

Uniform Notice for Funding Opportunity (NOFO) Summary Information

	Data Field	
1.	Awarding Agency Name:	Illinois Department of Public Health
2.	Agency Contact:	Mark Vassmer, mark.vassmer@illinois.gov, 217-558-3525
3.	Announcement Type:	<input checked="" type="checkbox"/> Initial announcement <input type="checkbox"/> Modification of a previous announcement
4.	Type of Assistance Instrument:	Grant
5.	Funding Opportunity Number:	CDC-RFA-TP12-120105CONT16
6.	Funding Opportunity Title:	Public Health Emergency Preparedness
7.	CSFA Number:	
8.	CSFA Popular Name:	
9.	CFDA Number(s):	93.074
10.	Anticipated Number of Awards:	95
11.	Estimated Total Program Funding:	\$7,119,484
12.	Award Range	\$27,332 to \$1,065,197
13.	Source of Funding:	<input checked="" type="checkbox"/> Federal or Federal pass-through <input type="checkbox"/> State <input type="checkbox"/> Private / other funding Mark all that apply
14.	Cost Sharing or Matching Requirement:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
15.	Indirect Costs Allowed Restrictions on Indirect Costs	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If yes, provide the citation governing the restriction:
16.	Posted Date:	May 23, 2016
17.	Closing Date for Applications:	June 30, 2016
18.	Technical Assistance Session:	Session Offered: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Session Mandatory: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Date and time: May 17, 2016 11AM - Noon Registration/Webinar Link: http://idph.adobeconnect.com/phep/

Agency-specific Content for the Notice of Funding Opportunity

A. Program Description

The purpose of this grant is to fund certain eligible Illinois certified local health departments to assess, prioritize, build, and exercise the necessary resource elements, tasks, and functions of the Centers for Disease Control and Prevention's (CDC) 15 Public Health Emergency Preparedness (PHEP) Capabilities National Standards that local health department's need to prevent, mitigate and recover from the top hazards to the public health in its jurisdiction. This includes both specific mandated deliverables from the Scope of Work and Performance Measures listed below - as well as various activities selected and prioritized by the applicant according to these instructions.

This grant agreement represents the final budget year (July 1, 2016, - June 30, 2017) of a five-year project period from July 1, 2012- June 30, 2017. The Department is authorized to make this grant pursuant to SEC 391(A) 317(K) of PHS 42 U.S.C. SEC 241A 247B.

Scope of Work

Planning Goal - The Grantee will plan appropriate activities and resources this year to build or sustain Capabilities for which the Grantee's current CPG rating is "Highly Important" or "Critical", or which have been specified in this agreement by the Department; and that are designed to reach a CPG rating of "Full" or "Significant Ability" on the 2017 final annual IDPH approved Capabilities Plan Guide (CPG) self-assessment.

Capability Assessment - The Grantee will conduct an annual self-assessment of the status of its PHEP Capabilities and resource elements. The Grantee will utilize the Capability Planning Guide (CPG) Module in CEMP. The Capability Assessment is due in CEMP by February 1, 2017 for the IDPH Emergency Response Coordinator's (ERC) review and approval.

Annual Training and Exercise Planning Workshop - As early as practical, but no later than March 13, 2017, Grantees will conduct an annual Training and Exercise Planning Workshop (TEPW) to review, prioritize, and coordinate their exercise and training activities to improve and validate their preparedness capabilities.

Multi-Year Training and Exercise Plan - As early as possible, but no later than April 14, 2017, using the results of their last current annual TEPW, the Grantee shall create and update their multi-year training and exercise (MYTEP) plan for Department ERC review and approval as explained in this section. The MYTEP consists of TWO parts. Both shall be in CEMP.

The first part of the MYTEP is a narrative which contains the Grantee's exercise priorities and target capabilities as described in the FEMA HSEEP guidance. The grantee will place a link in the quarterly report to the narrative MYTEP report. The text of the report will be posted in the area designated for this narrative by the CEMP Governance Committee.

The second part is updating the Grantee's training and exercise schedule in the CEMP module called "Index."

Grantees will notify the Department ERC upon completion of each part of the MYTEP.

Hazard Vulnerability Risk Assessment (HVA) - The Grantee will update its jurisdiction's HVA for any of the following reasons:

The Grantee becomes aware of new impacts to the public health and healthcare system in its jurisdiction;

The local emergency management agency requests an HVA or update;

The IDPH-recognized healthcare coalition requests an HVA or update; or,

The last HVA update will be 5 years old or more on June 30, 2017.

The Grantee's HVA must consider the occurrence of more frequent and extreme weather events and the access and functional needs of at-risk individuals. If the HVA is updated, it shall be submitted to the Department's ERC (in CEMP) for review and acceptance by April 14, 2017, otherwise, the Grantee must not in its report why the HVA was not updated.

Strategic Plan - Local Health Department (LHD) Grantees shall plan to sustain and/or build its public health preparedness capacity based on the Centers for Disease Control and Prevention (CDC) Public Health Preparedness (PHP) Capabilities, as amended from time to time. The Grantee's Strategic Plan will contain goals and objectives planned for the next five-year period (July 1, 2017 - June 30, 2022) for each capability. As this is a new five-year project period, CDC may update their PHEP Capabilities which may require IDPH to request updates to the Grantee's Strategic Plan. The initial draft of the new Strategic Plan shall be submitted to the IDPH ERC in CEMP for review and approval by March 24, 2017.

Annual Work Plan -The Grantee will provide to their IDPH Emergency Response Coordinator (ERC) for review and approval a draft PHEP grant application work plan in CEMP by March 24, 2017 that covers proposed Grantee activities for the following project year. The annual work plan shall be a detailed quarterly breakdown and explanation of all of the activities that will be conducted to the objectives prioritized and scheduled in the Grantee's Strategic Plan. As this is a new five-year project period, CDC may update their PHEP Capabilities which may require IDPH to request updates to the Grantee's Annual Work Plan. The annual work plan will contain objective, measurable quarterly benchmarks or with completion dates in order to measure progress on each activity toward its long term objective. Other than the capability activities prescribed in this agreement, the Grantee does not need to plan work in all PHEP capabilities each year. Additional capability activities needed shall be determined and prioritized by the Grantee, and approved by the ERC, based on the Grantee's local role in a capability as well as its current capability assessment and hazard vulnerability assessment. IDPH intends for the Grantee to use the ERC-approved Annual Work plan as part of their PHEP grant application for the following year's PHEP grant funds.

The Grantee will consult with all Public Health Emergency Planning and Response Stakeholders to assess, plan, implement, sustain or build PHEP Capabilities, including, but not limited to, Information Sharing, Emergency Operations Coordination, Community Preparedness and Recovery as described in their approved strategic and annual work plan.

Community Recovery

The Grantee will conduct activities as needed according to their plans.

Emergency Operations Coordination

IDPH SIREN - The Grantee will maintain access and staff abilities to use the State of Illinois Rapid Electronic Notification (SIREN) system (www.siren.illinois.gov) to receive emergency alerts from the Department or other SIREN partners. The Grantee will also assure that its key staff maintains their current 24 hour contact information in the Department's SIREN system.

Redundant Communication Systems - The Grantee will have communications equipment that includes at least a primary and a backup system, which will allow interoperable and operable communications with IDPH, local healthcare partners, its jurisdiction's emergency operations center and other local and state partners. This shall include:

Secure high-speed internet and network resources.

Possession and maintenance of 2 way radio equipment compatible with the State of Illinois interoperability radio equipment platform - Starcom21 and a valid emergency and exercise use subscription to access the State of Illinois Starcom21 network.

Staff with the ability to use and exercise the 2 way Radio systems.

Any one or more of the following: fax, dedicated telephone line(s), cellular telephone(s) with necessary chargers, television, AM/FM/Weather radios, 2 way IREACH radios, high frequency (HAM) radios, or satellite communication.

Ability for 2 way radios to function without utility power by using an alternate power source capable of providing continuous communications for not less than 48 hours.

