

Date of Visit:

Arizona Department of Homeland Security

Final Review	Staff Initials	Date
□Planner		
☐ Finance Staff		
□Equipment		
□Supervisor		

Section A: Administrative and Background Information

Location of Site Visit: Subrecipient Address Date of Notification Letter: Enter Date

AZDOHS Staff Conducting the Site Visit:

Name	Title/Position
Select Name	Choose an item.

Subrecipient:

Subrecipient Staff Present (Including name, department, and title/position):

Name	Department	Title/Position
Enter Name	Enter Department	Enter Title/Position
Enter Name	Enter Department	Enter Title/Position
Enter Name	Enter Department	Enter Title/Position
Enter Name	Enter Department	Enter Title/Position
Enter Name	Enter Department	Enter Title/Position
Enter Name	Enter Department	Enter Title/Position

Grants Reviewed:

Grant Number	Grant Source	Performance Period	Ext. (Y/N)	PCF (Y/N)	Qtr 1	Qtr 2	Qtr 3	Qtr 4	Qtr 5	Qtr 6	Qtr 7	Qtr
	Source											
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The Monitoring Checkist.

\square Fin	ance					
•	If applicable, is subrecipient current on audits (Within 9 months of end of fiscal year)? Review and discuss with					
	monitoring team any findings that should be addressed during the site visit.					
•	Review Reimbursement requests, master reports and any pending items.					
	 Summary of items to address during visit: 					
	 Are reimbursements submitted regularly? Yes No 					
	 Do reimbursement request forms include all information such as dates, signatures and support 					
	documentation?					
	Yes No					
	 Are there recurring errors? Yes No 					
	What is the date of the most recent procurement policy on file at AZDOHS?					
	If applicable, what is the date of the most recent payroll/overtime policy on file at AZDOHS?					
•	Are there financial special conditions related to the grant? If so, what are they? (i.e. audit findings, AZDOHS holds,					
	match requirements, subrecipient restrictions)					
						
	ogrammatic					
•	Subrecipient Agreement					
	Performance period					
•	Reallocations / Extensions / Modifications					
	Was an extension/modification granted?					
	Is amendment documentation in file, and does it include appropriate signatures?					
•	Do the reimbursements correspond with the percentage of completion indicated in the quarterly report?					
□ Qu	arterly Reports					
•	Are all quarterly reports current?					
•	What is the percentage of completion?					
•	Is there any concern about completion of the project within the remaining of the performance period?					
•	If the project is primarily equipment purchases, are there delays in getting the equipment purchases made?					
□Res	sponds in a timely manner to inquiries from the AZDOHS? Yes No					
□ Equ	uipment - EHP (Environmental and Historic Prevention)					
•	Did the award require an EHP "B" approval and is notification in the grant file?					
•	Is the EHP approval in the grant file (spreadsheet)?					
•	If EHP applicable, date of most recent correspondence:					
Sumn	nary of items to address during visit:					

Section B: Financial and Administrative Review:

Vendor	Invoice Number	Invoice Date	Check Number/ EFT #	Check Date	Amount Reimbursed	Grant Number	Does Invoice agree w/ Check or itemized in remittance?	Authorized for Payment?	Were items invoiced and received prior to the end of the subrecipient agreement?
OPSG Review of Subrecipient's grant file	Reimbursement Packet - Total Amount Submitted	AZDOHS Received Date	Total number of OT hours in their packet agrees with number submitted to AZDOHS (Y/N)	Payroll payment to officers verified (Y/N)	Amount Reimbursed	Grant Number	Does reimbursem ent packet mirror the one received at AZDOHS? (Y/N)	Authorizing signature on OT/Mileage Log in subrecipient records (Y/N)	Hours reported on Overtime log match Payroll (Y/N)

Comments:

Finance		
I.	Does the subrecipient(s) master grant file include the following (Check only those that apply):	
	☐ Grant award letter	
	☐ Subrecipient agreement	
	☐ Amendments	
	\square Invoices, and/or receipts and purchase orders to support reported expenditures	
	☐ Copies of reimbursement requests	
	☐ Quarterly reports	
	a. Who maintains the file? <u>Click here to enter text.</u>	
	b. Are fiscal records for the grant kept in a secure location?	☐ Yes ☐ No
II.	Has a fund(s) or account(s) in subrecipient's accounting system been established that identifies the revenues and expenses associated with the grants independently from all other funds whether they are local or federal funds?	☐ Yes ☐ No
	a. If yes, what is/are the account codes/numbers?	
	Click here to enter text.	
	 If no, how are funds tracked? (Provide subrecipient reference: 2 CRF 200.302) 	
	Click here to enter text.	
	c. Does the financial system have notation capability to identify the CFDA number, Federal Award ID number and year, name of Federal Agency, and name of pass- through agency (AZDOHS)?	☐ Yes ☐ No
	d. Is the CFDA information contained in the financial system? (Subrecipient should have notation in accounting system whether electronic/automated or manual.)	☐ Yes ☐ No
	Click here to enter text.	
	(Note: Compare against invoices when expenditures are reviewed. If not the same, you may need to discuss with the appropriate individuals.)	
III.	Explain the system(s) in place that are used by the project manager and finance staff to mo	unitor hudgots
111.	and actual costs on an ongoing basis. Who monitors, and who's informed of budget statu	-
	Click here to enter text.	
IV.	Are internal financial reports on the grants maintained and kept current? Who reconciles, and how often are they reconciled? (names/titles)	☐ Yes ☐ No
	Click here to enter text.	

V.	Does the relevant staff have knowledge of the Super Circular OMB 2 CFR 200?	☐ Yes ☐ No
	www.ecfr.gov If not, remind them that this is a requirement of the grant and identified in the	
	subrecipient agreement.	
Person	□ N/A	
VI.	Are grant funds being used to supplement existing budgets, and not to supplant	☐ Yes ☐ No
	budgets? Supplanting budgets with grant funds is unallowable.	
VII.	Are time and effort reports in the grant file?	☐ Yes ☐ No
VIII.	Are time and effort reports reviewed before payroll is processed? If so, by whom?	☐ Yes ☐ No
	Click here to enter text.	
IX.	Is the agency participating in the E-Verify program?	☐ Yes ☐ No
	If not or if uncertain, have the subrecipient contact their HR department to verify. (Note: Tribal entities are not required to participate in E-Verify)	
	Subrecipient representative affirms the organization meets compliance	☐ Yes ☐ No
	with applicable provisions of laws and policies prohibiting discrimination	
	as described in the Subrecipient Agreement.	
	Affirming Representative Name: Click here to enter text.	
	Annual Stephesentative name: Stephese to enter texts	
-	on Stonegarden	□ N/A
X.	Date of the most recent overtime policy on file with AZDOHS (refer to pg. 2) Enter Date (Date should be entered during pre-site meeting.)	
	Is there an updated version available? <i>If yes,</i> obtain a copy during the site visit. (If representative is unable to verify whether there is an updated version, request representative to inquire and follow-up with an email.) Enter Date	☐ Yes ☐ No
XI.	Are employee-related expenses (ERE) calculated only on Public Safety Retirement, Social Security, Medicare (FICA) and Worker's Compensation?	☐ Yes ☐ No
	Click here to enter text.	
Drocure	am ant	□ N/A
Profession	nal and Contractual Services:	
XII.	Are trainer/instructor/consultant services included in the grant award? This includes	
AII.	internal personnel hired on backfill/overtime to deliver training.	☐ Yes ☐ No
	If not, skip to Question XIV.	
	a. If yes, was the \$450 per day fee limitation observed or was a waiver approved?	☐ Yes ☐ No
XIII.	Were State and local procurement procedures and laws followed?	☐ Yes ☐ No
	a. Was a competitive bid process, when applicable, adhered to when contract was awarded? Request to see evidence of the bidding process (i.e., copy of other bids or other paperwork).	☐ Yes ☐ No ☐ N/A — No purchases made at this time.

