

PROBLEM-SOLVING COURTS

GRANT WRITING & ADMINISTRATION TRAINING

State Court Administrative Office

Trial Court Services

# SCAO Problem-Solving Court Team

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# GOALS FOR TODAY'S TRAINING

- Identify updates, changes, and trouble areas within each grant application
- Provide general information for writing the grant from beginning to end
- Educate on building measurable goals by utilizing methods and tools
- Instruct on building a quality budget request
- Share how SCAO/PSC's grant managers score grants
- Explain the how to's for submitting a proper claim
- Clarify grant reporting requirements and due dates
- Answer any and all questions regarding grants, the process, and specifics

# TYPES OF GRANTS

- Michigan Drug Court Grant Program (MDCGP)
  - Operational
  - Planning
- Byrne JAG Grant Program
- Office of Highway Safety Planning (OHSP)
  - Operational
  - Planning
  - Regional
- Urban Drug Court Initiative (UDCI)
- Michigan Mental Health Court Grant Program (MMHCGP)
- Regional Driving While Impaired Grant Program (RDWI)
- Michigan Veterans Treatment Court Grant Program (MVTCGP)
- Swift and Sure Sanctions Probation Program (SSSPP)

*All Grants are  
Reimbursement  
ONLY!*

# GRANT APPLICATIONS

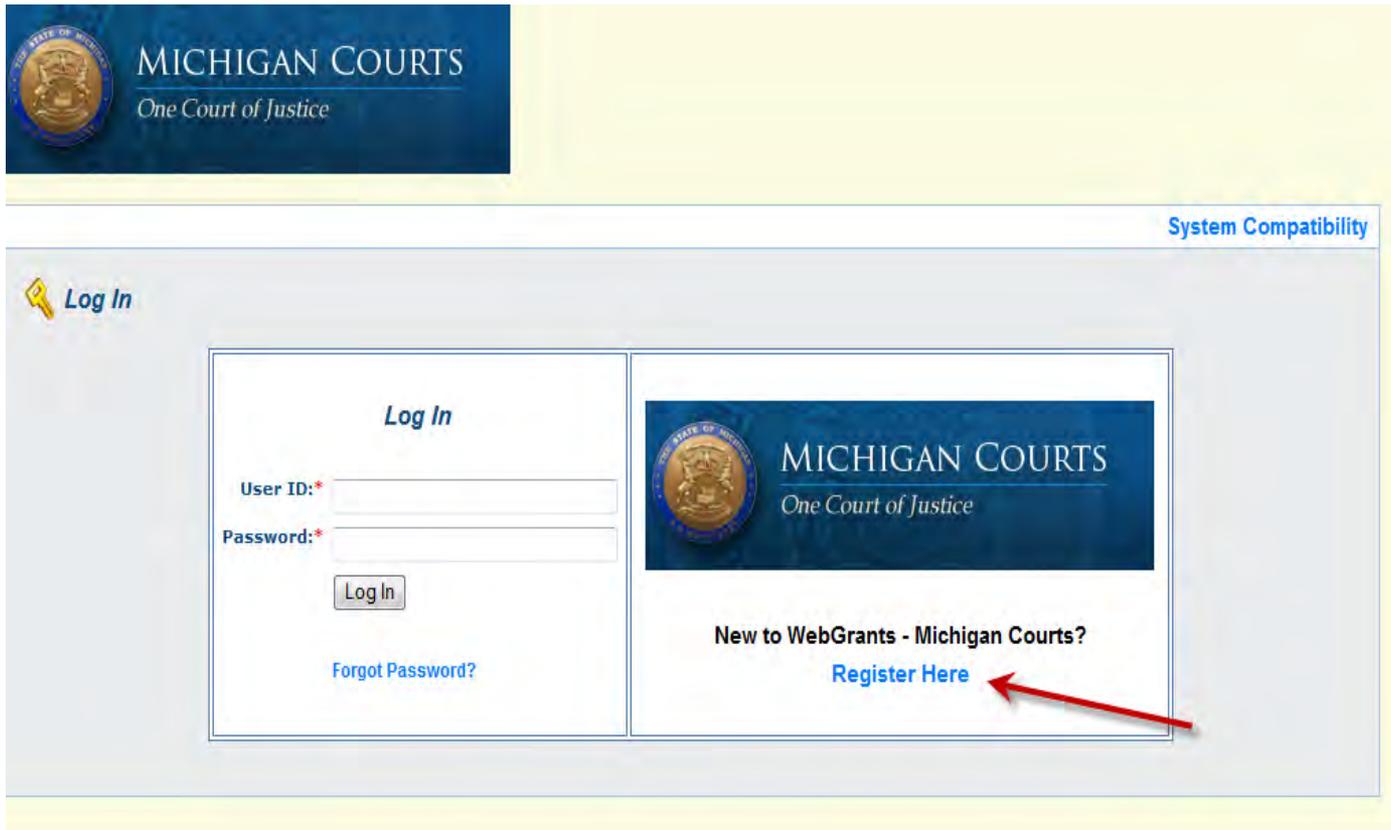
- All grants open April 1, 2015.
- Applications (other than Byrne JAG and OHSP) close on May 15, 2015.
- Byrne JAG and OHSP close on May 29, 2015.

DON'T MISS  
THE DEADLINE!

# GRANT APPLICATIONS

All grant applications are completed in WebGrants.

- Must have access to WebGrants for any grant application.
- WebGrants is located at <http://micourts.dullestech.net>



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*One Court of Justice*

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Salutation First Name Middle Name Last Name

**Title:**

**Email:**\*

**Confirm Email:**\*

**Address:**\*

**Address Line 2**

**Address Line 3**

**City:**\*     
City State/Province Postal Code/Zip

**Phone:**\*    
Phone Ext.

**Fax:**



**Organization Information**

**Name:**\*

**Organization Type:**

**Tax ID:**

**Organization Website:**

**Address:**\*

\*     
City State/Province Postal Code/Zip

**Phone:**\*    
Phone Ext.

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# STARTING THE APPLICATION

## General Information

- Label “Project Title” with AWARDYEAR, Grant, Court, and County:  
Example: FY 2016 Byrne JAG 100<sup>th</sup> Circuit Court Wonderland County
- If applying for more than one grant utilizing copy and paste, **UPDATE** the “Project Title” for each grant. For example: all programs must apply for MDCGP, thus the Project Title is FY 2016 MDCGP 100<sup>th</sup> Circuit Court Wonderland County. If you also use the same application to apply for OHSP funding , the Project Title should be changed to FY 2016 OHSP 100<sup>th</sup> Circuit Court Wonderland County.

# DRUG COURT GRANT PROGRAMS

## UPDATES

- Some slight changes to wording in the questions.
- A few new questions have been added.
- Some sections have been re-worked such that the questions are quite different from last year.

## COMMON MISTAKES

- Not answering all questions. This is especially important if you copy last year's application – new questions will be left blank (score of ZERO) unless you go into the application and review/respond!
- MDCGP – don't assume that every reviewer has read the whole application. Don't use "as stated above."
- Data/Trends/Spelling/Grammar (same as other programs).

## TROUBLE AREAS

- Problem Statement – Not Enough Data/Stats
- Substance Abuse Testing
- Incentives/Sanctions
- Judicial Supervision
- Evaluation of program: Process & Outcome

# **MICHIGAN MENTAL HEALTH COURT GRANT PROGRAM**

## **UPDATES**

- Both the MMHCGP and the RMHCGP applications are now similar.
- Each grant has slight changes with wording in the questions.
- A few questions have been moved to different areas within the application.

## **COMMON MISTAKES**

- Not answering all questions.
- Not including data or statistical information to support your statement.
- Not updating the application to reflect current trends or current information.
- Spelling and grammar errors.
- Being generic in answers or even having too much information that doesn't answer the question.

## **TROUBLE AREAS**

- How to obtain statistical information
- Treatment information
- Evaluation of program: Process and Outcome

# MICHIGAN VETERANS TREATMENT COURT GRANT PROGRAM

## UPDATES

- Grant has slight changes with wording in the questions.
- Growing program, expect greater competition for grant funds

## COMMON MISTAKES

- Not answering all questions.
- Not including data or statistical information to support your statement.
- Not updating the application to reflect current trends or current information.
- Spelling and grammar errors.

## TROUBLE AREAS

- Collaboration with the VA
  - Insufficient detail regarding the relationship between the court and the VA
- Mentor Programs
  - Lacking detail
    - How are mentors recruited?
    - Training?
    - Matching with participants?

