



Goal Of Today's Workshop

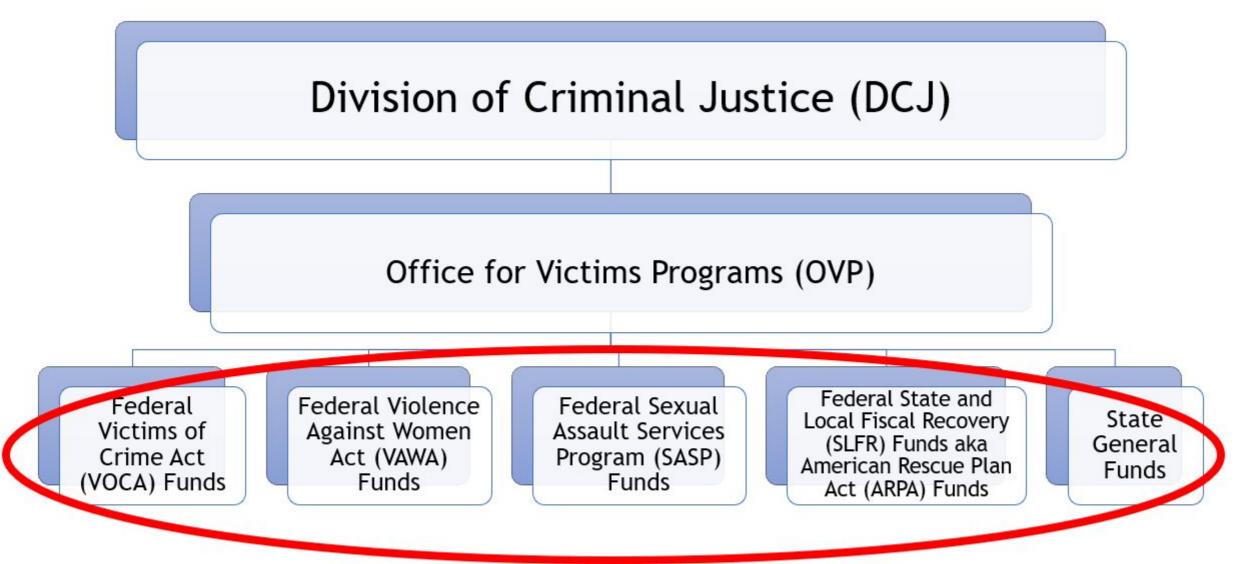


Provide your agency with building blocks to successfully meet **CVS Grant Post-Award** Requirements

Common Acronyms

PMT:	Performance Measurement Tool
ARPA:	American Rescue Plan Act
SLFRF:	State and Local Fiscal Recovery Fund
VAWA:	Violence Against Women Act
SASP:	Sexual Assault Services Program
VOCA:	Victims of Crime Act
OVP:	Office For Victims Programs
CVS:	Crime Victim Services Funds
DCJ:	Division of Criminal Justice
CDPS:	Colorado Department of Public Safety

Overview of CVS Grant Process





CVS Grant Types

	VOCA	VAWA	SASP	SLFRF	General Fund
Grant Type	Federal	Federal	Federal	Federal	State
Intent	Provides funding for direct services for victims of crime.	assault, domestic	Dedicated to the	for victims of crime impacted by the COVID pandemic.	Provides funding for services that support victims of crime. These funds are not guaranteed to be available in future cycles.
Match	Yes 20% * (match waived for 2023-2024)	Yes 25% **	No	No	No



What to Expect From OVP



COMMUNICATION:

News, announcements and resources via quarterly newsletters and other forms of communication



MONITORING:

Compliance review and onsite visit



DOCUMENTATION REQUESTS:

Staff may request supporting documentation for grant expenditures or other required grants document (e.g. whistleblower policy).