The Grantee shall publish and maintain 24-hour emergency contact information, on their public web sites, CEMP, and elsewhere, where the general public, hospitals, or other Public Health Emergency Planning and Response Stakeholders can find and promptly reach a staff person to report a suspect or actual public health incident or event in accordance with 77 IAC 615.340 (b). The Grantee will maintain up-to-date contact information for Public Health Emergency Planning and Response Stakeholders and share data and other essential elements of information with them during an emergency response.

Emergency Public Information and Warning

The Grantee will conduct activities as needed according to their plans.

Fatality Management

The Grantee will document their defined local fatality management roles, capabilities and responsibilities (if any), as characterized by CDC's PHEP Capabilities as amended from time to time, in relation to those of key local partners (e.g., emergency management, coroners/medical examiners, healthcare organizations, and funeral directors) in its emergency operations plan.

Information Sharing

INEDSS - The Grantee will maintain and utilize the I-NEDSS AVR (Analysis, Visualization and Reporting) to review infectious disease data and share this information in aggregate form (without personal identifiers) with key partners, including relevant health care providers, to promote timely reporting of cases, outbreaks and other events and an awareness of prevention and disease control measures.

Comprehensive Emergency Management Program (CEMP) - The Grantee will maintain an "instance" of IDPH's CEMP - and appropriate staff member's ability to use CEMP - by participating in IDPH-sponsored CEMP training. The Grantee will provide to the Department updated Primary, Secondary, and Tertiary 24/7 after-hours emergency contact information for key Grantee staff on a quarterly basis and/or as necessary using CEMP. The Grantee will use CEMP for the development, maintenance, and sharing of the Grantee's Annual PHEP/CRI Work plan, Strategic Plan, SNS Strategic National Stockpile (SNS) Plan), CPG capability assessments and PHEP/CRI grant quarterly reports. The Department also encourages the Grantee to utilize CEMP to the fullest extent possible for other plan development and sharing. The Department (or Grantee) may request other uses of CEMP as CEMP functionality is increased (e.g. MCM-ORR documentation) that may become mandatory in future budget periods.

IDPH Web Portal - The Grantee will maintain continuous access and staff abilities to use the IDPH SharePoint web portal (www.idphnet.illinois.gov) for Department information, applications and services.

IMATS - The Grantee will maintain continuous access to, and an appropriate staff member's ability to use CDC's Inventory Management and Tracking System (IMATS) and assure that all validated SNS drop site

facilities, and dispensing site locations and any SNS inventory are maintained in IMATS. The Grantee will also participate in at least 1 Department-hosted IMATS drills.

Mass Care

The Grantee will conduct activities as needed according to their plan.

Medical Countermeasure Dispensing and Medical Materiel Management and Distribution

The Grantee will cooperate with the Department to comply with CDC Point of Dispensing (POD) standards.

By June 30, 2017, Grantees without a CRI grant from the Department will fully participate in a Medical Countermeasures Operational Readiness Assessment MCMORR (formerly LTAR) using the current version of the CDC assessment tool in the format requested by the Department by June 30, 2017, (unless the MCMORR has been completed between July 1, 2015 and June 30, 2016); and participate with their Regional ERC to conduct a review of the Grantee's primary MCM/SNS receiving site (i.e., local drop site) using the CDC's DSLR RSS Site Survey Form. "Baseline Data" shall be updated annually in CEMP.

Volunteer Management

The Department may provide (see Section 5.1) additional award funds with the 4th quarter reimbursement to Grantees on record with the federal government as hosting an MRC unit and conducting at least one training, drill, or exercise with the majority of unit members during this grant year. The Grantee shall either maintain its current Medical Reserve Corp Unit, or plan activities in its annual work plan and strategic plan, so that by 6/30/17 it will either administer, or assure the availability and coordination of the services of a Medical Reserve Corp (MRC) unit to their jurisdiction. If the availability of an MRC unit cannot be obtained, the Grantee must request IDPH approval of the use of another specified source of qualified volunteers. The Grantee must have full access to Illinois HELPS or other Department-approved volunteer registration and/or credentialing system. The Grantee will attend at least one Department-designated training on updated Illinois Volunteer Management procedures, if offered.

Public Health Surveillance and Epidemiological Investigation

The Grantee will maintain its capability to respond appropriately and in a timely manner to potential disease outbreaks through collaboration and cooperation with the Department's Office of Health Protection (OHP). Grantees will submit final written reports to OHP within 30 days of concluding outbreak investigations. After action reports for outbreaks will be written when requested and sent to the Department.

Training and Exercise

HSEEP - Grantees shall follow current version of USDHS-Federal Emergency Management Agency's Homeland Security Exercise and Evaluation Program (HSEEP) standards, Illinois Emergency Management Agency Exercise Policy Standards, and IDPH-OPR's Training and Exercise Grant Guidance when planning, implementing, evaluating, improvement planning, and reporting on preparedness training and exercise funded by this grant.

Training

Relevant Grantee staff shall obtain and maintain training in National Incident Management System (NIMS) and Incident Command System (ICS) topics required by the Department's most current Training and Exercise Grant Guidance.

Relevant Grantee staff shall obtain and maintain current training as needed to properly use SIREN (receive and send alerts), Starcom21 radios, CEMP, the IDPH Web Portal, Illinois HELPS, INEDSS, ITRAIN, and IMATS, Medical Countermeasures Distribution and Dispensing.

At least one Grantee employee with preparedness or response duties shall attend the Department's annual Integrated Public Health and Medical Preparedness Summit Conference.

The Grantee will document completion of all the above Department- required trainings in the IDPH training record system, I-TRAIN in writing.

Exercises

The Grantee shall coordinate as practical all internal and external exercise opportunities to meet exercise requirements as efficiently and economically as possible and coordinate its annual exercise requirement with requests from other local, regional, or statewide healthcare or emergency management officials if possible. The Grantee, with relevant partners, will write and implement an After-Action Report/Improvement Plan (AAR/IP) for emergency events and the annual exercise and as soon as possible following the event (Goal is 60 days), but no later than 30 days following the termination of this grant. The Grantee will post the AAR/IP in CEMP and immediately notify the Department ERC.

Annual Exercise - The Grantee shall annually test specific PHEP Capabilities by conducting or significantly participating in an exercise as follows in this section. Significantly participating means participating in all planning, after action meetings, and exercise play; including Grantee agency-related exercise elements, after-action assessments and improvement plans and responsibilities.

The capabilities, tasks and functions tested during the annual exercise will be determined by previous Grantee's AAR/IPs and current Department Training and Exercise Guidance.

Unless the Grantee has previously exercised any of the following 3 capabilities in one or more multi-capability (3 or more) exercises between July 1, 2012 and June 30, 2016, the Grantee will conduct an exercise that simultaneously tests: 1) medical countermeasure dispensing (determining throughput); 2) information sharing, and 3) volunteer management in an exercise by June 30, 2017. Otherwise, an exercise testing other capabilities (3 or more) may be conducted by June 30, 2017.

The level of the annual exercise will be determined by HSEEP guidance and the most current Department Training and Exercise Guidance. Exercises should be incremental toward functional or full-scale, but that depends on Grantee resources, the capability and tasks being tested, and to fill gaps identified.

Due to their very narrow focus, "CRI drills" (such as the 3 required for agencies that also receive CRI grants) may not designate the drills alone to meet this grant's requirement for an annual exercise. The drills may be included as part of larger exercise meeting the other requirements in this section.

The Grantee may submit a written request to the Department ERC, documented in the appropriate quarterly report in CEMP, if it believes a local emergency response and AAR/IP may qualify to meet this agreements annual exercise requirement. The request must be submitted within 30 days following the start of the event. The Department will use the most current Training and Exercise Guidance and its sole judgment to determine if a Grantee event response will qualify as an annual exercise.

Drills - The Grantee will conduct staff notification and other communication drills, either standalone, or as part of a larger exercise, as follows:

One incident command staff alert notification and assembly drill (in-person or virtual) each year outside of normal business hours according to the current Training and Exercise Guidance.

Grantee will have on file a signed IPHMAS agreement and participate in the Illinois Public Health Mutual Aid System (IPHMAS); responding to IPHMAS requests and exercises; and initiates one Illinois Public Health Mutual Aid System (IPHMAS) request as a drill or part of an exercise, or for an actual event.

