

Grants Management Advisory Committee Meeting (GMAC)
DRAFT MINUTES
December 13, 2012

Videoconference Locations:

State Health Division
4150 Technology Way Suite 303
Carson City, NV

Division of Child and Family Services
1010 Ruby Vista Dr. Suite 101
Elko, Nevada

Early Intervention Office
3811 W. Charleston Suite 112
Las Vegas, NV 89102

Members Present

Jeff Fontaine, Chair
Dr. Ina Dorman
Marcia O'Malley
Connie McMullen
Denise Tanata-Ashby

Robert Martinez, Vice Chair
Cindy Roragen
Arthur de Joya
Ken Lange
Al Conklin

Members Absent

Kevin Schiller
Dr. David Jensen
Pauline Salla

Department of Health and Human Services (DHHS) Staff

Laurie Olson, Chief, Grants Management Unit
Rique Robb, Social Services Specialist (SSPS) III
Gary Gobelman, SSPS III
Toby Hyman, SSPS III
Pat Petrie, SSPS III
Gloria Sulhoff, Administrative Assistant II
Toni Cordova, Administrative Assistant III

I. Welcome, Introductions and Announcements

Chair Jeff Fontaine opened the meeting with a roll call and established that a quorum was present.

II. Public Comment

Las Vegas – None
Elko – None
Carson City – None

III. Approval of Minutes

Approval of the September 13, 2012 GMAC Minutes

Motion: Connie McMullen
Second: Denise Tanata-Ashby
Vote: Unanimously Approved

IV. Reports and Updates from GMU

➤ **FY12 Annual Grants Management Unit Report**

Laurie Olson, GMU chief, reported that the GMU annual report was issued in early October 2012. In FY12, 124 grants and seven contracts were managed. About 92% of grantees met or exceeded 80% of their goals while stretching their limited dollars to serve more individuals and families than originally projected. The GMU and Fiscal Unit in the Director's Office have expanded fiscal accountability requirements over the past five years, which has reduced audit findings. A few grantees have recurring issues but they are being resolved. Ms. Olson thanked grantees for their cooperation in the GMU's efforts to enhance fiscal accountability.

➤ **FY13 Social Services Block Grant – Title XX Surplus**

In late August, the Fiscal Unit identified \$1.2 million of unobligated Title XX funds. The surplus accumulated for a variety of reasons – more funds received than projected, the difference between the federal and state fiscal years, small amount of funds not drawn by grantees. The Legislature has the authority to decide whether to bring these funds into the budget and for what purpose.

At its December meeting, the Interim Finance Committee (IFC) voted to increase the Title XX budget authority by \$273,329 for FY13. The GMU received approval for the following expenditures.

- ❖ \$948 for a webinar system to provide remote trainings/orientations.
- ❖ \$25,706 for Differential Response (DR) training that includes attendance at a national conference held in Las Vegas.
- ❖ \$171,675 to restore Family Resource Centers (FRCs) to the FY12 funding level.
- ❖ \$75,000 for a strategic planning process around information and referral (I&R).

Ms. Olson noted that each individual FRC may not be restored to its FY12 funding level due to a change in the funding formula. She also explained that the I&R strategic planning process was deemed necessary because the recent Statewide Community Needs Assessment placed "help finding information" among the top priorities despite the fact that there are many places to find help including 2-1-1, FRCs, Aging and Disability Resource Centers. This indicates a need to build a more coordinated system with better public awareness).

Any other uses of the surplus Title XX funds will have to go before the Legislature or the IFC.

Mr. Fontaine: In regards to the surplus, what is the surplus and how can we get more of these funds, is there a match?

Ms. Olson: There is no match requirement and the only way to get more of this funding is to propose projects that would be approved by the Legislature or the IFC. It will be their call to approve those funds.

Mr. Fontaine: Does the GMAC have the ability to request or recommend projects so that those funds can be allocated?

