

Instruction Sheet for the FY16 EMPG Performance Report -Cumulative-

Part I: General Information Table

Purpose: The information being requested will identify the Cal OES subrecipient (i.e. County Operational Area/Tribal Nation), their Cal OES identification number, the date the report was completed, the period being reported on, and the grant number associated with the performance report.

Instructions: Provide the following required general information.

Jurisdiction: Enter the County Operational Area or Tribal Nation name.

Cal OES ID#: Enter the California Governor's Office of Emergency Services identification number assigned to the County Operational Area/Tribal Nation; such as 000-00000. The Cal OES identification number is located on the upper, left-hand corner of the Financial Management Forms Workbook's (FMFW) Grant Subaward Face Sheet.

Date of Report: Identify the date the report is completed. This date must be on or after the final day of the most recent quarter being reported.

Reporting Period: Identify the beginning and ending dates of the reporting period in this cumulative performance report from the drop down menu; otherwise, utilize the M/D/YY format, such as July 1, 20XX - September 30, 20XX; July 1 - December 31, 20XX; July 1 20XX - March 31, 20XX; July 1, 20XX - June 30, 20XX.

If a Cal OES subrecipient's award period is extended beyond the fiscal year, select "5th Quarter or Additional Period" from the drop down list, or else continue utilizing this aforementioned format. If the new period of performance end date does not coincide with the above identified reporting period end dates, input the revised period of performance end date that was identified in the Notification of Amendment Approval letter. For example, if an extension was approved, by Cal OES, until August 31, 20XX then the reporting period identified on the performance report, for the extended period, would be identified as July 1, 20XX - August 31, 20XX.

Note: All performance reports for FY16 EMPG are **CUMULATIVE**. The performance report must be updated quarterly with cumulative information. As a result, all tallied data will be reported successively in an ongoing fashion. Therefore, all reported data provided in previously submitted EMPG performance reports must be included in all subsequent EMPG performance reports submitted throughout the FY16 EMPG Program award period.

Subaward Number: This would be the Cal OES subaward number associated with this specific grant. The Cal OES subaward number is located on the upper, right-hand corner of the Financial Management Forms Workbook's (FMFW) Grant Subaward Face Sheet.

Part II: Grant Activities Table

Purpose: The data in this template will be used to evaluate the timely completion of planned emergency management activities.

Instructions: Report on activities and/or projects supported with FY16 EMPG Program funds.

Activity: List each of the specific projects identified in your application. **Each activity identified in the FMFW must be listed in the Activity column of this report.**

Note: The “Activity” identified must coincide with the Project Letter and Project Name identified in the Cal OES subrecipient’s approved Financial Management Forms Workbook (FMFW).

Task(s) to be completed: List the specific task(s) to be completed that are associated with the corresponding FMFW Project Letter and Name.

Status: List the current status of the corresponding activity to be completed by choosing Complete, Delayed, or Ongoing from the drop-down menu.

Activity Summary: Describe what was done from start to finish on this activity for each quarter.

Note: If activity status is identified as “Delayed,” then provide additional details in the Activity Summary explaining the specific causes for the delay, as well as provide a prognosis (forecasted date or timeline) of when the delayed activity will begin/continue.

Part III: Personnel Data Table

Purpose: This data requested will assist in documenting the extent to which EMPG Program funding contributes to enhancing or sustaining emergency management capacity in terms of personnel support at the Operational Area level.

Instructions: Report data pertaining to emergency management personnel and FY16 EMPG Program funds.

All EMPG Program funds (Federal and match) allocated towards Operational Area emergency management personnel (County, City, Town, Tribal): List the total amount of EMPG Program funds (both federal grant dollars and local match dollars) allocated toward Operational Area emergency management personnel. Operational Area emergency management personnel include emergency management personnel at all local levels, such as the county; city; town, special district; and tribal levels, as applicable.

Total number of Operational Area emergency management personnel supported (fully or partially) by the EMPG Program: List the total number of Operational Area emergency

management personnel whose salary-related costs are paid for (fully or partially) by federal grant funds from the EMPG Program.

Note: Emergency management personnel are all personnel who perform emergency management-related functions. This would include EMPG Program Management and Administration (M&A) staff.

Additional Information: Detailing the total amount of EMPG Program funds (both federal and local match dollars) is not required in response to the first question. However, historically some jurisdictions have provided a breakdown of the total funds and total personnel, detailing the specific amounts of funding and specific personnel from each of the subrecipients (as defined in 2 CFR §200.93). Doing so is optional and voluntary. If desired, that information can be provided in this section.

Part IV: Training Data Table

Purpose: The data requested will be used to assess grant-funded training.

Instructions: Report data on training sessions that are funded with FY16 EMPG Program funds.

Name of Training: List the name of the EMPG-funded training course.

EMPG Required? (Yes/No): Is the course required of EMPG-funded personnel? Click Yes or No.

