

**ACF PERFORMANCE PROGRESS REPORT
ACF-OGM-PPR
COVER PAGE INSTRUCTIONS**


Administration for Children and Families
U.S. Department of Health and Human Services

Item	Data Elements	Instructions
1.	Awarding Federal Agency and Organizational Element to Which Report is Submitted	Enter the name of the awarding Federal agency and organizational element identified in the award document or otherwise instructed by the agency. The organizational element is the sub-agency within an awarding Federal agency.
2.	Federal Grant or Other Identifying Number Assigned by the awarding Federal agency	Enter the grant/award number contained in the award document.
3a.	DUNS Number	Enter the recipient organization's Data Universal Numbering System (DUNS) number or System for Award Management (SAM) extended DUNS Number.
3b.	EIN	Enter the recipient organization's Employer Identification Number (EIN) provided by the Internal Revenue Services.
4.	Recipient Organization	Enter the name of recipient organization and address, including zip code.
5.	Recipient Account Number or Account Number	Enter the account number or any other identifying number assigned by the recipient to the award. This number is strictly for the recipient's use only and is not required by the awarding Federal agency.
6.	Project/Grant Period	Indicate the project/grant period established in the award document during which Federal sponsorship begins and ends. Note: Some agencies award multi-year grants for a project/grant period (e.g., 5 years) that are funded in increment known as budget periods or funding periods. These are typically annual increments. Please enter the project/grant period, not the budget period or funding period.
7.	Reporting Period End Date	Enter the ending date of the reporting period. For quarterly, semi-annual, and annual reports, the following calendar quarter period end dates shall be used: 3/31; 6/30; 9/30; and 12/31. For final PPRs, the reporting period end date shall be the end date of the project/grant period. The frequency of required reporting is usually established in the award document.
8.	Final Report	Mark appropriate box. Check "yes" only if this is the final report for the project/grant period specified in Box 6.
9.	Report or Frequency	Select the appropriate term corresponding to the requirements contained in the award document. "Other" may be used when more frequent reporting is required for high-risk grantees, as specified in OMB Circular A-110.
10.	Performance Narrative	Leave blank and complete Form ACF-OGM SF PPR Attachment B

ACF PERFORMANCE PROGRESS REPORT
Appendix B - Program Indicators
ACF-OGM-PPR
PPR-OGM-B

		Page 2	of Pages 3
1. Federal Agency and Organization Element to Which Report is Submitted <div style="border: 1px solid black; padding: 5px; min-height: 40px;"> The Office of Family Assistance </div>	2. Federal Grant or Other Identifying Number Assigned by Federal Agency <div style="border: 1px solid black; padding: 5px; min-height: 40px;"> 90ZJ0037 </div>	3a. DUNS <div style="border: 1px solid black; padding: 5px; min-height: 30px;"> 128518193 </div> 3b. EIN <div style="border: 1px solid black; padding: 5px; min-height: 30px;"> 956002748 </div>	4. Reporting Period End Date (MM/DD/YYYY) <div style="border: 1px solid black; padding: 5px; min-height: 40px;"> 6/30/2021 </div>
Program Indicators			
(1) Item	(2) Activity Description	(3) Indicator	(4) Explanation
B-01	Major activities and accomplishments during this period		<div style="border: 1px solid black; padding: 5px;"> <p>Preschool Services Department (PSD) started serving customers on 5/1/2021. This included entry and characteristics surveys and scheduling of cohort sessions. There are 27 families enrolled in the Parent Education sessions as of 6/30. Hired a Program Supervisor, and Office Assistant, and 3 Case Managers. Added a Domestic Violence policy, completed the Logic Model and the Evaluation Plan. These have been entered into Fastrack.</p> </div>
B-02	Problems		<div style="border: 1px solid black; padding: 5px;"> <p>It has been problematic to schedule cohorts due to family work schedules. Scheduling during the evenings has helped. Finding qualified staff to hire has been problematic due to lack of applicants despite marketing the positions. Working without face to face events and canvassing due to the pandemic has decreased the opportunities for recruitment. Marketing materials must go through multiple approval processes.</p> </div>
B-03	Significant findings and events		<div style="border: 1px solid black; padding: 5px;"> <p>We have found that the majority of our customers are also parents who have children enrolled in the Preschool Services Department. To widen the marketing scope, Preschool Services is partnering with other county agencies and community based agencies to market to their clientele.</p> </div>

ACF PERFORMANCE PROGRESS REPORT
Appendix B - Program Indicators
ACF-OGM-PPR

B-04	Dissemination activities		Individual outreach via phone, text, and e-mail has been completed with eligible families. Ongoing reports and outreach have been established with the PSD Policy Council and progress reports have been established with the PSD Shared Governance Board. Marketing materials have been created and are currently going through the Fatherhood FIRE approval process and the San Bernardino County Approval process. Marketing emails have been sent to potential participants via 
B-05	Other Activities		
B-06	Activities planned for next reporting period		Activities planned for the next reporting period are interviewing and filling vacant positions, continuing the Nurturing Fathers curriculum, and providing training on policies and procedures.