Participate in at least one StarCom21 radio communication drills per quarter with other health departments and other response partners, such as hospitals, blood centers, and the Department per current Department Training and Exercise Guidance.

The Grantee will also participate in at least 1 Department-hosted IMATS drill by June 30, 2017.

The Grantee will maintain written records of these exercises and drills per the current Department Training and Exercise Guidance.

The Grantee will make timely response to CDC or Department-initiated, or other locally initiated regional notification/ communication drills, including those conducted through telephone, SIREN, StarCom21, or other methods.

Performance Measures

See Exhibit E & F attached to this document.

B. Funding Information

This award is utilizing ☒ federal pass-through, ☐ state and/ or ☐ private funds.

The period of performance will be July 1, 2016 to June 30, 2017.

Grant awards are only available in the maximum amounts shown below for specific certified local health departments that have participated in the IDPH Public Health Preparedness Program during the previous 4 years.

Award amounts listed below are based on an amount per capita (varies with available funds) with the addition of one of two different base amounts (\$25,000 for single and \$35,000 multi-jurisdictional health departments). The listed amounts also reflect an additional amount of \$1,450 available in the 4th quarter if the grantee hosts a Medical Reserve Corp Unit for the whole year and conducts at least one training, drill, or exercise with the majority of unit members.

ADAMS	57,195
BOND	34,591
BOONE	49,817
BROWN	28,178
BUREAU	42,476
CALHOUN	27,332
CARROLL	32,050
CASS	31,250
CHAMPAIGN	61,093
CHAMPAIGN-URBANA	82,487
CHRISTIAN	42,853
CLARK	32,484
CLAY	32,780
CLINTON	43,751
COLES	51,133
COOK	1,065,197
CRAWFORD	35,530
CUMBERLAND	31,512
DEKALB	73,181
DEWITT-PIATT	50,253
DOUGLAS	35,604
DUPAGE	446,559
EAST SIDE	54,050
EDGAR	33,511
EFFINGHAM	42,139
EGYPTIAN	57,144
EVANSTON	60,577

FAYETTE	36,594
FORD	31,452
FRANKLIN-WILLIAMSON	84,979
FULTON	43,434
GREENE	31,362
GRUNDY	49,387
HAMILTON	30,325
HANCOCK	35,203
HENDERSON	28,359
HENRY	49,581
IROQUOIS	38,616
JACKSON	54,040
JASPER	29,443
JEFFERSON	44,239
JERSEY	35,531
JO DAVIESS	36,840
KANE	261,082
KANKAKEE	76,979
KENDALL	77,569
KNOX	50,696
LAKE	348,756
LASALLE	78,647
LAWRENCE	32,712
LEE	41,508
LIVINGSTON	42,846
LOGAN	40,335
MACON	77,201
MACOUPIN	48,335
MADISON	149,827
MARION	44,519
MARSHALL	32,241
MASON	31,720
MC DONOUGH	41,392
MC HENRY	167,915
MC LEAN	104,143
MENARD	30,821
MERCER	33,980
MONROE	40,100
MONTGOMERY	40,243
MORGAN	41,287
MOULTRIE	31,802
OAK PARK	50,219
OGLE	49,511
PEORIA	111,896
PERRY	35,240
PIKE	32,528
PUTNAM	27,752
RANDOLPH	40,338
ROCK ISLAND	94,051
SANGAMON	116,923
SCHUYLER	29,906
SCOTT	27,454
SKOKIE	56,132
SOUTHERN SEVEN	68,068
ST. CLAIR	121,132
STARK	27,746
STEPHENSON	48,310
STICKNEY	45,131
TAZEWELL	88,484

VERMILION	63,848
WABASH	30,474
WARREN	33,113
WASHINGTON	31,742
WAYNE	34,129
WHITESIDE	51,802
WILL	336,889
WINNEBAGO	161,733
WOODFORD	44,165

GRAND TOTAL STATEWIDE \$7,119,484

Allowable - All grant funds must be used for items that are necessary and reasonable for the proper and efficient performance of the grant and may only be used for the purposes stated in your grant agreement, work plan, and budget. Items must not be restricted by, and must comply with, all applicable state and federal regulations.

Allocated - Items charged to this grant must be appropriately allocated (pro-rated) between this grant and other funding sources as applicable. This is especially important to describe and document if the item appears to have significant non-grant uses such as a purchase that directly supports many or all health department programs and is not strictly considered an emergency preparedness capability resource. For example, equipping a conference room with new furniture and computer equipment, so it could also be used as an emergency operations center, still significantly supports all public health programs with a new conference room. The requested expenses for this must be allocated to show that PHEP is only paying its share. For example, if the applicant **documented** the amounts of non-PHEP funds recently spent, or were being budgeted, for the purchase of similar furniture or computer equipment, or otherwise supported the ongoing use of this room (e.g. building, renovation, maintenance, or utility costs for this project, the PHEP expenses may be permitted. Without this documented justification - the request may be rejected. On the other hand, the cost of an item strictly considered an emergency preparedness capability resource item, such as an emergency generator, even though it may benefit the entire agency would probably be allowed, except for construction or major building renovation such as foundation work.

Reasonable - The amounts charged for any item must be reasonable. That means the nature and amount of the expense does not exceed what a prudent person under the same circumstances would expend; and that the items are generally recognized as ordinary and necessary for the performance of the grant.

- Grantees **CAN** (with **prior** CDC and IDPH approval) use funds to purchase material-handling equipment (MHE) such as industrial or warehouse-use trucks to be used to move materials, such as forklifts, lift trucks, turret trucks, etc. Vehicles must be of a type not licensed to travel on public roads.
- Grantees **CAN** (with **prior** IDPH and CDC approval) use funds to **lease** vehicles to be used as a means of transportation for carrying people or goods, e.g., passenger cars or trucks and electrical or gas-driven motorized carts.
- Grantees **CAN** use funds to purchase caches of antibiotics for use by first responders and their families to assure the health and safety of the public health workforce.
- Grantees may not use funds to purchase "personalized clothing" that would not be shared with other staff and kept permanently as the property of the user. Personal protective equipment (PPE) such as clothing designed for infection control and prevention, respirators, gloves, etc **is allowed**. For example, colored vests or jackets identifying a responder's agency and/or role that remain the property of the Grantee and are assigned and shared by several staff **may be allowed**. Uniform shirts, blouses, pants, etc for health department staff that effectively becomes staff property or are not kept at the agency to share will not be permitted.

- The costs of meetings and conferences, the **primary** purpose of which is the dissemination of PHEP Capability technical information, **are allowable**. This includes costs of meals, transportation, rental of facilities, speakers' fees, and other items incidental to such meetings or conferences. The applicant must: describe (or draft copy of the formal) meeting agenda; identify the meeting/conference/training in its work plan or budget; show on the agenda how meals are a necessary part of a working meeting (or training), integral to full participation in the business of the meeting, i.e., meals may not be taken elsewhere without attendees missing essential formal discussions, lectures or speeches concerning the purposed of the meeting or training; certify that meal costs are not duplicated in the participants' per diem, subsistence allowances or otherwise reimbursed; certify that the majority of participants incur significant travel (e.g., distance of more than 50 miles or 45 minutes) and that guest (non-participant) meals are not being purchased with PHEP funds.
- Grantees can use funds to support appropriate accreditation activities that meet the Public Health Accreditation Board's preparedness-related standards.

The applicant must submit an updated Strategic Plan for the remaining year of this 5 year project as well as an Annual Work Plan and Budget for the term of this grant agreement with this application.

C. Eligibility Information

An entity may apply for a grant but will not be eligible for a grant award until the entity has pre-qualified through the Grant Accountability and Transparency Act (GATA) Grantee Portal, www.grants.illinois.gov. During pre-qualification, Dun and Bradstreet verifications are performed including a check of Debarred and Suspended status and good standing with the Secretary of State. The pre-qualification process also includes a financial and administrative risk assessment utilizing an Internal Controls Questionnaire. If applicable, the entity will be notified that it is ineligible for award as a result of the Dun and Bradstreet verification. The entity will be informed of corrective action needed to become eligible for a grant award.