XIV.	Is subrecipient a member of the State Cooperative?	☐ Yes ☐ No
	If not, inform them that the Cooperative allows them to procure items on State	
	contract. Information on the State Cooperative is available at	
	https://spo.az.gov/programs/cooperative	
XV.	Are written policies and procedures related to grants management, accounting and	☐ Yes ☐ No
	procurement available to relevant staff? If not, explain why.	
	Click here to enter text.	
	 Date of the most current procurement policy on file with AZDOHS (refer to page 2): Enter Date 	
	Is there an updated version of the policy available?	☐ Yes ☐ No
	If yes, obtain a copy during the site visit.	
	Enter Date Click here to enter text.	
Insuran	ice Coverage	
XVI.	Subrecipient representative affirms the organization maintains insurance coverage as	☐ Yes ☐ No
	described in 2 CFR §200.310.	
	(§ 200.310 Insurance coverage The non-Federal entity must, at a minimum, provide the equivalent insurance coverage for real property and equipment acquired or improved with Federal	
	funds as provided to property owned by the non-Federal entity. Federally-owned property need	
	not be insured unless required by the terms and conditions of the Federal award.)	
	Affirming Representative Name: Click here to enter text.	
Record	keeping	
	keeping Are all records (programmatic and fiscal) maintained for three (3) years after the close of	☐ Yes ☐ No
	Are all records (programmatic and fiscal) maintained for three (3) years after the close of the grant at the federal level as required by AZDOHS and the Arizona Department of	☐ Yes ☐ No
	Are all records (programmatic and fiscal) maintained for three (3) years after the close of the grant at the federal level as required by AZDOHS and the Arizona Department of Library, Archives, and Public Records? Exception : Property Control Records – 3 yrs.	☐ Yes ☐ No
	Are all records (programmatic and fiscal) maintained for three (3) years after the close of the grant at the federal level as required by AZDOHS and the Arizona Department of Library, Archives, and Public Records? Exception : Property Control Records – 3 yrs. after final disposition.	☐ Yes ☐ No
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Mat	Are all records (programmatic and fiscal) maintained for three (3) years after the close of the grant at the federal level as required by AZDOHS and the Arizona Department of Library, Archives, and Public Records? Exception: Property Control Records – 3 yrs. after final disposition. Who is responsible? Click here to enter text. Ch Requirements If applicable, how was the match requirement met?	□ N/A □ Cash □ In-kind
Mat xvIII. xIX.	Are all records (programmatic and fiscal) maintained for three (3) years after the close of the grant at the federal level as required by AZDOHS and the Arizona Department of Library, Archives, and Public Records? Exception: Property Control Records – 3 yrs. after final disposition. Who is responsible? Click here to enter text. Ch Requirements If applicable, how was the match requirement met? Subrecipient provided support documentation to meet match requirements.	□ N/A
Mat XVIII. XIX. Subre	Are all records (programmatic and fiscal) maintained for three (3) years after the close of the grant at the federal level as required by AZDOHS and the Arizona Department of Library, Archives, and Public Records? Exception: Property Control Records – 3 yrs. after final disposition. Who is responsible? Click here to enter text. Ch Requirements If applicable, how was the match requirement met?	□ N/A □ Cash □ In-kind
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Mat XVIII. XIX. Subre guida Print/	Are all records (programmatic and fiscal) maintained for three (3) years after the close of the grant at the federal level as required by AZDOHS and the Arizona Department of Library, Archives, and Public Records? Exception: Property Control Records – 3 yrs. after final disposition. Who is responsible? Click here to enter text. Ch Requirements If applicable, how was the match requirement met? Subrecipient provided support documentation to meet match requirements. ecipient representative verifying that match requirements were met in compliance with grant ance and applicable CFRs: Type Name: Click here to enter text. Signature: Click here to enter text. Date: Enter Date S-Through Funds	□ N/A □ Cash □ In-kind □ Yes □ No
Mat XVIII. XIX. Subre guida Print/ Pass (App	Are all records (programmatic and fiscal) maintained for three (3) years after the close of the grant at the federal level as required by AZDOHS and the Arizona Department of Library, Archives, and Public Records? Exception: Property Control Records – 3 yrs. after final disposition. Who is responsible? Click here to enter text. Ch Requirements If applicable, how was the match requirement met? Subrecipient provided support documentation to meet match requirements. ecipient representative verifying that match requirements were met in compliance with grant ance and applicable CFRs: (Type Name: Click here to enter text. Signature: Click here to enter text. Date: Enter Date is Through Funds (Icable when subrecipient subgrants funds awarded to them by AZDOHS)	□ N/A □ Cash □ In-kind □ Yes □ No
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Mat XVIII. XIX. Subre guida Print/ Pass (App XX.	Are all records (programmatic and fiscal) maintained for three (3) years after the close of the grant at the federal level as required by AZDOHS and the Arizona Department of Library, Archives, and Public Records? Exception: Property Control Records – 3 yrs. after final disposition. Who is responsible? Click here to enter text. Ch Requirements If applicable, how was the match requirement met? Subrecipient provided support documentation to meet match requirements. ecipient representative verifying that match requirements were met in compliance with grant ance and applicable CFRs: Type Name: Click here to enter text. Signature: Click here to enter text. Date: Enter Date S-Through Funds Ilicable when subrecipient subgrants funds awarded to them by AZDOHS) If applicable, how are subrecipients monitored with the pass-through funds? Click here to enter text.	□ N/A □ Cash □ In-kind □ Yes □ No □ N/A □ Yes □ No