Ms. Olson: The GMAC would have to call a special meeting, make a recommendation to Mike Willden, then present your requests to the IFC at their next meeting. We submitted our proposals in August and it took until December to obtain approval.

Ms. McMullen: Where does the \$273,000 go?

Laurie Olson: The IFC approved \$273,000 in funding for our specific requests (as outlined above). The rest will remain in reserve. Typically, 90% of the money from Title XX is legislatively approved for specific state

agencies and the GMU receives approximately 10% to grant to community-based agencies. One reason for not rushing to spend the surplus is that Title XX may be subject to a federal cut and, if so, we may need the reserve.

➤ **FY14-15 Agency Request Budget**

Ms. Olson reported that all State departments submitted their Agency Request budgets to the Budget Office at the end of August. The DHHS budget included funds administered by the Grants Management Unit. Requests that will support grant-funded programs include the following.

- ❖ Problem Gambling (competitive – oversight by the ACPG) – \$859,247
- ❖ Community Services Block Grant (CSBG – federally approved allocations to designated community action agencies) – \$3,386,138
- ❖ Social Services Block Grant (SSBG-Title XX) – \$1,159,969
- ❖ Children’s Trust Fund/Community-Based Child Abuse Prevention (CTF/CBCAP – about a 56% to 44% split between death and birth certificate fees and federal leveraging) – \$764,680
- ❖ Fund for a Healthy Nevada (FHN)
 - \$1 million for Tobacco Cessation – administered by the Health Division since July 2010
 - \$4.6 million for Wellness – formerly Children’s Health, briefly called All Nevadans after SB421 expanded the language to include programs that improve the well-being of all Nevadans
 - \$1.3 million for Disability programs including Respite, Positive Behavior Support and Independent Living
 - \$1.4 million for DR and \$1.3 million for FRCs (State General Fund until FY13 when funding switched to FHN – fund availability created by elimination of Trust Fund for Public Health)

➤ **Proposed Spending Plan for the Fund for a Healthy Nevada (FHN)**

- ❖ Per SB421 passed by the 2011 Legislature, funding silos were removed and three advisory bodies were charged with conducting a statewide community needs assessment to determine funding priorities [GMAC, Commission on Aging (CoA), Commission on Services for Persons with Disabilities (CSPD)].
- ❖ The GMU worked on behalf of the GMAC to gather community input through online and paper surveys, public forums, and public comment at GMAC meetings.
- ❖ Per statute, the GMAC and the other two advisory bodies made recommendations to the DHHS Director in June 30, 2012.
- ❖ The Director considered these recommendations along with a variety of other factors in developing the FHN Proposed Spending Plan. Other factors included duplication of effort, funding history, and the reduction or elimination of funding sources that support vital programs.
- ❖ This was a new experience for all staff involved in developing the FHN Proposed Spending Plan. It was a huge responsibility to help interpret and coalesce the three sets of recommendations, and develop a plan that, as closely as possible, reflected the desire of those who participated in the public process. Not everything could be funded – and funded adequately.

➤ **FHN Disability**

- ❖ The GMAC and the GMU oversee Respite, Independent Living Grants and Positive Behavior Support (PBS). The \$1.3 million total for these three program areas is about the same funding level as the past three years.
- ❖ Historically, the GMAC and the GMU have attempted to evenly distribute funds in this category among the three program areas but, according to recommendations made by the three advisory bodies, there is a greater need for Respite than PBS and Independent Living. Therefore, it was proposed that Respite receive 50% of the available funding and PBS and Independent Living each receive 25%.

- ❖ Other line items in the FHN Disability budget (e.g., Traumatic Brain Injury, Autism, Family Preservation) are not in the GMU's purview.