ACF PERFORMANCE PROGRESS REPORT
Appendix B - Program Indicators
ACF-OGM-PPR
INSTRUCTIONS

Schedule

Submit the original progress report to the Office of Grants Management, Division of Discretionary Grants, and a copy to the Program Office. Reports are due 30 days after the end of the second and fourth quarters of the budget period (every six months).

A FINAL PROGRAM REPORT IS DUE 90 DAYS AFTER THE PROJECT PERIOD END DATE.

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2	Federal Grant or Other Identifying Number Assigned by the awarding Federal agency	Enter the grant/award number contained in the award document.
3a	DUNS Number	Enter the recipient organization's Data Universal Numbering System (DUNS) number or Central Contract Registry extended DUNS number.
3b	EIN	Enter the recipient organization's Employer Identification Number (EIN) provided by the Internal Revenue Service.
4	Reporting Period End Date	Enter the ending date of the reporting period. For quarterly, semi-annual, and annual reports, the following calendar quarter reporting period end dates shall be used: 3/31; 6/30; 9/30 and or 12/31. For final PPRs, the reporting period end date shall be the end date of the project/grant period. The frequency of required reporting is usually established in the award document.
Program Indicators		
B-01(4)	Major activities and accomplishments during this period	Recommend use of project task charts from approved grant application and/or project work plan with this section. Describe any draft/final products in this section. Use additional pages if needed.
B-02(4)	Problems	Describe any deviations or departures from the original project plan including actual/anticipated slippage in task completion dates, and special problems encountered or expected. Use this report section to advise Project Officer and Grants Management Specialist of assistance needs. Use additional pages if needed.
B-03(4)	Significant findings and events	(To be noted by project officer, or reported to regions, States, other agencies, Program Director/Commissioner, Assistant Secretary, Secretary, etc.) Use additional pages if needed.
B-04(4)	Dissemination activities	Briefly describe project related inquiries and information dissemination activities carried out over the reporting period. Itemize and include a copy of any newspaper, newsletter, magazine articles or other published materials considered relevant to project activities, or used for project information or public relations purposes. Use additional pages if needed.
B-05(4)	Other Activities	Briefly describe. Use additional pages if needed.
B-06(4)	Activities planned for next reporting period	Briefly describe. Use additional pages if needed.

THE PAPERWORK REDUCTION ACT OF 1995 (Pub. L. 104-13)

Public reporting burden for this collection of information is estimated to average 1 hour per response, including the time for reviewing instructions, gathering and maintaining the data needed, and reviewing the collection of information.

OMB Approval Number: 0970-0406

Expiration Date: 11/30/2022

An agency may not conduct or sponsor, and a person is not required to respond to, a collection of information unless it displays a currently valid OMB control number.

FEDERAL FINANCIAL REPORT

(Follow form instructions)

1. Federal Agency and Organizational Element to Which Report is Submitted CHRIS PFLAUMER OFFICE OF HEAD START, REGION IX 90 SEVENTH STREET, 9th FLOOR SAN FRANCISCO, CA 94103	2. Federal Grant or Other Identifying Number Assigned by Federal Agency (To report multiple grants, use FFR Attachment) 90ZJ0037/01	Page 1	of 1
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3. Recipient Organization (Name and complete address including Zip code) PRESCHOOL SERVICES DEPARTMENT OF SAN BERNARDINO COUNTY 662 SOUTH TIPPECANOE AVE, SAN BERNARDINO, CA 92415-0630

4a. DUNS Number 128518193	4b. EIN 1-95-8002748-A1	5. Recipient Account Number or Identifying Number (To report multiple grants, use FFR Attachment)	6. Report Type <input checked="" type="checkbox"/> Quarterly <input type="checkbox"/> Semi-Annual <input type="checkbox"/> Annual <input type="checkbox"/> Final	7. Basis of Accounting <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual
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8. Project/Grant Period (Month, Day, Year) From: 9/30/2020 To: 9/29/2021	9. Reporting Period End Date (Month, Day, Year) 6/30/2021
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10. Transactions (Use lines a-c for single or multiple grant reporting)	Cumulative
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Federal Cash (To report multiple grants, also use FFR Attachment):	
a. Cash Receipts	67,533.91
b. Cash Disbursements	67,533.91
c. Cash on Hand (line a minus b)	-

(Use lines d-o for single grant reporting)	
Federal Expenditures and Unobligated Balance:	
d. Total Federal funds authorized	993,019
e. Federal share of expenditures	67,533.91
f. Federal share of unliquidated obligations	14,168
g. Total Federal share (sum of lines e and f)	81,701.91
h. Unobligated balance of Federal funds (line d minus g)	911,317.09