# SWIFT AND SURE GRANT APPLICATION

## UPDATES

- Grant has changes with wording in the questions. Be sure to update answers based on changes to the application and program.
- New goals added that focus on the key concepts of Swift and Sure – swift, certain, consistent, proportionate, and fair.
- Growing program, expect greater competition for grant funds.

## COMMON MISTAKES

- Not answering all questions.
- Not including data or statistical information to support your statement.
- Not updating the application to reflect current trends or current information.
- Not focusing enough on the key concepts of Swift and Sure.
- Spelling and grammar errors.

## TROUBLE AREAS

- Focusing too much on substance abuse testing
- Supervision strategies
- Evaluation of program

# GOALS

**Defining**  
**Establishing**  
**Measuring**  
**Writing**

# What are goals and objectives?

## **GOALS**

- Primary focus and important
- Large in size
- The end result
- The whole purpose
- Longer term

## **OBJECTIVES**

- Sub-goals
- Medium or small in size
- The means to the end
- The “steps”
- Part of the whole
- Shorter term

# GOALS

- Goals are what you want to *achieve!*  
They are general statements of what the program intends to accomplish.
- Goals should be consistent with your *mission statement*. Goals flow from your mission statement.
- Goals are *measurable!*

# OBJECTIVES

- The connector from your problem to the problem being fixed (goal)
- Measurable actions!!!
- Various components that your program provides to participants to move toward the end goal.

# ESTABLISHING GOALS AND OBJECTIVES

## *Program goals should:*

1. Focus on public health, safety and personal responsibility;
2. Improve utilization of community resources
3. Be cost effective
4. Show high rates of treatment retention and completion

## *Objectives should be:*

1. Clearly stated
2. Quantifiable with measurable outcomes
3. Attainable

# EDUCATION

## 1. Identify the problem.

- *“Too many kids in our school district are not graduating.”*

## 2. What do we want to achieve? (Goal)

- *“We want a 100 percent graduation rate.”*



## 3. How do we get there? (Objectives)

# IDENTIFYING OBJECTIVES

## *To Improve Graduation Rates*

- Provide quality education
- Provide learning tools and social programs
- Increase and maintain attendance by providing transportation.
- *All of these objectives are measurable!!!!!!!*

# MEASURING OBJECTIVES

*“Provide quality education.”*

Quality education can be measured by:

1. MEAP scores; Grades/Test Scores.
  2. Teacher reports.
  3. Evidence-Based (EB) models of education implemented.
- Instruments that may be used to measure can include state database (MEAP), school database (grades), teachers personal data input, research on EB models.
  - Quality education → measured by scores/teacher reports and fidelity to EB models  
→ Graduation!

# MEASURING OBJECTIVES

*“Provide learning tools and social programs.”*

Learning tools and social programs can be measured by:

1. Number of new books ordered; inventory –how many given.
  2. Number of afterschool activity hours.
- Instruments that may be used to measure may be school budget, inventory, number of hours of afterschool activity enrollment and participation.

Tools and programs → measured by  
budget and hours → Graduation!

# MEASURING OBJECTIVES

*“Increase and maintain attendance by providing transportation.”*

Measures can include:

1. How many kids are not in attendance.
  2. Determining with parents which kids need transportation.
  3. What percentage of kids in need are receiving the service.
- Instruments that may be used can include attendance records; feedback from surveys to parents; hours of service provided.
  - Attendance → measured by surveys and attendance records → Graduation!

# MEASURING THE GOAL

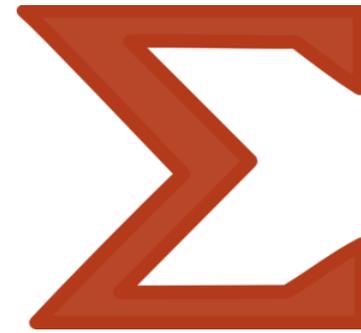
*“Increase Graduation Rate”*

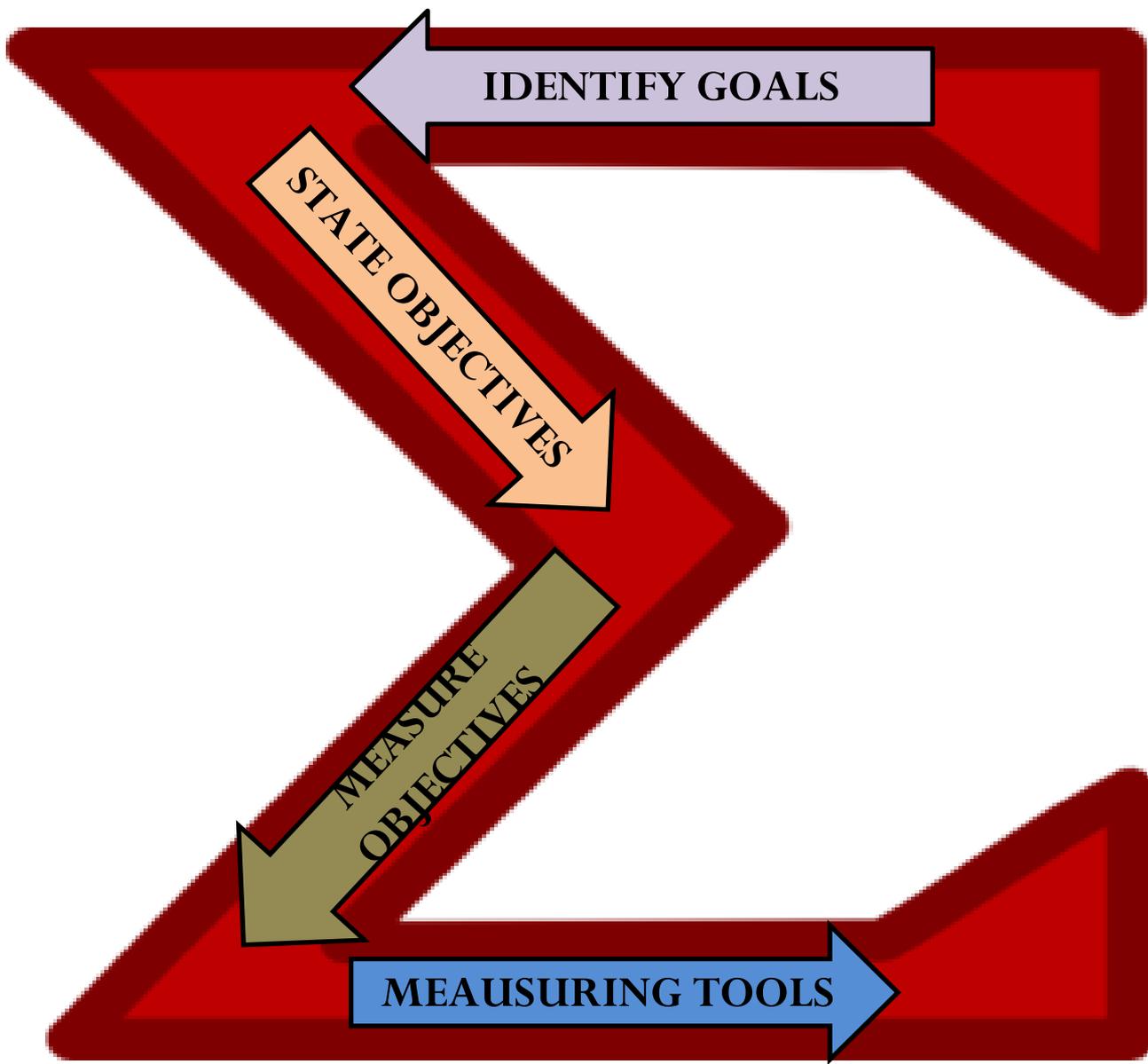
- What was the graduation rate?
- What is the graduation rate now?
- Has there been an increase?
- Report the percentage point increase!!
- Explain your findings!!

# PARTS IS PARTS?

*Sum the parts for a clear flowing means to an end!*

- Identify the problem!
- State the desired end result!
- State objectives!
- Describe how you will measure your objectives!
- Describe the measuring tool for each objective!
- Outcomes – was the goal reached?