➤ **FHN Wellness (formerly Children's Healthy or All Nevadans)**

- ❖ The GMAC/GMU Statewide Community Needs Assessment clearly indicated that food insecurity is the number one issue facing Nevadans. The FHN Proposed Spending Plan includes \$2.3 million to support hunger relief projects (about twice as much as the GMU/GMAC currently uses for this purpose).
- ❖ Other FHN funding proposals within the GMU's purview include:
 - \$300,000 to support Health Access projects;
 - \$1.3 million to support FRCs;
 - \$1.3 million to support DR, and
 - \$500,000 to support 2-1-1.
- ❖ Another \$500,000 is proposed for immunization projects. These funds would be awarded to the Health Division.
- ❖ Suicide Prevention would also receive \$500,000 under the proposed spending plan.

Ms. Olson noted that Oral Health programs for children would not be funded in FY14-15 under the proposed spending plan. Although dental care was among the GMAC's recommendations for priorities under the general topic of Health, funding services for children under FHN would be duplicative. Ms. Olson explained that the Oral Health programs currently funded under FHN generally target schools where at least 75% of the children are eligible for free lunches. It is reasonable to assume then, that many of these children are eligible for Medicaid, which covers dental care for children. Now that the Governor has announced that Nevada will expand Medicaid, even more children will be eligible. The FHN statute specifically states that we should not supplant existing funding and that we should maximize other local and federal resources. Medicaid is an existing resource and much of the funding is federal. Conversely, dental for senior citizens is going to be pursued with FHN dollars by the Senior Rx program. The Senior Rx provision in the FHN statute specifically allows it and Medicare does not cover dental.

➤ **The Next Step**

- ❖ The GMU/GMAC's role in the budget development process is complete. We conducted the Needs Assessment and the GMAC made its recommendations.
- ❖ The Governor will release his Recommended Budget shortly before/after the State of the State address on January 16, 2013.
- ❖ The Legislature convenes February 4, 2013 and will begin hearing budgets shortly thereafter. Anyone who wishes to testify about the DHHS budget, or any other budget, should watch the legislative website for meeting announcements and agendas (<http://www.leg.state.nv.us/>).

Mr. Fontaine: Were the amounts requested stable funding? Increases/decreases?

Ms. Olson: Mostly stable funding with the exception of the hunger relief projects. There are no changes in our operating costs. All budgets were submitted with the restoration of pay cuts and furloughs, but the Budget Office rejected those restorations.

Mr. Fontaine: What can you tell us about funding for Health Access?

Ms. Olson: We are trying to determine how to best frame and structure the Request for Applications around Health Access.

Mr. Fontaine: Once the Governor's Recommended Budget goes to Legislature, is there a role for this committee in that process?

Ms. Olson: The GMAC role in budget development is complete. Your role was to conduct the Statewide Community Needs Assessment, listen to public testimony and make your recommendations to Mike Willden. If the GMAC wanted to make any other impact, you could individually testify if you so choose. Another possibility is at your March meeting, agree on some statement you would like to make at the Legislature for the record. Representatives of the Advisory Committee on Problem Gambling are going to go to the Legislature and voice their opinion on funding.

➤ Mr. Fontaine recognized members of the public and allowed comments and questions.

- Paula Berkley of the Food Bank of Northern Nevada asked which State agency will receive Family Preservation Funds. Ms. Olson responded that it would be the Division of Mental Health and Developmental Services.
- Michele Oke of the Pace Coalition asked for clarification about funding for Oral Health. Ms. Olson responded that dental care for children is not included in the FHN Proposed Spending Plan because it was considered a duplication of effort. Medicaid pays for children's dental care and programs currently funded through FHN target schools where the majority of children are probably eligible for Medicaid.
- In response to questions about 2-1-1 funding, Ms. Olson explained that 2-1-1 has so far been supported by small grants from multiple sources. The FHN Proposed Spending Plan recommends allocating \$500,000 from one funding source – FHN Wellness. She said that the award process for 2-1-1 will not be competitive. The existing 2-1-1 grantees are considered sole source providers and requiring them to submit proposals would not be an effective use of their time or the GMAC's time. However, the GMU recognizes that the system is not perfect; hence, the I&R strategic planning process. In addition, the GMU awarded \$11,000 to the United Way of Northern Nevada to support a part-time statewide coordinator for 2-1-1. (This was accomplished with funds released when a food security grantee declined their award.)