Note: Training courses required of EMPG-funded personnel include the following: IS-100; IS-200; IS-700; IS-800; IS-120; IS-230; IS-235; IS-240; IS-241; IS-242; and IS-244.

Number of Personnel Trained: List the total number of personnel (both EMPG and Non-EMPG-funded personnel) who were trained in the identified EMPG-funded training course.

Total Number of EMPG Program-Funded Personnel: List the total number of Operational Area EMPG-funded personnel.

Note: ‘EMPG-funded personnel’ are individuals whose salary is paid, fully or partially, by the FY16 EMPG Program. While ‘Non-EMPG-funded personnel’ are individuals whose salary is not paid for, fully or partially, by FY16 EMPG Program but whose attendance at the training was supported (i.e., paid for) by the FY16 EMPG Program.

Hint: The ‘Total number of EMPG-Funded Personnel’ is the same response as that provided under Part III: Personnel Data Table, Total number of Operational Area emergency management personnel supported (fully or partially) by the EMPG Program.

Total Number of EMPG Program-Funded Personnel That Completed the Course: List the total number of Operational Area EMPG Program-funded personnel who completed the identified training course.

Training Identified in TEP: Click the appropriate box, “Yes” or “No,” to identify whether or not the training was identified in the Multi-Year Training & Exercise Plan (TEP).

Part V: Exercise Data Table

Purpose: The data requested will be used to assess grant-funded exercises.

Instructions: Report data on exercises that are conducted in whole or part with FY16 EMPG Program funds.

Exercise Name: List the name of the exercise.

Date(s) of Exercise: List the date or dates (in month/day/year format) that the exercise was conducted.

Type of Exercise: Identify the type of exercise. Exercise types include the following: Seminar, Workshop, Tabletop, Game, Drill, Functional, and Full-Scale.

Number of EMPG-Funded Personnel Participating: Input the total number of EMPG-funded personnel who participated in the exercise.*

*Subrecipients (as defined in 2 CFR §200.93) must retain exercise sign-in sheet(s) that support this data with their FY16 EMPG case file.

Number of EMPG Program-Funded Personnel Participating in Exercise: List the total number of EMPG-funded personnel who participated in the exercise.

Exercise Identified in TEP: Click the appropriate box, “Yes” or “No,” to identify whether or not the exercise was identified in the Multi-Year Training & Exercise Plan (TEP).

Date AAR Completed: If the Subrecipient (as defined in 2 CFR §200.93) or Tribe was the host of the identified exercise, input the date (in month/day/year format) when the After Action Report/Improvement Plan (AAR/IP) associated with the reported exercise was completed. Conversely, if the Subrecipient (as defined in 2 CFR §200.93) or Tribe was not the exercise host and was only a participant in the exercise then select “N/A” indicating the exercise was not hosted just below the date input field.

Note: ‘AAR Completed’ refers to the following if the grant-funded entity, i.e., the subrecipient (as defined in 2 CFR §200.93) or Tribe, was the exercise host: 1.) AAR/IP was completed by the appropriate grant-funded entity; 2.) AAR/IP has been e-mailed to both, hseep@fema.dhs.gov and the appropriate Cal OES EMPG Program Specialist.

Part VI: EMPG Program-Funded Personnel Training Record

Purpose: The data requested will be used to identify the EMPG Program-funded personnel along with the completion of FY16 EMPG grant-required training.

Instructions: Report data on EMPG Program-funded personnel and their completion of FY16 EMPG required training.

EMPG-Funded Personnel -Name: Vertically list the full name(s), i.e., first and last name, of the (EMPG-funded) personnel whose salary is being paid for (in part or full) by FY16 EMPG grant funds.

NIMS Training (IS 100; IS 200; IS 700; IS 800) - Completion Dates (M/D/Y): Upon a specific EMPG Program-funded personnel's completion of a required NIMS training course, input the date the training was completed (in M/D/YY format) in the corresponding horizontal box to the right of the identified personnel's name that is associated with the completed NIMS training.

FEMA Professional Development Series (IS 120; IS 230; IS 235; IS 240; IS 241; IS 242; IS-244) - Completion Dates (M/D/Y): Upon a specific EMPG Program funded personnel's completion of a required FEMA Professional Development Series training course, input the date the training was completed (in M/D/YY format) in the corresponding horizontal box to the right of the identified personnel's name that is associated with the completed FEMA Professional Development Series training.

NOTE: EMPG-funded personnel completing the "National Emergency Management Basic Academy" in lieu of the FEMA Professional Development Series will report their progress towards completing the required training in Part IX: Other Significant EMPG-Funded Accomplishments. Reported data must include the employee's full name, name of the training, and the date the training was completed.

Number of EMPG Funded Personnel: List the total number of FY16 EMPG Program-funded personnel.

Trainings Required: Input the numerical answer for the following calculation: total number of FY16 EMPG Program-funded personnel multiplied by required trainings (11).

Trainings Completed: List the total number of completed trainings by all EMPG Program-funded personnel, as identified by the number of entry fields with "M/D/YYs" listed in the FY16 EMPG Program-Funded Personnel & Training Record.