**IDENTIFY  
PROBLEM**

**GOAL  
ACHIEVED!!**

**Problem: Too many youths are failing school!**

<b>GOAL</b>	<b>OBJECTIVES</b>	<b>MEASURING THE OBJECTIVES</b>	<b>MEASURING INSTRUMENT</b>	<b>GOAL ACHIEVED</b>
Increase Graduation Rate	Provide Quality Education	School Grades MEAP Scores EB Models	SCHOOL DATABASE STATE DATABASE RESEARCH & INTERNAL MONITORING	<b>Graduation Rate 100%</b>
Increase Graduation Rate	Provide Learning Tools and Social Programs	Updated Books/Computers Number of after school Activities	SCHOOL INVENTORY PROGRAM ENROLLMENT DATABASE	<b>Graduation Rate 100%</b>
Increase Graduation Rate	Increase Attendance by Providing Transportation	Attendance Rate ID Kids in Need	SCHOOL DATABASE SURVEY PARENTS	<b>Graduation</b>

## DO'S AND DO NOT'S

*Goal: Alleviate jail or detention overcrowding*

“No jail time is given up front which saves on jail bed days.”

## DO'S AND DO NOT'S

*Goal: Alleviate jail or detention overcrowding*

- How does the court plan to alleviate jail overcrowding? The objective in this goal is that “no jail time will be given up front.”
- How do we measure what is stated in that objective? WE can assume what you want to measure, but we need to see that YOU know how to measure it.

## DO'S AND DO NOT'S

### *Goal: Alleviate jail or detention overcrowding*

*By entering the program, participants will receive reduced jail sentences, or no jail sentence depending on the eligible offense. Although some jail may be served up front or served for program sanctions, the amount of overall jail time among participants is significantly reduced. A successful recovery court program will lead to lower recidivism rates among program participants which will lead to program participants staying out of jail in the future. The **progress of this goal will be measured by comparing jail days spent among participants and comparing them to the days that would have been served without program participation. DCCMIS** will be utilized to look at participants jail days spent while in the program for sanctions and upfront jail days and tracking re-arrest jail days after graduation.*

# DO'S AND DO NOT'S

*Goal: Alleviate jail or detention overcrowding*

- Objectives listed:
  - Reduced jail at sentencing
  - Reduction of future cases per participant (lowering recidivism rate)
- Measures:
  - Comparing jail days for participants to what they would have served without the program.
  - Tracking re-arrest jail days after graduation (recidivism)
  - DCCMIS used as tool

# COMMON MISTAKES

- Very lengthy response with little content
- Vague response

*“To reach the goal of becoming a productive citizen of the community, which is acknowledged at graduation”*

- No objectives listed
- No measures listed. Is it measurable? How are you going to see if you have reached your goal?

# PROGRESS/PROGRAM REPORTS

Goals and Objectives: Provide information regarding your program goals and objectives and explain your progress in accomplishing them this quarter.

- Use the measurements/variables given in the application to give feedback on how your program has worked towards those goals.

***WE WANT DATA!!!!***

# SCORING/CONCLUSION

## *Scoring Is Based On:*

- Components (parts is parts).
- Validity of the objectives.
- Whether tools are appropriate.
- Does the flow (summation) make sense?
- Did you add goals specific to your program?
- Follow the do's and the do not's!

# GRANT BUDGETS

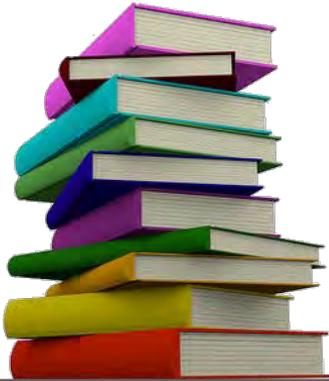
# BUDGETS IN GRANT APPLICATIONS

- Big part of application – consider it as equal to the questions section
- Scored as part of overall application – accounts for about 20%
- The budget is where you tell us how much money you need and why

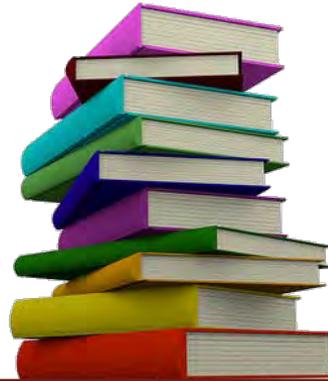


# REMEMBER TO READ

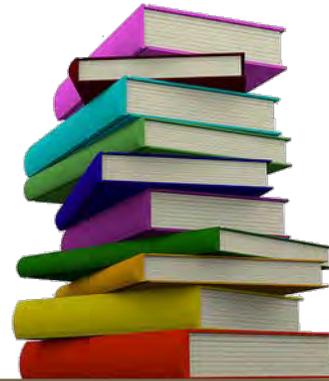
GRANT BUDGETS SHOULD BE:



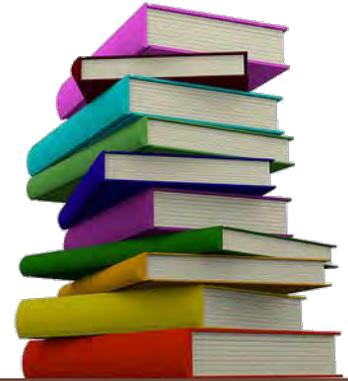
REASONABLE



ESSENTIAL



ACCURATE



DETAILED

# REASONABLE

- Amount of Request
  - Extremely large requests unlikely to be met and may be artificially lowered for review
- Program Size
  - \$100,000 request: reasonable for 100 participants, not so reasonable for 15 participants
- Population Served
- Non-Grant Factors

# ESSENTIAL

- Appropriate to the Program
  - Example: Lower-risk DWI participants are less likely to need residential treatment
  - Example: Higher-risk opiate population may need more drug testing
- Needs vs. Wants
  - Request should be balanced, not the “Kitchen Sink Approach”

# ACCURATE

- VERY IMPORTANT IN GRANT SCORING
- Requesting disallowables or excessive amounts will hurt your budget score
- Use correct line items
- Provide Rates for Everything

 **Application**

**Application: 04575 - 2016 Testing**

**Program Area:** Office of Highway Safety Planning (OHSP) CFDA 20.601

**Funding Opportunity:** 04550 - Fiscal Year 2016 Federal: Office of Highway Safety Planning (OHSP) - CFDA 20.601

**Application Deadline:** Final Application Deadline not Applicable

**Personnel** [Mark as Complete](#) | [Go to Application Forms](#) | [Add](#)

Name	Position	Computation	Request	Other Grant Or Funding Sources	Local Cash Contribution	Local In-Kind Contribution	Total
<a href="#">Ed Employee</a>	Probation Officer	\$20/hour x 1040 hours	\$20,800.00	\$0.00	\$20,800.00	\$0.00	\$41,600.00
<a href="#">Contractual Connie</a>	Contractual Drug Tester	\$12/hour x 500 hours	\$6,000.00	\$0.00	\$0.00	\$0.00	\$6,000.00
<a href="#">Paula Prosecutor</a>	Prosecutor	\$40/hour x 200 hours	\$8,000.00	\$8,000.00	\$0.00	\$0.00	\$16,000.00
			<b>\$34,800.00</b>	<b>\$8,000.00</b>	<b>\$20,800.00</b>	<b>\$0.00</b>	<b>\$63,600.00</b>

# DETAILED

- Names/Providers for each line item
- Detailed cost/rate for each line item
- Justification matters! Don't just do the calculations — tell us why it's important to your program

## Personnel Justification

### Personnel Justification\*

*Justify personnel (i.e., wages) associated with the proposed project.*

Staff time is very important to our program. The Wonderland County Drug Court cannot operate without probation and drug testing. The county pays for 50% of the probation officer's time, so we are requesting the other 50% through this grant. The probation officer provides case management services, verifies compliance with court orders, conducts drug testing for male participants, attends staffing meetings and court hearings, and conducts initial assessments. The probation officer is paid at a rate of \$20 per hour, with full time being 2080 hours. Half of this salary is 20x1040 or \$20,800.

Our program utilizes a part-time contractual employee to provide drug testing. Using supplies provided by the court, she conducts random, observed urinalysis and oral swab tests to our female participants. This position is an at-will employee, contractual basis, with no benefits. Pay is \$12/hour to a maximum of 500 hours. We are requesting the full \$6,000 through this grant as there are no other funding sources to pay for this valuable service.

# BUDGETS IN WEBGRANTS

- Be sure to accurately fill out all sections – this includes other funding sources

Contractual <span style="float: right;">Add</span>									
Contractor	Computation	Services to be Provided	Request	Other Grant or Funding Source	Local Cash Contribution	Local In-Kind Contribution	Total	Subrecipient	Contractor/Vendor
ABC Testing	\$8 x 80 x 2/wk x 52 weeks = \$66650	Testing	\$20,000.00	\$0.00	\$0.00	\$46,650.00	\$66,650.00	No	Yes
Treatum Well	\$80/individual x 400 sessions = \$32,000	Individual sessions	\$32,000.00	\$0.00	\$0.00	\$0.00	\$32,000.00	Yes	No
Test	\$12 x 100	Testing	\$1,200.00	\$0.00	\$0.00	\$0.00	\$1,200.00	No	Yes
			<b>\$53,200.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$46,650.00</b>	<b>\$99,850.00</b>		

## Contractual Justification

### Contractual Justification\*

Justify contractual costs associated with the proposed project. These contractual costs should tie back to the Budget Request Summary and the Budget Detail Worksheet.