TECHNICAL ASSISTANCE:

More training and resources for grantees

What OVP Expects From Grantees



POST-AWARD SUBMISSIONS: Submit program and financial reports on time



GRANT FILE: Maintain up-to-date grant file



Communication: Maintain regular communication with CVS Grants Team staff

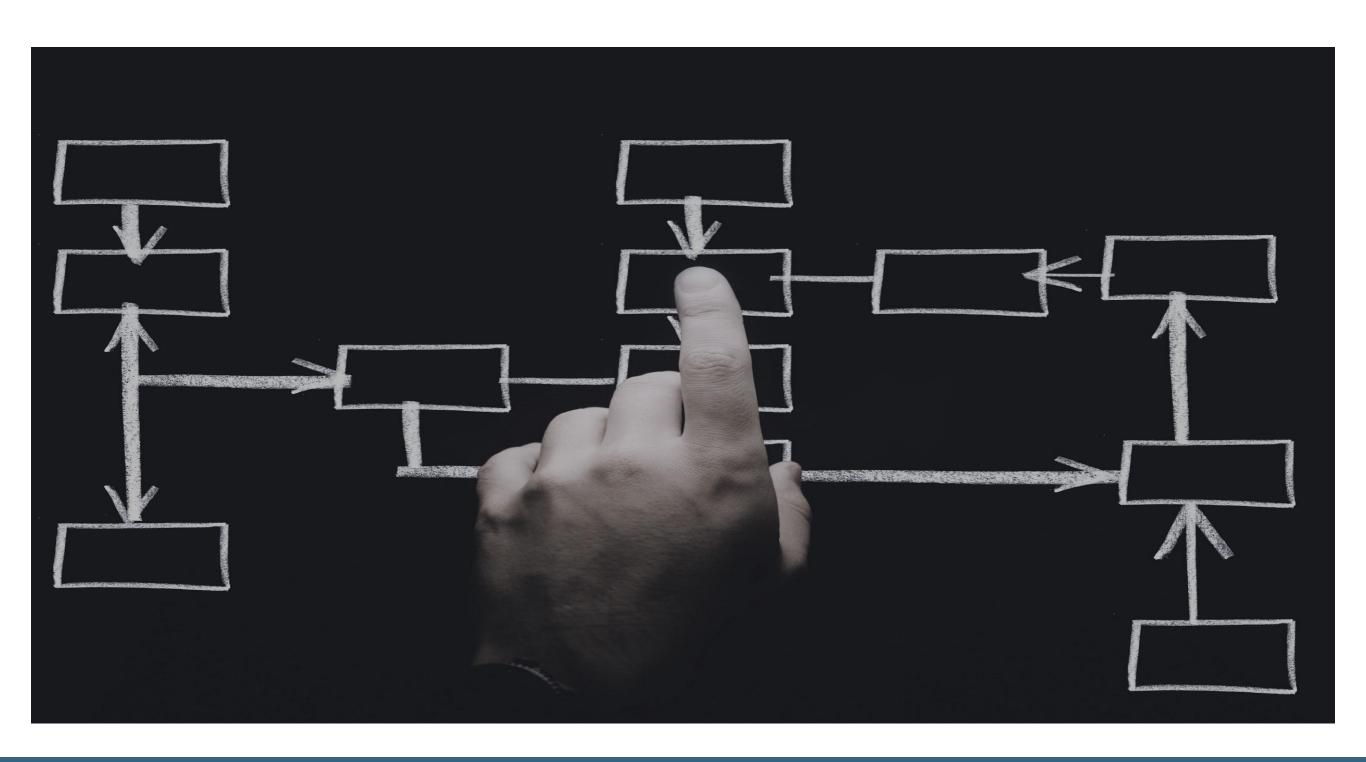


REFER TO GRANT AGREEMENT: Provide services as outlined in your grant agreement, or latest approved modifications



ADHERE TO BUDGET: Adhere to approved budget and approved budget line items (i.e. modifications, if applicable)

Grant Administration Resources



Grant Administration Resources

RESOURCE	CONTENTS / LOCATION
Grant Agreement	 Approved budget and statement of work Terms and requirements of grant agreement Applicable special conditions* Location: "Grant Agreement" Tab in ZoomGrants
OVP Website	 Funding source specific information Resources and Technical Assistance CVS Connections E-Newsletter archives & sign-up General OVP information Location: https://dcj.colorado.gov/dcj-offices/office-for-victims-programs
Essential Grant Accounting & Financial Documentation Packet	 Guidance regarding general accounting practices and samples of required financial back-up documentation Location: https://cdpsdocs.state.co.us/dcj/DCJ%20External%20Website/OVP/Essential%20Grant%20Accounting%20and%20Financial%20Documentation%20Packet.pdf



