

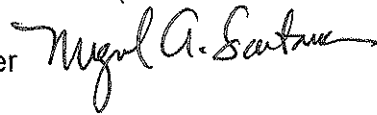
**CITY OF LOS ANGELES**  
INTER-DEPARTMENTAL CORRESPONDENCE

0150-03892-0058

Date: March 21, 2011

To: The Mayor  
The Council  
Attn: Pamela Finley, Mayor's Office  
John White, City Clerk's Office

From: Miguel A. Santana, City Administrative Officer



Subject: **GRANTS PILOT PROGRAM – GRANT ACCEPTANCE PACKET FOR CALIFORNIA EMERGENCY MANAGEMENT AGENCY (CAL EMA), VICTIM ASSISTANCE PROGRAM (VAP) AUGMENTATION SUB-AWARD THROUGH LOS ANGELES COUNTY**

Attached is the Grant Acceptance Packet for the Victim Assistance Program Augmentation Sub-award in the amount of \$128,806 received by the City Attorney's Office. As a participant in the Grants Pilot Program, this department submitted the packet for review and analysis by the CAO Grants Oversight Unit and the appropriate CAO Analyst.

In accordance with the approved procedures for the Pilot, this Office reviewed the Packet for completeness, conducted a concise analysis and prepared a Fiscal Impact Statement. The Grant Acceptance Packet consists of the following:

- Review of Grant Award and Acceptance Determination
- Department Request for Acceptance of Grant Award

If you have any questions about the Grants Pilot Program or the procedures for the Grant Acceptance Packet, please contact Camilla Fong at 213-978-7681.

**Attachments**

MAS:ACA:CLF:04110107c

**OFFICE OF THE CITY ADMINISTRATIVE OFFICER**  
Review of Grant Award and Acceptance Determination

|   |                                       |  |
|---|---------------------------------------|--|
| Recipient City Department:<br>Office Of The City Attorney   |                                       | Award Notification Date:<br>02/16/2011                     |
| Grant Award Title:<br>Victim Assistance Program Grant Augmentation FY 2010-11   |                                       | Grant Amount: \$128,806<br>Prior Grant Award(s): \$856,817 |
| Awarding Agency:<br>Los Angeles County  |                                       |  |
| Grant Agreement Number/Reference:   | Performance Start Date:<br>02/01/2011 | Performance End Date:<br>06/30/2011                        |
| Purpose:<br>The County of Los Angeles awarded additional Victim of Crime Act Assistance (VOCA) funding to the City's Victim Assistance Program (VAP). The award will provide additional funding from February 1, 2011 to June 30, 2011. This augmentation award will enable the enhancement of victim services throughout the City of Los Angeles. These funds are administered by the California Emergency Management Agency (Cal-EMA) and have some restrictions on usage. These funds will be used for contractual services, computer equipment and software, office supplies, and travel. |                                       |  |

