Department of Health and Human Services  
Centers for Disease Control and Prevention  
CDC Office of Financial Resources  
2920 Brandywine Road  
Atlanta, GA 30341

NOTICE OF AWARD  
AUTHORIZATION (Legislation/Regulations)  
Public Health Service Act, as amended, Section 301(a) and Section 317K, 42 U.S.C. 241(a); 42 U.S.C. 247b-12

1a. SUPERSEDES AWARD NOTICE  
deleted except that any additions or restrictions previously imposed remain in effect unless specifically rescinded

4. GRANT NO.  
1 NU38DP000004-01-00  
Formerly

6. PROJECT PERIOD  
From 09/30/2018  
Through 09/29/2023

7. BUDGET PERIOD  
From 09/30/2018  
Through 09/29/2019

8. TITLE OF PROJECT (OR PROGRAM)  
SDY/SUID for the State of Nevada

9a. GRANTEE NAME AND ADDRESS  
CLARK, COUNTY OF  
Alternate Name: Clark County, NV Office of the Coroners/Medical Examiner  
1704 Pinto Ln  
Las Vegas, NV 89106-4102

9b. GRANTEE PROJECT DIRECTOR  
Mr. David Mills  
1704 Pinto Ln  
Las Vegas, NV 89106-4102  
Phone: 702-459-3210

10a. GRANTEE AUTHORIZING OFFICIAL  
Mr. David Fudenberg  
1704 Pinto Ln  
Las Vegas, NV 89106-4102  
Phone: 702-459-3210

10b. FEDERAL PROJECT OFFICER  
Mrs. Linda Hannon-Hall  
1600 Clifton Rd  
Atlanta, GA 30333  
Phone: 770-648-1393

11. APPROVED BUDGET  
(Excludes Direct Assistance)

1. Financial Assistance from the Federal Awarding Agency Only
2. Total project costs including grant funds and all other financial participation

<table>
<thead>
<tr>
<th>Item</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Salaries and Wages</td>
<td>60,000.00</td>
</tr>
<tr>
<td>b. Fringe Benefits</td>
<td>15,000.00</td>
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<tr>
<td>c. Total Personnel Costs</td>
<td>75,000.00</td>
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<tr>
<td>d. Equipment</td>
<td>5,371.00</td>
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<tr>
<td>e. Supplies</td>
<td>1,000.00</td>
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<tr>
<td>f. Travel</td>
<td>8,929.00</td>
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<tr>
<td>g. Construction</td>
<td>0.00</td>
</tr>
<tr>
<td>h. Other</td>
<td>0.00</td>
</tr>
<tr>
<td>i. Contractual</td>
<td>0.00</td>
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<tr>
<td>j. TOTAL DIRECT COSTS</td>
<td>90,300.00</td>
</tr>
<tr>
<td>k. INDIRECT COSTS</td>
<td>0.00</td>
</tr>
<tr>
<td>l. TOTAL APPROVED BUDGET</td>
<td>90,300.00</td>
</tr>
</tbody>
</table>

12. AWARD COMPUTATION

1. Amount of Federal Financial Assistance (from Item 11a)  
2. Less Unobligated Balance From Prior Budget Periods  
3. Less Cumulative Prior Award(s) This Budget Period  
4. AMOUNT OF FINANCIAL ASSISTANCE THIS ACTION  
5. TOTAL Federal Funds Awarded to Date for Project Period  

<table>
<thead>
<tr>
<th>Year</th>
<th>Total Direct Costs</th>
<th>Total Direct Costs</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>a. 2</td>
<td>b. 3</td>
</tr>
<tr>
<td></td>
<td>d. 5</td>
<td>e. 6</td>
</tr>
<tr>
<td>1.00</td>
<td>90,300.00</td>
<td></td>
</tr>
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</table>

13. PROGRAM INCOME SHALL BE USED IN ACCORD WITH ONE OF THE FOLLOWING ALTERNATIVES:

a. DEDUCTION
b. ADDITIONAL COSTS
c. MATCHING
d. OTHER RESEARCH (Add / Deselect Option)
e. OTHER (See REMARKS)