Justification for ABC Testing and Treatum Well.

## Supplies Add

Item	Computation	Request	Other Grantor Funding Source	Local Cash Contributions	Local In-Kind Contributions	Total
Test Cups	3 x 1000	\$3,000.00	\$0.00	\$0.00	\$0.00	\$3,000.00
		<b>\$3,000.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$3,000.00</b>

## Supplies Justification

### Supplies Justification\*

Justify supply costs associated with the proposed project. These supply expenses should tie back to the Budget Request Summary and Budget Detail worksheet.

Justification for supplies.

## Travel Add

Type of Travel Expenses	Computation	Request	Other Grantor Funding Source	Local Cash Contributions	Local In-Kind Contributions	Total
Bus Tokens	\$1.25 x 500 = \$625	\$244.00	\$0.00	\$0.00	\$0.00	\$244.00
		<b>\$244.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$0.00</b>	<b>\$244.00</b>

## Travel Justification

### Travel Justification\*

Justify travel costs associated with the proposed project. The costs should tie back to the Budget Request Summary and the Budget Detail worksheet.

Justification for Travel

## MULTIPLE FUNDING SOURCES

- Request 100% on EACH application
- Be sure to follow allowables and guidelines for EACH program
- Show personnel/fringes for ALL employees charged against multiple funding sources

## EXAMPLE

- Your court wants \$100,000 to run a drug court program and you have a high percentage of straddle/presumptive cases (making your program a good candidate for Byrne).
  - Request \$100,000 from Byrne AND \$100,000 from MDCGP.
  - Don't request \$50,000 from one and \$50,000 from the other.

## EXAMPLE

- Anna Banana works 20 hours for drug court and 20 hours for veterans court. The court wants all 40 hours to be grant funded over the two programs.
  - 20 hours requested on MDCGP with the other 20 under “other grant or funding source” so line item shows full salary
  - 20 hours under MVTCGP with the other 20 hours under “other grant or funding source” so line item shows full salary

Explain “other funding source” in justification!

# SCORING

## BEFORE SUBMISSION.....

- Scores (points possible) for each section are predetermined prior to the submission date
- Analysts are assigned sections to read and score.



# 2015 GRANT YEAR: 170 APPLICATIONS

Problem Solving Court  
Analysts

Judicial Outreach  
Liaison

Michigan Supreme Court  
Financial Analyst



# Conference Room

OCCUPIED

## MULTIPLE REVIEW

- Reviewers score their assigned sections
- Review team assembles to discuss grant scores
- Each reviewer then creates an award scenario
- Awards are made

## SINGLE REVIEW

- Reviewer scores grant applications
- Reviewer creates an award scenario
- Awards are made

# HOW TO IMPROVE YOUR SCORE

- Finding your previous review

**MICHIGAN COURTS**  
*One Court of Justice*

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Welcome iam Testing

**Main Menu**  
Click Help above to view instructions. Go to "My Profile" to reset password.

- Instructions
- My Profile**
- Funding Opportunities
- My Applications
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WebGrants - Michigan Courts

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webgrants@dullestech.com	WebGrants – Please Revise Your Budget- 02638 - Regional DWI Court	<p>**** Do Not Respond to This Email ****</p> <p>Dear Rebecca Turner,</p> <p>Your budget is under review and requires modification. Your application has been unlocked. Please log into the WebGrants grants management system and revise your budget. Instructions and your scoring sheet are attached. The application details appear below: Number: 02638 Name: Regional DWI Court</p> <p>You are requested to make the following modifications to your budget and resubmit it by 09/26/2014.</p> <p>You may log into the WebGrants grants management system at <a href="https://micourts.dullestech.net">https://micourts.dullestech.net</a></p>	C54 RDWI- 1.pdf	09/16/2014 12:21	Sent
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# HOW TO IMPROVE YOUR SCORE

- Could you earn a few more points from reading your prior reviews?
- Good narrative. **Would like more specific data** (some estimates and ranges provided). Data/stats can be used to bolster narrative. Good jail information, but again, would like more specific data (especially on in-program sanctions).

Possible Points	Data	Points Received
20	Success Rate=61	20
10	Number of Days in the Program=533	9
10	SA Tx Contact Hrs=67	9
10	Total Drug Tests=220	10
10 for >90 days, 15	Sobriety Days=413	15
10	Court Reviews=23	10
15	Incentives/Sanctions Ration=2/1	1
10	Employ at Discharge	10
100		84

# CLAIMS

# SUBMITTING CLAIMS

- Starts with an approved budget.
- Knowing what is an allowed expense and what is not.
- Knowing who is as sub-recipient and who is a contract/vendor.  
(See attachment A-Memo on Changes to Subcontract Requirements)
- Claims are submitted quarterly
  - 1<sup>st</sup> Quarter is from October 1<sup>st</sup> – December 31<sup>st</sup> (Due January 10<sup>th</sup>)
  - 2<sup>nd</sup> Quarter is from January 1<sup>st</sup> – March 31<sup>st</sup> (Due April 10<sup>th</sup>)
  - 3<sup>rd</sup> Quarter is from April 1<sup>st</sup> – June 30<sup>th</sup> (Due July 10<sup>th</sup>)
  - 4<sup>th</sup> Quarter is from July 1<sup>st</sup> – September 31<sup>st</sup> (Due October 10<sup>th</sup>)

# QUARTERLY REIMBURSEMENT

- Request for reimbursement in 1<sup>st</sup> quarter:
  - Invoices for services/supplies must reflect dates between 10/1 - 12/31. Invoices from the previous FY will not be covered in current FY. Invoices from 2<sup>nd</sup> quarter must be requested in 2<sup>nd</sup> quarter.
  - Payroll will only be reimbursed for dates between 10/1 - 12/31, regardless of when the payroll cycle ends.
- Request for reimbursement in 2<sup>nd</sup> and 3<sup>rd</sup> quarters:
  - Invoices and payroll must reflect dates from either the 1<sup>st</sup>, 2<sup>nd</sup>, or 3<sup>rd</sup> quarter.
- Request for reimbursement in 4<sup>th</sup> quarter:
  - Invoices and payroll must reflect dates from all quarters in the current fiscal year (ending 9/30).

# SUPPORTING DOCUMENTATION

- Personnel and Fringe Benefits: (See attachment B: Guidelines for Claims Backup )
  - General Ledger
  - Payroll Report
  - Time sheets for those who have time split to 1 or more grants
- Contractual:
  - Invoices that include the date of service, cost X rate = total
  - Time sheets for contractual people who work on more than one grant
  - Mileage logs (include dates of travel, miles traveled, reason for travel.)
- Supplies:
  - Invoices/receipts date of purchase/order, cost X rate = total
- Travel:
  - Invoices/receipts date of purchase/order, cost X rate = total
  - Mileage logs (includes date of travel, mileage traveled, and reason for travel)

**MHC's ONLY: CMH's/treatment provider must submit all backup documentation listed above.**

# ORGANIZING YOUR CLAIMS

- Develop a spreadsheet (not required but makes the review process easier)
- **Organize by category first, then by month**
- BEFORE SUBMITTING
  - Check that all requests for reimbursement are in your approved budget
    - If not, complete a Contract Amendment
  - Check that all requests for reimbursement (invoices/receipts/payroll) fall within the appropriate dates for quarter.
  - Check that all supporting documentation is attached (invoices, receipts, timesheets, etc.)
- SUBMIT 😊

# CONTRACT AMENDMENTS

## WHEN TO COMPLETE AN AMENDMENT

- When adding/removing items from the approved budget
- When changing/shifting items within the approved budget

## TYPES OF CONTRACT AMENDMENTS

- Budget Revision
- Project Revision



# SUBMITTING THE CLAIM

 [Menu](#) |  [Help](#) |  [Log Out](#)

 [Back](#) |  [Print](#) |  [Add](#) |  [Delete](#) |  [Edit](#) |  [Save](#)

## Grant Tracking

### Grant: 00461 - testingSSPP - 2013

**Status:** Underway

**Program Area:** Swift and Sure Sanctions Probation Program (SSPP)

**Grantee Organization:** 100th Circuit Court

**Program Officer:** Jessica Parks

**Awarded Amount:** \$100,000.00

### Claims

[Copy Existing Claim](#) | [Return to Components](#)

ID	Type	Status	Date Submitted	Date Paid	Date From-To	Claim Amount
00461 - 001	Reimbursement	Editing			10/01/2015 - 12/31/2015	\$0.00
00461 - 002	Reimbursement	Editing			01/01/2016 - 03/31/2016	\$0.00
00461 - 003	Reimbursement	Editing			04/01/2016 - 06/30/2015	\$0.00
00461 - 004	Reimbursement	Editing			08/01/2015 - 09/30/2015	\$0.00
Submitted Amount						\$0.00
Approved Amount						\$0.00
Paid Total						\$0.00
Total						\$0.00

Last Edited By:

## Grant Tracking

Claim: 00461 - 002

[Grant Components](#)

Grant: [00461-testingSSSPP](#)

Status: Editing

Program Area: Swift and Sure Sanctions Probation Program (SSSPP)

Grantee Organization: [100th Circuit Court](#)

Program Manager: Jessica Parks

### Components

[Preview](#)

Complete each component of the Claim and mark it as complete. Click Submit when you are done.