Grant Administration Resources - Cont'd

RESOURCE	CONTENTS
DCJ Grants & Resources Website	 Reporting Forms Guidance ZoomGrants Resources DCJ Administrative Guides (Federal & State) Civil Rights and Legal Requirements Location: https://dcj.colorado.gov/dcj-grants
DCJ Federal & State Administrative Guides	 Financial Requirements Administrative Requirements Audit Requirements Location: https://cdpsdocs.state.co.us/dcj/Grants/State_AdminGuide.pdf https://cdpsdocs.state.co.us/dcj/Grants/State_AdminGuide.pdf
DOJ Grants Financial Guide	 Reference manual for VOCA, VAWA, & SASP recipients Guidance for ensuring effective day-to-day management of awards. Location: https://www.ojp.gov/funding/financialguidedoj/overview



Highlight of Terms and Requirements of Your Grant Agreement

- Determination of the suitability to work with minors (VOCA, VAWA, SASP Grants)
- Verify employment eligibility
- Programs who receive federal funds cannot place unreasonable restrictions on competition and cannot discriminate against any person or entity on the basis of them being an "associate of the federal government"
- VAWA and SASP grantees must have a policy for response to workplace-related incidents of sexual misconduct, domestic violence, and dating violence

Your Working Grant File



GRANT FILE(S) MUST BE MAINTAINED FOR 3.5 YEARS AFTER THE END OF YOUR GRANT PERIOD.



Your Working Grant File: Contents

	CONTENTS	EXAMPLES
Grant Agreement	 Signed grant agreement document & exhibits Attachments submitted with grant application 	 DCJ Form 30 FMQs Sources of Income Table
Reporting Documentation	 Financial Reports Payment Requests Quarterly Programmatic Reports Annual Reports, if required 	 ZoomGrants Submissions (Even & Odd Tabs) CVS 2 Narrative Submitted PMT & Backup VAWA & SASP Annual Reports
Financial Documentation	 Documentation of all revenues & actual expenses Grant funded and match staff documentation Subledgers that match and support monthly or quarterly grant and match expenses Relevant audit/financial review 	 Payroll Records/Timesheets Invoices Receipts Vouchers Travel Forms

Your Working Grant File: Contents

	CONTENTS	EXAMPLES
Programmatic Documentation	Aggregate records, not individual client files	 Records supporting number of services you report serving
Communication with DCJ	 Copies of other forms & supporting documentation submitted for DCJ for approval Email communication with Grant Program Manager, Grant Financial Manager and other CVS staff 	 DCJ Form 16 & DCJ Form 17 Vendor Contracts Audit/Insurance/SAM Communication Email approval or denial of cost/services
Additional Information	 Office for Civil Rights (OCR), Limited English Proficiency (LEP), and Equal Opportunity Plan (EEOP) documents as relevant. Login information for applicable systems & websites 	●Login for ZoomGrants ●Login for PMT



Project Official Responsibilities

Overview of Roles

Grant Responsibilities

Grant Forms & Reporting Responsibilities

Project Director

Has day to day oversight of the project Responsible for:

- All programmatic & financial aspects
- main point of contact
- ZoomGrants Account Management

- Programmatic Reports
- Financial Reports
- Grant Change Forms

Financial Officer

Reviews invoices and other expenses related to the grant

Manages and prepares:

- the grant budget
- grant expense back-up documentation
- financial reports in collaboration with the Project Director

- Financial Reports
- Budget Revision
 Modification Requests
 (DCJ Form 4A)

Signature Authority Authorized to enter into contracts on behalf of agency

Enters into Grant
 Agreement with DCJ

- DCJ Form 4B Only when changing the Project Director
- Able to sign in lieu of Project Director or Financial Officer on any DCJ Form



<u>Understanding Your Budget</u>



PERSONNEL

Salaries and/or fringe benefits, or a portion, paid with grant funds

Examples: Direct Service Staff, Administrative Staff



SUPPLIES & OPERATING:

Project-related program supplies

Examples: Rental space, Conference registrations, Emergency assistance for victims (i.e. travel, food, clothing, emergency shelter, rental assistance, etc.)



TRAVEL

Program staff related travel costs

Examples: Conference related mileage/lodging/per diem & Mileage to provide direct services

<u>Understanding Your Budget</u>



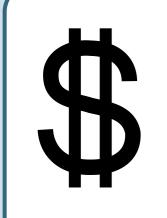
EQUIPMENT

Items costing \$5,000 or more per unit and a useful life of more than one year

Examples: Colposcopes



CONSULTANTS/ CONTRACTS Professional services provided for the grant project and requires submission of the DCJ Form 16 and sometimes the DCJ Form 17 **Examples:** Attorneys, Specialized clinical and therapeutic services, In-service trainer for direct service staff, Accountants.



