



# Post Award Request 7396-10 Montana (MT) - 02-04-2022 - Redirection (E, , , , , , , , , , , )

## **Post Award Request**

#### **Post Award Request** 7396-10 Recipient: Montana (MT) \* must provide value Date: M-D-Y 02-04-2022 \* must provide value **ELC Funding Involved** $\overline{\phantom{a}}$ Other COVID-19 project \* must provide value **Request Type** Redirection \* must provide value How many ELC projects are involved in this post award action? $\nabla$ \* must provide value From budget period: Budget Period 3 (8/1/21 - 7/31/22) \* must provide value To budget period: Budget Period 3 (8/1/21 - 7/31/22) \* must provide value **Grants Management Officer/Specialist Name (for ATTN line):** Brownie Anderson-Rana \* must provide value O Kathy Raible NOTE: Please use new "Notice of Award Number" fields below for correct formatting. **Notice of Award Number:**

#### **Notice of Award Number:**

Amendment Type  1-digit number (no letters). Typically 5, 6, or 9 but can be others. *required	Main Grant Number  12 Digits; Will always start off 'NU50CK000' and then have 3 numbers (no letters) at the end based on the recipient. *required	Budget Period  2 digits; Will always start with '0' and the second of the 2- digits will be the budget period in which the award was made. For example: Enhancing Detection was a BP1 award so '01'; whereas, the BP2 continuation funding is a BP2 award so '02'.  *required	Amendment Number  2 digits; Will always be a 2-digit number (no letters).  *required
6	NU50CK000500	03	03
0 characters remaining	0 characters remaining	0 characters remaining	0 characters remaining

Formatted NOA Number: 6 NU50CK000500-03-03

Is this request related to 2019 Novel Coronavirus (2019-nCoV)?

\* must provide value

Reason for redirection, highlighting benefits

\* must provide value

No

The funds amounting to \$109,736 were not approved. Line items E1 and S1 were moved to O1 (other). We are requesting funds from O1 (\$109,736) to be redirected to equipment.

1. Move 100,000 from O1 to equipment for E.4. The Montana State Prison (MSP) has developed a plan to improve confinement facility preparedness and response efforts to respond and mitigate the spread of a virus. In order to support these practices, especially during an emergency power outage, MSP would like to request the use of these funds to purchase a generator. The MSP will need

the generator to operate the equipment used to screen inmates, staff and visitors to help reduce the virus risk within a congregate setting. The generator is also needed in emergencies to operate the sanitization equipment, lighting for diagnostic and screening testing, and telephones for contact tracing. In order for MSP to meet inmate needs resulting from COVID-19-related limited/restricted mobility and/or access to the facility, MSP has made significant investment into the equipment and infrastructure needed to utilize video conferencing technology and other measures for attorney/client purposes, court appearances, family visiting, programming and telehealth. MSP would, however, be unable to provide uninterrupted services during an emergency power outage without the generator. It is also essential to have back up power supply for offenders who are ill and requiring the use of equipment to main their health status, equipment such as oxygen concentrators, which with Covid-19 the demand for oxygen use in the infected patients has increased tenfold. Without the ability to provide uninterrupted power and delivery of needed medical treatments, poor patient outcomes may occur. The State of Montana's procurement process will be followed for this purchase. At a minimum, three bids will be solicited, and the lowest bidder will win the purchase. In addition, the Clinical Services Division (CSD) Health Care Manager and the core team will work with on-site staff at MSP to ensure a generator is placed in the proper location and allows for the use of the sanitizing equipment, power for diagnostic and screening testing, contact tracing, programming and telehealth within the congregate living facilities in the event of a power outage.