14. RECOMMENDED FUTURE SUPPORT  
(Subject to the availability of funds and satisfactory progress of the project):

15. REMARKS  
(Other Terms and Conditions Attached -)[x] Yes [ ] No

16. This award is based upon an application submitted to and as approved by the Federal Awarding Agency on the above titled project and is subject to the terms and conditions incorporated either directly or by reference in the following:

17. GRANT'S MANAGEMENT OFFICIAL  
Stephanie Latham

18. VENDOR CODE  
18A. 18860000028A

19. DUNS  
088465716

20. CONG. DIST.  
04

<table>
<thead>
<tr>
<th>FY-ACCOUNT NO.</th>
<th>DOCUMENT NO.</th>
<th>ADMINISTRATIVE CODE</th>
<th>AMT ACTION FIN ASST</th>
<th>APPROPRIATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>21. a. 8-93906YK</td>
<td>b. 18NU38DP000004</td>
<td>c. DP</td>
<td>d. $90,300.00</td>
<td>e. 75-18-0872</td>
</tr>
<tr>
<td>22. a.</td>
<td>b.</td>
<td>c.</td>
<td>d.</td>
<td>e.</td>
</tr>
<tr>
<td>23. a.</td>
<td>b.</td>
<td>c.</td>
<td>d.</td>
<td>e.</td>
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</table>
### Direct Assistance

<table>
<thead>
<tr>
<th>BUDGET CATEGORIES</th>
<th>PREVIOUS AMOUNT (A)</th>
<th>AMOUNT THIS ACTION (B)</th>
<th>TOTAL (A + B)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Personnel</td>
<td>$0.00</td>
<td>$0.00</td>
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<tr>
<td>Fringe Benefits</td>
<td>$0.00</td>
<td>$0.00</td>
<td>$0.00</td>
</tr>
<tr>
<td>Travel</td>
<td>$0.00</td>
<td>$0.00</td>
<td>$0.00</td>
</tr>
<tr>
<td>Equipment</td>
<td>$0.00</td>
<td>$0.00</td>
<td>$0.00</td>
</tr>
<tr>
<td>Supplies</td>
<td>$0.00</td>
<td>$0.00</td>
<td>$0.00</td>
</tr>
<tr>
<td>Contractual</td>
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<td>$0.00</td>
<td>$0.00</td>
</tr>
<tr>
<td>Construction</td>
<td>$0.00</td>
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</tr>
<tr>
<td>Total</td>
<td>$0.00</td>
<td>$0.00</td>
<td>$0.00</td>
</tr>
</tbody>
</table>
AWARD ATTACHMENTS

Clark County, NV Office of the Coroner/Medical Examiner 1 NU38DP000004-01-00

1. BP1 Terms and Conditions
2. SDY Summary Statement
3. SUID Summary Statement
AWARD INFORMATION

Incorporation: In addition to the federal laws, regulations, policies, and CDC General Terms and Conditions for Non-research awards at https://www.cdc.gov/grants/federalregulationspolicies/index.html, the Centers for Disease Control and Prevention (CDC) hereby incorporates Notice of Funding Opportunity (NOFO) number CDC-RFA-DP18-1806, entitled Sudden Unexpected Infant Death and Sudden Death in the Youth Surveillance, and application dated February 27, 2018, as may be amended, which are hereby made a part of this Non-research award, hereinafter referred to as the Notice of Award (NoA).

Approved Funding: Funding in the amount of $90,300.00 is approved for the Year 01 budget period, which is September 30, 2018 through September 29, 2019. All future year funding will be based on satisfactory programmatic progress and the availability of funds.

The federal award amount is subject to adjustment based on total allowable costs incurred and/or the value of any third party in-kind contribution when applicable.

Note: Refer to the Payment Information section for Payment Management System (PMS) subaccount information.

Note: Refer to the Payment Information section for draw down and Payment Management System (PMS) subaccount information.

Financial Assistance Mechanism: Cooperative Agreement

Substantial Involvement by CDC: This is a cooperative agreement and CDC will have substantial programmatic involvement after the award is made. Substantial involvement is in addition to all post-award monitoring, technical assistance, and performance reviews undertaken in the normal course of stewardship of federal funds.

CDC program staff will assist, coordinate, or participate in carrying out effort under the award, and recipients agree to the responsibilities therein, as detailed in the NOFO.