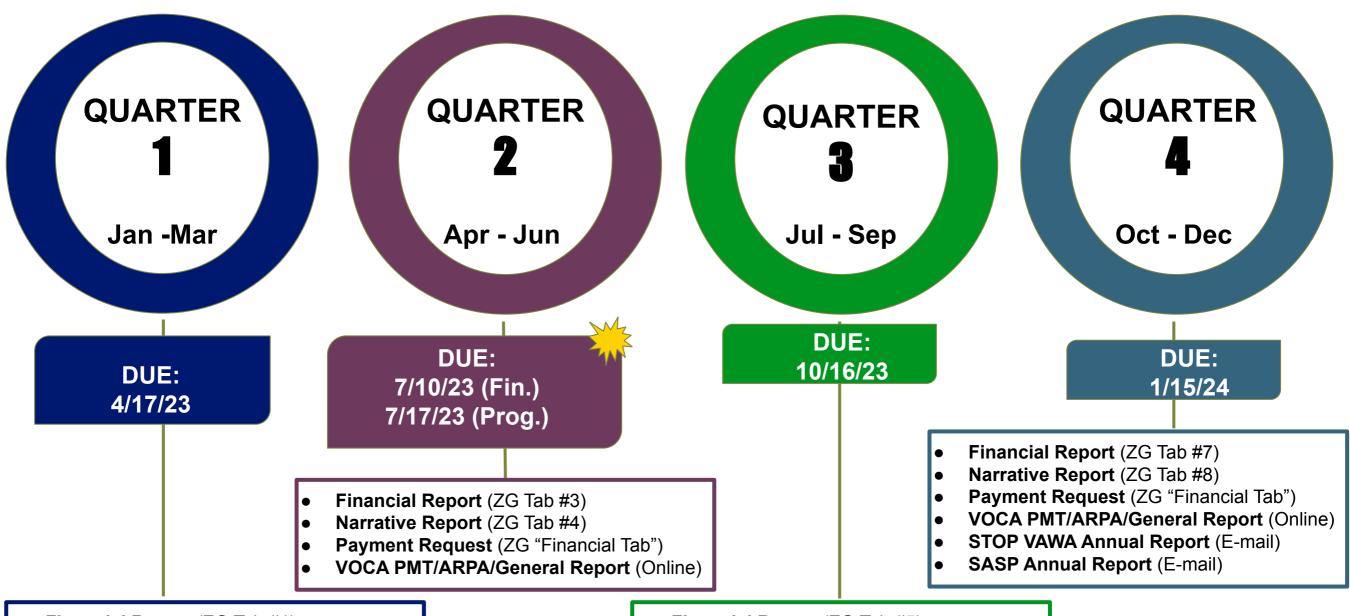
INDIRECT

Costs incurred that are necessary to the provision of direct services, but cannot be tied to, or readily allocated to, a specific grant project or activity. There are 2 types of indirect calculations:

- 10% De Minimis Rate
- Federally Negotiated Rates

Agencies should have a line for indirect costs in their accounting system, as these funds are not directly allocated as specific costs.

