



September 21, 2016

Joyce Dudley, District Attorney
Santa Barbara County
1112 Santa Barbara Street
Santa Barbara, CA 93101

Subject: **NOTIFICATION OF APPLICATION APPROVAL**
Elder Abuse Program
Subaward #: XE16 01 0420, Cal OES ID: 083-00000

Dear Ms. Dudley:

Congratulations! The California Governor's Office of Emergency Services (Cal OES) has approved your application in the amount of \$223,746, subject to Budget approval. A copy of your approved subaward is enclosed for your records.

Cal OES will make every effort to process payment requests within 45 days of receipt.

This subaward is subject to the Cal OES Subrecipient Handbook. You are encouraged to read and familiarize yourself with the Cal OES Subrecipient Handbook, which can be viewed on Cal OES website at www.caloes.ca.gov.

Any funds received in excess of current needs, approved amounts, or those found owed as a result of a close-out or audit, must be refunded to the State within 30 days upon receipt of an invoice from Cal OES.

Should you have questions on your subaward please contact your Program Specialist.

VSPS Grants Processing

Enclosure

c: Subrecipient's file

(Cal OES Use Only)

Cal OES#	083-00000-16	FIPS#	083-00000	VS #		Subaward #	XELW010420
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CALIFORNIA GOVERNOR'S OFFICE OF EMERGENCY SERVICES GRANT SUBAWARD FACE SHEET

The California Governor's Office of Emergency Services (Cal OES), makes a Grant Subaward of funds set forth to the following:

1. **Subrecipient:** County of Santa Barbara 1a. DUNS#: 131851219
2. **Implementing Agency:** District Attorney's Office 2a. DUNS#: 131851219
3. **Implementing Agency Address:** 1112 Santa Barbara Street Santa Barbara 93101-2008
Street City Zip+4
4. **Location of Project:** Santa Barbara Santa Barbara 93101-2008
City County Zip+4
5. **Disaster/Program Title:** Elder Abuse Program 6. **Performance Period:** 07/01/2016 to 06/30/2018
7. **Indirect Cost Rate:** N/A; 10% de minimis; Federally Approved ICR _____ %

Grant Year	Fund Source	A. State	B. Federal	C. Total	D. Cash Match	E. In-Kind Match	F. Total Match	G. Total Project Cost
2016	8. VOCA		\$ 223,746	55,937	\$ 74,582		55,937 \$ 74,582	279,083 \$ 298,328
Select	9. GJAO						\$ 0	\$ 0
Select	10. Select						\$ 0	\$ 0
Select	11. Select						\$ 0	\$ 0
Select	12. Select						\$ 0	\$ 0
TOTALS		\$ 0	\$ 223,746	\$ 223,746	55,937 \$ 74,582	\$ 0	55,937 \$ 74,582	12. G Total Project Cost: \$ 298,328

13. This Grant Subaward consists of this title page, the application for the grant, which is attached and made a part hereof, and the Assurances/Certifications. I hereby certify I am vested with the authority to enter into this Grant Subaward, and have the approval of the City/County Financial Officer, City Manager, County Administrator, Governing Board Chair, or other Approving Body. The Subrecipient certifies that all funds received pursuant to this agreement will be spent exclusively on the purposes specified in the Grant Subaward. The Subrecipient accepts this Grant Subaward and agrees to administer the grant project in accordance with the Grant Subaward as well as all applicable state and federal laws, audit requirements, federal program guidelines, and Cal OES policy and program guidance. The Subrecipient further agrees that the allocation of funds may be contingent on the enactment of the State Budget.

14. **Official Authorized to Sign for Subrecipient:** Joyce E. Dudley 15. **Federal Employer ID Number:** 95-6002833
- Name: Joyce E. Dudley Title: District Attorney
- Telephone: (805) 568-2306 (area code) FAX: (805) 568-2398 (area code) Email: jdudley@co.santa-barbara.ca.us
- Payment Mailing Address: 1112 Santa Barbara Street City: Santa Barbara Zip+4: 93101-2008
- Signature: Joyce E. Dudley Date: 2/11/2016

[FOR CAL OES USE ONLY]

I hereby certify upon my own personal knowledge that budgeted funds are available for the period and purposes of this expenditure stated above.