| Checklist for Grant Acceptance:  | Yes | No | N/A | Comments  |
|--|-----|----|-----|---|
| <b>1. Authority for Grant Acceptance</b>   |     |    |     |   |
| <ul style="list-style-type: none"> <li>Department requests acceptance of the Grant</li> </ul>  | X   |    |     | ( ) Terms/Conditions outlined in Award Notice/Grantor Agreement   |
| <b>2. Match Requirement Review</b>   |     |    |     |   |
| <ul style="list-style-type: none"> <li>Match Sources Identification completed</li> </ul>   |     |    | X   | ( ) Obtain match requirements from Award Notice/Grantor Agreement |
| <ul style="list-style-type: none"> <li>Additional Funds requested</li> </ul>   |     |    |     | ( ) Submit to CAO for review                                      |
| <b>3. Charter Section 1022 Determination</b>   |     |    |     |   |
| <ul style="list-style-type: none"> <li>Charter Section 1022 findings completed</li> </ul>  |     |    | X   | ( ) Submit to CAO for review and determination                    |
| <b>4. Provisions for Grant-Funded Contracts</b>  |     |    |     |   |
| <ul style="list-style-type: none"> <li>Standard and Grantor Provisions or equivalent language is included</li> </ul>   |     |    | X   | ( ) Incorporate Provisions or Language into proposed agreement    |
| <ul style="list-style-type: none"> <li>Pro Forma Agreement<br/>RFP <input type="checkbox"/> MOU <input type="checkbox"/> PSA <input type="checkbox"/></li> </ul> |     |    | X   | ( ) Submit to City Attorney for review and approval; copy to CAO  |
| <b>5. Personnel Authorities</b>  |     |    |     |   |
| <ul style="list-style-type: none"> <li>Department has submitted a request for position(s)</li> </ul>   |     |    | X   | ( ) Review documents and make determination                       |
| <b>6. Grant Implementation Recommendations</b>   |     |    |     |   |
| <ul style="list-style-type: none"> <li>Department has submitted grant implementation instructions</li> </ul>   | X   |    |     | ( ) Submit to CAO for review                                      |
| <b>7. Controller Instructions for Fund/Accounts Set-Up</b>   |     |    |     |   |
| <ul style="list-style-type: none"> <li>Department has requested Funds/Accounts Set-up</li> </ul>   |     |    | X   |   |
| <b>8. Governing Body Resolution/Certification</b>  |     |    |     |   |
| <ul style="list-style-type: none"> <li>Department has submitted Resolution/Certification</li> </ul>  |     |    | X   | ( ) Submit to CAO and City Attorney for review                    |
| <b>9. Fiscal Impact Analysis</b>   |     |    |     |   |
| <ul style="list-style-type: none"> <li>Department has submitted Fiscal Impact Statement</li> </ul>   | X   |    |     | ( ) Submit to CAO for review and determination                    |

**OFFICE OF THE CITY ADMINISTRATIVE OFFICER**  
Review of Grant Award and Acceptance Determination

**10. Grant Award Summary**

The Office of the City Attorney is requesting approval to accept \$128,806 in additional grant funding for the Victim Assistance Program (VAP) for Fiscal Year 2010-11. This grant augmentation is awarded from the County of Los Angeles and is administered by the California Emergency Management Agency (Cal EMA). These funds are provided to directly serve victims of crime and survivors of homicide victims in the City of Los Angeles. Victim advocates provide Crisis Intervention and Emergency Services, Resource and Referral Services, and Court Support and Case Disposition Services. The City Attorney's Office reports additional contract employees will be hired to provide services for a three month period in Los Angeles Police Department (LAPD) divisions or at City Attorney branch offices as needed.

While these funds are to be expended before June 30, 2011, the County will make an extension of time available if needed into the first quarter of FY 2012 due to the late notification. The grant augmentation will provide \$76,800 in contractual services, \$19,206 in new computers and software, \$20,935 in travel expenses, and \$12,045 materials/supplies. The Victim Assistance advocates will attend a credential training program through the National Organization of Victim Assistance (NOVA) to enhance their skill level. There is no match requirement to receive these additional funds. The revised cost of the program is \$1,156,179 of which \$985,623 will be reimbursed by the County of Los Angeles. The City Attorney's Office has received full reimbursement from the County of Los Angeles for FY 2009-10 and has reimbursed \$630,445 to the General Fund. A balance of \$210,173 in FY 2009-10 reimbursements will be processed as soon as possible.

**11. Recommendations**

Pursuant to a review of departmental recommendations for this grant, please provide a complete list of necessary actions for implementation including acceptance of the award by the City, Controller instructions for fund and accounts set-up, coordination of project activities, etc.


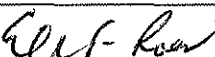
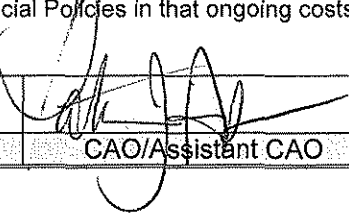
That the Council, subject to the approval of the Mayor:

1. Authorize the City Attorney or his designee to approve the amended contract between the City and the County of Los Angeles in the amount of \$985,623 for the period of July 1, 2010 to June 30, 2011;
2. Authorize the City Attorney or his designee to accept the additional funding in the amount of \$128,806 from the County of Los Angeles and to execute said contract, subject to the approval of the Office of the City Attorney as to form and legality;
3. Authorize the Controller to:
  - a. Increase the receivable from the County of Los Angeles in the amount of \$128,806;
  - b. Upon receipt of grant funds increase the following appropriation accounts within Fund 368, City Attorney Grant Fund, Department 12 as follows;  
Account G303 - Operating Expenses      \$128,806
4. Request the City Attorney to submit invoices to the County of Los Angeles on a monthly basis to ensure that the General Fund is reimbursed in a timely manner.
5. Authorize the City Attorney to prepare Controller's instructions for any necessary technical adjustments, subject to the approval of the City Administrative Officer, and authorize the Controller to implement the instructions.

**12. Fiscal Impact Statement**

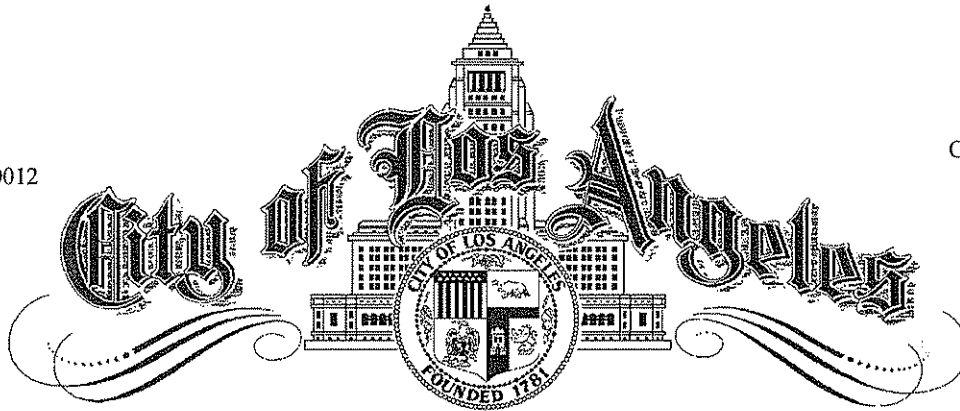
- ☒ (X) Yes This Office finds that the Grant complies with City financial policies as follows (see below):  
☐ ( ) No This Office finds that the Grant does not comply with City financial policies as follows (see below):

The acceptance of the grant augmentation award of \$128,806 will have no General Fund impact. These funds will be used for enhanced operating expenses for the Victim Assistance Program. No match is required to accept these funds. The acceptance and use of the grant funds is consistent with the City's Financial Policies in that ongoing costs are supported by ongoing revenue.

|  |  |   |                 |
|--|--|---|-----------------|
| <br>CAO Analyst | <br>Chief | <br>CAO/Assistant CAO | 3/17/11<br>Date |
|--|--|---|-----------------|

City Hall East  
200 N. Main Street  
Room 800  
Los Angeles, CA 90012

(213) 978-8100 Tel  
(213) 978-8312 Fax  
CTrutanich@lacity.org  
www.lacity.org/atty



**CARMEN A. TRUTANICH**  
City Attorney

PM 1:53  
ACTIVE OFFICER

March 2, 2011

The Honorable Antonio Villaraigosa  
Mayor of Los Angeles  
City Hall  
Los Angeles, CA 90012  
Attention: Pamela Finley

Honorable City Council  
City of Los Angeles  
City Hall  
Los Angeles, CA 90012  
Attention: June Lagmay

Re: Victim Assistance Program (VAP) Grant Augmentation Award  
Council File No. 10-1739

Contact persons: Michiko Reyes Tel. 213 978-7020  
Kathy Colobong Tel. 213 978-2167

The Office of the City Attorney is transmitting the following items for your review and approval: 1) FY 2010-11 Victim Assistance Program (VAP) grant award augmentation; and 2) FY 2010-11 VAP Amended Grant Award Agreement between the City and the County of Los Angeles.

VAP is in its 31st year of sustained funding. Council previously approved a \$856,817 grant award for FY 2010-2011 on December 16, 2010. This augmentation award will enable the enhancement of victim services at ten locations through the City of Los Angeles from February 1, 2011 to June 30, 2011.