2. Move \$9,736 from O1 (other) to equipment. Please see the following statements for the need of redirection of funds. The Montana State Prison (MSP) is the state-owned facility for the male inmates in the custody of the Montana Department of Corrections. This population includes many highrisk and elderly inmates, with complex medical issues. The MSP campus provides on-site care of inmates in the infirmary 24-7. The inmates are housed in different living units and work in various areas spread across a 68-acre campus. In order for the infirmary to adequately respond to emergent medical requests and provide timely emergent care for the inmates, it is necessary to transport the inmates from the various locations to the infirmary for care. To prevent the spread of COVID-19 during transport, MSP is requesting funding to purchase an emergency transport vehicle with wheelchair accessibility and has isolation capabilities, as well as ambulatory emergency type capabilities and equipment for staff to respond timely to an emergency to provide quality care for a critically ill patient. This vehicle will allow the safe transport of inmates as well as protection for the transport operators. The State of Montana's procurement process will be followed for this purchase. At minimum, three bids will be solicited, and the lowest bidder will win the purchase. A more competitive bidding process may be used, to ensure the most qualifying vehicles are purchased.

Insert statement specifying if redirection remains within to scope of the program announcement and will be used to support the ongoing activities of our cooperative agreement was the provide value	award.
If applicable, insert statement and provide the new, appro and negotiated indirect cost rate agreement. If no change required, state "Indirect costs have not been affected by t redirection of funds." * must provide value	is redirection of funds.
Organizational POC and Contact Information (name, phon number, and email address) * must provide value	Beth Hopkins 406-444-3012 beth.hopkins@mt.gov
Note: Values should be entered as whole numbers only, without any doll  Enter a 0 for cost categories with no funding  Salaries	
* must provide value	2032660
Fringe Benefits	0.000
* must provide value	852667
Travel	62224
Travel * must provide value	62221
* must provide value	210401
* must provide value  Equipment  * must provide value  Supplies	210401
* must provide value  Equipment  * must provide value	
* must provide value  Equipment  * must provide value  Supplies  * must provide value  Contractual	210401
* must provide value  Equipment  * must provide value  Supplies  * must provide value  Contractual  * must provide value	210401
* must provide value  Equipment  * must provide value  Supplies  * must provide value  Contractual  * must provide value  Other	210401
* must provide value  Equipment  * must provide value  Supplies  * must provide value  Contractual  * must provide value	210401       144424       759389
* must provide value  Equipment  * must provide value  Supplies  * must provide value  Contractual  * must provide value  Other	210401       144424       759389
* must provide value  Equipment  * must provide value  Supplies  * must provide value  Contractual  * must provide value  Other  * must provide value  Direct	210401       144424       759389       8268312
* must provide value  Equipment  * must provide value  Supplies  * must provide value  Contractual  * must provide value  Other  * must provide value	210401       144424       759389       8268312
* must provide value  Equipment  * must provide value  Supplies  * must provide value  Contractual  * must provide value  Other  * must provide value  Direct  Indirect  * must provide value	210401  144424  759389  8268312  12330074  493758
* must provide value  Equipment  * must provide value  Supplies  * must provide value  Contractual  * must provide value  Other  * must provide value  Direct  Indirect	210401 144424 759389 8268312
* must provide value  Equipment  * must provide value  Supplies  * must provide value  Contractual  * must provide value  Other  * must provide value  Direct  Indirect  * must provide value  Total	210401  144424  759389  8268312  12330074  493758

E: Cross-cutting Emerging Issues	
alaries	
ote: Values should be entered as whole numbers only, without any dollar signs (\$) o	or commas (e.g. \$100,000 = 100000)
Original Project Award (Budget Period 3 (8/1/21 - 7/31/22))	1170154
Proposed Redirection (Budget Period 3 (8/1/21 - 7/31/22))	0
Revised Project Award (Budget Period 3 (8/1/21 - 7/31/22))	
Revised Floject Award (Budget Ferrou 5 (6/ 1/21 - 7/51/22))	1170154