Mary Rucker 9/19/16 Sara Stillwell 9/19/16
 Cal OES Fiscal Officer Date Cal OES Director (or designee) Date

Yr: 2015-16 / Chapter: 23/ PCA No: 18405
 Item: 0690-102-0890 Component: 40.20.451
 FAIN #: 2015-VA-GX-0058 CPDA#: 16.575
 Federal Award Dates: 10/01/14 - 09/30/18
 Fund: Federal Trust
 Program: Elder Abuse Program
 Match Req.: 20%, C/IK based on TPC
 Project No.: 15VOCA Amount: \$ 223,746

RECEIVED FEB 18 2016

ML# 100990

**CALIFORNIA GOVERNOR'S OFFICE OF EMERGENCY SERVICES
SUPPLEMENTAL GRANT SUBAWARD INFORMATION**

1. Cal OES Contact Information Section:

Governor's Office of Emergency Services
Mark S. Ghilarducci, Director
3650 Schriever Avenue
Mather, CA 95655
(916) 845-8506 phone • (916) 845-8511 fax

2. Federal Awarding Agency Section:

Fund Year	Federal Program Fund / CFDA #	Federal Awarding Agency	Total Federal Award Amount	Total Local Assistance Amount
2015	Victims of Crime Act (VOCA) / 16.575	Office for Victims of Crime	\$232,722,931	\$223,414,013
Choose an item.	Choose an item.	Choose an item.	\$	\$
Choose an item.	Choose an item.	Choose an item.	\$	\$
Choose an item.	Choose an item.	Choose an item.	\$	\$
Choose an item.	Choose an item.	Choose an item.	\$	\$

3. Project Description Section:

- Project Acronym (Please choose from drop down):
Elder Abuse Program (XE)

- Project Description (Please type the Project Description):
To expand the multidisciplinary community response to elder and dependent adult abuse.

4. Research & Development Section:

- Is this Subaward a Research & Development grant? Yes No

SPECIAL CONDITION

Grant Subaward No. XE16 01 0420
is hereby approved with the following condition:

- Subrecipient must submit Sole source Justification and NCB Form for consultants prior to expending budgeted funds.
- must be received by Cal OES by within 60 days of receipt of executed Grant Subaward Agreement.

Failure to comply with these requirements may result in the withholding and disallowance of grant payments, the reduction or termination of the Grant Subaward and/or the denial of future grant funds.

PROJECT CONTACT INFORMATION

Subrecipient: Santa Barbara County District Attorney's Office

Subaward #: XEL 010420

Provide the name, title, address, telephone number, and e-mail address for the project contacts named below. **NOTE: If you use a PO Box address, a street address is also required for package delivery and site visit purposes.**

1. The **Project Director** for the project:

Name: Joyce Dudley Title: District Attorney

Telephone #: (805) 568-2306 Fax#: (805) 568-2398 Email Address: jdudley@co.santa-barbara.ca.us

Address/City/Zip: 1112 Santa Barbara Street, Santa Barbara CA 93101

2. The **Financial Officer** for the project:

Name: Kerry Bierman Title: Administrative Director

Telephone #: (805) 568-2304 Fax#: (805) 568-2398 Email Address: kbierman@co.santa-barbara.ca.us

Address/City/Zip: 1112 Santa Barbara Street, Santa Barbara CA 93101

3. The **person** having **Routine Programmatic** responsibility for the project:

Name: Megan Rheinschild Title: Victim Witness Program Director

After hours:

Telephone #: (805) 568-2408 & (805) 729-1614 Fax#: (805) 568-2398 Email Address: mriker@co.santa-barbara.ca.us

Address/City/Zip: 1112 Santa Barbara Street, Santa Barbara CA 93101

4. The **person** having **Routine Fiscal Responsibility** for the project:

Name: Michael Soderman Title: Business Manager

Telephone #: (805) 568-2303 Fax#: (805) 568-2398 Email Address: msoderman@co.santa-barbara.ca.us

Address/City/Zip: 1112 Santa Barbara Street, Santa Barbara CA 93101

5. The **Executive Director** of a Community Based Organization or the **Chief Executive Officer** (i.e., chief of police, superintendent of schools) of the implementing agency:

Name: Joyce Dudley Title: District Attorney

Telephone #: ((805)568-2306 Fax#: (805)568-2398 Email Address: jdudley@co.santa-barbara.ca.us

Address/City/Zip: 1112 Santa Barbara Street, Santa Barbara CA 93101

6. The **Official Designated** by the Governing Board to enter into the Grant Subaward for the City/County or Community-Based Organization, as stated in Section 14 of the Grant Subaward Face Sheet:

Name: Joyce Dudley Title: District Attorney

Telephone #: (805) 568-2306 Fax#: (805) 568-2398 Email Address: jdudley@co.santa-barbara.ca.us

Address/City/Zip: 1112 Santa Barbara Street, Santa Barbara CA 93101

7. The **chair** of the **Governing Body** of the subrecipient:

Name: Peter Adam Title: Chair, Board of Supervisors

Telephone #: (805)346-8407 Fax#: (805) 346-8404 Email Address: peter.adam@countyofsb.org

Address/City/Zip: 105 East Anapamu, Santa Barbara, CA 93101

SIGNATURE AUTHORIZATION

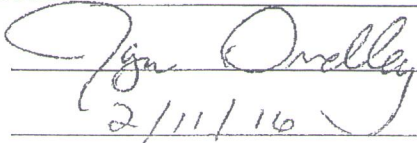
Subaward #: XE16010420

Subrecipient: Santa Barbara County

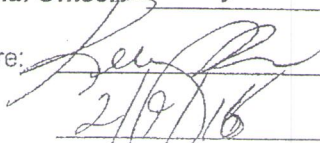
Implementing Agency: Santa Barbara County District Attorney's Office-Victim Witness Assistance Program

*The Project Director and Financial Officer are **REQUIRED** to sign this form.

*Project Director: Joyce Dudley

Signature: 
Date: 2/11/16

*Financial Officer: Kerry Bierman

Signature: 
Date: 2/9/16

The following persons are authorized to sign for the
Project Director

Signature

Kelly Scott

Print Name



Signature

Print Name

Signature

Print Name

Signature

Print Name

Signature

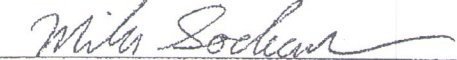
Print Name

The following persons are authorized to sign for the
Financial Officer

Signature

Michael Soderman

Print Name



Signature

Print Name

Signature

Print Name

Signature

Print Name

Signature

Print Name

CERTIFICATION OF ASSURANCE OF COMPLIANCE
Victims of Crime Act (VOCA) Fund

I, Joyce Dudley hereby certify that
(official authorized to sign Subaward; same person as Section 14 on Subaward Face Sheet)

SUBRECIPIENT: Santa Barbara County

IMPLEMENTING AGENCY: District Attorney's Office Victim Witness Assistance Program

PROJECT TITLE: Elder Abuse Program XE

is responsible for reviewing the *Subrecipient Handbook* and adhering to all of the Subaward requirements (state and/or federal) as directed by Cal OES including, but not limited to, the following areas:

I. Federal Grant Funds

Subrecipients expending \$750,000 or more in federal grant funds annually are required to secure an audit pursuant to OMB Uniform Guidance 2 CFR Part 200, Subpart F and are allowed to utilize federal grant funds to budget for the audit costs. See Section 8000 of the Subrecipient Handbook for more detail.

- The above named Subrecipient receives \$750,000 or more in federal grant funds annually.
- The above named Subrecipient does not receive \$750,000 or more in federal grant funds annually.

II. Equal Employment Opportunity – (*Subrecipient Handbook Section 2151*)

It is the public policy of the State of California to promote equal employment opportunity by prohibiting discrimination or harassment in employment because of race, religious creed, color, national origin, ancestry, disability (mental and physical) including HIV and AIDS, medical condition (cancer and genetic characteristics), marital status, sex, sexual orientation, denial of family medical care leave, denial of pregnancy disability leave, or age (over 40). **Cal OES-funded projects certify that they will comply with all state and federal requirements regarding equal employment opportunity, nondiscrimination and civil rights.**

Please provide the following information:

Equal Employment Opportunity Officer: Cassandra Lawson

Title: Equal Opportunity Manager

Address: 1226 Anacapa Street, Santa Barbara, CA 93101

Phone: (805) 568-2807

Email: clawson@co.santa-barbara.ca.us

III. Drug-Free Workplace Act of 1990 – (Subrecipient Handbook, Section 2152)

The State of California requires that every person or organization subawarded a grant or contract shall certify it will provide a drug-free workplace.

IV. California Environmental Quality Act (CEQA) – (Subrecipient Handbook, Section 2153)

The California Environmental Quality Act (CEQA) (*Public Resources Code, Section 21000 et seq.*) requires all Cal OES funded projects to certify compliance with CEQA. Projects receiving funding must coordinate with their city or county planning agency to ensure that the project is compliance with CEQA requirements.