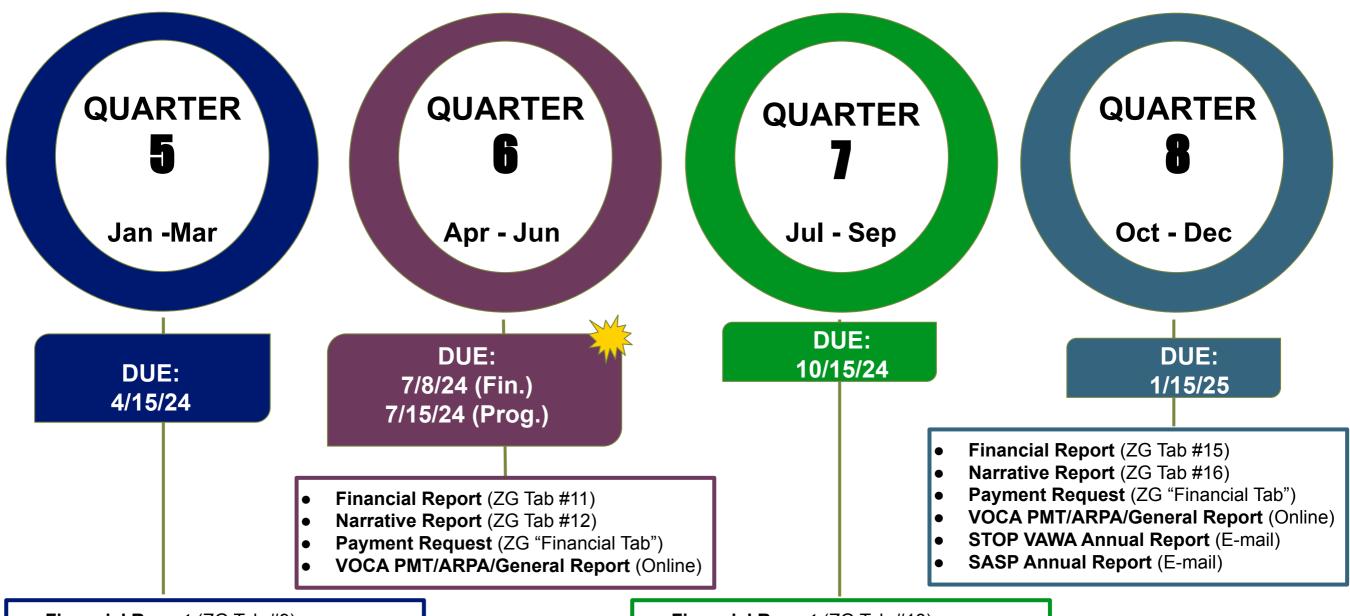
Quarterly Reporting Schedule



- Financial Report (ZG Tab #1)
- Narrative Report (ZG Tab #2)
- Payment Request (ZG "Financial Tab")
- VOCA PMT/ARPA/General Report (Online)

- Financial Report (ZG Tab #5)
- Narrative Report (ZG Tab #6)
- Payment Request (ZG "Financial Tab")
- VOCA PMT/ARPA/General Report (Online)

Quarterly Reporting Schedule



- Financial Report (ZG Tab #9)
- Narrative Report (ZG Tab #10)
- Payment Request (ZG "Financial Tab")
- VOCA PMT/ARPA/General Report (Online)

- Financial Report (ZG Tab #13)
- Narrative Report (ZG Tab #14)
- Payment Request (ZG "Financial Tab")
- VOCA PMT/ARPA/General Report (Online)

Quarterly Narrative Form (DCJ Form CVS 2)

NEW VERSION

COLORADO DIVISION OF CRIMINAL JUSTICE (DCJ)

CVS 2 Quarterly Report - Narrative Form

INS UCTIONS:

- Download and save this form to your computer.
- If you have multiple CVS grants, you will need to download and use separate forms for each grant. Do not use one form for multiple grants or multiple funding sources.
- Once you have saved the form, open the form from its saved location and complete the applicable fields.
- To ensure the content you have entered is visible, simply press "tab" or click outside of the field and it should automatically
 expand.
- If you have goals and objectives, in order to work off the previous quarter's version of the CVS 2, save an unsigned copy of the
 CVS 2 onto your computer each quarter and work off that version
- Sign electronically. After signing electronically, you will be prompted to save the document.
- · Once completed and saved, reopen to ensure your responses were saved before uploading into ZoomGrants.

GRANTEE:	GRANT NUMBER:
PROJECT TITLE:	PROJECT DURATION FROM TO
PREPARED BY:	
DATE: EMAIL ADDRESS:	PHONE:

SELCECT THE FUNDING SOURCE FOR THIS GRANT AWARD:

○ VOCA

OS.T.O.P. VAWA

○ SASP

ARPA/General Funds



Opening Forms



You will receive an error message...

Please wait...

If this message is not eventually replaced by the proper contents of the document, your PDF viewer may not be able to display this type of document. You can upgrade to the latest version of Adobe Reader for Windows®, Mac, or Linux® by visiting http://www.adobe.com/go/reader_download.

For more assistance with Adobe Reader visit http://www.adobe.com/go/acrreader. Windows is either a registered trademark or a trademark of Microsoft Corporation in the United States and/or other countries. Mac is a trademark of Apple Inc., registered in the United States and other countries. Linux is the registered trademark of Linus Torvalds in the U.S. and other countries.