1111150	
Note: Values should be entered as whole numbers only, without any dollar signs (\$)	or commas (e.g. \$100,000 = 100000)
Original Project Award (Budget Period 3 (8/1/21 - 7/31/22))	507209
Proposed Redirection (Budget Period 3 (8/1/21 - 7/31/22))	0
Revised Project Award (Budget Period 3 (8/1/21 - 7/31/22)) (Calculated from Original Award and Proposed Redirection)	507209
Travel	
Note: Values should be entered as whole numbers only, without any dollar signs (\$)	or commas (e.g. \$100,000 = 100000)
Original Project Award (Budget Period 3 (8/1/21 - 7/31/22))	0
Proposed Redirection (Budget Period 3 (8/1/21 - 7/31/22))	0
Revised Project Award (Budget Period 3 (8/1/21 - 7/31/22)) (Calculated from Original Award and Proposed Redirection)	0
Equipment  Note: Values should be entered as whole numbers only, without any dollar signs (\$)	or commas (e.g. \$100,000 = 100000)
Original Project Award (Budget Period 3 (8/1/21 - 7/31/22))	210401
Proposed Redirection (Budget Period 3 (8/1/21 - 7/31/22))	109736
Since this amount is greater than or equal to \$25,00 with your request in Gr	•
Revised Project Award (Budget Period 3 (8/1/21 - 7/31/22)) (Calculated from Original Award and Proposed Redirection)	320137
Reason funds remain available:	The funds amounting to \$109,736 were not approved. Line items E1 and S1 were moved to O1 (other). We are requesting funds from O1 (\$109,736) to be redirected to equipment.
	1. Move 100,000 from O1 to equipment to line item E.4. This is to pay for a generator for the following reasons: The Montana State Prison (MSP) has developed a plan to improve confinement facility preparedness and response efforts to respond and mitigate the spread of a virus. In order to support these practices, especially during an emergency power outage, MSP would like to request the use of these funds to purchase a generator. The MSP will need the generator to operate the equipment used to screen inmates, staff and visitors to help reduce the virus risk within a congregate setting. The

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programming and telehealth. MSP would, however, be unable to provide uninterrupted services during an emergency power outage without the generator. It is also essential to have back up power supply for offenders who are ill and requiring the use of equipment to main their health status, equipment such as oxygen concentrators, which with Covid-19 the demand for oxygen use in the infected patients has increased tenfold. Without the ability to provide uninterrupted power and delivery of needed medical treatments, poor patient outcomes may occur. The State of Montana's procurement process will be followed for this purchase. At a minimum, three bids will be solicited, and the lowest bidder will win the purchase. In addition, the Clinical Services Division (CSD) Health Care Manager and the core team will work with on-site staff at MSP to ensure a generator is placed in the proper location and allows for the use of the sanitizing equipment, power for diagnostic and screening testing, contact tracing, programming and telehealth within the congregate living facilities in the event of a power outage.

2. Move \$9,736 from O1 (other) to equipment to E.1. Please see the following statements for the need of redirection of funds. The Montana State Prison (MSP) is the state-owned facility for the male inmates in the custody of the Montana Department of Corrections. This population includes many highrisk and elderly inmates, with complex medical issues. The MSP campus provides on-site care of inmates in the infirmary 24-7. The inmates are housed in different living units and work in various areas spread across a 68-acre campus. In order for the infirmary to adequately respond to emergent medical requests and provide timely emergent care for the inmates, it is necessary to transport the inmates from the various locations to the infirmary for care. To prevent the spread of COVID-19 during transport, MSP is requesting funding to purchase an emergency transport vehicle with wheelchair accessibility and has isolation capabilities, as well as ambulatory emergency type capabilities and equipment for staff to respond timely to an emergency to provide quality care for a critically ill patient. This vehicle will allow the safe transport of inmates as well as protection for the transport operators. The State of Montana's procurement process will be followed for this purchase. At minimum, three bids will be solicited, and the lowest bidder will win the purchase. A more competitive bidding process may be used, to ensure the most qualifying vehicles are purchased.

