cost. All other equipment	nent to be purc	elated equipr	iters or computer-n	. Also list any compu	Equipment List Equipment purchase or lease costing \$5,000 or more, and justify these expenditures. Also list any computers or computer-related equipment to be pur costing leas than \$5,000 should be listed under Supplies.
	h in the court	ents to yout	om and board paymants to youth in the court	so provide roo	y plan. To al	their self-sufficienc	ir goals identified in	Justification: To provide fiscal support to youth aging out of foster care and to help them achieve their goals identified in their self-sufficiency plan. To also provide roo
	les should be	\$ ogram suppli	Total: al or anticipated pro	Listing of typic	ot required.	general items are n	es, etc. Unit cost for	Operating Total: \$ List tangible and expendable personal property, such as office supplies, program supplies, etc. Unit cost for general items are not required. Listing of typical or anticipated program supplies should be included. If providing meals, snacks, or basic nutrition, include these costs here.
						for each trip.	n F48 and complete	If traveling to more than 1 out-of-state destination, copy section above, revise formula in F48 and complete for each trip
								Justification: Who will travel and why
"Revise as needed to	•	S						In-State Travel
						plete for each trip	n Cell F33 and com	If traveling to more than 1 out-of-state destination, copy section above, revise formula in Cell F33 and complete for each trip
revise as needed to incl		40						Out-of-State Travel
	e unless the	ts) as a guid	Total: or mileage (54.0 cen	d State rates fo	v.gsa.gov) an	lodging (go to www ire special justifica	es for per diem and standard fares requi	Travel/Training Total: \$ Identify staff who will travel, the purpose, frequency, and projected costs. Utilize GSA rates for per diem and lodging (go to www.gsa.gov) and State rates for mileage (54.0 cents) as a guide unless the organization's policies specify lower rates for these expenses. Out-of-state travel or non-standard fares require special justification.
	15,000.00	60	Total:			5,485.01	•	Total Fringe Cost \$
	13,000.00		0 3	3			_	achieve their goals identified in their self-sufficiency independent Living plan. (Goal #1)
	15,000,00	3	200	7,00K	2	113,923,78	se .	Valerie Welsh Senior Human Services Case Worker (#70001121) Senior Human Services Case Worker (#70001121) 11 years in current position (20.5 years with Agency) Provide case management and fiscal support to help youth aging out of foster care
	Amount Requested	Amo	Months	% of Time	Fringe Rate		Annual Salary	
15,000.00 "revise this formula as needed to include each position listed	15,000.00	~	Fringe Total:	Including I		yrant.	nd total cost to this g	Total Personnel Costs List Staff, positions, percent of time to be spent on the project, rate of pay, fringe rate, and total cost to this grant.

Add more as necessary and adjust formula in F112 to reflect changes.
For FY23, Washoe County has set a Provisional indirect rate of 12%. However, in Indirect costs represent the expenses of doing business that are not readily identified with a particular grant, contract, project function, or activity, but are necessary for the general operation of the organization and the conduct of activities it performs. This will be a percentage that cannot exceed 10% of Direct Expenses. Note that the formula in Cell F112 will automatically calculated 10%. Applicants may override this formula only to request a lower indirect rate. TOTAL DIRECT CHARGES purposes of this budget. Per Washoe County policy, indirect is calculated using only order to comply with State requirements, this rate has been reduced to 10% for the employment readiness, personal and professional readiness, educational assistance, transportation/driving needs, medical/behavioral assistance, food vouchers, travel for Assistance for youth needing intensive support, housing, basic needs, food vouchers, counseling, services to reduce high risk behaviors, child care and parenting needs, scholarships that are a component of a larger project or program may be included here, but require special justification. Identify and justify these expenditures, which can include virtually any relevant expenditure associated with the project, such as audit costs, car insurance, client transportation, etc. Stipends or TOTAL BUDGET 10% of Base Salary (Senior Case Worker) Justification. Include narrative to justify any special budget line items included in this category, such as stipends, scholarships, marketing brochures, or public information. The budget piece to project Youth Advisory Board snacks for participants. (Goal #3) AB350 Room & Board (Goal #2) FAFFY Youth Stipend (Goal #2) appropriate supports and services for youth aging out of foster care (Goal #1) relationship connections, stipends for youth participation in policy meetings, and other Method of Accountability: Vendor contract, invoices, youth UNITY case notes *Sole Source Justification: N/A Scope of Work: Private attorney will be contracted with HSA and youth to assist youth with public guardian petitions and immigration assistance. (Goal #1) Period of Performance: July 1, 2024 - June 30, 2025 Method of Selection: Competitive Bid Method of Accountability: Vendor contract, invoices, youth UNITY case notes Sole Source Justification: Provider is the only one currenty in the area to provide these direct case management and housing services to youth aging out of foster care. (Goal #1) Scope of Work: Monal Village will provide mentoring services to include safe and healthy living, budgeting and time management skills, connections to communty activities, employment/education or vocational training, housing and assisting youth in learning to advocate for themselves will also providing emotional support as they learn to become independent adults. (Goal #1) Method of Selection: Sole Source Name of Contractor/Subrecipient: Monai Village Supportive Living Method of Accountability: Vendor contract, invoices, youth UNITY case notes *Sole Source Justification: Existing contract from RFP process Name of Contractor/Subrecipient: TBD Period of Performance; July 1, 2025 - June 30, 2026 approx. 35 youth approx. 10 youth approx. 25 youth x \$200 x 12 mo. approx. 15 youth / mo. Approximately 4 youth 2 youth 10% \$ 113,923.78 \$ \$5,750.00 12 months per year 10,000.00 59,000.00 27,780.00 15,000.00 1,000.00 Total: 49 64 148,500.00 97,780.00 1,500.00 23,000.00 3,000.00 11.0190