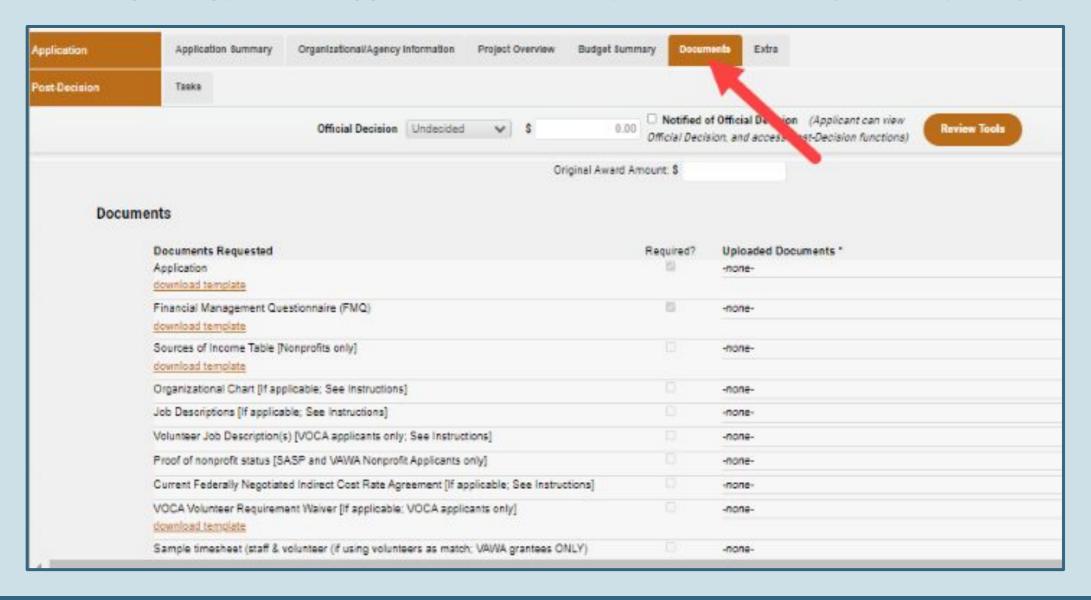
VIDEO INSTRUCTIONS ON HOW TO OPEN FORMS: https://youtu.be/aOXRAgiGTsl

DCJ Forms

Form Description	Form Number	Where to Submit	Signature Required
Quarterly & Final Subgrant Financial Report	DCJ 1-A	ZoomGrants Report Tabs	Project Director & Financial Officer
Payment Request	DCJ 3	ZoomGrants Financial Tab	Project Director
Quarterly Statistical & Narrative Report*	CVS2	ZoomGrants Report Tabs	Project Director
PMT (VOCA only)	N/A	PMT Website	Project Director
SASP Program Annual Progress Report (SASP only)	N/A	Email	Project Director
STOP Program Annual Progress Report (VAWA Only)	N/A	Email	Project Director
Budget Revision*	DCJ 4-A	Documents Tab	Project Director & Financial Officer
Change in Project Officials*	DCJ 4-B	Documents Tab	Project Director** and signature of new Project Official
Modification of Other Grant Agreement Terms	DCJ 4-D	Documents Tab	Project Director
Equipment Inventory/Retention	DCJ 5	Documents Tab	Project Director
Equipment Procurement Certification Form	DCJ 13	Documents Tab	Project Director
Professional Services/Consultant* Certification	DCJ 16 & 17	Documents Tab	Project Director and Contractor (if applicable)

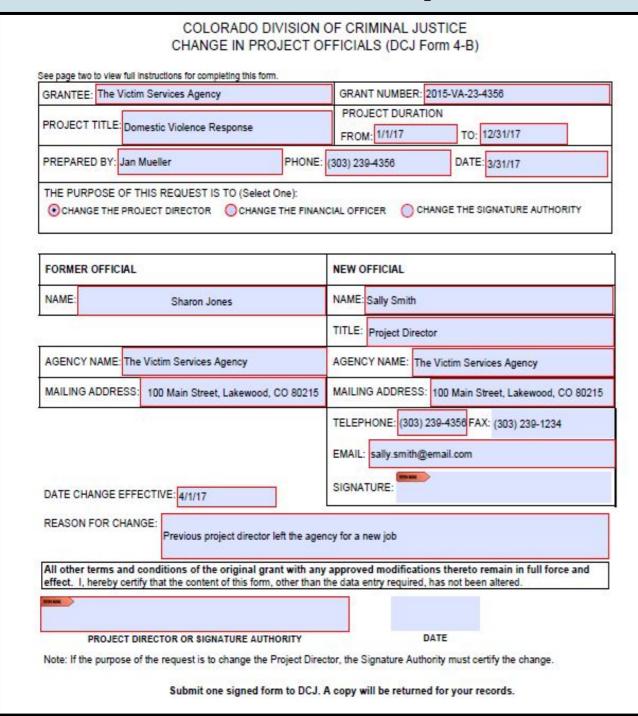
DCJ Forms

- Blank templates of DCJ Forms can be found in ZoomGrants under the "Documents" Tab
- All forms should be submitted via ZoomGrants for Grant Program Managers to review & approve
- Be sure to keep a copy of the approved form from your Grant Manager with your grant file