Name	Complete?	Last Edited
<a href="#">General Information</a>	✓	03/11/2015
<a href="#">Reimbursement</a>	✓	03/12/2015
<a href="#">Attachments</a>		



### Grant Tracking

Claim: 00461 - 002

Grant Components

Grant: 00461-testingSSSPP

Status: Editing

Program Area: Swift and Sure Sanctions Probation Program (SSSPP)

Grantee Organization: 100th Circuit Court

Program Manager: Jessica Parks

### Attachments

Create New Version | Mark as Complete | Go to Claim Forms

Description	File Name	File Size	Date Uploaded
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Last Edited By:

### Application

#### Attach File

Upload File: G:\2015 Training\Grant Writing March 2015\FY 2015 1st Quarter C [Browse...]

Description\*: 1st Quarter documentation



 **Grant Tracking**

Claim: 00461 - 002

[Grant Components](#)

Grant: [00461-testingSSPP](#)

Status: Editing

Program Area: Swift and Sure Sanctions Probation Program (SSPP)

Grantee Organization: [100th Circuit Court](#)

Program Manager: Jessica Parks

**Attachments**

[Create New Version](#) | [Mark as Complete](#) | [Go to Claim Forms](#)

Description	File Name	File Size	Date Uploaded
<a href="#">1st Quarter documentation</a>	<a href="#">FY 2015 1st Quarter Contractual.pdf</a>	7 KB	03/12/2015

Last Edited By: Thomas Myers, 03/12/2015

 Grant Tracking

**Grant: 00461 - testingSSSPP - 2013**

**Status:** Underway

**Program Area:** Swift and Sure Sanctions Probation Program (SSSPP)

**Grantee Organization:** 100th Circuit Court

**Program Officer:** Jessica Parks

**Awarded Amount:** \$100,000.00

**Claims**

[Copy Existing Claim](#) | [Return to Components](#)

ID	Type	Status	Date Submitted	Date Paid	Date From-To	Claim Amount
00461 - 001	Reimbursement	Submitted	03/11/2015		10/01/2015 - 12/31/2015	\$4,468.90
00461 - 002	Reimbursement	Editing			01/01/2016 - 03/31/2016	\$0.00
00461 - 003	Reimbursement	Editing			04/01/2016 - 06/30/2015	\$0.00
00461 - 004	Reimbursement	Editing			08/01/2015 - 09/30/2015	\$0.00
<b>Submitted Amount</b>						<b>\$4,468.90</b>
<b>Approved Amount</b>						<b>\$0.00</b>
<b>Paid Total</b>						<b>\$0.00</b>
<b>Total</b>						<b>\$4,468.90</b>

Last Edited By:

# WHAT SCAO SEES

## **Reimbursement**

Budget Category	Contract Budget	Expenses This Period	Prior Expenses	Total	Available Balance
<b>Personnel Summary</b>					
Personnel Total	\$25,000.00	\$1,176.00	\$0.00	\$1,176.00	\$23,824.00
<b>Fringe Benefits Summary</b>					
Fringe Benefits Total	\$10,000.00	\$1,170.00	\$0.00	\$1,170.00	\$8,830.00
<b>Contractual Summary</b>					
Contractual Total	\$50,000.00	\$2,211.90	\$0.00	\$2,211.90	\$47,788.10
<b>Supplies Summary</b>					
Supplies Total	\$10,000.00	\$205.00	\$0.00	\$205.00	\$9,795.00
<b>Travel Summary</b>					
Travel Total	\$5,000.00	\$299.84	\$0.00	\$299.84	\$4,700.16
<b>Sub Total:</b>	<b>\$100,000.00</b>	<b>\$5,062.74</b>	<b>\$0.00</b>	<b>\$5,062.74</b>	<b>\$94,937.26</b>
<b>Total:</b>	<b>\$100,000.00</b>	<b>\$5,062.74</b>	<b>\$0.00</b>	<b>\$5,062.74</b>	<b>\$94,937.26</b>

## **Attachments**

Description	File Name	File Size
1st Quarter Claims	<a href="#">supporting documentation.pdf</a>	226 KB

## Reimbursement

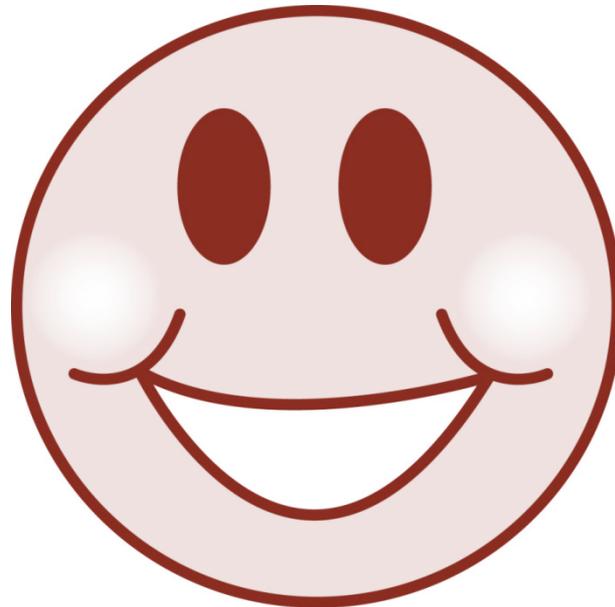
Budget Category	Contract Budget	Expenses This Period	Prior Expenses	Total	Available Balance
<b>Personnel Summary</b>					
Personnel Total	\$25,000.00	\$1,176.00	\$0.00	\$1,176.00	\$23,824.00
<b>Fringe Benefits Summary</b>					
Fringe Benefits Total	\$10,000.00	\$1,170.00	\$0.00	\$1,170.00	\$8,830.00
<b>Contractual Summary</b>					
Contractual Total	\$50,000.00	\$2,211.90	\$0.00	\$2,211.90	\$47,788.10
<b>Supplies Summary</b>					
Supplies Total	\$10,000.00	\$205.00	\$0.00	\$205.00	\$9,795.00
<b>Travel Summary</b>					
Travel Total	\$5,000.00	\$299.84	\$0.00	\$299.84	\$4,700.16
<b>Sub Total:</b>	<b>\$100,000.00</b>	<b>\$5,062.74</b>	<b>\$0.00</b>	<b>\$5,062.74</b>	<b>\$94,937.26</b>
<b>Total:</b>	<b>\$100,000.00</b>	<b>\$5,062.74</b>	<b>\$0.00</b>	<b>\$5,062.74</b>	<b>\$94,937.26</b>

## Attachments

Description	File Name	File Size
FY 2015 1st Quarter Contractual	<a href="#">FY 2015 1st Quarter Contractual.pdf</a>	7 KB
FY 2015 1st Quarter Personnel	<a href="#">FY 2015 1st Quarter Personnel.pdf</a>	7 KB
FY 2015 1st Quarter Supplies	<a href="#">FY 2015 1st Quarter Supplies.pdf</a>	7 KB
FY 2015 1st Quarter Travel	<a href="#">FY 2015 1st Quarter Travel.pdf</a>	8 KB
FY 2015 1st Quarter Spreadsheet	<a href="#">FY 2015 Spread Sheet.pdf</a>	7 KB

## CONCLUSION FOR SUBMITTING YOUR CLAIM

Verify invoices/receipts  
and  
Organize claim before submitting!