On January 31, 2011 Cal-EMA preliminarily notified the County of Los Angeles of an anticipated grant augmentation award totaling **\$515,224** using available VOCA funds. Thereafter, the County confirmed its intent to make **\$128,806** available to the City as a grant sub-recipient for the enhanced operation of VAP during the balance of FY 2011. While these funds are to be expended from February 1, 2011 through June 30, 2011, the County has confirmed its intent to make an extension of time available if needed following acceptance of the grant augmentation award into the first quarter of FY 2012.

The augmentation award will fund seven contract victim assistance providers for three months, one contract technology coordinator for three months, updated technical equipment, and travel/training expenses. The City will be reimbursed by the County of Los Angeles with moneys received from the CalEMA Law Enforcement and Victim Services Division.

Honorable Antonio Villaraigosa  
City Council  
March 2, 2011  
Page Two

Grant funds will be used as follows:

- Operating Expenses      \$128,806

**No match** is required by the County of Los Angeles to accept these funds.

We, therefore, request that the City Council, subject to the approval of the Mayor, request the following:


1. Authorize the City Attorney or designee to **APPROVE** the amended contract between the City and County in the amount of **\$128,806** for the period of July 1, 2010 to June 30, 2011.
2. Authorize the City Attorney or designee to **ACCEPT** the funding in the amount of **\$128,806** from the County of Los Angeles.
3. Authorize the City Attorney or designee to **EXECUTE** said contract, subject to the approval of the Office of the City Attorney as to form and legality.
4. That the City Council, subject to the approval of the Mayor, **AUTHORIZE** the Controller to:
  - a. Establish a receivable in the amount of \$128,806 from the County of Los Angeles;
  - b. Establish the following appropriation accounts within Fund **368**--City Attorney Grant Fund, Department 12, upon receipt of grant funds:

| Account Number | Account Name       | Amount            |
|----------------|--------------------|-------------------|
| <b>G303</b>    | Operating Expenses | <b>\$ 128,806</b> |

5. **AUTHORIZE** the City Attorney or designee to prepare Controller instructions for any necessary technical adjustments, subject to the approval of the City Administrative Officer, and instruct the Controller to implement the instructions.

Thank you for your consideration in this matter.

