



CITY OF DETROIT
OFFICE OF THE CHIEF FINANCIAL OFFICER
OFFICE OF DEVELOPMENT AND GRANTS

COLEMAN A. YOUNG MUNICIPAL CENTER
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DETROIT, MICHIGAN 48226
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July 16, 2024

The Honorable Detroit City Council
ATTN: City Clerk Office
200 Coleman A. Young Municipal Center
Detroit MI 48226

RE: Request to accept an increase in appropriation for the Improving Physical and Psychosocial Functioning in Underserved Older Adults During the COVID-19 Pandemic Grant

The Regents of the University of Michigan has awarded in increase in appropriation to the City of Detroit Health Department for Year Four of the Improving Physical and Psychosocial Functioning in Underserved Older Adults During the COVID-19 Pandemic Grant, in the amount of \$147,711.00. There is no match requirement. This funding will increase appropriation 21092, previously approved in the amount of \$351,074.00, by Council on July 11, 2023, to a total of \$498,785.00.

The objective of the grant is to support a community health worker-led remote intervention among older adults (50+) in Detroit during the COVID-19 Pandemic. The funding allotted to the department will be utilized to pay for salaries/fringe, consultant wages, travel, supplies, materials, equipment, and other related costs. This is a reimbursement grant.

I respectfully ask your approval to accept and appropriate funding in accordance with the attached resolution.

Sincerely,

DocuSigned by:
Terri Daniels
4D2BEEE23C8D489...

Terri Daniels
Director, Office of Development and Grants

CC:
Sajjiah Parker, Assistant Director, Grants

DocuSigned by:
Matthew Spayth
17E14C346551497...
Office of Budget

DocuSigned by:
Cheryl Smith-Williams
B80AE70E1057467...

Agreement Approved as to Form
By the Law Department



Office of Development and Grants

RESOLUTION

Council Member _____

WHEREAS, the Health Department is requesting authorization to accept an increase in appropriation for Year Four of the Improving Physical and Psychosocial Functioning in Underserved Older Adults During the COVID-19 Pandemic Grant, from the Regents of the University of Michigan, in the amount of \$147,711.00, to support a community health worker-led remote intervention study among older adults (50+) in Detroit during the COVID-19 Pandemic; and

WHEREAS, this funding will increase appropriation 21092, previously approved in the amount of \$351,074.00, by Council on July 11, 2023, to a total of \$498,785.00; and

WHEREAS, the Law Department has approved the attached agreement as to form; and

WHEREAS, this request has been approved by the Office of Budget; now

THEREFORE, BE IT RESOLVED that the Director or Head of the Department is authorized to execute the grant agreement on behalf of the City of Detroit; and

BE IT FURTHER RESOLVED, that the Budget Director is authorized to increase the budget accordingly for appropriation number 21092, in the amount of \$147,711.00, for the Improving Physical and Psychosocial Functioning in Underserved Older Adults During the COVID-19 Pandemic Grant.

FDP Subaward Amendment

Awarding Agency Amendment No
 PTE/Prime Award No. Subaward No

Pass-Through Entity (PTE)	Subrecipient
<input type="text" value="Regents of the University of Michigan"/>	<input type="text" value="City of Detroit"/>
<input type="text" value="kohnmich@umich.edu"/>	<input type="text" value="christina.floyd@detroitmi.gov"/>
<input type="text" value="Mary Janevic"/>	<input type="text" value="Yolanda Hill-Ashford"/>
<input type="text" value="Project Title: Improving Physical and Psychosocial Functioning in Underserved Older Adults During the COVID-19 Pandemic: A Community Health Worker-Led Intervention"/>	

Cumulative Budget Period(s)	Amount Funded This Action	Total Amount of Funds Obligated to Date
<small>(Agreement Start Date)</small> Start Date: <input type="text" value="09/24/2021"/> <small>(End Date of Latest Budget Period)</small> End Date: <input type="text" value="06/30/2025"/>	<input type="text" value="\$ 147,711.00"/>	<input type="text" value="\$ 498,785.00"/>

Subrecipient Cost Share Subject to FFATA Subrecipient UEI (Unique Entity Identifier - May leave blank if unchanged from prior Agreement)

Amendment(s) to Original Terms and Conditions

This Amendment revises the above-referenced Subaward Agreement as follows:

- Additional Budget Period**
 Additional budget period - is hereby added to this Subaward.
- No Cost Extension**
- Additional Funding**
 Additional funding in the amount of is hereby obligated to this Subaward.
- Deobligation**
- Carryover is Carryover is allowed across all budget periods.
- Carryover Authorized**
- Detailed Budget/Scope of Work/Notice of Award Attached** (Specify if the Budget and Scope of Work are "New", "Revised", or "Supplemental" in dropdown or "Other")
 is incorporated by attachment to this Amendment.
- Other (See Below)**

Per PHS Conflict of Interest (COI) regulations, effective 08/24/2012, complete COI policy statement information in Attachment B.

For clarity: all amounts stated in this amendment are in United States Dollars.

All other terms and conditions of this Subaward Agreement remain in full force and effect.