# REPORTING REQUIREMENTS

# OVERVIEW

- Where to find the reporting requirements and their due dates
- Timeliness
- Navigating WebGrants
- Claims (all grants)
  - Reminder: organization is important; include timesheets
- Progress reports (all grants)
  - What makes a good report?
- Program reports (federal grants)
  - What makes a good report?
- Program income reports (federal grants)
- Program income verification (federal grants)
- Time certification (federal grants)
- Office of civil rights training certification (Byrne grant)
- DCCMIS data exception report (all grants)
- DCCMIS user audit report (all grants)

## WHERE TO FIND REQUIREMENTS & DUE DATES

- Grant contract
- Grant description under “Opportunity” in WebGrants
- WebGrants – under “claims” and “status reports.”
- Call or e-mail your SCAO grant administrator.

## BE ON TIME



- Submit all reports on time.
- Even if it's one minute late, it will show as "Late" in WebGrants. A history of late reports may be a factor in future award amounts.
- 30 days past the due date, a delinquency notice will be sent.

<b>MDCGP</b>	<b>VTC</b>	<b>MHC</b>	<b>S&amp;S</b>	<b>OHSP</b>	<b>Byrne</b>	<b>Regional DWI</b>
<i>Claims Due</i> -Jan 10 -Apr 10 -July 10 -Oct 10						
<i>Progress Report Due</i> -Apr 30 -Oct 30						
<i>DCCMIS Data Exception Report</i> -Feb 15 -May 15 -Aug 15 -Nov 15	<i>DCCMIS Data Exception Report</i> -Feb 15 -May 15 -Aug 15 -Nov 15	<i>DCCMIS Data Exception Report</i> -Feb 15 -May 15 -Aug 15 -Nov 15	<i>DCCMIS Data Exception Report</i> -Feb 15 -May 15 -Aug 15 -Nov 15	<i>DCCMIS Data Exception Report</i> -Feb 15 -May 15 -Aug 15 -Nov 15	<i>DCCMIS Data Exception Report</i> -Feb 15 -May 15 -Aug 15 -Nov 15	<i>DCCMIS Data Exception Report</i> -Feb 15 -May 15 -Aug 15 -Nov 15
<i>DCCMIS User Audit Report</i> -Jan 31						
				<i>Program Report Due</i> -Jan 10 -Apr 10 -July 10 -Oct 10	<i>Program Report Due</i> -Jan 10 -Apr 10 -July 10 -Oct 10	
				<i>Program Income Due</i> -Jan 10 -Apr 10 -July 10 -Oct 10	<i>Program Income Due</i> -Jan 10 -Apr 10 -July 10 -Oct 10	
				<i>Program Income Verification</i> -Jan 10	<i>Program Income Verification</i> -Jan 10	
				<i>Time Certification</i> -Apr 10 -Oct 10	<i>Time Certification</i> -Apr 10 -Oct 10	
					<i>Office of Civil Rights Training Certification</i> -Jan 10	

# FINDING THE PROGRESS REPORT IN WEBGRANTS

- For all grant programs.
- Usually bi-annual.

 **Grant Tracking**

**Grant:** - FY 2015 OHSP - Sobriety Court - 2014

**Status:** Underway

**Program Area:** Office of Highway Safety Planning (OHSP) CFDA 20.601

**Grantee Organization:**

**Program Officer:** Thomas Myers

**Awarded Amount:**

**Instructions**

The grant forms appear below.

**Grant Components**

You can define your own alerts in the Alerts section

Component	Last Edited
General Information	11/20/2014
Claims	
<b>Status Reports</b>	
Site Visit	
Contract Amendments	
Correspondence	
Budget	02/13/2015
Subcontract Forms	
Grant Contact Information	11/20/2014
DCCMIS Contact Information	11/20/2014
Opportunity	-
Application	-

**Grant Tracking**

**Grant:** | - 2014 Application for Office of Highway Safety Planning (OHSP) -

**Status:** Closed

**Program Area:** Office of Highway Safety Planning (OHSP) CFDA 20.601

**Grantee Organization:**

**Program Officer:** Thomas Myers

**Awarded Amount:** \$65,000.00

**Status Reports**

[Copy Existing Status Report](#) | [Return to Components](#)

ID	Type	Date From-To	Due Date	Submitted Date	Arrived?	Status
- 01	Quarterly Report	10/01/2013-12/31/2013	01/10/2014	01/09/2014	On Time	Approved
- 02	Quarterly Report	01/01/2014-03/31/2014	04/10/2014	04/10/2014	On Time	Approved
- 03	Quarterly Report	04/01/2014-06/30/2014	07/10/2014	07/10/2014	On Time	Approved
- 04	Quarterly Report	07/01/2014-09/30/2014	10/10/2014	10/10/2014	On Time	Approved
- 05	Bi-Annual Report	10/01/2013-03/31/2014	04/10/2014	03/28/2014	On Time	Approved
- 06	Bi-Annual Report	04/01/2014-09/30/2014	10/10/2014	10/06/2014	On Time	Approved
- 07	Annual Report	10/01/2013-09/30/2014	01/10/2014	01/02/2014	On Time	Approved
- 08	Progress Report With Data	10/01/2013-03/31/2014	04/30/2014	04/29/2014	On Time	Approved
- 09	Progress Report With Data	04/01/2014-09/30/2014	10/30/2014	10/27/2014	On Time	Approved

Last Edited By:

# Progress Report

## Part 1

Goal 1: Reduce drug use during program participation.\*

Goal 2: Retain participants in the program.\*

Goal 3: Reduce drug and alcohol related crime in the jurisdiction. (May not be applicable to family dependency courts).

Goal 4: Alleviate congestion of court dockets.\*

Goal 5: Alleviate jail or detention overcrowding, if applicable.

Goal 6: Retain participants in substance abuse treatment.\*

Goal 7: Reduce child abuse and neglect, if applicable.

Optional goal 8:

Optional goal 9:

Optional Goal 10:

Is the program utilizing Ignition Interlock for eligible participants?\*

How does offering or not offering Ignition Interlock effect the program's operation?\*

Does the program accept transfers from other jurisdictions? \*

If yes, are the eligibility requirements different for transfer cases? Please describe the eligibility criteria (location of residence, charge type, etc.)

## Part 2

**Drug Testing and Sobriety Days:** Please analyze your court's drug testing and sobriety days data. Does the data seem accurate? Why or why not? Describe any recent or proposed changes to your drug testing protocols.\*

*Use your court's individual data (provided in the attachment) to develop responses to each of the following questions.*

**Days in Program and Scheduled Reviews:** Does the data regarding days in program and scheduled reviews seem accurate? Why or why not? Are you planning any changes to the frequency of status reviews or program length?\*

**Treatment:** Please analyze your court's treatment hours. Does the data seem accurate? Why or why not? How is your court determining individual treatment needs and levels? Describe any recent or proposed changes to the treatment component of your program.\*

**Sanctions/Incentives/Jail:** Please analyze and describe your court's use of incentives and sanctions, including jail. Does your data seem accurate? Why or why not? Have you recently implemented any changes to your use of incentives or sanctions?\*

**Successful Completions:** Are you satisfied with your court's percentage of successful completions? Does it fall in line with your goals? \*



**STATEWIDE DATA BY COURT TYPE FOR SUCCESSFUL DISCHARGES 10/01/2013 - 3/31/2014**

Court Type	Successful Completions  (%) (N)	Days in Jail as a Sanction  Mean	Number of Days in Drug Court  Mean	Number of Scheduled Drug Court Reviews  Mean	Number of Sobriety Days  Mean	Total Number of Drug Tests  Mean	Number of SA Treatment Contact Hours  Mean	Number of Incentives  Mean	Number of Sanctions  Mean	Employment Status at Discharge		Improved Employment Status at Discharge  Yes	Improved Education Level at Discharge  Yes
										Employed Full or Part Time	Not Employed or Not in Labor Force		
Adult Circuit	51% (N=160)	13	570	27	386	202	216	13	3	80%	20%	61%	15%
Adult District	57% (N=108)	6	507	23	330	253	88	9	2	90%	10%	57%	20%
Family Dependency	48% (N=26)	10	360	27	222	168	113	25	4	58%	42%	42%	12%
Juvenile	48% (N=36)	24	385	25	190	130	150	15	4	42%	58%	39%	97%
Sobriety	71% (N=444)	11	500	19	363	370	73	9	2	91%	9%	46%	17%
<b>DATA BY COURT NAME FOR SUCCESSFUL DISCHARGES 10/01/2013 - 3/31/2014</b>													
Circuit Adult	91% (N=20)	8	630	26	458	196	39	21	2	95%	5%	60%	20%