Objective Review Response Requirement: The review comments on the strengths and weaknesses of the proposal are provided as part of this award. A response to the weaknesses in these statements must be submitted to and approved, in writing, by the Grants Management Specialist/Grants Management Officer (GMS/GMO) noted in the CDC Staff Contacts section of this NoA, no later than 30 days from the budget period start date. Failure to submit the required information by the due date, October 30, 2018, will cause delay in programmatic progress and will adversely affect the future funding of this project.

Budget Revision Requirement: By October 30, 2018 the recipient must submit a revised budget with a narrative justification. Failure to submit the required information in a timely manner may adversely affect the future funding of this project. If the information cannot be provided by the due date, you are required to contact the GMS/GMO identified in the CDC Staff Contacts section of this notice before the due date.
Expanded Authority: The recipient is not permitted the following expanded authority in the administration of the award.

Program Income: Any program income generated under this grant or cooperative agreement will be used in accordance with the Addition alternative.

Addition alternative: Under this alternative, program income is added to the funds committed to the project/program and is used to further eligible project/program objectives.

Note: The disposition of program income must have written prior approval from the GMO.

Indirect Costs:
Indirect costs are not approved for this award, because indirect costs were not requested or an approved Indirect Cost Rate Agreement has not been established. To have indirect costs approved for this grant, submit an approved indirect cost rate agreement to the grants management specialist no later than October 31, 2018

REPORTING REQUIREMENTS

Performance Progress and Monitoring: Performance information collection initiated under this grant/cooperative agreement has been approved by the Office of Management and Budget under OMB Number 0920-1132 “Performance Progress and Monitoring Report”, Expiration Date 8/31/2019. The components of the PPMR are available for download at: https://www.cdc.gov/grants/alreadyhavegrant/Reporting.html.

Required Disclosures for Federal Awardee Performance and Integrity Information System (FAPIIS): Consistent with 45 CFR 75.113, applicants and recipients must disclose in a timely manner, in writing to the CDC, with a copy to the HHS Office of Inspector General (OIG), all information related to violations of federal criminal law involving fraud, bribery, or gratuity violations potentially affecting the federal award. Sub recipients must disclose, in a timely manner in writing to the prime recipient (pass through entity) and the HHS OIG, all information related to violations of federal criminal law involving fraud, bribery, or gratuity violations potentially affecting the federal award. Disclosures must be sent in writing to the CDC and to the HHS OIG at the following addresses:
CDC, Office of Grants Services
Ebony Holt, Grants Management Officer/Specialist
Centers for Disease Control and Prevention
Chronic Disease and Birth Defect Services Branch
2960 Brandywine Road
Atlanta, Georgia 30341
Email: eholt@cdc.gov (Include "Mandatory Grant Disclosures" in subject line)

AND

U.S. Department of Health and Human Services
Office of the Inspector General
ATTN: Mandatory Grant Disclosures, Intake Coordinator
330 Independence Avenue, SW
Cohen Building, Room 5527
Washington, DC 20201

Page 2 of 4
Fax: (202)-205-0604 (Include “Mandatory Grant Disclosures” in subject line) or
Email: MandatoryGranteeDisclosures@oig.hhs.gov

Recipients must include this mandatory disclosure requirement in all sub awards and contracts
under this award.

Failure to make required disclosures can result in any of the remedies described in 45 CFR
75.371. Remedies for noncompliance, including suspension or debarment (See 2 CFR parts

CDC is required to report any termination of a federal award prior to the end of the period of
performance due to material failure to comply with the terms and conditions of this award in the
OMB-designated integrity and performance system accessible through SAM (currently FAPIIS).
(45 CFR 75.372(b)) CDC must also notify the recipient if the federal award is terminated for
failure to comply with the federal statutes, regulations, or terms and conditions of the federal
award. (45 CFR 75.373(b))

PAYMENT INFORMATION

The HHS Office of the Inspector General (OIG) maintains a toll-free number (1-800-HHS-TIPS [1-
800-447-8477]) for receiving information concerning fraud, waste, or abuse under grants and
cooperative agreements. Information also may be submitted by e-mail to hhstips@oig.hhs.gov or
by mail to Office of the Inspector General, Department of Health and Human Services, Attn:
HOTLINE, 330 Independence Ave., SW, Washington DC 20201. Such reports are treated as
sensitive material and submitters may decline to give their names if they choose to remain
anonymous.