V. Lobbying – (Subrecipient Handbook Section 2154)

Cal OES grant funds, grant property, or grant funded positions shall not be used for any lobbying activities, including, but not limited to, being paid by or on behalf of the undersigned, to any person for influencing or attempting to influence an officer or employee of any agency, a Member of Congress, an officer or employee of Congress, or an employee of a Member of Congress in connection with the making of any federal grant, the entering into of any cooperative agreement, and the extension, continuation, renewal, amendment, or modification of any federal grant or cooperative agreement.

VI. Debarment and Suspension – (Subrecipient Handbook Section 2155)
(This applies to federally funded grants only.)

Cal OES-funded projects must certify that it and its principals are not presently debarred, suspended, proposed for debarment, declared ineligible, sentenced to a denial of federal benefits by a state or federal court, or voluntarily excluded from covered transactions by any federal department of agency.

VII. Proof of Authority from City Council/Governing Board

The above-named organization (Applicant) accepts responsibility for and will comply with the requirement to obtain a signed resolution from the city council/governing board in support of this program. The applicant agrees to provide all matching funds required for said project (including any amendment thereof) under the Program and the funding terms and conditions of Cal OES, and that any cash match will be appropriated as required. It is agreed that any liability arising out of the performance of this Subaward, including civil court actions for damages, shall be the responsibility of the grant Subrecipient and the authorizing agency. The State of California and Cal OES disclaim responsibility of any such liability. Furthermore, it is also agreed that grant funds received from Cal OES shall not be used to supplant expenditures controlled by the city council/governing board.

The applicant is required to obtain written authorization from the city council/governing board that the official executing this agreement is, in fact, authorized to do so. The applicant is also required to maintain said written authorization on file and readily available upon demand.

VIII. Civil Rights Compliance

The Subrecipient complies with all laws that prohibit excluding, denying or discriminating against any person based on actual or perceived race, color, national origin, disability, religion, age, sex, gender identity, and sexual orientation in both the delivery of services and employment practices and does not use federal financial assistance to engage in explicitly religious activities.

IX. Special Condition for Grant Subaward with Victims of Crime Act (VOCA) Funds

- **Computer Network Requirement:** The recipient understands and agrees that (a) No award funds may be used to maintain or establish a computer network unless such network blocks the viewing, downloading, and exchanging of pornography, and (b) Nothing in subsection (a) limits the use of funds necessary for any federal, state, tribal, or local law enforcement agency or any other entity carrying out criminal investigations, prosecution, or adjudication activities.
- **Prohibit use of funds for ACORN and its subsidiaries:** Recipient understands and agrees that it cannot use any federal funds, either directly or indirectly, in support of any contract or subaward to either the Association of Community Organizations for Reform Now (ACORN) or its subsidiaries, without the express prior written approval of OJP.
- **Text Messaging Policy:** Pursuant to Executive Order 13513, "Federal Leadership on Reducing Text Messaging While Driving," 74 Fed. Reg. 51225 (October 1, 2009), the Department encourages recipients and subrecipients to adopt and enforce policies banning employees from text messaging while driving any vehicle during the course of performing work funded by this grant, and to establish workplace safety policies and conduct education, awareness, and other outreach to decrease crashes caused by distracted drivers.
- **Nondiscrimination in programs involving students:** The recipient understands and agrees that award funds may not be used to discriminate against or denigrate the religious or moral beliefs of students who participate in programs for which financial assistance is provided from those funds, or of the parents or legal guardians of such students.
- **Registration with the System for Award Management and Universal Identifier Requirements:** The recipient agrees to comply with applicable requirements regarding registration with the System for Award Management (SAM) (or with a successor government-wide system officially designated by OMB and OJP). The recipient also agrees to comply with applicable restrictions on subawards to first-tier subrecipients that do not acquire and provide a Data Universal Numbering System (DUNS) number. The details of recipient obligations are posted on the Office of Justice Programs web site at <http://www.ojp.gov/funding/sam.htm> (Award condition: Registration with the System for Award Management and Universal Identifier Requirements), and are incorporated by reference here. This special condition does not apply to an award to an individual who received the award as a natural

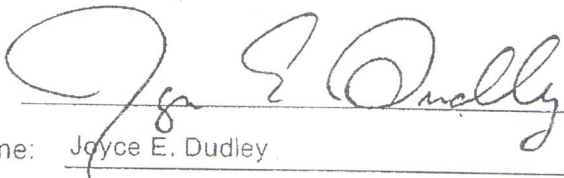
person (i.e., unrelated to any business or nonprofit organization that he or she may own or operate in his or her name).