Justification of how funds would be used in current budget period:

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#### Supplies

Note: Values should be entered as whole numbers only, without any dollar signs (\$) or commas (e.g. \$100,000 = 100000)

Original Project Award (Budget Period 3 (8/1/21 - 7/31/22))

89000

(22, 4:53 PM ELC Po	st Award Actions: BP1, BP2 & BP3   REDCap
Proposed Redirection (Budget Period 3 (8/1/21 - 7/31/22))	0
Revised Project Award (Budget Period 3 (8/1/21 - 7/31/22)) (Calculated from Original Award and Proposed Redirection)	89000
Contract	
lote: Values should be entered as whole numbers only, without any dollar signs (\$,	or commas (e.g. \$100,000 = 100000)
Original Project Award (Budget Period 3 (8/1/21 - 7/31/22))	313500
Proposed Redirection (Budget Period 3 (8/1/21 - 7/31/22))	0
Revised Project Award (Budget Period 3 (8/1/21 - 7/31/22)) (Calculated from Original Award and Proposed Redirection)	313500
Other lote: Values should be entered as whole numbers only, without any dollar signs (\$,	or commas (e.g. \$100,000 = 100000)
Original Project Award (Budget Period 3 (8/1/21 - 7/31/22))	109736
Proposed Redirection (Budget Period 3 (8/1/21 - 7/31/22))	-109736
Revised Project Award (Budget Period 3 (8/1/21 - 7/31/22)) (Calculated from Original Award and Proposed Redirection)	0
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## **Total Direct Costs**

Original Project Award (Budget Period 3 (8/1/21 - 7/31/22))	2400000		
Proposed Redirection (Budget Period 3 (8/1/21 - 7/31/22))	0		
Revised Project Award (Budget Period 3 (8/1/21 - 7/31/22))			
(Calculated from Original Award and Proposed Redirection)	2400000		
ndirect Costs			
ote: Values should be entered as whole numbers only, without any dollar signs (\$) o	r commas (e.g. \$100,000 = 100000)		
Original Project Award (Budget Period 3 (8/1/21 - 7/31/22))	50000		
Proposed Redirection (Budget Period 3 (8/1/21 - 7/31/22))	-0		

Revised Project Award (Budget Period 3 (8/1/21 - 7/31/22)) (Calculated from Original Award and Proposed Redirection)

50000		

### Total

Complete?

Original Project Award (Budget Period 3 (8/1/21 - 7/31/22))	2450000
Proposed Redirection (Budget Period 3 (8/1/21 - 7/31/22))	0
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Revised Project Award (Budget Period 3 (8/1/21 - 7/31/22))	
(Calculated from Original Award and Proposed	2450000
Redirection)	

1. Project Table: E: Cross-cutting Emerging Issues				
CATEGORY	Original Project Award Budget Period 3 (8/1/21 - 7/31/22)	Proposed Redirection Budget Period 3 (8/1/21 - 7/31/22)	Revised Award	
Salaries	1170154	0	1170154	
Fringe Benefits	507209	0	507209	
Travel	0	0	0	
Equipment	210401	109736	320137	
Supplies	89000	0	89000	
Contractual	313500	0	313500	
Other	109736	-109736	0	
Total Direct Costs	2400000	0	2400000	
Indirect Costs	50000	-0	50000	
Total	2450000	0	2450000	

	Total	2450000	0	2450000	
Total					
Supporting Do	ocument				
Supporting Do	ocument				
General Notes	i				
	•	mark the Form Status as Status as "Incomplete."	"Complete." If this page i	s not yet co	mplete,
			information for the rem e & Go To Next Form" fro		
			our ELC Project Officer to and CDC Partner Program		ır draft in
Form Status					

https://rdcp.cdc.gov/redcap\_v12.0.8/DataEntry/index.php?pid=1377&id=7396-10&event\_id=4034&page=post\_award\_request

Complete **✓**