1. **Eligible Applicants**

Only local health departments in Illinois that are certified pursuant to 77 IAC 600 are eligible to apply. This does not include agencies that have not accepted PHEP funds for the last 4 years or those located within the City of Chicago.

2. **Cost Sharing or Matching**

This application requires a 10% match from non-federally funded resources in compliance 2 CFR 200.306.

3. **Indirect Cost Rate**

The applicant may charge an indirect cost based on an annually negotiated indirect cost rate agreement (NICRA). There are three types of NICRAs: a) Federally Negotiated Rate. Organizations that receive direct federal funding, may have an indirect cost rate that was negotiated with the Federal Cognizant Agency. Illinois will accept the federally negotiated rate. The applicant must provide a copy of the federally NICRA. b) State Negotiated Rate. The organization must negotiate an indirect cost rate with the State of Illinois if they do not have Federally Negotiated Rate or elect to use the De Minimis Rate. The indirect cost rate proposal must be submitted to the State of Illinois within 90 days of the notice of award. c) De Minimis Rate. An organization that has never received a Federally Negotiated Rate may elect a de minimis rate of 10% of modified total direct cost (MTDC). Once established, the de minimis rate may be used indefinitely. Grantee can elect to use the 10% de minimis rate to claim indirect costs while a different proposal is being reviewed and negotiated with the State of Illinois. Once a negotiated rate is approved and accepted by both the Grantee and its Cognizant State Agency it can be used immediately and the de minimis rate will be vacated. If a Grantee is NOT eligible to elect the de minimis rate, the Grantee will not be allowed reimbursement of indirect costs until a State of Illinois Indirect Cost rate is approved.

4. ***Other, if applicable***

Applicants are required to be able to access the Internet and effectively use IDPH's online Comprehensive Emergency Management Program (CEMP) to develop and maintain the annual work plan and strategic plan required to be submitted with this grant application. For information on how to access IDPH-CEMP through the Internet, applicants should contact their local IDPH OPR Emergency Response Coordinator.

D. Application and Submission Information

1. *Address to Request Application Package*

Applications must be submitted via the Illinois Department of Public Health's Electronic Grants Administration and Management System (EGrAMS), accessible at idphgrants.com.

Since high-speed internet access is not yet universally available for downloading documents or accessing the electronic application, and applicants may have additional accessibility requirements, applicants may request paper copies of materials.

Paper application documents are not currently available. Note that Internet access is a mandatory requirement for being awarded and implementing this grant. Please contact Mark Vassmer, Program Manager with any concerns regarding this requirement.

2. *Content and Form of Application Submission*

Strategic Work Plan

PROCESS: The Grantee's Strategic Plan will list Goals and their Objectives planned for the remaining year of this five-year project broken down by Capability. This Strategic Plan should be updated each year - but only for future budget periods

GOALS/OUTCOMES: Goal(s) can span multiple functions, tasks, or resource elements within each capability. Goal descriptions should be designed to answer the questions:

- "What are the changes that are going to occur?"
- "What are the improvements to the public health and/or healthcare system or to the communities?"
- "What issue or problem is being addressed within the Capability?"

They should reflect changes in awareness, knowledge, attitudes, skills, opinion, behavior, policies and/or health improvement.

OBJECTIVES: There should be at least one Objective for each Goal/Outcome. The Objectives should also describe a desired Goal/Outcome which could be reported in the narrative report. An Objective is the cumulative desired result of the annual work plan Activities that delineates the steps involved in meeting the Objective. The expected Objectives should be well defined, specific, measurable, realistically achievable, and must directly contribute to the achievement of the Goal/Outcome. In other words, the proposed Objectives should include what the awardee proposes to produce because of their Activities (e.g. "plan", "curriculum", "tracking system database"). It should be evident that the Objective will improve, accomplish, resolve the original problem identified by the Goal/Outcome.

PRIORITIES: The Grantee will plan appropriate Goals/Outcomes and Objectives to build or sustain Capabilities and their component Functions for which the Grantee's current PHP Capability Planning Guide (CPG) rating as entered into CEMP is "Highly Important" or "Critical", or which have been made mandatory by the Department in the current agreement. The overall Performance Goal is to reach a CPG rating of "Full" or "Significant Ability" on the 2017 final annual IDPH CPG self-assessment in CEMP of these Important and Critical Capabilities and Functions. On the "Capability Priority Matrix" table in CEMP, the Capabilities and Functions requiring work that must be addressed in the Strategic Plan are the red ones that fall into the 4 squares in the upper left corner. The Grantee does not need to plan work in all 15 Capabilities each year. The Grantee will prioritize work based on its local role in a capability - as well as its capability assessment - the CPG - and its hazard vulnerability assessment. There are further instruction on the CPG assessment completion in CEMP.

Annual Work Plan

PRIORITIES: The Grantee will plan appropriate activities and obtain resources to build or sustain Capabilities and their component Functions, Tasks and Resource Elements for which the Grantee's current PHP Capability Planning Guide (CPG) rating" is "Highly Important" or "Critical", or which have been made mandatory by the Department in the current agreement. This priority will align with that used in the Strategic Plan. The amount of work each year should be enough to reach a CPG rating of "Full" or "Significant Ability" on the 2017 final annual IDPH CPG self-assessment in these Important and Critical functions. The Capabilities and Functions that should be prioritized in the Annual Work Plan are the RED ones that fall into the 4 squares in the upper left corner of the Capability Priority Matrix in CEMP. The Grantee does not need to plan work in all 15 Capabilities each year. Further instruction on the CPG assessment completion is in CEMP.

GRANT APPLICATION: The local health department must upload a PDF of this entire ERC-approved Annual Work Plan (including the Approval Form Cover Page) in EGrAMS as part of next year's grant application

COMPLETING THE ANNUAL WORK PLAN FORM:

LEAD: The staff, employee, contractor, partner agency or volunteer that are primarily responsible for any activities related to that Capability/Function during the entire year.

RESOURCES: Other supporting, personnel, partners, equipment, supplies or other resources that are required to complete any activities related to that Capability/Function during the entire year.

ACTIVITIES/BENCHMARKS: These need to be entered in the quarter that you plan to conduct them.

BENCHMARKS: In addition to your planned Activities, at a minimum, make sure and include the following Benchmark deliverables (found in your grant agreement) in your Annual Work Plan in the cell for the appropriate Quarter and Capability/Function :

- Annual and Strategic Work Plan Submission
- HVA Published or Updated
- Exercises, Drills (including Starcom21 Radio, MRC Unit, IPHMAS, IMATS)
- After Action Report / Improvement Plan (AAR/IP) Publications

- Capability Planning Guide (CPG) Assessment
- Training and Exercise Planning Workshop
- Multi-Year Training and Exercise Plan Publication
- MCM-ORR, Baseline Update & Drop Site Survey

ACTIVITIES: Describe at least one activity in the Annual Work Plan for each Objective in the Strategic Plan that describes the necessary tasks, resources, deliverables, or products required to meet the Objective. The planned Activities must contribute to resolving the identified issue or problem stated in the Goal in the Strategic Plan.

3. *Dun and Bradstreet Universal Numbering System (DUNS) Number and System for Award Management (SAM)*

Each applicant (unless the applicant is an individual or Federal or State awarding agency that is exempt from those requirements under 2 CFR § 25.110(b) or (c), or has an exception approved by the Federal or State awarding agency under 2 CFR § 25.110(d)) is required to:

- (i) Be registered in SAM before submitting its application. If you are not registered in SAM, this link provides a connection for SAM registration: <https://governmentcontractregistration.com/sam-registration.asp>;
- (ii) provide a valid DUNS number in its application; and
- (iii) continue to maintain an active SAM registration with current information at all times during which it has an active Federal, Federal pass-through or State award or an application or plan under consideration by a Federal or State awarding agency.

The State awarding agency may not make a Federal pass-through or State award to an applicant until the applicant has complied with all applicable DUNS and SAM requirements and, if an applicant has not fully complied with the requirements by the time the State awarding agency is ready to make a Federal pass-through or State award, the State awarding agency may determine that the applicant is not qualified to receive a Federal pass-through or State award and use that determination as a basis for making a Federal pass-through or State award to another applicant.

4. *Submission Dates and Times*

Applications will be accepted in EGrAMS from May 23, 2016 through midnight on June 30, 2016.