V. FY14-15 Request for Applications

➤ **Food Security Strategic Planning Process**

Gary Gobelman, SSPS-III, reported that a final plan will be available to the public once it is finalized by DHHS Director Mike Willden and the Governor. Representatives from several State departments and the food safety network have been working on this project since April 2012. A contract was established with Social Entrepreneurs, Inc., (SEI) to provide research, materials and facilitation of the four working groups. Mr. Gobelman said the LEAD group kept us on track and reviewed the policy issues and how we can improve. The FEED group focused on increasing service levels, expansion of food programs, outreach strategies and strategies to reduce reliance on the food safety network. The GROW group focused on increasing the use of locally grown products by the food safety network and developing a concept for mapping food safety assets across the state. The REACH group focused on coordinating the purchasing, storage and distribution process to improve cost efficiency and technology to track clients. SEI researched eight different plans from other states to assist in their process with a focus on Strategies, Policy, Nutritional Education, and Statistics.

Mr. Gobelman noted that the rate of food insecurity in Nevada is 16%, meaning one out of six people are food insecure. Nevada is 51st behind the District of Columbia in free breakfast/lunches, 53rd in regard to school lunch programs and 46th in SNAP in terms of level of served vs. eligibility. The SNAP program is a cornerstone of the food safety network because it is an uncapped program on the federal side.

➤ **Summary of Request for Applications Process**

Ms. Olson cautioned that, while an RFA will be issued after the first of the year, budget decisions by the 2013 Legislature could alter the process. If so, an amendment to the RFA will be published. In addition to the FHN allocations discussed earlier, the RFA will include \$1,159,969 of Title XX funds. The emphasis for Title XX will be Parent Education, Crisis Intervention and Child Self-Protection but food security projects and respite care are also allowable under federal rules. CTF/CBCAP is budgeted at \$765,000. This money must be spent on activities that prevent child abuse and neglect.

Ms. Olson said that ideas for food security projects will be discussed with the Food Security Strategic Plan steering committee before they are finalized and that the GMU is working to determine how best to structure the RFA for Health Access projects.

The GMU is expecting about 100 proposals, which translates to significant evaluation work for GMAC members. Ms. Olson said that one RFA will be issued but there will be separate online applications for specific program areas. The online process will be one step as opposed to the two steps required in the last online process.

Mr. Gobelman elaborated on plans for the food security solicitation. Tentatively, two kinds of projects will be solicited – Hunger One-Stop Shops and new food access points in underserved areas. The One-Stop Shops will emphasize distribution of food, screening, referral and follow up. The GMU expects to fund up to three proposals in Washoe County, up to three in Clark County and two or more in the rural areas. Proposals must be collaborative in nature and be structured as formal partnerships involving two or more agencies.

Ms. Tanata-Ashby: What is the approximate number of food insecurity proposals the GMU expects and how was this number determined?

Mr. Gobelman: We are looking for up to three proposals in each geographic area (north, south, rural). We're looking for collaborative projects, so we assume people will form a network of agencies in order to submit a proposal. We don't necessarily know what the best strategies are for doing the outreach, screening and referral or the best strategies for organizing the food pantries and determining the procedures for distributing food. We had a difficult time envisioning that there would be more than three networks in each urban area.

Ms. Olson: Also, we think it is important to adequately fund fewer programs rather than fund many programs inadequately. That is one reason why we are looking at limiting the number of One-Stop Shops.

Ms. Tanata-Ashby: Is the funding going to be dispersed evenly between the north and south?

Ms. Olson: We do take geography into consideration when monies are dispersed. The number of One-Stop Shops doesn't necessarily equate to the amount of funding that would be going to Las Vegas vs. Washoe. It depends on the quality of proposals that are submitted.