Change in Project Officials (DCJ Form 4B)



PURPOSE

To Change a project official for your grant

TIPS

- Grantees must notify Grant
 Program Managers of any Project
 Official Change within fifteen (15)
 days following the change;
- If you have multiple CVS awards, one form is needed for each grant;
- A copy with DCJ Approval will be uploaded into ZoomGrants.

Consultants/Contracts Certification Form (DCJ Form 16)

	CERTIFICATION (DCJ FORM 16)
See Instructions on page two of this form.	0.00 0.00 0.00 0.00 0.00 0.00 0.00 0.0
The Victim Services Agency	GRANT NUMBER: 2015-VA-23-4356
PROJECT TITLE: Domostic Violence Poppenso	PROJECT DURATION: FROM: 1/1/17 TO: 12/31/17
PROJECT DIRECTOR: Jan Muster	PHONE: 303-239-086
This form is used to verify the grantee's compliance with fede contractors under contract with the project. This form must be com- and if the hourly rate exceeds the maximum per hour rate execution. Refer to the DCJ Administrative Guide applicable to you sections must be completed. SECTION I: CONTRACTOR INFORMATION	pieted and forwarded to DCJ at the time of contract execution, prior approval must also be submitted before contract
Contractor's Name and Address:	
SECTION II: PRIOR APPROVAL	
	ed \$650 per 8-hour day (\$81,25/hr.) (Federally Funded Grants), O
State Funded Grants. Complete Section III.	ed good per ornour day (go) 25/11/2) (redetaily runded Grants), O
Prior Approval Required (federal grant funds only) - Tr	
Attach a written justification for the payment rate with this form or Contract. Stop here and submit to DCJ, do not complete Sec	, and the proposed draft of the Statement of Work, Purchase Orde tion III until prior approval is granted.
SECTION III: CONTRACT EXECUTION DETAILS	-
0 <u>.347</u> 3	ral debarment list and is actively registered at https://www.sam.gov
	al department list and is actively registered at https://www.sam.gov
Total Contract Amount: 10,000 Amount Paid by Grant: 10,000 Amount Paid by Grant: 10,000	mount Paid by Match (If applicable):
2. Attach a copy of the signed Statement of Work, Purchase Or	der, or Contract with outside contractor.
Date executed: mnt	
12 - 12 - 12 - 12 - 12 - 12 - 12 - 12 -	
D. Indicate the type of Procurement Process used to select this provide, to the maximum extent practical, open and free competitive (informal/formal) Competitive (informal/formal) Competitive (informal/formal)	tition. Attach a description of the process utilized.
 Indicate the type of Procurement Process used to select this provide, to the maximum extent practical, open and free compe 	ttion. Attach a description of the process utilized. Other
D. Indicate the type of Procurement Process used to select this provide, to the maximum extent practical, open and free compeCompetitive (informal/formal)Color SourceC. Has contractor been notified of the provision regarding copyright YES NO N/A.	ttion. Attach a description of the process utilized. Other
D. Indicate the type of Procurement Process used to select this provide, to the maximum extent practical, open and free compeCompetitive (informal/formal)Color SourceC. Has contractor been notified of the provision regarding copyright YES NO N/A.	tition. Attach a description of the process utilized. Other Inted materials? (see page 2 for provisions) E COPY TO DCJ That (1) records will be maintained and reflect the basis (invoice) onsistently applied for all aspects of this program, (3) dual ayment from more than one source for the same work for this
D. Indicate the type of Procurement Process used to select this provide, to the maximum extent practical, open and free compe	tition. Affach a description of the process utilized. Other Intel materials? (see page 2 for provisions) E COPY TO DCJ That (1) records will be maintained and reflect the basis (invoice) onsistently applied for all aspects of this program, (3) dual ayment from more than one source for the same work for this
D. Indicate the type of Procurement Process used to select this provide, to the maximum extent practical, open and free competitive (informal/formal) E. Has contractor been notified of the provision regarding copyright B. YES NO NA SUBMIT ON SIGNED AT CONTRACT EXECUTION: By my signature, I certify for payments to the contractor, (2) invoices for payments will be compensation is not allowed (i.e. the consultant is not receiving payments), (4) the information on this form is accurate and verifiable.	tition. Attach a description of the process utilized. Other Ited materials? (see page 2 for provisions) E COPY TO DCJ That (1) records will be maintained and reflect the basis (invoice) onsistently applied for all aspects of this program, (3) dual ayment from more than one source for the same work for this
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D. Indicate the type of Procurement Process used to select this provide, to the maximum extent practical, open and free competitive (informal/formal) Competitive (informal/formal) Sole Source Competitive (informal/formal) N/A SUBMIT ON SIGNED AT CONTRACT EXECUTION: By my signature, I certify for payments to the contractor, (2) invoices for payments will be a compensation is not allowed (i.e. the consultant is not receiving project), (4) the information on this form is accurate and verifiable. PROJECT DIRECTOR SIGNATURE	other a description of the process utilized. Other attending the process utilized and reflect the basis (invoice) on sistently applied for all aspects of this program, (3) dual asyment from more than one source for the same work for this DATE.
D. Indicate the type of Procurement Process used to select this provide, to the maximum extent practical, open and free competitive (informal/formal) Competitive (informal/formal) Sole Source NO NIA SUBMIT ON SIGNED AT CONTRACT EXECUTION: By my signature, I certify for payments to the contractor, (2) invoices for payments will be a compensation is not allowed (i.e. the consultant is not receiving project), (4) the information on this form is accurate and verifiable. PROJECT DIRECTOR SIGNATURE *****Colorado Division of C	tition. Attach a description of the process utilized. Other Inted materials? (see page 2 for provisions) E COPY TO DCJ That (1) records will be maintained and reflect the basis (invoice) onsistently applied for all aspects of this program, (3) dual syment from more than one source for the same work for this DATE Interiminal Justice Use Only*** Contract Execution: Approved Denied