5. *Intergovernmental Review, if applicable*

N/A

6. *Funding Restrictions*

Funding Restrictions

- None of the funds awarded under these programs may be used to pay the salary of an individual at a rate in excess of Executive Level II or \$185,100 per year. (See http://grants.nih.gov/grants/policy/salcap_summary.htm.)
- Grantees cannot use funds for fund raising activities or lobbying.
- Grantees cannot use funds for research.

- Grantees cannot use funds for construction or major renovations, except for repairs and maintenance.
- Grantees cannot use funds for clinical care.
- Grantees cannot use funds to acquire real property such as land, land improvements, structures, and appurtenances thereto. In addition, activities under individual grants that constitute major renovation of real property or purchase of a trailer or modular unit that will be used as real property may be charged to HHS grants only with specific statutory authority and GMO approval.
- Grantees cannot use funds for reimbursement of pre-award costs.
- Grantees may supplement but not supplant existing state or federal funds for activities described in the budget.
- Payment or reimbursement of backfilling cost for staff, including healthcare personnel for exercises, is not allowed.
- Grantees cannot use funds to **purchase** vehicles to be used as means of transportation for carrying people or goods, such as passenger cars or trucks and electrical or gas-driven motorized carts.

7. Other Submission Requirements

Applications must be submitted via the Illinois Department of Public Health's Electronic Grants Administration and Management System (EGrAMS), accessible at idphgrants.com. Technical questions about problems with access to or use of EGrAMS should be sent to the EGrAMS helpdesk at dph.grantreview@illinois.gov.

At least three contact types will be required for the application: Program Contact, Business/Administrative Office Contact, and Authorized Official contact.

Some of the other changes applicants will discover from previous years are:

DUNS number is now required

Department and Division Name

SAMS Cage Code (linked to Agency profile)

State-wide applicability: applicant may select the entire state or specific counties

Legislative Districts: applicant may select the appropriate checkboxes for the agency and project-specific legislative districts

Notice of Funding Opportunity acknowledgement statement (previously RFA acknowledgement)

New Indirect Cost Section

- If indirect costs are allowed, this new section will be utilized by the applicant to select the appropriate indirect cost type and rate
- Aligns with GATA Budget Template and validates against the Budget Section

Certification Section

- Updated to include the required GATA application certification language and fields

- Includes a second page for Financial Certification in alignment with the GATA Budget Template
- Certification tab has been moved to the end of the application sections and now appears after the Miscellaneous tab

E. Application Review Information

1. Criteria

General Application Information (Program ERC and Fiscal)

1. Is the applicant a certified Illinois local health department outside Chicago?
2. Does the application appear to be completed correctly and fully?
3. Are there any attachments missing or incorrectly completed?
4. Do any of the responses appear to require further clarification or potentially disqualify the applicant?
5. Does the applicant have Internet access as mandated for implementation of the grant?

General Application Information (Fiscal)

1. Has the applicant completed the required the annual "Fiscal and Administrative Risk Assessment (ICQ)?"
2. Has the applicant failed to met any specific conditions placed on them as a result of any Fiscal & Administrative Risk Assessment Internal Control Questionnaire (ICQ)?
3. Has the applicant completed the required pre-qualification process through Illinois' Grantee Portal?

General Application Information (Program Manager)

1. Has the grantee completed and adequately responded to the required "Programmatic Risk Assessment"?

Annual Work Plan (Program ERC)

1. Does the Annual Work Plan appear to sustain and/or build the applicant's public health preparedness capacity to build or sustain Capabilities for which the Grantee's current CPG rating is "Highly Important" or "Critical", or which have been specified by the Department?
2. Does the Annual Work Plan appear to be designed to address gaps so that the applicant can reach a CPG rating of "Full" or "Significant Ability" on the 2017 final annual IDPH approved Capabilities Plan Guide (CPG) self-assessment?
3. Does the annual work plan identify the applicant's people and resources that will implement activities; and estimate the quarter in which the activities AND required benchmarks and other outputs will occur?
4. Is the applicant's Annual Work Plan working on the capability objectives shown in the the Grantee's Strategic Work Plan?

5. Does the applicant's strategic plan sufficiently prioritize activities based on its IDPH-approved CPG assessment?

Budget (Program ERC)

1. Are the proposed budget items necessary and reasonable to directly support the Grantee's Annual Work Plan?
2. Are the proposed budget items appropriately allocated (pro-rated) between this grant and other funding sources - especially if the item appears to have significant non-grant uses?

Budget (Fiscal)

1. Is the budget filled out and calculated correctly per the directions?
2. Is the mandatory 10% match shown?
3. Does each budget item adequately describe each item and accurately and correctly document the calculation of the its cost?
4. Do any of the items in the budget appear to be restricted by the federal funding source, or federal of state regulations?
5. Does the budget utilize all available grant funds and not exceed the grant award amount.
6. Has the applicant's Indirect Cost (if requested) been correctly calculated according to its NICRA?

2. Review and Selection Process

Applications will have a two-part review. Both the IDPH/OPR/DPR Program Emergency Response Coordinator (ERC) responsible for the applicant's region and IDPH/OPR/DFGM Fiscal staff assigned to the PHEP Program will review the grant as described in the Review Criteria in E.1. Both reviewers must recommend the grant for funding in order for it to be awarded. If there are questions or disagreements between the reviews, it will be reviewed to the Program Manager then Deputy Director if necessary. Applications that are not correctly completed, or need clarification will be returned to the applicant for correction and resubmission. IDPH comments and clarification requests can be accessed through the icons found on the "Index" tab screen in the "Comments" Column - and by the "Approver Comments" at the bottom. IDPH may also deny an applicant a grant award that doesn't meet basic qualifications. If any reviewers have a conflict of interest, the application will be assigned to another IDPH/OPR reviewer. Once approved by IDPH, the applicant will be notified through an email from EGrAMS with instructions on how to print, sign and submit their grant to IDPH for final execution.

3. Anticipated Announcement and State Award Dates, if applicable.

The exact date of the Notice of Award and a fully executed grant agreement is not known, but is estimated to be between August and October 2016. Applications are received and evaluated on a "rolling" basis at different times during the 30 day application period. Applications are reviewed by both IDPH program and fiscal staff as soon as possible after it is received. Applicants may be asked to make clarifications and corrections based on these two reviews. Additional time may be needed if the applicant elects to use a negotiated indirect cost rate to support grant operations.

The indirect cost rate proposal must be submitted by the applicant to the State of Illinois within 90 days of the notice of award. The Awardee must also be qualified through the Grant Accountability and Transparency Act (GATA) Grantee Portal <http://www.grants.illinois.gov/>. This qualification process also includes a financial and administrative risk assessment utilizing an Internal Controls Questionnaire. Delays may occur if the applicant needs to take corrective action to become eligible for a grant award.

F. Award Administration Information

1. State Award Notices

Once an application is reviewed and approved by IDPH staff, the applicant will receive an email from EGrAMS with instructions on how to print, review, sign and mail 4 copies back to IDPH. Any grant work done prior to receiving a grant signed by IDPH's Director is at your own financial risk. Federal requirements prohibit reimbursement for any grant expenses for work done prior to the start of your grant.

2. Administrative and National Policy Requirements

Applicants should refer to the detailed indirect cost rate requirements and limitations as stated in Section C. 3. Indirect Cost Rate.

This NOFO may not include all of the terms and conditions of the State award. Applicants must refer to the Notice of State Award (NOSA) and their grant agreement for the complete terms and conditions of the award.

Upon executing an award based on this application, the Grantee, its officers, and directors shall be responsible for compliance with the following certifications to the extent that the certifications apply to Grantee.

ARTICLE VIII - REQUIRED CERTIFICATIONS

Certifications. Grantee, its officers, and directors shall be responsible for compliance with the enumerated certifications to the extent that the certifications apply to Grantee.

(a) Bribery. Grantee certifies that it has not been convicted of bribery or attempting to bribe an officer or employee of the State of Illinois, nor made an admission of guilt of such conduct which is a matter of record (30 ILCS 500/50-5).