Mr. Fontaine recognized Melissa Aguire of Communities in Schools of Northeast Nevada who asked for the amount of funding earmarked for the rural areas.

Mr. Gobelman: We haven't yet identified that, but we do say that we are interested in rural county proposals that cover multiple counties.

➤ **Request for Applications Timeline**

Ms. Olson reviewed the RFA timeline.

- Publication February 4, 2013
- Mandatory orientations for applicants the week of February 4th
- Deadline for submission of substantive questions Friday, February 15th
- Responses to questions posted to GMU website Tuesday, February 19th
- Technical questions may continue throughout the process
- Applications due by close of business Monday, March 4th
- GMAC meeting to orient members to evaluation process Thursday, March 14th
- GMU completes staff reviews Tuesday, April 2nd, and passes proposals to GMAC Friday, April 5th
- GMAC Subcommittees submit scores to GMU Monday, April 22nd
- GMAC Subcommittees meet between April 24th and 30th
- Full GMAC meets Thursday, May 9th, to hear Subcommittee recommendations and make final recommendations
- DHHS Director Mike Willden makes final decisions by Friday, May 17th
- GMU works with grantees to finalize budgets and scope of work
- Grants become effective Monday, July 1st

➤ **GMAC Subcommittees – Requirements, Appointments, Possible Use of Subject Matter Experts**

Ms. Olson reported that, according to the GMAC bylaws, the Chair is responsible for appointing members to subcommittees. However, before that occurs, members will be given the opportunity to request specific appointments. There will be three subcommittees: Prevention of Child Abuse and Neglect, Disability Services and Wellness. Ms. Olson recommended that members volunteer for only one subcommittee since there will be many proposals to evaluate. She suggested that members try to populate the subcommittees evenly and consider their roles on the GMAC when requesting appointments. She noted that the GMAC bylaws also allow non-GMAC members to sit on subcommittees and recommended that the committee take advantage of that option. Subcommittees are subject to the Open Meeting Law.

Mr. Fontaine asked for volunteers and made the following appointments.

- **Prevention of Child Abuse and Neglect** – Dr. Ina Dorman, Al Conklin, Kevin Schiller, Dr. David Jensen and Pauline Salla.
- **Disability Services** – Ken Lange, Cindy Roragen, Connie McMullen Marcia O'Malley.
- **Wellness** – Arthur de Joya, Robert Martinez, Denise Tanata-Ashby and Jeff Fontaine.

The subcommittees will select their own chairs.

Ms. O'Malley: I would strongly recommend that someone from the community who is familiar with the health issues for disabled youth and people with disabilities be appointed to the Wellness Subcommittee.

Mr. Fontaine: Is there an interest in extending an invite to other community members to participate in the other two subcommittees?

Mr. Martinez: Yes, we are all in agreement with that recommendation in Las Vegas.

Denise Tanata-Ashby: The people who are appointed to a subcommittee cannot be a grantee. Is that correct?

Mr. Fontaine: That would be correct, yes. I will leave it up to each individual subcommittee, but please limit the number to one or two people. Will this be a subcommittee action?

Ms. Olson: Let me review the bylaws and then make a suggestion.

Mr. Fontaine: The bylaws give the chair the option to appoint, but you can relinquish that power to the subcommittee chair. I feel that the best approach would be that the subcommittee members get the names to Laurie and once the names are all in to her, I can do the appointments and that way the members will be on the subcommittees earlier rather than later.

Motion: Ms. O'Malley moved that the chair make the appointments once the names are submitted to the chief of the GMU.

Second: Mr. Martinez

Vote: Unanimously Approved

VI. Public Comment:

Elko – None

Las Vegas – None

Carson City – None

VII. Adjournment

Motion: Ms. McMullen

Second: Mr. Lange

Vote: Unanimously Approved

Adjournment at 11:20 a.m.