Payment Management System Subaccount: Funds awarded in support of approved activities
have been obligated in a newly established subaccount in the PMS, herein identified as the “P
Account”. Funds must be used in support of approved activities in the NOFO and the approved
application. All award funds must be tracked and reported separately.

The grant document number identified on the bottom of Page 1 of the Notice of Award must be
known in order to draw down funds.

CDC Staff Contacts

Grants Management Specialist: The GMS is the federal staff member responsible for the day-
to-day management of grants and cooperative agreements. The GMS is the primary contact of
recipients for business and administrative matters pertinent to grant awards.

GMS Contact:
Ebony Holt, Grants Management Specialist/Officer
Centers for Disease Control and Prevention
Chronic Disease and Birth Defect Services Branch
2960 Brandywine Road
Atlanta, Georgia 30341
Telephone: 770-488-5872  
Email: eholt@cdc.gov

**Program/Project Officer:** The PO is the federal official responsible for monitoring the programmatic, scientific, and/or technical aspects of grants and cooperative agreements, as well as contributing to the effort of the award under cooperative agreements.

**Programmatic Contact:**  
Carri Cottengim, Project Officer  
Centers for Disease Control and Prevention  
Telephone: 770-488-4290  
Email: wsh2@cdc.gov

**Grants Management Officer:** The GMO is the federal official responsible for the business and other non-programmatic aspects of grant awards. The GMO is the only official authorized to obligate federal funds and is responsible for signing the NoA, including revisions to the NoA that change the terms and conditions. The GMO serves as the counterpart to the business officer of the recipient organization.

**GMO Contact:**  
Stephanie Latham, Team Leader  
Centers for Disease Control and Prevention  
2960 Brandywine Road  
Atlanta, Georgia 30341  
Telephone: 770-488-2917  
Email: fvw6@cdc.gov
Date Reviewed: March 21, 2018
Applicant Name: Nevada (SDY)
Application #: NU38DP2018000074
Score: 51.33 of 100

Brief Summary of Application:

Summary of Project:
The Clark County Office of the Coroner/Medical Examiner (CCOCME) investigates all deaths by violence, criminal means, suicide, or any unattended death for Clark County, inclusive of the cities of Las Vegas, North Las Vegas, Henderson, Boulder City, and Mesquite, Nevada, which in recent years has averaged approximately 15,000 reported deaths of all types annually. CCOCME has also partnered with Lincoln, Nye, and White Pine Counties to provide coroner/medical examiner services for their citizens.

In 1992 CCOCME, in partnership with the Nevada Department of Health and Human Services (NVHHS), the University of Nevada Las Vegas (UNLV) National Institute for Children’s Research and Policy (NICRP), and the Southern Nevada Health District (SNHD), implemented a child death review (CDR) committee to track and review deaths of minors under the age of eighteen and use the data to prevent future child deaths. That program evolved over the years and now the state manages six regional CDR teams reviewing all deaths of minors under eighteen years old, covering the entire state of Nevada.

Since obtaining dual certification under the National Association of Medical Examiners (NAME) and the International Association of Coroners and Medical Examiners (IACME), CCOCME strives to merge all best practices and nationally recognized investigative and forensic standards into a single cohesive policy in its daily operations, to include its partnership in regional CRD teams for more than half of the state of Nevada. One area deemed lacking is active participation with the CDC’s national registry for Sudden Unexpected Infant Death (SUID) and Sudden Death in the Young (SDY).

Since NVHHS, NICRP, SNHD, and CCOCME have been conducting a similar program for in-state surveillance, case identification, data collection, and data entry on SUID and SDY cases, CCOCME, as a bone fide agent of NVHHS, will utilize the CDC grant funds to amend, modify, revise, and coordinate the current state CDR operations to make them compliant with the nationally recognized standards and implement the data entry into the national registry system with the primary goal to review and analyze the data for implementing strategies to prevent future child deaths in the state.