(b) Bid Rigging. Grantee certifies that it has not been barred from contracting with a unit of State or local government as a result of a violation of Paragraph 33E-3 or 33E-4 of the Criminal Code of 1961 (720 ILCS 5/33E-3 or 720 ILCS 5/33E-4, respectively).

(c) Debt to State. Grantee certifies that neither it, nor its affiliate(s), is/are barred from receiving an Award because Grantee, or its affiliate(s), is/are delinquent in the payment of any debt to the State, unless Grantee, or its affiliate(s), has/have entered into a deferred payment plan to pay off the debt, and Grantee acknowledges Grantor may declare the Agreement void if the certification is false (30 ILCS 500/50-11).

(d) Educational Loan. Grantee certifies that it is not barred from receiving State agreements as a result of default on an educational loan (5 ILCS 385/1 et seq.).

(e) International Boycott. Grantee certifies that neither it nor any substantially owned affiliated company is participating or shall participate in an international boycott in violation of the provision of the U.S.

Export Administration Act of 1979 (50 USC Appendix 2401 et seq. or the regulations of the U.S. Department of Commerce promulgated under that Act (15 CFR Parts 730 through 774).

(f) Dues and Fees. Grantee certifies that it is not prohibited from receiving an Award because it pays dues or fees on behalf of its employees or agents, or subsidizes or otherwise reimburses them for payment of their dues or fees to any club which unlawfully discriminates (775 ILCS 25/1 et seq.).

(g) Pro-Children Act. Grantee certifies that it is in compliance with the Pro-Children Act of 2001 in that it prohibits smoking in any portion of its facility used for the provision of health, day care, early childhood development services, education or library services to children under the age of eighteen (18), which services are supported by Federal or State government assistance (except such portions of the facilities which are used for inpatient substance abuse treatment) (20 USC 7181-7184).

(h) Drug-Free Work Place. If Grantee is not an individual, Grantee certifies it will provide a drug free workplace pursuant to the Drug Free Workplace Act. 30 ILCS 580/3. If Grantee is an individual and this Agreement is valued at more than \$5,000, Grantee certifies it shall not engage in the unlawful manufacture, distribution, dispensation, possession, or use of a controlled substance during the performance of the Agreement. 30 ILCS 580/4. Grantee further certifies that it is in compliance with the government-wide requirements for a drug-free workplace as set forth in 41 USC 8102.

(i) Motor Voter Law. Grantee certifies that it is in full compliance with the terms and provisions of the National Voter Registration Act of 1993 (52 USC 20501 et seq.).

(j) Clean Air Act and Clean Water Act. Grantee certifies that it is in compliance with all applicable standards, order or regulations issued pursuant to the Clean Air Act (42 USC §7401 et seq.) and the Federal Water Pollution Control Act, as amended (33 USC §1251 et seq.).

(k) Debarment. Grantee certifies that it is not debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this Agreement by any Federal department or agency (45 CFR Part 76), or by the State (See 30 ILCS 708/25(6)(G)).

(l) Non-procurement Debarment and Suspension. Grantee certifies that it is in compliance with Subpart C of 2 CFR Part 180 as supplemented by 2 CFR Part 376, Subpart C.

(m) Grant for the Construction of Fixed Works. Grantee certifies that all Programs for the construction of fixed works which are financed in whole or in part with funds provided by this Agreement shall be subject to the Prevailing Wage Act (820 ILCS 130/0.01 et seq.) unless the provisions of that Act exempt its application. In the construction of the Program, Grantee shall comply with the requirements of the Prevailing Wage Act including, but not limited to, inserting into all contracts for such construction a stipulation to the effect that not less than the prevailing rate of wages as applicable to the Program shall be paid to all laborers, workers, and mechanics performing work under the Award and requiring all bonds of contractors to include a provision as will guarantee the faithful performance of such prevailing wage clause as provided by contract.

(n) Health Insurance Portability and Accountability Act. Grantee certifies that it is in compliance with the Health Insurance Portability and Accountability Act of 1996 (HIPAA), Public Law No. 104-191, 45 CFR Parts 160, 162 and 164, and the Social Security Act, 42 USC 1320d-2 through 1320d-7, in that it may not use or disclose protected health information other than as permitted or required by law and agrees to use appropriate safeguards to prevent use or disclosure of the protected health information. Grantee shall maintain, for a minimum of six (6) years, all protected health information.

(o) Criminal Convictions. Grantee certifies that neither it nor any officer, director, partner or other managerial agent of Grantee has been convicted of a felony under the Sarbanes-Oxley Act of 2002, nor a

Class 3 or Class 2 felony under Illinois Securities Law of 1953, or that at least five (5) years have passed since the date of the conviction. Grantee further certifies that it is not barred from receiving an Award under 30 ILCS 500/50-10.5, and acknowledges that Grantor shall declare the Agreement void if this certification is false (30 ILCS 500/50-10.5).

(p) Forced Labor Act. Grantee certifies that it complies with the State Prohibition of Goods from Forced Labor Act, and certifies that no foreign-made equipment, materials, or supplies furnished to the State under this Agreement have been or will be produced in whole or in part by forced labor, convict labor, or indentured labor under penal sanction (30 ILCS 583).

(q) Illinois Use Tax. Grantee certifies in accordance with 30 ILCS 500/50-12 that it is not barred from receiving an Award under this Paragraph. Grantee acknowledges that this Agreement may be declared void if this certification is false.

(r) Environmental Protection Act Violations. Grantee certifies in accordance with 30 ILCS 500/50-14 that it is not barred from receiving an Award under this Paragraph. Grantee acknowledges that this Agreement may be declared void if this certification is false.

(s) Goods from Child Labor Act. Grantee certifies that no foreign-made equipment, materials, or supplies furnished to the State under this Agreement have been produced in whole or in part by the labor of any child under the age of twelve (12) (30 ILCS 584).

(t) Federal Funding Accountability and Transparency Act of 2006. Grantee certifies that it is in compliance with the terms and requirements of 31 USC 6101.

ARTICLE IX - CRIMINAL DISCLOSURE

9.1. Mandatory Criminal Disclosures. Grantee shall continue to disclose to Grantor all violations of criminal law involving fraud, bribery or gratuity violations potentially affecting this Award. See 30 ILCS 708/40. Additionally, if Grantee receives over \$10 million in total Grant Funds, funded by either State or Federal funds, during the period of this Award, Grantee must maintain the currency of information reported to SAM regarding civil, criminal or administrative proceedings as required by 2 CFR 200.113 and Appendix II of 2 CFR Part 200, and 30 ILCS 708/40.

ARTICLE X - UNLAWFUL DISCRIMINATION

10.1. Compliance with Nondiscrimination Laws. Grantee, its employees and subcontractors under subcontract made pursuant to this Agreement, shall comply with all applicable provisions of State and Federal laws and regulations pertaining to nondiscrimination, sexual harassment and equal employment opportunity including, but not limited to, the following laws and regulations and all subsequent amendments thereto:

(a) The Illinois Human Rights Act (775 ILCS 5/1-101 et seq.), including, without limitation, 44 Ill. Admin. Code Part 750, which is incorporated herein;

(b) The Public Works Employment Discrimination Act (775 ILCS 10/1 et seq.);

(c) The United States Civil Rights Act of 1964 (as amended) (42 USC 2000a- and 2000h-6). (See also guidelines to Federal Financial Assistance Recipients Regarding Title VI Prohibition Against National Origin Discrimination Affecting Limited English Proficient Persons [Federal Register: February 18, 2002 (Volume 67, Number 13, Pages 2671-2685)]);

(d) Section 504 of the Rehabilitation Act of 1973 (29 USC 794);

(e) The Americans with Disabilities Act of 1990 (42 USC 12101 et seq.); and

(f) The Age Discrimination Act (42 USC 6101 et seq.)

Article XI - LOBBYING

11.1. Improper Influence. Grantee certifies that no Grant Funds have been paid or will be paid by or on behalf of Grantee to any person for influencing or attempting to influence an officer or employee of any government agency, a member of Congress or Illinois General Assembly, an officer or employee of Congress or Illinois General Assembly, or an employee of a member of Congress or Illinois General Assembly in connection with the awarding of any agreement, the making of any grant, the making of any loan, the entering into of any cooperative agreement, or the extension, continuation, renewal, amendment or modification of any agreement, grant, loan or cooperative agreement. 31 USC 1352. Additionally, Grantee certifies that it has filed the required certification under the Byrd Anti-Lobbying Amendment (31 USC 1352), if applicable.