Percentage Completed: Input the numerical answer for the following calculation: Divide the Trainings Completed by the Trainings Required. The answer will be the total percentage of FY16 EMPG required training completed by all FY16 EMPG Program-funded staff.

Part VII: EMPG Program Funded Personnel & Exercise Record

Purpose: The data requested will be used to identify the EMPG Program-funded personnel along with the completion of FY16 EMPG grant required exercises (3 exercises in a 12-month period).

Instructions: Report data on EMPG Program-funded personnel and their completion of FY16 EMPG required exercises (3 exercises in a 12-month period).

EMPG-Funded Personnel - Name: Vertically list the full name(s), i.e., first and last name, of the (EMPG-funded) personnel whose salary is being paid for (in part or full) by FY16 EMPG grant funds.

Exercise 1 - Input Name of Exercise & Date of Exercise: Upon a specific EMPG Program-funded personnel's completion of their first required FY16 EMPG exercise, i.e., "Exercise 1," input both the exercise name and date of exercise (in M/D/YY format) in the corresponding horizontal boxes, which are located to the right of the identified personnel's name that is associated with the successful completion of the first required exercise.*

Exercise 2 - Input Name of Exercise & Date of Exercise: Upon a specific EMPG Program-funded personnel's completion of their second required FY16 EMPG exercise, i.e., "Exercise 2," input both the exercise name and date of exercise (in M/D/YY format) in the corresponding horizontal boxes, which are located to the right of the identified personnel's name that is associated with the successful completion of the second required exercise.*

Exercise 3 - Input Name of Exercise & Date of Exercise: Upon a specific EMPG Program-funded personnel's completion of their third required FY16 EMPG exercise, i.e., "Exercise 3," input both the exercise name and date of exercise (in M/D/YY format) in the corresponding horizontal boxes, which are located to the right of the identified personnel's name that is associated with the successful completion of the third required exercise.*

*Subrecipients (as defined in 2 CFR §200.93) must retain exercise sign-in sheet(s) that support this data with their FY16 EMPG case file.

Number of EMPG Funded Personnel: List the total number of FY16 EMPG Program-funded personnel.

Exercises Required: Input the numerical answer for the following calculation: total number of FY16 EMPG Program-funded personnel multiplied by required exercises (3).

Exercises Completed: List the total number of completed exercises by all EMPG Program-funded personnel, as identified by the number of entry fields with "M/D/YYs" listed in the FY16 EMPG Program-Funded Personnel Exercise Record.

Percentage Completed: Input the numerical answer for the following calculation: Divide the Exercises Completed by the Exercises Required. The answer will be the total percentage of FY16 EMPG required exercises completed by all FY16 EMPG Program-funded staff.

Part VIII: Multi-Year Training and Exercise Plan (TEP)

Purpose: The data requested will be used to identify whether or not the FY16 EMPG requirements associated with the Multi-Year Training and Exercise Plan were met.

Instructions: Report on activities pertaining to the completion, submission, and updating of an FY16 EMPG Multi-Year Training and Exercise Plan.

Was a Multi-Year TEP submitted electronically to the appropriate Cal OES Exercise Division POC and EMPG Program Specialist? Indicate whether or not you completed this activity by clicking “Yes” or “No.”

Was a hardcopy of the Multi-Year TEP submitted to Cal OES, on a one-time basis, with a performance report? Indicate whether or not you completed this activity by clicking “Yes” or “No.”

Was the Operational Area Multi-Year TEP updated annually, as required under FY16 EMPG? Indicate whether or not you completed this activity by clicking “Yes” or “No.”

Part IX: Other Significant EMPG-Funded Accomplishments

Purpose: The data requested will be used to identify other significant accomplishments that occurred with EMPG Program funds that were not captured elsewhere in the reporting document.

Instructions: List any other significant accomplishments that occurred that you would like to discuss pertaining to your Operational Area’s use of FY16 EMPG Program funds that were not captured or discussed in other areas of the performance report.

Part X: Certification of Reported Activities

Certification: Have the Authorized Agent sign this form. Print the name, title, and date as well.

FY16 EMPG Performance Report Submission and Mailing Instructions

Electronic Submission Instructions: Prior to obtaining an Authorized Agent signature and mailing in the hardcopy of the performance report please submit an electronic copy via e-mail to your EMPG Program Specialist for review. After EMPG Program Specialist review, if the performance report document is approved for hardcopy submission to Cal OES, the EMPG Program Specialist will then direct the Cal OES subrecipient to submit the Authorized Agent signed hardcopy of the report. Follow the below mailing instructions when mailing the hardcopy.

Mailing Instructions: Mail the hardcopy performance report with “original” Authorized Agent signature to your Cal OES Grants Management Section, EMPG Program Specialist, as instructed below:

Cal OES
Attn: EMPG Program Specialist’s Name (First and Last)
Emergency Management Grants Unit
3650 Schriever Avenue
Mather, CA 95655