By an Authorized Official of PTE: <div style="text-align: right;">Date <input type="text"/></div>	By an Authorized Official of Subrecipient: <div style="text-align: right;">Date <input type="text"/></div>
Name <input type="text" value="Michael Kohn, J.D."/> Title <input type="text" value="Contract Administrator Intermediate"/>	Name <input type="text"/> Title <input type="text"/>

Attachment A

MICHIGAN DEPARTMENT OF COMMUNITY HEALTH
PROGRAM BUDGET - COST DETAIL

- Use WHOLE DOLLARS Only

Program		Year 1	Year 2	Year 3	Year 4	Year 5	Total
Improving Physical and Psychosocial Functioning in Underserved Older Adults D		9/24/2021-6/30/2022	7/1/2022-6/30/2023	7/1/2023-6/30/2024	7/1/2024-6/30/2025	7/1/2025-6/30/2026	9/24/2021-6/30/2028
Local Agency							
Southeastern Michigan Health Association							
1. SALARIES & WAGES:		BUDGET	BUDGET	BUDGET	BUDGET	BUDGET	BUDGET
POSITION DESCRIPTION - EMPLOYEE	POSITIONS REQUIRED (FTEs)	SALARY	SALARY	SALARY	SALARY	SALARY	SALARY
CHW Supervisor	0.50	11,250	11,250	11,250	11,250	5,625	50,625
Community Health Worker	0.50	10,000	40,000	40,000	40,000	22,500	152,500
Community Health Worker	0.50	10,000	40,000	40,000	40,000	22,500	152,500
TOTAL FTEs	1.50	31,250	91,250	91,250	91,250	50,625	355,625
2. FRINGE BENEFITS: (Specify)		1. TOTAL SALARIES					
<input checked="" type="checkbox"/> FICA <input checked="" type="checkbox"/> HOSPITAL <input checked="" type="checkbox"/> VISION <input checked="" type="checkbox"/> WORKERS		Composite Rate 41.00%					
<input type="checkbox"/> UNEMPLOYMENT <input checked="" type="checkbox"/> TERM LIFE <input type="checkbox"/> HEARING							
<input checked="" type="checkbox"/> RETIREMENT <input checked="" type="checkbox"/> DENTAL							
2. TOTAL FRINGE BENEFITS:		12,813	37,413	37,413	37,413	20,756	145,806
3. TRAVEL: (Specify if any item exceeds 10% of Total Expenditures)		2. TOTAL FRINGE BENEFITS:					
Mileage: (recruitment and meetings)		1,800	1,800	1,800	1,800	1,800	9,000
Conferences		-	1,720	-	-	-	6,880
3. TOTAL TRAVEL:		1,800	3,520	3,520	3,520	3,520	15,880
4. SUPPLIES & MATERIALS: (Specify if any item exceeds 10% of Total Expenditures)		3. TOTAL TRAVEL:					
Office Supplies		800	100	100	100	100	1,200
Printing/Copying		500	500	500	500	500	2,500
Program Supplies (Roller Bags)		330	-	-	-	-	330
4. TOTAL SUPPLIES & MATERIALS:		1,630	600	600	600	600	4,030
5. CONTRACTUAL: (Subcontracts)		4. TOTAL SUPPLIES & MATERIALS:					
Name	Address						
5. TOTAL CONTRACTUAL:		-	-	-	-	-	-
6. EQUIPMENT: (Specify)		5. TOTAL CONTRACTUAL:					
Laptops		1,400	-	-	-	-	1,400
6. TOTAL EQUIPMENT:		1,400	-	-	-	-	1,400
7. OTHER EXPENSES: (Specify if any item exceeds 10% of Total Expenditures)		6. TOTAL EQUIPMENT:					
Others (explain):							
Cell phones \$250.00 start up & (FTE's *\$50.00)*12		1,700	1,200	1,200	1,200	900	6,200
Meeting Supplies		-	300	300	300	300	1,200
7. TOTAL OTHER EXPENSES:		1,700	1,500	1,500	1,500	1,200	7,400
8. TOTAL DIRECT EXPENDITURES: (Sum of Totals 1-7)		50,593	134,283	134,283	134,283	76,701	530,142
9. INDIRECT COSTS		7. TOTAL OTHER EXPENSES:					
Rate #1	& A Rate	10.00%					
9. TOTAL INDIRECT EXPENDITURES:		5,059	13,428	13,428	13,428	7,670	53,014
10. TOTAL ALL EXPENDITURES: (Sum of lines 8-9)		55,652	147,711	147,711	147,711	84,371	583,156

Attachment B

The following term is hereinafter incorporated into and made part of this Subaward Agreement, Attachment 2, Special Terms and Conditions.

NIH-Specific Requirements Promoting Objectivity in Research Applicable to Subrecipients (42 CFR Part 50 Subpart F)

a) 42 CFR Part 50. 604 requires that institutions conducting PHS-funded research “Maintain an up-to-date, written, enforced policy on financial conflicts of interest.” Further, “If the Institution carries out the PHS-funded research through a subrecipient (e.g., subcontractors or consortium members), the Institution (awardee Institution) must take reasonable steps to ensure that any subrecipient Investigator complies with this subpart by incorporating as part of a written agreement with the subrecipient terms that establish whether the financial conflicts of interest policy of the awardee Institution or that of the subrecipient will apply to the subrecipient's Investigators.”

Subrecipient must designate herein whether the financial conflicts of interest policy of _____ Prime Recipient Institution, or X Subrecipient Institution (check one) will apply. If applying its own financial conflicts of interest policy, by execution of this Subaward Agreement, Subrecipient Institution certifies that its policy complies with 42 CFR Part 50.

b) Subrecipient shall report any financial conflict of interest to Prime Recipient's Administrative Representative, as designated on Attachment 3A. Any financial conflicts of interest identified shall subsequently be reported to NIH. Such report shall be made before expenditure of funds authorized in this Subrecipient Agreement and within 45 days of any subsequently identified financial conflict of interest.