- Department of Health and Human Services policy allows no more than 10% flexibility of the total budget category not to exceed amount of the subaward, within the approved Scope of Work/Budget. Subrecipient will obtain written permission to redistribute funds within categories. Note: the redistribution cannot alter the total amount of the subaward. Modifications in excess of 10% require a formal amendment.
- Equipment purchased with these funds belongs to the federal program from which this funding was appropriated and shall be returned to the
 program upon termination of this agreement.
- Travel expenses, per diem, and other related expenses must conform to the procedures and rates allowed for State officers and employees. It
 is the Policy of the Board of Examiners to restrict contractors/Subrecipients to the same rates and procedures allowed State Employees. The
 State of Nevada reimburses at rates comparable to the rates established by the US General Services Administration, with some exceptions
 (State Administrative Manual 0200.0 and 0320.0).
- The program Contract Monitor or Program Manager shall, when federal funding requires a specific match, maintenance of effort (MOE), "inkind", or earmarking (set-aside) of funds for a specific purpose, have the means necessary to identify that the match, MOE, "in-kind", or earmarking (set-aside) has been accomplished at the end of the grant year. If a specific vendor or subrecipient has been identified in the grant application to achieve part or all of the match, MOE, "in-kind", or earmarking (set-aside), then this shall also be identified in the scope of work as a requirement and a deliverable, including a report of accomplishment at the end of each quarter to document that the match, MOE, "in-kind", or earmarking (set-aside) was achieved. These reports shall be held on file in the program for audit purposes, and shall be furnished as documentation for match, MOE, "in-kind", or earmarking (set-aside) reporting on the Financial Status Report (FSR) 90 days after the end of the grant period.

The Subrecipient agrees:

To request reimbursement according to the schedule specified below for the actual expenses incurred related to the Scope of Work during the subaward period.

- Total reimbursement through this subaward will not exceed \$150,000.00.
- Requests for Reimbursement will be accompanied by supporting documentation, including a line item description of expenses incurred;
- Indicate what additional supporting documentation is needed in order to request reimbursement.
- Additional expenditure detail will be provided upon request from the Department.
- The Subrecipient will, in the performance of the Scope of Work specified in this subaward, perform functions and/or activities that could
 involve confidential information; therefore, the Subrecipient is requested to fill out Section G, which is specific to this subaward, and will
 be in effect for the term of this subaward.

Additionally, the Subrecipient agrees to provide:

- A complete financial accounting of all expenditures to the Department within 30 days of the <u>CLOSE OF THE SUBAWARD PERIOD</u>. Any
 un-obligated funds shall be returned to the Department at that time, or if not already requested, shall be deducted from the final award.
- Any work performed after the SUBAWARD PERIOD will not be reimbursed.
- If a Request for Reimbursement (RFR) is received after the 30-day closing period, the Department may not be able to provide reimbursement.
- If a credit is owed to the Department after the 30-day closing period, the funds must be returned to the Department within 30 days of identification.

The Department agrees:

- Identify specific items the program must provide or accomplish to ensure successful completion of this project, such as:
 - Providing technical assistance, upon request from the Subrecipient;
 - Providing prior approval of reports or documents to be developed;
- The Department reserves the right to hold reimbursement under this subaward until any delinquent forms, reports, and expenditure
 documentation are submitted to and accepted by the Department.