- VA OCFO Access: The Grantee authorizes Office for Victims of Crime (OVC) and/or the Office of the Chief Financial Officer (OCFO), and its representatives, access to and the right to examine all records, books, paper or documents related to the VOCA grant. The State will further ensure that all VOCA subgrantees will authorize representatives of OVC and OCFO access to and the right to examine all records, books, paper or documents related to the VOCA grant.
- Reporting Potential Fraud, Waste, and Abuse, and Similar Misconduct: The recipient must promptly refer to the DOJ OIG any credible evidence that a principal, employee, agent, contractor, subgrantee, subcontractor, or other person has either 1) submitted a false claim for grant funds under the False Claims Act; or 2) committed a criminal or civil violation of laws pertaining to fraud, conflict of interest, bribery, gratuity, or similar misconduct involving grant funds. This condition also applies to any subrecipients. Potential fraud, waste, abuse, or misconduct should be reported to the OIG by mail: Office of the Inspector General, U.S. Department of Justice Investigations Division, 950 Pennsylvania Avenue, N.W., Room 4706, Washington, DC 20530; email: oig.hotline@usdoj.gov; hotline: (contact information in English and Spanish): 800-869-4499; or hotline fax: 202-616-9881. Additional information is available from the DOJ OIG website at www.usdoj.gov/oig.

All appropriate documentation must be maintained on file by the project and available for Cal OES or public scrutiny upon request. Failure to comply with these requirements may result in suspension of payments under the grant or termination of the grant or both and the Subrecipient may be ineligible for subaward of any future grants if the Cal OES determines that any of the following has occurred: (1) the Subrecipient has made false certification, or (2) violates the certification by failing to carry out the requirements as noted above.

CERTIFICATION:

I, the official named below, am the same individual authorized to sign the Subaward [Section 14 on Grant Subaward Face Sheet], and hereby swear that I am duly authorized legally to bind the contractor or grant Subrecipient to the above described certification. I am fully aware that this certification, executed on the date and in the county below, is made under penalty of perjury under the laws of the State of California.

Authorized Official's Signature: 

Authorized Official's Typed Name: Joyce E. Dudley

Authorized Official's Title: District Attorney

Date Executed: 7/20/2016

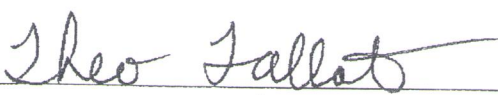
Federal Employer ID #: 95-6002833 Federal DUNS # 131851219

Current Central Contractor Registration Expiration Date: April 14th, 2017

Executed in the City/County of: Santa Barbara

AUTHORIZED BY: *(not applicable to State agencies)*

- | | |
|-------------------------------------------------|--------------------------------------------------------------|
| <input type="checkbox"/> City Financial Officer | <input checked="" type="checkbox"/> County Financial Officer |
| <input type="checkbox"/> City Manager | <input type="checkbox"/> County Manager |
| <input type="checkbox"/> Governing Board Chair | |

Signature: 

