

Recorder's Office Cover Sheet

Recording Requested By:

Name: Wendy Garrison

Department: China Spring Youth Camp



00171736202309996480050059

SHAWNYNE GARREN, RECORDER

Type of Document: (please select one)

- Agreement
- Contract
- Grant
- Change Order
- Easement
- Other

specify: _____



State of Nevada
 Department of Health and Human Services
Division of Child & Family Services
 (hereinafter referred to as the Division)

Subaward # 21027-22-008
 Budget Account: 3147
 Category: 40
 GL: _____
 Job Number: 21027A21

SUBAWARD AMENDMENT # 1

Grants Management Unit (GMU) Child Welfare Grants			
<input type="checkbox"/> (Chafee) Chafee Independent Living <input type="checkbox"/> (FAFFY) Transition from Foster Care <input type="checkbox"/> (ETV) Educational Training Voucher <input type="checkbox"/> (IVB-2) Title IVB-2, Caseworker Visitation <input type="checkbox"/> (IVB2-FF) Title IVB-2, Family First Transition Act <input type="checkbox"/> (AI) Adoption Incentive <input type="checkbox"/> (CJA) Children's Justice Act	<input type="checkbox"/> (CANS) Child Abuse and Neglect <input type="checkbox"/> (CDR) Child Death Review <input type="checkbox"/> (DR) Differential Response <input type="checkbox"/> (CTF) Children's Trust Fund <input type="checkbox"/> (CBCAP) Community Based Child Abuse <input checked="" type="checkbox"/> (ARPA) American Rescue Plan Act 2021		
Email to: DCFS Grants Management Unit <u>DCFSgrants@dcfs.nv.gov</u>		Subrecipient Name: County of Douglas dba China Spring Youth Camp	
Address: 4126 Technology Way, Suite 100 Carson City, Nevada 89706		Address: Mailing Address: PO Box 218, Minden, NV 89423-0218 Physical Address: 225 China Spring Rd., Gardnerville, NV 89410 Contact Person: Wendy Garrison	
Subaward Period: July 1, 2022-June 30, 2023		Amendment Effective Date: (Upon approval by all parties)	
This amendment reflects a change to: <input type="checkbox"/> Scope of Work <input checked="" type="checkbox"/> Term <input checked="" type="checkbox"/> Budget			
Reason for Amendment: To provide accurate reimbursement under appropriate categories.			
Reference GIR-23-19: SUBAWARD AMENDMENTS			
Required Changes: Extend performance period through 06/30/2025. Update the personnel category to reduce the number of staff from 6 to 2 employees and 2 contractors to ensure services are provided to youth with substance use and mental health issues.			
Approved Budget Categories	Current Budget	Amended Adjustments	Revised Budget
1. Personnel	\$686,994.00	\$0.00	\$686,994.00
2. Travel/Training	\$0.00	\$0.00	\$0.00
3. Operating	\$0.00	\$0.00	\$0.00
4. Equipment	\$0.00	\$0.00	\$0.00
5. Contractual/Consultant	\$0.00	\$0.00	\$0.00
6. Other	\$0.00	\$0.00	\$0.00
TOTAL DIRECT COSTS	\$686,994.00	\$0.00	\$686,994.00
7. Indirect Costs	\$0.00	\$0.00	\$0.00
TOTAL APPROVED BUDGET	\$686,994.00	\$0.00	\$686,994.00
Incorporated Documents: Exhibit A: Revised Budget Narrative Exhibit B: Original Notice of Subaward and all previous amendments			

By signing this Amendment, the Authorized Subrecipient Official or their designee, Grants and Projects Analyst II, and Division of Child and Family Services Administrator acknowledge the above as the new standard of practice for the above referenced Subaward. Further, the undersigned understand this amendment does not alter, in any substantial way, the non-referenced contents of the Original Subaward and all of its Attachments.

Authorized Subrecipient Official Mark Gardner Chair of the Board of County Commissioners Grants and Projects Analyst II	Signature FILED	Date 8/8/23
Deputy Administrator, Division of Child and Family Services		NO. <u>2023-201</u> DATE <u>8/18/23</u>

DOUGLAS COUNTY CLERK
 1 MINDEN, NV

BY AL DEPUTY

<u>Total Personnel Costs</u>		Annual Salary	Fringe Rate	Including Fringe % of Time	Total: Months	Total: \$	Amount Requested
Dr. Jenna Sexton Assistant Director 362.1290.01 Overseeing Clinical & Managing staff to ensure Youth Programming and population are meeting target goals.							
		\$ 294,622.85	40%	100%	28	\$	412,472
UNK Dorm Prea Manager Ensure youth programs and youth behavior align with program goals to create stable and safe living environment							
		\$ 128,230.01	40%	100%	24	\$	179,522
Dr. Farnsworth Child Psychiatrist Contract Psychiatrist Contract to manage medications, and psychiatric needs of youth							
		\$ 50,000.00	0%	100%	13	\$	50,000.00
UNK PREA Coordinator Contract Assigning of an Agency Coordinator to ensure the Safety of the youth in accordance with the Federal Prison Rape Elimination Act (PREA)							
		\$ 45,000.00	0%	100%	12	\$	45,000.00
						Total:	\$ 686,994.00
<u>Travel/Training</u>						Total:	\$ -
<u>Operating</u>						Total:	\$ -
<u>Equipment</u>						Total:	\$ -
<u>Contractual</u>						Total:	\$ -
<u>Other</u>						Total:	\$ -
TOTAL DIRECT CHARGES						Total:	\$ 686,994.00
TOTAL BUDGET						Total:	\$ 686,994.00