Both parties agree:

- All reports of expenditures and requests for reimbursement processed by the Department are SUBJECT TO AUDIT.
- This subaward agreement may be TERMINATED by either party prior to the date set forth on the Notice of Subaward, provided the termination shall not be effective until 30 days after a party has served written notice upon the other party. This agreement may be terminated by mutual consent of both parties or unilaterally by either party without cause. The parties expressly agree that this Agreement shall be terminated immediately if for any reason the Department, state, and/or federal funding ability to satisfy this Agreement is withdrawn, limited, or impaired.

Financial Reporting Requirements

- A Request for Reimbursement is due on a monthly basis, based on the terms of the subaward agreement, no later than the 15th of the month.
- Reimbursement is based on actual expenditures incurred during the period being reported.
- · Payment will not be processed without all reporting being current.
- · Reimbursement may only be claimed for expenditures approved within the Notice of Subaward.

Agency Ref. #:	325011-26-00
Budget Account:	3250
GL:	11

Draw #:

		Request for Rein	nbursement		· ·	
Program Name: Fund to Assist Former Foster Youth	(FAFFY)		Subrecipient's Nam Washoe County Hum			
Address: 4126 Technology Way, 3 rd Floor Carson City, NV 89706-2023		:	Address: 350 S. Center Street Reno, NV 89501-2103			
<u>Subaward Period</u> : July 1, 2025 – June 30, 2026			Subrecipient's: EIN: 88 Vendor #: T4	-6000138 I0283400A		
	FINANCIA	AL REPORT AND REC	QUEST FOR REIMBU	RSEMENT		
	Month(s):	companied by expendi		Calendar year: 202	25	
Approved Budget Category	Approved Budget	Total Prior Requests	Current Request	Year to Date Total	Budget Balance	Percent Expended
1. Personnel	\$15,000.00	\$0.00	\$0.00	\$0.00	\$15,000.00	0.0%
2. Travel/Training	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	-
3. Operating	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	-
4. Equipment	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	-
5. Contractual/Consultant	\$35,720.00	\$0.00	\$0.00	\$0.00	\$35,720.00	0.0%
6. Other	\$97,780.00	\$0.00	\$0.00	\$0.00	\$97,780.00	0.0%
7. Indirect	\$1,500.00	\$0.00	\$0.00	\$0.00	\$1,500.00	0.0%
Total \$150,000.00 \$0.00 \$0.00 \$150,000.00 0.0%						0.0%
	THE PERSON NAMED IN COLUMN				COLUMN THE COLUMN TO SERVE	NUMBER OF
MATCH REPORTING	Approved Match Budget	Total Prior Reported Match	Current Match Reported	Year to Date Total	Match Balance	Percent Completed
	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	•
I, a duly authorized signatory for the subrecipient certify to the best of my knowledge and belief that this report is true, complete and accurate; that the expenditures, disbursements and cash receipts are for the purposes and objectives set forth in the terms and conditions of the grant award; and that the amount of this request is not in excess of current needs or, cumulatively for the grant term, in excess of the total approved grant award. I am aware that any false, fictitious or fraudulent information, or the omission of any material fact, may subject me to criminal, civil or administrative penalties for fraud, false statements, false claims, or otherwise. I verify that the cost allocation and backup documentation attached is correct.						
Authorized Signature		Title			Date	
Is program contact required?Y	es No	FOR DEPARTMENT Contact Person:			MESINE MISS	
Reason for contact:					_	
Fiscal review/approval date:	R 84-13			2 2		
Scope of Work review/approval date:					_	
ASO or Bureau Chief (as required):		<u>.</u>		Dete		

SECTION E

Audit Information Request

1.	Non-Federal entities that <u>expend</u> \$750,000.00 or more in total federal awards are conducted for that year, in accordance with 2 CFR § 200.501(a).	e required to have a single or prograr	n-specific audit
2.	Did your organization expend \$750,000 or more in all federal awards during your organization's most recent fiscal year?	YES X	NO 🗌
3.	When does your organization's fiscal year end?	June	
4.	What is the official name of your organization?	Washoe County	
5.	How often is your organization audited?	Annually	
6.	When was your last audit performed?	July 2024	
7.	What time-period did your last audit cover?	July 1, 2023 - June 30, 2024	
8.	Which accounting firm conducted your last audit?	Eide Bailly	

SECTION F

Notification of Utilization of Current or Former State Employee

For the purpose of State compliance with NRS 333.705, subrecipient represents and warrants that if subrecipient, or any employee of subrecipient who will be performing services under this subward, is a current employee of the State or was employed by the State within the preceding 24 months, subrecipient has disclosed the identity of such persons, and the services that each such person will perform, to the issuing Agency. Subrecipient agrees they will not utilize any of its employees who are Current State Employees or Former State Employees to perform services under this subward without first notifying the Agency and receiving from the Agency approval for the use of such persons. This prohibition applies equally to any subcontractors that may be used to perform the requirements of the subward. The provisions of this section do not apply to the employment of a former employee of an agency of this State who is not receiving retirement benefits under the Public Employees' Retirement System (PERS) during the duration of the subward.