11.2. Federal Form LLL. If any funds, other than Federally-appropriated funds, were paid or will be paid to any person for influencing or attempting to influence any of the above persons in connection with this Agreement, the undersigned must also complete and submit Federal Form LLL, Disclosure of Lobbying Activities Form, in accordance with its instructions.

11.3. Lobbying Costs. Grantee certifies that it is in compliance with the restrictions on lobbying set forth in 2 CFR Part 200.450. For any Indirect Costs associated with this Agreement, total lobbying costs shall be separately identified in the Program Budget, and thereafter treated as other Unallowable Costs.

11.4. Procurement Lobbying. Grantee warrants and certifies that it and, to the best of its knowledge, its sub-grantees have complied and will comply with Executive Order No. 1 (2007) (EO 1-2007). EO 1-2007 generally prohibits Grantees and subcontractors from hiring the then-serving Governor's family members to lobby procurement activities of the State, or any other unit of government in Illinois including local governments, if that procurement may result in a contract valued at over \$25,000. This prohibition also applies to hiring for that same purpose any former State employee who had procurement authority at any time during the one-year period preceding the procurement lobbying activity.

11.5. Subawards. Grantee must include the language of this ARTICLE XI in the award documents for any subawards made pursuant to this Award at all tiers. All sub-awardees are also subject to certification and disclosure. Pursuant to Appendix II(I) to 2 CFR Part 200, Grantee shall forward all disclosures by contractors regarding this certification to Grantor.

11.6. Certification. This certification is a material representation of fact upon which reliance was placed to enter into this transaction and is a prerequisite for this transaction, pursuant to 31 USC 1352. Any person who fails to file the required certifications shall be subject to a civil penalty of not less than \$10,000, and not more than \$100,000, for each such failure.

Article XII - MAINTENANCE AND ACCESSIBILITY OF RECORDS; MONITORING

12.1. Records Retention. Grantee shall maintain for three (3) years from the date of submission of the final expenditure report, adequate books, all financial records and, supporting documents, statistical records, and all other records pertinent to this Award, adequate to comply with 2 CFR 200.333, unless a different retention period is specified in 2 CFR 200.333. If any litigation, claim or audit is started before the expiration of the retention period, the records must be retained until all litigation, claims or audit exceptions involving the records have been resolved and final action taken.

12.2. Accessibility of Records. Grantee, in compliance with 2 CFR 200.336, shall make books, records, related papers, supporting documentation and personnel relevant to this Agreement available to authorized Grantor representatives, the Illinois Auditor General, Illinois Attorney General, any Executive Inspector General, the Grantor's Inspector General, Federal authorities, any person identified in 2 CFR 200.336, and any other person as may be authorized by Grantor (including auditors), by the State of Illinois or by Federal statute. Grantee shall cooperate fully in any such audit.

12.3. Failure to Maintain Books and Records. Failure to maintain books, records and supporting documentation, as described in this ARTICLE XII, shall establish a presumption in favor of the State for the recovery of any funds paid by the State under this Agreement for which adequate books, records and supporting documentation are not available to support disbursement.

12.4. Monitoring and Access to Information. Grantee must monitor its activities to assure compliance with applicable State and Federal requirements and to assure its performance expectations are being achieved. Grantor shall monitor the activities of Grantee to assure compliance with all requirements and performance.

3. Reporting

Grant Narrative Progress Reports are to be submitted quarterly in CEMP. A narrative report is due 1 month following the end of each calendar quarter as specified in grant agreement. Funding will be suspended until the report is received and reviewed by its IDPH Emergency Response Coordinator (ERC) per 30 ILCS 705/4.1.

The Grantee will write an After-Action Report/Improvement Plan (AAR/IP) for emergency events and its annual exercise and as soon as possible (60 days) following the event, but no later than 30 days following the termination of this grant. The Grantee will post the AAR/IP in CEMP and immediately notify the Department ERC.

By April 14, 2017 the Grantee shall create and update their multi-year training and exercise (MYTEP) plan for Department ERC review and approval as explained in the grant agreement.

The initial draft of the new Strategic Plan for State Fiscal Year 2018 shall be submitted to the IDPH ERC in CEMP for review and approval by March 24, 2017.

The Grantee will provide to their IDPH ERC for review and approval a draft PHEP grant application work plan in CEMP by March 24, 2017 that covers proposed Grantee activities for State fiscal Year 2018.

G. State Awarding Agency Contact(s)

IDPH Office of Preparedness and Response (OPR)
Public Health Emergency Preparedness (PHEP) Grant Program Contacts
422 S. 5th Street, Springfield, IL 62701
Phone (217) 558-0560; Fax (217) 557-3894

Winfred Rawls
IDPH, Deputy Director, Office of Preparedness and Response
Room 401
Office: (217) 558-0560
Email: Winfred.rawls@illinois.gov

Mark Vassmer
Division of Disaster Planning & Readiness
Room 403
PHEP/HPP Program Manager
Office: (217) 558-3525
Email: Mark.Vassmer@illinois.gov

Shana Altman
Division of Grants and Financial Management
CDC Grants Manager
Office: 217-557-4423
Email: Shana.Altman@illinois.gov

**Division of Disaster Planning and Readiness
Emergency Response Coordinators (ERC) Regional Staff**

Anu Meka, MPH, Regional Section Chief
Emergency Response Coordinator
Springfield Region
422 S. 5th Street, 4th Flr
Springfield, IL 62701
O: (217) 557-3766
CW: (217) 836-2619
Fax: (217) 557-3894
Email: anu.meka@illinois.gov
Assigned Coverage Area: Springfield Region
(Adams, Brown, Cass, Christian, Hancock, Logan, Mason, Menard, Morgan, Montgomery, Pike, Schuyler, Sangamon, Scott)

M. Masood Athar, MD, MPH
Emergency Response Coordinator
Rockford Region
IDPH Rockford Regional Office
4302 North Main
Rockford IL 61103
O: (815) 967-3874
B: (815) 238-7942
Fax: (815) 987-7822
Email: masood.athar@illinois.gov
Assigned Coverage Area: Rockford Region (Boone, Carroll, DeKalb, Jo Davies, Lee, Ogle, Stephenson, Whiteside, Winnebago)

Elizabeth Bussmann, BS, CIH
Emergency Response Coordinator
Edwardsville Region
IDPH Edwardsville Regional Office
22 Kettle River Drive
Glen Carbon, IL 62034
O: (618) 656-9425

B: (618) 301-6249
Fax: (618) 656-5863
Email: elizabeth.bussmann@illinois.gov
Assigned Coverage Area: Edwardsville Region
(Bond, Calhoun, Clinton, Fayette, Greene, Jersey, Macoupin, Madison, Monroe, Randolph, St. Clair)

Matt Ringenberg, MPH, LEHP, CERC
Emergency Response Coordinator
Peoria Region
IDPH - Peoria Regional Office
5415 N. University, Suite 101
Peoria, IL 61614
O: (309) 693-5382
B: (309) 229-0456
Fax: (309) 693-5118
Email: matthew.ringenberg@illinois.gov
Assigned Coverage Area: Peoria East Region
(Bureau, Fulton, Henderson, Henry, Knox, LaSalle, Livingston, McLean, Peoria, Putnam, Marshall, McDonough, Mercer, Rock Island, Stark, Tazewell, Warren, Woodford)

Lynne E. Reagan, RN MHSA
Emergency Response Coordinator
Champaign Region
IDPH Champaign Regional Office
2125 South First Street
Champaign, Illinois 61820-7401
O: (217) 278-5937
B: (217) 722-9364
Fax: (217) 278-5959
SMS: 2177229364@vtext.com
Email: lynne.reagan@illinois.gov
Assigned Coverage Area: Champaign Region (Champaign, Clark, Coles, Crawford, Cumberland, DeWitt, Douglas, Edgar, Effingham, Ford, Iroquois, Jasper, Lawrence, Macon, Moultrie, Piatt, Shelby, Vermilion)