**LEGEND**

Your average (mean) falls in the upper quartile when compared to all adult circuit drug courts

Your average (mean) falls in the lower quartile when compared to all adult circuit drug courts

## FY 2014 DCCMIS USER AUDIT

Due to SCAO by January 31, 2014

### DCCMIS System Administrator

Court Name (i.e., 3rd Circuit - Adult)	100th Circuit Court
System Administrator Name	J.Smith
Address	123 Street
City, State, Zip	Anytown, MI, 12345
Phone Number	000-000-0000
Email Address	email@email.com

### DCCMIS Users

<u>Username</u>	<u>Full Name of User</u>
sampleuser	Sample User
jsmith	John Smith
Jasmith	Jane Smith



### DATA EXCEPTION REPORT

Filter Exception By: Court: **SCAO Test Adult** Exception Type: All Status: Outstanding

EXCEPTION REPORT LIST    MESSAGE FOR SCAO    COURT SUMMARY REPORT    EXCEPTION TYPE SUMMARY REPORT    MESSAGE

DATE	CLIENT NAME	CASE/DOCKET #	EXCEPTION	STATUS	LAST ACTION DATE	LAST ACTION MESSAGE
02/19/2015	Monsters, Gila	12345	Drug tests	Outstanding		
10/09/2014	Smith, Joe	5417fs	Charge Type	Outstanding		
01/23/2015	test, just a	123456	Charge Type	Outstanding		
02/21/2015	test, just a	123456	Drug tests	Outstanding		
01/13/2015	tyson, mike	15-565656	Charge Type	Outstanding		
01/13/2015	tyson, mike	15-565656	DSM-IV	Outstanding		
01/13/2015	WHITE, IRIS LOUISE	14-010203-01	Charge Type	Outstanding		

# FINDING THE QUARTERLY REPORTS IN WEBGRANTS

- *For OHSP and Byrne only.*
- This includes the “quarterly program report” and quarterly “program income report.”

 **Grant Tracking**

Status Report:

Grant:  [FY 2015 OHSP - Sobriety Court](#)

Status: Editing

Program Area: Office of Highway Safety Planning (OHSP) CFDA 20.601

Grantee Organization:

Program Manager: Thomas Myers

**Components**

[Preview](#) | [Submit](#)

Complete each component of the status report and mark it as complete. Click Submit when you are done.

Name	Complete?	Last Edited
<a href="#">General Information</a>	✓	11/26/2014
<a href="#">Quarterly Program Report</a>		
<a href="#">Program Income Report</a>		





# PROGRAM REPORT

*(OHSP AND BYRNE ONLY)*

- \*Answer the question – narrative portion.
- \*Support the answer – data portion.
  - Details, data, details, data.
- Link the answer to the grant application.
  - For example, if the grant application includes the 6 goals for drug courts and 2 optional goals, include these 8 goals in the program report.
- Target population; program modifications; activities planned.

## PROGRAM REPORT VS. PROGRESS REPORT

- Program report – quarterly report for the federal grants (OHSP and Byrne) that focuses on goals stated in the application, target population, modifications, and activities planned.
- Progress report – bi-annual report that focuses on goals stated in the application, ignition interlock, transfers, drug testing data, sobriety court days, days in the program, scheduled reviews, treatment, sanctions/incentives, and successful completions. Include progress report data.

**PROGRAM INCOME IN**  
**WEBGRANTS**

 **Grant Tracking**

**Status Report:**     1 - 02

**Grant:**     [\\_\\_\\_\\_\\_ FY 2015 OHSP - Sobriety Court](#)

**Status:**     Editing

**Program Area:**     Office of Highway Safety Planning (OHSP) CFDA 20.601

**Grantee Organization:**    

**Program Manager:**     Thomas Myers

**Components**

[Preview](#) | [Submit](#)

*Complete each component of the status report and mark it as complete. Click Submit when you are done.*

Name	Complete?	Last Edited
<a href="#">General Information</a>	✓	11/26/2014
<a href="#">Quarterly Program Report</a>		
<a href="#">Program Income Report</a>		



## Program Income Report

NOTE: This report should reflect Program Income only related to this grant program.

### 1. DEFINITIONS:

A. "Program Income" means gross income earned by the grantee during the funding period as a direct result of the project. Federal funds received through a grant are NOT considered to be program income.

B. "Direct Result" means a specific act or set of activities which are directly attributable to grant funds and directly related to the goals and objectives of the project.

Does this program have program income, as defined within the Program Income Report Instructions? If No, please disregard the remainder; otherwise, please complete the following information:

**Program Income:**\*  Yes  No

The amounts within this section should agree with the amounts reported for the ending balance on any prior report.

**Balance at Beginning of Quarter:**

We (the Project Director and Financial Officer), by placing a checkmark within this box, hereby certify that Program Income has been expended on this program participants only.

**Verification:**

## Program Income for Period & Year to Date

The amounts reported within this section should correspond to the accounting records of the reporting agency. Furthermore, this section does not correspond to any federal funds received by the agency.

Row	Income for Quarter	Income YTD
Forfeitures	<input type="text" value="\$0.00"/>	<input type="text" value="\$0.00"/>
Fees	<input type="text" value="\$0.00"/>	<input type="text" value="\$0.00"/>
Interest	<input type="text" value="\$0.00"/>	<input type="text" value="\$0.00"/>
Other	<input type="text" value="\$0.00"/>	<input type="text" value="\$0.00"/>

## Program Expenditures for Period & Year to Date

The amounts reported within this section should correspond to the accounting records of the reporting agency. Do not include federal portions of grant expenditures.

Row	Expenditures for Quarter	Expenditures YTD
Grant Match	<input type="text" value="\$0.00"/>	<input type="text" value="\$0.00"/>
Equipment	<input type="text" value="\$0.00"/>	<input type="text" value="\$0.00"/>
Personnel	<input type="text" value="\$0.00"/>	<input type="text" value="\$0.00"/>
Other	<input type="text" value="\$0.00"/>	<input type="text" value="\$0.00"/>

[Return to Top](#)

# PROGRAM INCOME

- Income collected as a result of the program. Broad language.
- Must be spent on or before September 30.
- Must be spent on the program only.
- Must be a \$0 balance by the end of the fiscal year. In other words, every penny of program income must be expended.
  - Fiscal year to fiscal year; not quarter to quarter.
- This is a big deal for the federal grants. Be sure to get it right.

# THE BI-ANNUAL REPORT IN WEBGRANTS

- *For OHSP and Byrne only.*
- This includes the “employee time certification.”

## Grant Tracking

Status Report: | - 05

Grant: **FY 2015 OHSP - Sobriety Court**

Status: Editing

Program Area: Office of Highway Safety Planning (OHSP) CFDA 20.601

Grantee Organization: Circuit Court - County

Program Manager: Thomas Myers

### Components

[Preview](#) | [Submit](#)

Complete each component of the status report and mark it as complete. Click Submit when you are done.

Name	Complete?	Last Edited
<a href="#">General Information</a>	✓	11/26/2014
<a href="#">Employee Time Certification</a>		

 **Grant Tracking**

Status Report: - 05

Grant: **FY 2015 OHSP - Sobriety Court**

Status: Editing

Program Area: Office of Highway Safety Planning (OHSP) CFDA 20.601

Grantee Organization:

Program Manager: Thomas Myers

**Employee Time Certification**

[Mark as Complete](#) | [Go to Status Report Forms](#)

To access the Employee Time Certification Form, please click [here](#).  
After the form has been signed by each individual listed in the personnel section of your budget, attach the forms in this section.

To access instructions for completing the form, please click [here](#).

For a tutorial regarding completing the Bi-annual Employee Time Certification, click [here](#).

Description	File Name
-------------	-----------

Last Edited By:

**SCAO Byrne Justice Assistance Grant (Byrne JAG) Grant and  
Office of Highway Safety Planning (OHSP) Grant**

**Employee Time Certification**

**For compliance with ADM-214 (4/2011) Michigan State Police Grants Management Section**

<b>Grantee (Court Name)</b> [REDACTED]	<b>SCAO Contract Number</b> [REDACTED]	<b>SCAO Project Numbers</b> 2013-MU-BX-0051 AL-14-05
---	---	--

**This program does not have personnel charged to this grant. If box is checked, please disregard the remainder; otherwise, complete the following information.**

**Reporting Period**

1st Period (10/1 - 3/31)       2nd Period (4/1 - 9/30)

The following percentage of time spent on the respective grant program for the reporting period specified is indicated below. This percentage is supported by time sheets and reflects actual work time.