Are any cur	rent or 1	former employees of the State of Nevada assigned to perform work on this subaward?
YES		If "YES", list the names of any current or former employees of the State and the services that each person will perform.
NO	X	Subrecipient agrees that if a current or former state employee is assigned to perform work on this subaward at any point after execution of this agreement, they must receive prior approval from the Department.
Name		Services
	_	

Subrecipient agrees that any employees listed cannot perform work until approval has been given from the Department.

SECTION G

Confidentiality Addendum

BETWEEN

Nevada Department of Health and Human Services

Hereinafter referred to as "Department"

and

Washoe County Human Services Agency

Hereinafter referred to as "Subrecipient"

This CONFIDENTIALITY ADDENDUM (the Addendum) is hereby entered into between Department and Subrecipient.

WHEREAS, Subrecipient may have access, view or be provided information, in conjunction with goods or services provided by Subrecipient to Department that is confidential and must be treated and protected as such.

NOW, THEREFORE, Department and Subrecipient agree as follows:

I. **DEFINITIONS**

The following terms shall have the meaning ascribed to them in this Section. Other capitalized terms shall have the meaning as described to them in the context in which they first appear.

- Agreement shall refer to this document and that agreement to which this addendum is made a part.
- Confidential Information shall mean any individually identifiable information, health information or other information in any form or media.
- 3. Subrecipient shall mean the name of the organization described above.
- 4. Required by Law shall mean a mandate contained in law that compels a use or disclosure of information.

II. TERM

The term of this Addendum shall commence as of the effective date of the primary inter-local or other agreement and shall expire when all information provided by Department or created by Subrecipient from that confidential information is destroyed or returned, if feasible, to Department pursuant to Clause VI.

III. LIMITS ON USE AND DISCLOSURE ESTABLISHED BY TERMS OF CONTRACT OR LAW

Subrecipient hereby agrees it shall not use or disclose the confidential information provided, viewed or made available by Department for any purpose other than as permitted by Agreement or required by law.

IV. PERMITTED USES AND DISCLOSURES OF INFORMATION BY SUBRECIPIENT

Subrecipient shall be permitted to use and/or disclose information accessed, viewed or provided from Department for the purpose(s) required in fulfilling its responsibilities under the primary agreement.

V. USE OR DISCLOSURE OF INFORMATION

Subrecipient may use information as stipulated in the primary agreement if necessary, for the proper management and administration of Subrecipient; to carry out legal responsibilities of Subrecipient; and to provide data aggregation services relating to the health care operations of Department. Subrecipient may disclose information if:

- 1. The disclosure is required by law; or
- 2. The disclosure is allowed by the agreement to which this Addendum is made a part; or
- 3. The Subrecipient has obtained written approval from the Department.

VI. OBLIGATIONS OF SUBRECIPIENT

Agents and Subcontractors. Subrecipient shall ensure by subcontract that any agents or subcontractors to whom it provides or
makes available information, will be bound by the same restrictions and conditions on the access, view or use of confidential information
that apply to Subrecipient and are contained in Agreement.

- Appropriate Safeguards. Subrecipient will use appropriate safeguards to prevent use or disclosure of confidential information other than as provided for by Agreement.
- Reporting Improper Use or Disclosure. Subrecipient will immediately report in writing to Department any use or disclosure of confidential information not provided for by Agreement of which it becomes aware.
- 4. **Return or Destruction of Confidential Information.** Upon termination of Agreement, Subrecipient will return or destroy all confidential information created or received by Subrecipient on behalf of Department. If returning or destroying confidential information at termination of Agreement is not feasible, Subrecipient will extend the protections of Agreement to that confidential information as long as the return or destruction is infeasible. All confidential information of which the Subrecipient maintains will not be used or disclosed.

IN WITNESS WHEREOF, Subrecipient and the Department have agreed to the terms of the above written Addendum as of the effective date of the agreement to which this Addendum is made a part.