Recipient Share:	
i. Total recipient share required	-
j. Recipient share of expenditures	-
k. Remaining recipient share to be provided (line i minus j)	-

Program Income:	
l. Total Federal program income earned	
m. Program income expended in accordance with the deduction alternative	
n. Program income expended in accordance with the addition alternative	
o. Unexpended program income (line i minus line m or line n)	

11.	a. Type	b. Rate	c. Period From	d. Period To	e. Base	f. Amount Charged	g. Federal Share
Indirect Expense							
g Totals:					0	0	0

12. Remarks:

13. Certification: By signing this report, I certify to the best of my knowledge and belief that the report is true, complete, and accurate, and the expenditures, disbursements and cash receipts are for the purposes and intent set forth in the award documents. I am aware that any false, fictitious, or fraudulent information may subject me to criminal, civil, or administrative penalties. (U.S. Code, Title 18, Section 1001)

a. Typed or Printed Name and Title of Authorized Certifying Official Curt Hagman, Chairman, County of San Bernardino	c. Telephone (Area code, number, and extension) 909-383-2025
b. Signature of Authorized Certifying Official 	d. Email Address Curt.Hagman@bos.sbcounty.gov
	e. Date Report Submitted (Month, Day, Year) 7/29/21
14. Agency use only:	

Standard Form 425 - Revised 10/11/2011
OMB Approval Number: 0348-0061
Expiration Date: 2/28/2015

Paperwork Burden Statement
According to the Paperwork Reduction Act, as amended, no persons are required to respond to a collection of information unless it displays a valid OMB Control Number. The valid OMB control number for this information collection is 0348-0061. Public reporting burden for this collection of information is estimated to average 1.6 hours per response, including time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. Send comments regarding the burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden, to the Office of Management and Budget, Paperwork Reduction Project (0348-0061), Washington, DC 20503.



County of San Bernardino DELEGATED AUTHORITY – DOCUMENT REVIEW FORM

This form is for use by any department or other entity that has been authorized by Board of Supervisors/Directors action to execute grant applications, awards, amendments or other agreements on their behalf. All documents to be executed under such delegated authority must be routed for County Counsel and County Administrative Office review prior to signature by designee.

Note: This process should NOT be used to execute documents under a master agreement or template, or for construction contract change orders. Contact your County Counsel for instructions related to review of these documents.

Complete and submit this form, along with required documents proposed for signature, via email to the department's County Counsel representative and Finance Analyst. If the documents proposed for signature are within the delegated authority, the department will submit the requisite hard copies for signature to the County Counsel representative. Once County Counsel has signed, the department will submit the signed documents in hard copy, as well as by email, to CAO Special Projects Team for review. If approved, the department will be provided routing instructions as well as direction to submit one set of the executed documents to the Clerk of the Board within 30 days.

For detailed instructions on submission requirements, reference Section 7.3 of the Board Agenda Item Guidelines as the Delegation of Authority does not eliminate the document submission requirements.

Department/Agency/Entity: Preschool Services

Contact Name: Martha Garcia

Telephone: (909) 383-2036

Agreement No.: _____ Amendment No.: _____ Date of Board Item 11/17/20 Board Item No.: 51

Name of Contract Entity/Project Name: Dept. of Health and Human Services, Administration for Children and Families

Explanation of request/Special Instructions:

Preschool Services Department (PSD) received grant funding for the Fatherhood-Family-Focused, Interconnected, Resilient, and Essential (FIRE) program. The grantor, the Office of Family Assistance, requires PSD to submit the Performance Progress Report and Federal Financial Report (SF-425) as a grantee. Both reports are due to the Office of Family Assistance by July 30, 2021. PSD is requesting the signature of the Board of Supervisors Chairman on the Performance Progress Report and SF-425 report. The Chairman is the Authorized Certifying Official for the FIRE grant.

Insert check mark that the following required documents are attached to this request:

- ☒ Documents proposed for signature (Note: For contracts, include a signed non-standard contract coversheet for contracts not submitted on a standard contract form).
- ☒ Board Agenda item that delegated the authority

Department Routed to County Counsel	County Counsel Name: Adam Ebright	Date Sent: 7/27/21
Reviewing County Counsel Use Only	Review Date 07/28/21 _____ Signature	Determination: <input checked="" type="checkbox"/> Within Scope of Delegated Authority ____ Outside Scope of Delegated Authority
CAO-Special Projects Use Only	Review Date <u>7/29/21</u> <u>Jennifer McAllister</u> Signature	Disposition: <input checked="" type="checkbox"/> Route for signature to: <input checked="" type="checkbox"/> Chair <input type="checkbox"/> CEO <input type="checkbox"/> Department ____ Return to Department for preparation of agenda item