Sincerely,



3/2/11

Bill Mangan  
Chief Budget Analyst

## City of Los Angeles Grant Award Notification and Acceptance

|  |                     |  |  |  |
|--|---------------------|--|--|--|
| <b>Recipient Department</b>  |                     |  |  |  |
| This Grant Award is: <input type="checkbox"/> New <input checked="" type="checkbox"/> Continuation/Renewal <input type="checkbox"/> Supplemental <input type="checkbox"/> Revision <input checked="" type="checkbox"/> Sub-Allocation  |                     |  |  |  |
| Grants Coordinator: Janette Flintoft   |                     | E-Mail: janette.flintoft@lacity.org  |  | Phone: 213-215-5808  |
| Project Manager: Derek Tennell   |                     | E-Mail: derek.tennell@lacity.org   |  | Phone: 213-978-2177  |
| Department/Bureau/Agency: City Attorney  |                     |  |  | Date: 02/16/2010   |
| <b>Grant Information</b>   |                     |  |  |  |
| Name of Grantor: CalEMA  |                     |  | Pass Through Agency: LA County District Attorney |  |
| Grant Program Title: Victim Assistance Program (VAP)   |                     |  |  | Notification of Award Date: February, 2011   |
| Funding Source (Public or Private):<br><input checked="" type="checkbox"/> Federal <input checked="" type="checkbox"/> State <input type="checkbox"/> Local<br><input type="checkbox"/> Foundation <input type="checkbox"/> Corporation<br><input type="checkbox"/> Other  |                     | Grant Type:<br><input checked="" type="checkbox"/> Formula/Block<br><input type="checkbox"/> Competitive/Discretionary<br><input type="checkbox"/> Other |  | Funds Disbursement:<br><input type="checkbox"/> Advance<br><input checked="" type="checkbox"/> Reimbursement |
|  |                     |  |  | Agency's Grant ID:<br>CFDA # _____<br>Other ID # <u>C.F. No. 10-1739</u><br>eCivis ID# _____                 |
| Match Requirement: <input checked="" type="checkbox"/> None <input type="checkbox"/> Recommended <input type="checkbox"/> Mandatory _____ Amount = _____ % Match<br>Match Type: <input checked="" type="checkbox"/> Cash <input checked="" type="checkbox"/> In-Kind Identify Source of Match: _____   |                     |  |  |  |
| <b>Fiscal Information:</b>   | Awarded Funds<br>\$ | Match/In-Kind Funds<br>\$  | Additional/Leveraged Funds<br>\$                 | Total Project Budget<br>\$128806   |
| <b>Approved Grant Budget Summary:</b>  |                     |  |  |  |
| <u>Category</u>  | <u>Awarded</u>      | <u>Match</u>   | <u>Additional</u>                                | <u>Explanation</u>   |
| Personnel  |                     |  |  |  |
| Salaries   |                     |  |  |  |
| Fringe Benefits  |                     |  |  |  |
| Indirect   |                     |  |  |  |
| Equipment  | 19026               |  |  |  |
| Materials/Supplies   | 12045               |  |  |  |
| Travel   | 20935               |  |  |  |
| Contractual Services   | 76,800              |  |  |  |
| Other  |                     |  |  |  |
|  |                     |  |  |  |
|  |                     |  |  |  |
| Total:   | 128,806             |  |  |  |
| <b>Approved Project</b>  |                     |  |  |  |
| Descriptive Title of Funded Project: Victim Assistance Program Grant Augmentation  |                     |  |  |  |
| Performance Period Start/End Dates (Month/Day/Year):<br>Start: 02/01/11 End: 06/30/11  |                     | Citywide: <input checked="" type="checkbox"/><br>Affected Council District(s): Citywide<br>Affected Congressional District(s): Citywide                  |  |  |
| Purpose: <input type="checkbox"/> Capital/Infrastructure <input type="checkbox"/> Equipment <input checked="" type="checkbox"/> Program <input type="checkbox"/> Planning/Training <input type="checkbox"/> Pilot/Demonstration  |                     |  |  |  |
| Identify Internal Partners (City Department/Bureau/Agency):  |                     |  |  |  |
| Identify External Partners: Los Angeles County District Attorney   |                     |  |  |  |
| <b>Summary</b>   |                     |  |  |  |
| Please provide a project summary including goals, objectives (metrics), specific outcomes, and briefly describe the activities that will be used to achieve these goals. You may attach an additional sheet of paper if necessary.   |                     |  |  |  |
| CalEMA has advised the County of Los Angeles of a grant augmentation award totalling \$515,224 for its VAP program for the period 02/01/11 - 06/30/11. In turn, the County advised the City (as it's subrecipient) that it will receive \$128,806 of these augmentation funds to enhance the City Attorney's Victim Assistance Program (VAP). VAP provides services to victims of crime and survivors of homicide victims. Surplus grant funds will pay for seven contract victim advocates, a contract technology coordinator, updated technical equipment, and travel/training expenses. VAP staff is assigned to offices located in Los Angeles Police Department (LAPD) divisions or City Attorney branch offices. |                     |  |  |  |

## City of Los Angeles Grant Award Notification and Acceptance

### Fiscal Impact Statement

Please describe how the acceptance of this grant will impact the General Fund. Provide details on any additional funding that may be required to implement the project/program funded by this grant.

**The grant augmentation award totals \$128,000 which will fund the full costs associated with four contract victim advocates, updated technical equipment, and travel/training expenses. No match is required by the County to accept these funds.**

### Acceptance Packet

The above named Department has received an award for the Grant Program identified above, accepts full responsibility for the coordination and management of all Grant funds awarded to the City, and will adhere to any policies, procedures and compliance requirements set forth by the Grantor and its related agencies or agents, as well as those of the City, and its financial and administrative departments. The following items comprise the Acceptance Packet and are attached for review by the CAO Grants Oversight Unit:

- |   |  |
|---|--|
| <input checked="" type="checkbox"/> Grant Award Notification and Acceptance               | <input type="checkbox"/> Copy of Award Notice                    |
| <input checked="" type="checkbox"/> Grant Project Cost Breakdown (Excel Document)         | <input type="checkbox"/> Copy of Grant Agreement (if applicable) |
| <input checked="" type="checkbox"/> Detail of Positions and Salary Costs (Excel Document) | <input type="checkbox"/> Additional Documents (if applicable)    |

Department Head Name:  
Earl Thomas

Department Head Signature: 

Date: 2/16/11

### FOR CAO USE ONLY

The Office of the City Administrative Officer, Grants Oversight Unit has reviewed the information as requested, and has determined that the Acceptance Packet is:

- ☐ Complete The Acceptance Packet has been forwarded to appropriate CAO analyst  
☐ Returned to Department (Additional information/documentation has been requested.)  
☐ Flagged (See comments below.)

Comments:

CAO Grants Oversight Unit Signature:

Date:

**Grant Award Notification and Acceptance  
Grant Project Cost Breakdown**

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|  |                 |   |                   |                           |              |                    |  |
|--|-----------------|---|-------------------|---------------------------|--------------|--------------------|--|
|  |                 |   |                   |                           |              | <b>Department:</b> |  |
| <b>Grant Name: Victim Assistance Program</b> |                 |   |                   | <b>Additional Costs**</b> |              |                    |  |
| <b>Grant Project Breakdown</b>               |                 | <b>Grant Funds</b>  | <b>City Funds</b> | <b>Non-City Funds</b>     | <b>Total</b> | <b>Comments</b>    |  |
| <b>Salaries</b>                              |                 |   |                   |                           |              |                    |  |
| 1010 Salaries General                        |                 |   |                   |                           |              |                    |  |
| 1020 Salaries Grant Reimbursed               |                 |   |                   |                           |              |                    |  |
| 1070 Salaries As Needed                      |                 |   |                   |                           |              |                    |  |
| 1090 Overtime                                |                 |   |                   |                           |              |                    |  |
| <b>Salaries Total:</b>                       |                 |   |                   |                           |              |                    |  |
|  |                 |   |                   |                           |              |                    |  |
| <b>Related Costs*</b>                        | <b>CAP Rate</b> |   |                   |                           |              |                    |  |
| Fringe Benefits                              |                 |   |                   |                           |              |                    |  |
| Central Services                             |                 |   |                   |                           |              |                    |  |
| Department Administration                    |                 |   |                   |                           |              |                    |  |
| <b>Related Costs Total:</b>                  |                 |   |                   |                           |              |                    |  |
|  |                 |   |                   |                           |              |                    |  |
| <b>Expense</b>                               |                 |   |                   |                           |              |                    |  |
| 2120 Printing & Binding                      |                 |   |                   |                           |              |                    |  |
| 2130 Travel                                  | \$20,935        |   |                   |                           |              |                    |  |
| 3040 Contractual Services                    | \$76,800        |   |                   |                           |              |                    |  |
| 3310 Transportation                          |                 |   |                   |                           |              |                    |  |
| 4160 Governmental Meetings                   |                 |   |                   |                           |              |                    |  |
| 6010 Office Supplies                         | \$12,045        |   |                   |                           |              |                    |  |
| 6020 Operating Supplies                      |                 |   |                   |                           |              |                    |  |
| 7300 Equipment                               | \$19,026        |   |                   |                           |              |                    |  |
| Victim Emergency Funds                       |                 |   |                   |                           |              |                    |  |
|  |                 |   |                   |                           |              |                    |  |
| <b>Expenses Total:</b>                       |                 |   |                   |                           |              |                    |  |
|  |                 |   |                   |                           |              |                    |  |
| <b>Grand Total:</b>                          | 128,806         | \$ 128,806  | \$ -              |                           |              |                    |  |
|  |                 |   |                   |                           |              |                    |  |
|  |                 | *Please use the full Cost Allocation Plan (CAP) rates unless disallowed by the Grantor. CAP rates should be applied to Gross Salaries (including Compensated Time Off.) |                   |                           |              |                    |  |
|  |                 | **Other sources of funding. Please indicate whether these funds are part of a match requirement and whether they are already provided or new funding is required.       |                   |                           |              |                    |  |



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PF2 (091222)