Typed Name: Theo Fallati

Title: County Auditor Controller

BUDGET CATEGORY AND LINE ITEM DETAIL

Subrecipient: SANTA BARBARA COUNTY					Subaward #: <i>XE 16 010420</i>			
A. Personal Services - Salaries/Employee Benefits	VOCA 15	VOCA Match 15						COST
1 FTE Victim/Witness Program Advocate II 55,307 Salary (\$2127 x 52 PP) \$55,307	\$110,614							\$0 \$0 \$0 \$110,614
Retirement 35% of Salary = \$19296 x 2 years	\$38,592							\$0
FICA/MediCare 7.6% of Salary = \$4215 x 2	\$8,430							\$38,592
Health Ins 17.4% of Salary = \$9651 x 2	\$19,302							\$8,430
								\$19,302
Extra Help DDA \$32.75 x .40 FTE = \$1048 x 48 PP = \$27,248	\$15,606	\$34,698						\$0 \$0 \$0 \$50,304
								\$0
VW Program Manager Salary (\$3469 x 52 PP) 180,388 x .05 x 2 year project:		\$9,020						\$0
Retirement x 36.5% of .05 FTE salary		\$3,292						\$9,020
Fica/Medicare: 6.5% of .05 FTE (2 yr)		\$587						\$3,292
Health Ins: 15.5% of .05 FTE (2 yr)		\$1,398						\$587
								\$1,398
Job Descriptions:								\$0
Advocate: Assists Victims of Crime with information, support, court accompaniment, orientation to the criminal justice system, resources and referrals,								\$0
Extra Help DDA: Provides outreach and education, act as a resource to victims or potential victims of crime and their family members relative to victimization and orientation to the criminal justice system.								\$0
VW Program Manager: Provides countywide oversight to the Victim/Witness Assistance Program and grant funded programs complying with grant requirements, plan, goals and objectives.								\$0
See Attached Job Descriptions								\$0
								\$0
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Personal Section Totals	\$192,544	\$48,995	\$0	\$0	\$0	\$0		\$241,539
PERSONAL SECTION TOTAL								\$241,539

BUDGET CATEGORY AND LINE ITEM DETAIL

Subrecipient: SANTA BARBARA COUNTY				Subaward #: <i>KE 16 010420</i>			
B. Operating Expenses	VOCA 15	VOCA Match 15					COST
							\$0
							\$0
							\$0
Elder Abuse Symposium (Each Year of Project)							\$0
Lodging x 4 x 3 nights @ 125 = \$1500 x 2 (year)	\$4,852						\$0
Meals: \$46/day x 4 x 3 = \$552 x 2							\$4,852
Mileage x 650 mi. x .575 per mi. = \$374 x 2							\$0
							\$0
							\$0
							\$0
Mandatory Program Meeting x 2	\$5,736						\$0
Lodging x 4 MDT members x 2 nights @ \$125 = \$2000							\$5,736
Per Diem: \$46/day x 2 days x 4 ps = \$736							\$0
Airfare: \$375 x 4 MDT members = \$3000							\$0
							\$0
							\$0
							\$0
							\$0
Victim Advocate Training	\$1,080						\$0
Lodging x 5 nights x \$95/night = \$475							\$1,080
Per Diem \$46/day x 5 days = \$230							\$0
Airfare: \$375 RT Santa Barbara/Sacramento							\$0
							\$0
							\$0
							\$0
							\$0
Computer Purchase	\$1,634						\$0
HP Desktop Elite 800 G1 \$975							\$0
Microsoft Business and Exchange Software \$244							\$1,634
Hardware Support \$75							\$0
Monitor \$150							\$0
Docking Station, Mouse and Keyboard \$190							\$0
							\$0
							\$0
Conference/Outreach x 2 year program		\$6,942					\$0
Facility Rental = \$200 x 2							\$0
AV Tech Fees = \$200 x 2							\$6,942
Consultant Speaker Fees x 3 x \$650 = \$1950 x 2							\$0
Consultant accommodations 3 x \$150=\$450 x 2							\$0
Outreach/Marketing Materials = \$671 x 2							\$0
							\$0
							\$0
Office Furniture	\$3,400						\$0
Desk \$1400							\$0
Chair x 2 x \$750 = \$1500							\$3,400
Side Table x 1 = \$500							\$0
							\$0
							\$0
Purchase of Radio Air Time	\$12,000						\$0
20 x 60 second PSA x 24 months = \$12000							\$12,000
							\$0
							\$0
Resource Cards/Neck Wallets	\$2,500						\$0
1500 x \$1.59 per piece = \$2385							\$2,500
Shipping = \$115							\$0
							\$0
							\$0
							\$0
							\$0
Operating Section Totals	\$31,202	\$6,942	\$0	\$0	\$0	\$0	\$38,144
OPERATING SECTION TOTAL							\$38,144

BUDGET CATEGORY AND LINE ITEM DETAIL

Subrecipient: SANTA BARBARA COUNTY					Subaward #:			
C. Equipment	VOCA 15	VOCA Match 15						COST
								\$0
								\$0
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Equipment Section Totals	\$0	\$0	\$0	\$0	\$0	\$0	\$0	\$0
EQUIPMENT SECTION TOTAL								\$0
Category Totals								
Same as Section 12G on the Grant Subaward Face Sheet	\$223,746	\$55,937	\$0	\$0	\$0	\$0		
Total Project Cost								\$279,683

Cal OES 2-106a (Revised 4/2016)