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Agency Ref. #: 21027-22-008
 Budget Account: 3147
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 Job Number: 21027A21

NOTICE OF SUBAWARD

Program Name: Community Recovery Grant DCFS Grants Management Unit DCFSGrants@dcfs.nv.gov	Subrecipient's Name: County of Douglas dba China Spring Youth Camp Wendy Garrison wgarrison@douglas.nv.gov
Address: 4126 Technology Way, 3 rd Floor Carson City, NV 89706-2009	Address: Mailing Address: PO Box 218, Minden, NV 89423-0218 Physical Address: 225 China Spring Rd., Gardnerville, NV 89410
Subaward Period: July 1, 2022 through June 30, 2023	Subrecipient's: EIN: <u>89-6000031</u> Vendor #: <u>T40174400</u> Unique Entity ID: <u>KE5GF37F6F95</u>

Purpose of Award: Provide services to youth 12-18 and their families in the sixteen counties serviced by the Camp (all Counties except Clark) with substance use and mental health issues to reduce recidivism into the juvenile justice system.

Region(s) to be served: Statewide Specific County or counties: Washoe and Rural counties

Approved Budget Categories:	
1. Personnel	\$686,994.00
2. Travel/Training	\$0.00
3. Operating	\$0.00
4. Equipment	\$0.00
5. Contractual/Consultant	\$0.00
6. Other	\$0.00
TOTAL DIRECT COSTS	\$686,994.00
7. Indirect Costs	\$0.00
TOTAL APPROVED BUDGET	\$686,994.00

FEDERAL AWARD COMPUTATION:	
Total Obligated by this Action:	\$ 686,994.00
Cumulative Prior Awards this Budget Period:	\$ 0
Total Federal Funds Awarded to Date:	\$ 686,994.00
Match Required <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	
Amount Required this Action:	\$ 0
Amount Required Prior Awards:	\$ 0
Total Match Amount Required:	\$ 0
Research and Development (R&D) <input type="checkbox"/> Y <input checked="" type="checkbox"/> N	
Federal Budget Period: 03/03/2021 through 12/31/2024	
Federal Project Period: 03/03/2021 through 12/31/2026	

FOR AGENCY USE, ONLY

Source of Funds	% Funds:	CFDA:	FAIN:	Federal Grant #:	Federal Grant Award Date by Federal Agency:
American Rescue Plan Act of 2021, US Treasury-Coronavirus State Fiscal Recovery Funds	100	21.027	SLFRP2634	SLRFP2634	June 4, 2021

Agency Approved Indirect Rate: 0.00% **Subrecipient Approved Indirect Rate:** 0.00%

Terms and Conditions:
 In accepting these grant funds, it is understood that:

- This award is subject to the availability of appropriate funds.
- Expenditures must comply with any statutory guidelines, the DHHS Grant Instructions and Requirements, and the State Administrative Manual.
- Expenditures must be consistent with the narrative, goals and objectives, and budget as approved and documented.
- Subrecipient must comply with all applicable Federal regulations.
- Quarterly progress reports are due by the 15th of each month following the end of the quarter, unless specific exceptions are provided in writing by the grant administrator.
- Financial Status Reports and Requests for Funds must be submitted monthly, unless specific exceptions are provided in writing by the grant administrator.

Incorporated Documents:	
Section A: Grant Conditions and Assurances;	Section E: Audit Information Request;
Section B: Description of Services, Scope of Work and Deliverables;	Section F: Current/Former State Employee Disclaimer;
Section C: Budget and Financial Reporting Requirements;	Section G: DHHS Confidentiality Addendum;
Section D: Request for Reimbursement;	Section H: ARPA General Provisions and Assurances
	Section I: ARPA Terms and Conditions

Authorized Subrecipient Official's Name and Title	Signature	Date
Wendy Garrison Director	<i>Wendy Garrison</i>	12/1/22
Yaraseth Anaya-Lugo Social Services Program Specialist III	<i>McChesney Wall for Yaraseth Anaya-Lugo</i>	12/6/2022
For Cindy Pitlock Administrator, Division of Child & Family Services	<i>McChesney Wall for Cindy Pitlock</i>	12/7/22

COPY

Douglas County State of Nevada

CERTIFIED COPY

I certify that the document to which this certificate is attached is a full and correct copy of the original record on file in the Clerk-Treasurer's Office on this

18 day of August, 20 23

By [Signature] Deputy