Joseph Ramos, RN, BSN
Emergency Response Coordinator
Chicago Region
122 S. Michigan Ave., 7th flr
Chicago, IL 60603
O: (312) 814-3881
B: (815) 761-2055
Fax: (312) 814-1503
Email: joe.ramos@illinois.gov
Assigned Coverage Area:
(Cook, DuPage, Grundy, Kane, Kankakee, Kendall, Lake, McHenry, Will)

Kevin Gillespie, LEHP
Emergency Response Coordinator

Marion Region
IDPH Marion Regional Office
2309 West Main St.
Suite 106
Marion, IL 62959
O: (618) 993-7047
B: (618) 964-5207
Fax: (618) 993-7052

Email: kevin.gillespie@illinois.gov

Assigned Coverage Area: Marion Region (Alexander, Clay, Edwards, Franklin, Gallatin, Hamilton, Hardin, Jackson, Jefferson, Johnson, Marion, Massac, Perry, Pope, Pulaski, Richland, Saline, Union, Wabash, Washington, Wayne, White, Williamson)

H. Other Information, if applicable

1. This grant agreement represents the final budget year (July 1, 2016, - June 30, 2017) of a five-year project period from July 1, 2012- June 30, 2017.
2. IDPH also awards preparedness funds to hospitals in Illinois and coordinates the PHEP program requirements with the Hospital Preparedness Program. Grant agreements for each program are designed to encourage and require cooperation with each other in planning, training, and response and participation in regional healthcare preparedness coalitions.
3. More information on IDPH's preparedness activities can be found at: <http://www.dph.illinois.gov/topics-services/emergency-preparedness-response>
4. The State of Illinois is not obligated to make any award as a result of this announcement or the receipt of an application. Grant funds are only reimbursable after the receipt of a fully executed grant agreement.

Mandatory Forms -- Required for All Agencies

1. **Uniform State Grant Application** – Available at idphgrants.com for eligible applicants
New to EGrAMS, click [HERE](#) to see how to Get Started
2. **Project Narrative (included in EGrAMS application)**
3. **Budget (included in EGrAMS application)**
4. **Budget Narrative (included in EGrAMS application)**

Other program-specific mandatory forms:

Strategic Plan and Annual Work Plan submitted, reviewed and approved by the IDPH ERC in CEMP must be part of this application.

**IDPH Local Health Department Public Health Preparedness (PHEP17) BP5 (SFY17) Grant
Exhibit E and F - PERFORMANCE MEASURES (REVISION May 2, 2016)**

Performance Measure	Data Reported	Report Frequency	Method of Reporting	Minimum Standard (Exhibit F)	Possible Remedial Action or Funding Impact
Grant Narrative Progress Reports	Date Submitted	Quarterly	CEMP	Complete a narrative report 1 month following the end of each calendar quarter as specified in grant.	Funding suspended until received and reviewed by ERC per 30 ILCS 705/4.1.
Preparedness and NIMS Training Completion for IDPH-required courses (IS 100, 200, 250, 300, 400, 700, 702, 703, 800, 808 and HSEEP, SIREN, CEMP, HELPS)	Percent (# in numerator that have completed each IDPH-required ICS training / Cumulative # of current staff required to complete each IDPH required ICS training)	4th Qtr	CEMP Survey Link	Complete by July 31, 2017	Funding suspended until received and reviewed by ERC per 30 ILCS 705/4.1.
Volunteers	Cumulative number of registered volunteers inclusive of those who are registered as a volunteer for your jurisdiction via IHELPS and/or through a local registration system.	4th Qtr	CEMP Survey Link	Complete by July 31, 2017. Number of volunteers meets LHD MCM Dispensing Needs assessed by ERC	Funding suspended until received and reviewed by ERC per 30 ILCS 705/4.1.
Annual Exercise or Event	Exercise or Event, Exercise and AAR/IP		CEMP Survey Link	Complete by July 31, 2017	Corrective Action in 15 days then suspension or termination of agreement.

IDPH Local Health Department Public Health Preparedness (PHEP17) BP5 (SFY17) Grant
Exhibit E and F - PERFORMANCE MEASURES (REVISION May 2, 2016)

	Date(s), Exercise Type (Drill, TTX, FE, FSE)				
PHEP CPG Assessment Update	Date submitted	Annual	CEMP Module	Complete by 2/1/2017	Funding suspended until received and reviewed by ERC per 30 ILCS 705/4.1.
Percent Priority CPG Capabilities	# CRITICAL or HIGHLY IMPORTANT capabilities with FULL or SIGNIFICANT CAPABILITY / # of ALL CRITICAL or HIGHLY IMPORTANT capabilities	Annual	CEMP Narrative Report by 3 rd quarter	70%	Corrective Action Plan as determined by ERC.
Conducts TEPW	Date Conducted	Annual	CEMP Narrative Report by 4 th quarter	Completed by 3/13/17	Corrective Action Plan as determined by ERC.
MYTEP Narrative and CEMP Module	Date completed	Annual	Narrative and CEMP Module	Completed by 4/14/17	Corrective Action Plan as determined by ERC.
HVA	Date of the last update	Annual	CEMP Module	Completed by 4/14/17	Corrective Action Plan as determined by ERC.
Strategic Plan Update	Date of the plan's update	Annual	CEMP	Completed by 3/24/17	Corrective Action Plan as determined by ERC.
Annual Work Plan	Date plan for BP1 (SFY18) is created	Annual	CEMP	Completed by 3/24/17	Corrective Action Plan as determined by ERC.
Emergency Response Planning with multiple appropriate planning partners.	List of non-LHD staff partners, meeting dates, confirm contact info.	Maintain annually	CEMP Narrative	Completed by June 30, 2017	Corrective Action Plan as determined by ERC.
Local Jurisdictional Data Sheet Update	Date updated	Annual	CEMP	June 30, 2017	Funding suspended until received and reviewed by ERC per 30 ILCS 705/4.1.
MCM ORR and local drop site survey	Date	Annual	CEMP and Site Survey Form	June 30, 2017	Corrective Action Plan as determined by ERC.
Type of MRC of volunteer unit Affiliation with LHD	("Hosted", "Affiliated", "Other",	annual	CEMP Narrative	June 30, 2017	Corrective Action Plan as determined by ERC.

**IDPH Local Health Department Public Health Preparedness (PHEP17) BP5 (SFY17) Grant
Exhibit E and F - PERFORMANCE MEASURES (REVISION May 2, 2016)**

	"None")				
Annual MRC Drill (if attached to MRC)	Date	Annual	CEMP Narrative	June 30, 2017	MRC Funding stipend suspended.
IDPH Preparedness Conference attendance		Annual	CEMP Narrative Report by 4th quarter		Corrective Action Plan as determined by ERC.
Exercise meets requirement to test MCM-throughput, info-sharing, volunteer management.		Once in five years	AAR/IP	60 days after exercise/event, but no later than	Corrective Action Plan as determined by ERC.
After Hours IC Staff Alert & Assembly Drill	Date	Annual	CEMP Narrative	June 30, 2017	Funding suspended until received and reviewed by ERC per 30 ILCS 705/4.1.
IPHMAS Request Drill / Exercise	Date	Annual	CEMP Narrative and/or AAR/IP for exercise/event	June 30, 2017	Funding suspended until received and reviewed by ERC per 30 ILCS 705/4.1.
Quarterly StarCom 21 Drill with Partners Dates	Date	1st Qtr	CEMP Narrative	September 30, 2016	Funding suspended until received and reviewed by ERC per 30 ILCS 705/4.1.
	Date	2nd Qtr	CEMP Narrative	December 31, 2016	Funding suspended until received and reviewed by ERC per 30 ILCS 705/4.1.
	Date	3rd Qtr	CEMP Narrative	March 31, 2017	Funding suspended until received and reviewed by ERC per 30 ILCS 705/4.1.
	Date	4th Qtr	CEMP Narrative	June 30, 2017	Funding suspended until received and reviewed by ERC per 30 ILCS 705/4.1.
IMATS Drill	Date	Annual	CEMP Narrative	June 30, 2017	Corrective Action Plan as determined by ERC.