GRANT PROGRAM	% OF TIME	DATES	
		FROM:	TO:
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]

**CERTIFICATIONS**

Employee has placed his/her signature below as certification of the above. Project Director or Supervisor places his/her signature below as concurrence of the above.

Employee Name [REDACTED]	Employee Signature	Date [REDACTED]
Project Director or Supervisor Name [REDACTED]	Project Director or Supervisor Signature	Date [REDACTED]

**AUTHORITY:** 1935 PA 59, as amended.  
**COMPLIANCE:** Mandatory  
**PENALTY:** Grant funds will be withheld if not returned to SCAO within 30 days of the end of the reporting period.

# THE ANNUAL REPORT IN WEBGRANTS

- *For OHSP and Byrne only.*
- This includes the “program income verification.”

## ***Program Income Verification***

---

**If your grant project will NOT earn income, place a checkmark in the**

*We (the Project Director and Financial Officer), by placing a checkmark within this box, hereby certify that the above-referenced grant does not earn income that can be defined as program income. We have placed our signatures below as certifications as such.*

**Earn Program Income?\***

**Project Director Name:\***

**Date:\***

**Financial Officer Name:\***

**Date:\***

# QUESTION & ANSWER

# SCAO Problem-Solving Court Team

Lauren Fetner  
517-373-0260

[fetnerl@courts.mi.gov](mailto:fetnerl@courts.mi.gov)

WebGrants Manager  
Grants: UDCI, RDWI  
Veterans Court

Dian Gonyea  
517-373-4854

[gonyead@courts.mi.gov](mailto:gonyead@courts.mi.gov)

DCAS and Data Manager

Dana Graham  
517-373-2218

[grahamd@courts.mi.gov](mailto:grahamd@courts.mi.gov)

DCCMIS Manager  
Grants: MI Drug Court  
Veterans Court

Michele Muscat  
517-373-0954

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Data Manager  
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**THANK YOU!**

# Attachment



# A

## Michigan Supreme Court

State Court Administrative Office  
Trial Court Services Division  
Michigan Hall of Justice  
P.O. Box 30048  
Lansing, Michigan 48909  
Phone (517) 373-4835

Jennifer Warner  
Director

### MEMORANDUM

DATE: April 3, 2014  
TO: Project Directors  
FROM: Jessica Parks, Problem-Solving Courts Manager  
RE: Changes to Subcontract Requirement

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Effective immediately, the requirements for submitting subcontracts to the State Court Administrative Office for problem-solving court and Swift and Sure Sanctions Probation Program grants have changed. Instead of requiring subcontracts for all persons or entities listed in the contractual section of your budget, you are now only required to submit subcontracts for persons or entities defined as subrecipients in the new Office of Management and Budget Federal Register, Volume 78, Number 248 (<http://www.gpo.gov/fdsys/pkg/FR-2013-12-26/pdf/2013-30465.pdf>). Section 200.330 dictates the distinction between a subrecipient and a contractor (previously referred to as a vendor). Subcontracts for contractors are now optional.

I have created the below checklists in the budget template in WebGrants grant applications for you to use to determine if each person or entity in the contractual section of your budget is a subrecipient or a contractor. Additionally, I have added the checklist to the contract amendment form in WebGrants. If you answer yes to three or more questions under the Subrecipient heading of the checklist, the person or entity is a subrecipient for which you must submit a subcontract in WebGrants. Failure to submit a subcontract for a subrecipient will result in withholding of reimbursement for that line item. If you answer yes to three or more questions under the Contractor heading of the checklist, the person or entity is a contractor and subcontracting is optional. Subcontract are not required and payment will not be withheld for contractors. A person or entity cannot be both a subrecipient and a contractor.

#### Subrecipient

1. Does this person or entity assist in determining who is eligible to participate in the program?

2. Does this person or entity have their performance measured in relation to whether objectives of this program are met?
3. Does this person or entity have responsibility for some programmatic decision making?
4. Is this person or entity responsible for adherence to requirements of this grant award?
5. Does this person or entity work to fulfill the purpose of this grant program as opposed to providing a good or service for the benefit of the court?

Contractor

1. Does this person or entity provide goods or services within normal business operations?
2. Does this person or entity provide similar goods or services to many different purchasers?
3. Does this person or entity normally operate in a competitive business environment?
4. Does this person or entity provide goods or services that are ancillary to the operation of this grant program?
5. Is this person or entity NOT responsible for compliance to the requirements of this grant award?

In addition to verifying that subcontracts for subrecipients are loaded in WebGrants before reimbursements are dispersed, subrecipient subcontracts will be reviewed as a part of on-site program monitoring.

If you have any questions, feel free to contact me by e-mail at [parksj@courts.mi.gov](mailto:parksj@courts.mi.gov) or by phone at 517-373-6285.

# Attachment



## B

### Michigan Supreme Court

State Court Administrative Office

Trial Court Services Division

Michigan Hall of Justice

P.O. Box 30048

Lansing, Michigan 48909

Phone (517) 373-4835

Jennifer Warner  
Director

### MEMORANDUM

DATE: October 24, 2014

TO: Problem-Solving Court Project Directors

FROM: Jessica Parks

RE: Guidelines for Claims Backup Documentation

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State Court Administrative Office (SCAO) Problem-Solving Court grant programs are reimbursement programs, meaning that courts must expend local funds and then submit claims to request reimbursement of their allowable expenses from the grant. The claim request must include backup documentation that substantiates the expenditures. Below are guidelines for appropriate types of backup documentation to submit with claims in order to expedite claim processing and payment.

#### Personnel Expenses

Individuals whose salary is charged to a grant fall into one of two categories: those who have all of their salary charged to a grant and those who have a portion of their salary charged to a grant. In cases where a portion of an individual's salary is charged to a grant, proper backup documentation includes a time sheet that identifies the portion of the individual's time that was spent on grant-related activities and the portion spent on other activities, even if those other activities are charged to a different grant. The time sheet should include a separate column for each grant and a column for leave time (vacation or sick leave, for example). The number of hours per month will vary depending on the number of days in each month and the placement of weekends. The employee should certify the time sheet is accurate with his or her signature and date. Attachment 1 is an example of a personnel time sheet. If all of an individual's salary is charged to a single grant, a time sheet is not necessary.

The table below will help you determine if a time sheet for personnel charged to a grant is necessary.

	One Grant		More than One Grant	
	Part-Time Employee	Full-Time Employee	Part-Time Employee	Full-Time Employee
All Activities are Grant Funded	No Time Sheet	No Time Sheet	Time Sheet	Time Sheet
A Portion of Activities are Grant Funded	Time Sheet	Time Sheet	Time Sheet	Time Sheet

In addition, courts must include a copy of a detailed general ledger, budget and expenditure report, or payroll journal produced by an accounting system for the reporting period as back-up documentation. The documentation must identify each employee being charged to the grant and include detailed entries of the costs incurred in addition to a total. If fringe benefits are charged to a grant, they must be in equal proportion to the hours worked on the grant and the individual benefits and amounts must be identified on the payroll document. While each county's payroll documents differ, an example of appropriate payroll documentation can be found as Attachment 2.

Please remember that employees funded with federal grants must also submit an Employee Time Certification through WebGrants twice each year. The Employee Time Certification must be signed by the employee and his or her supervisor.

#### Subrecipient Subcontractors Charged to Contractual Expenses

Subrecipient subcontractors must submit documentation to the court for payment. You should require documents that include their name or agency association, dates worked, hourly or per unit rates, hours or units included in the invoice, a description of the work completed, and a total invoice cost. If a subrecipient subcontractor works on more than one grant, a time log showing how all of their time was divided among the grants is appreciated. Additionally, including your accounting department's account number on the invoice is helpful. An example of an invoice is included as Attachment 3.

If you have a federally-funded grant, auditors may look for the same level of detail for your county- or city-funded employees as SCAO requests for subrecipient subcontractors. Keeping similar records for all subcontractors is prudent.

#### Vendor Invoices, Supplies, and Mileage

Vendor invoices and receipts for supplies should include the name of the vendor, date(s) of service(s), unit or hourly rate, number of units or hours, and a total amount to be charged to the grant. Mileage logs should include a name, the date of travel, the number of miles traveled, the purpose of the travel, the reimbursement rate per mile, and the total amount to be charged to the grant. For items like incentives and gas cards, it is best to keep a log onsite of who the items were distributed to in case you are audited.