PURPOSE

To verify compliance with regulations regarding services provided by outside contractors being funded by grant funds.

TIPS

- Must be submitted for any contract or consultant paid with grant funds or used as match;
- Payment requests including these costs will not be processed if forms have not been received and approved by your Grant Program Manager.
- A copy of the PO/contract and all necessary documentation must be submitted with the form.
- A draft copy of the PO/contract must be submitted with the form BEFORE entering into a contract that exceeds the maximum hourly rate (\$81.25/hr or \$650/8-hr day)
- Debarment Form (DCJ Form 17) is required for all individual contractors not in SAM
- Reference your specific Admin Guide (State or Federal) for additional information.



Budget Revision Form (DCJ Form 4-A)

COLORADO DIVISION OF CRIMINAL JUSTICE **BUDGET REVISION (DCJ FORM 4-A)** GRANT NUMBER: 2018-VW-002-12 PROJECT DURATION TO: 12/31/20 PREPARED BY: John Smith PHONE: (123) 123-1212 DATE: 3/15/19 On January 20 we hired our Victim Advocate for the grant, because of the lag in hiring time we have vacancy savings of \$1200 - \$1000 in salary and \$200 in fringe. We would like to move this money to supplies and operating to our Emergency Hotel stay line item which we have under budgeted for so far this year. DCJ4A v3.doc

PAGE 1

PURPOSE

Initiates a request to move funds from one budget category to another.

TIPS

- Approval from Grant Program Manager is required before deviating from the current approved budget;
- Form is used for revisions for both grant funds and match funds.
- Changes within a budget category must receive prior approval from your Grant Program Manager (via e-mail), but may not require a modification form.

Additional Requirements

/	Must notify Grant Program Manager of any Project or Match staff change, or of any position that is vacant for more than 45 days.
V	Published materials must acknowledge grant funding (Federal funding only). Specific language can be found in your Grant Agreement or Admin Guide.
V	Projects will be monitored every two (2) years.
•	Audits/Financial Reviews must be submitted annually to cdps_dcj_audits@state.co.us with a Management Letter.
	Resource: https://dcj.colorado.gov/grantee-audit-requirements
V	Must Maintain*:
	Current SAM Registration Insurance



^{*}Some grantees may be exempt from certain requirements based on source of funding.

Questions

- Contact your Grant Program Manager if you have specific questions about the implementation of your award.
 - Email cvsgrants@state.co.us with any other questions.