Reviewers’ Comments on Approach

Strengths of Section:
- Most of the NOFO activities are included in the Project Narrative
- Letters of support:
  - Children’s Hospital of Nevada

Weaknesses of Section:
- Very little detail in the narrative
- No distinction is made between SUID/SDY.
• Unclear if application is for Component 1 or 2. Some portions of the narrative refer to the Southern part of the state, ½ of the state’s population; other portions refer to the entire state.
• No work plan in the application.
• No letter of support from the CDC funded data coordinating center, a pediatric cardiologist, epileptologist/neurologist, genetic counselor, or forensic pathologist

**Reviewers’ Comments on Evaluation and Performance Measurement**

*Weaknesses of Section:*
• Very little mention of evaluation or performance measurement in the application

**Reviewers’ Comments on Organizational Capacity to Implement the Approach**

*Strengths of Section:*
• The project will include SDY cases in the case definition
• CDR meetings will be convened to review cases among a multidisciplinary team.

*Weaknesses of Section:*
• No mention of information about collection of family medical history

**Reviewers’ Comments on Budget and Budget Narrative**

*Strengths of Section:*
• Salaries seem appropriate

*Weaknesses of Section:*
• Only one budget is provided for both components. No distinction is made between SUID/SDY.
• Funding is requested for data collection and consent process materials; however, these activities are not described in the project narrative.
Date Reviewed: March 21, 2018
Applicant Name: Nevada (SUID)
Application #: NU38DP2018000074
Score: 52.00 of 100

Brief Summary of Application:

Summary of Project:
The Clark County Office of the Coroner/Medical Examiner (CCOCME) investigates all deaths by violence, criminal means, suicide, or any unattended death for Clark County, inclusive of the cities of Las Vegas, North Las Vegas, Henderson, Boulder City, and Mesquite, Nevada, which in recent years has averaged approximately 15,000 reported deaths of all types annually. CCOCME has also partnered with Lincoln, Nye, and White Pine Counties to provide coroner/medical examiner services for their citizens.

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Since NVHHS, NICRP, SNHD, and CCOCME have been conducting a similar program for in-state surveillance, case identification, data collection, and data entry on SUID and SDY cases, CCOCME, as a bone fide agent of NVHHS, will utilize the CDC grant funds to amend, modify, revise, and coordinate the current state CDR operations to make them compliant with the nationally recognized standards and implement the data entry into the national registry system with the primary goal to review and analyze the data for implementing strategies to prevent future child deaths in the state.

Reviewers' Comments on Approach

Strengths of Section:
- Most of the NOFO activities are included in the Project Narrative
- Letters of support:
  - Nevada HHS Division of Public and Behavioral Health
  - Children’s Hospital of Nevada
  - Nevada Institute for Children's Research and Policy
  - Las Vegas Metropolitan Police Department
Weaknesses of Section:

- Very little detail in the narrative
- No distinction is made between SUID/SDY.
- Unclear if application is for Component 1 or 2. Some portions of the narrative refer to the Southern part of the state, ⅔ of the state's population; other portions refer to the entire state.
- No work plan in the application.
- No letter of support from the CDC funded data coordinating center, the forensic pathology office, vital statistics, or child death review

Reviewers' Comments on Evaluation and Performance Measurement

Strengths of Section:

- Application includes progress toward meeting benchmarks, steps to overcoming barriers, and status update for each activity.
- Project team holds quarterly meetings to review SUID/SDY data based on work plan/grant objectives. Project coordinators meets every 6 months or at least annually to review SUID/SDY incidence, trends and demographic features.

Weaknesses of Section:

- There is very little mention of evaluation or performance measurement in the application.

Reviewers' Comments on Organizational Capacity to Implement the Approach

Strengths of Section:

- The applicant currently holds monthly meetings with a long list of CDR team members and will continue to do so during this project period for this Cooperative Agreement.

Weaknesses of Section:

- It appears that the 2 staff members who will coordinate all program activities are not yet hired, so no determination about their skills or capacity to implement the program can be determined.
- Information about legal authority for data entry is not included
- Information about training for CDR partners is not included.

Reviewers' Comments on Budget and Budget Narrative

Strengths of Section:

- Budget seems appropriate.