	Section C: Equipment Monitoring (2 CFR 200.313) Equipment Monitoring: A control system must be deployed to ensure adequate safeguards to prevent loss, damage, or					
theft of the property. Any loss, damage or theft must be investigated.						
I.	Have digital photos been taken of the applicable equipment?	☐ Yes ☐ No ☐ N/A				
II.	What is the policy or procedure for conducting physical inventory (including the inventor-based, provide an excerpt that includes equipment purchased with grathe last inventory record.					
	Click here to enter text.					
III.	What is the subrecipient's maintenance policy (to include requirements and sched	ules)?				
	Click here to enter text.					
IV.	Explain the subrecipient's policy for disposition of equipment (i.e., sale, transfer, di (Note: Remind subrecipient of grant-funded equipment disposition threshold (\$5,000) an for equipment greater than \$5,000 in value)					
	Click here to enter text.					
V.	Does the property control record system include (check box if item is included):					
	☐ Description of equipment					
	☐ Serial number ☐ Purchase date					
	☐ Title					
	☐ Location and use					
	☐ Condition					
	☐ Disposition date and sale price, if applicable	Т				
VI.	Equipment Records – Subrecipient Advised Updated Property Control Forms are to be submitted when equipment					
	disposition occurs.	☐ Yes ☐ No				
	☐ Records for equipment acquired with grant funds must be retained for 3					
	years after final disposition.					
VII.	Operation Stonegarden – Equipment Marking (Effective FFY 2017)					
	When practicable, is equipment prominently marked "Purchased with DHS funds for Operation Stonegarden Use"?	☐ Yes ☐ No ☐ N/A				
Commen	ts: Click here to enter text.					

Section D: Program/Project Review Project Implementation (SHSGP, UASI, NSGP only) Review grants with subrecipient: a. Core Capability Impact: i. How will this project help your agency to achieve the capability target selected in the grant application? ii. How will the grant/project be sustained? Grant Open/ POETE Comments Number Closed Click here to Choose an Choose an Core Capability: Click here to enter text. item. item. enter text. Sustainment: Click here to enter text. Choose an Core Capability: Click here to enter text. Click here to Choose an item. enter text. item. Sustainment: Click here to enter text. Click here to Choose an Choose an Core Capability: Click here to enter text. enter text. item. item. Sustainment: Click here to enter text. Click here to Choose an Choose an Core Capability: Click here to enter text. enter text. item. item. Sustainment: Click here to enter text. Click here to Choose an Choose an Core Capability: Click here to enter text. enter text. item. item. Sustainment: Click here to enter text. Click here to Choose an Choose an Core Capability: Click here to enter text. item. enter text. item. Sustainment: Click here to enter text. Click here to Choose an Core Capability: Click here to enter text. Choose an enter text. item. item. Sustainment: Click here to enter text. Reporting and Communication Does the subrecipient submit quarterly reports in a timely manner, providing all required ☐ Yes ☐ No information and capturing project activities? Click here to enter text. ☐ Yes ☐ No III. Are there any issues/concerns that may impede the progress or implementation of the project within the period of performance?

Regionalization/Partnership

IV. Describe which agencies will benefit or have already benefited from this/these project(s).

Click here to enter text.

Click here to enter text.

Comr	nunity Engagement	
prepar	Community is an approach to emergency management. Collectively, we can leverage all of the ing for, protecting against, responding to, recovering from and/or mitigating against all hazards to grant-related activities, but rather to the community as a whole).	
V.	How do you engage/educate the community about your agency and the services it provides?	
	Click here to enter text.	
VI.	In what ways is outreach conducted with nonprofit organizations, faith-based communities, the functional needs populations, vulnerable populations, youth/children, etc.? Click here to enter text.	ne private sector,
Plann	ing	□ N/A
VII	. What were the accomplishments/outcomes (i.e., strategies, emergency response exercise(s), plans, etc.) <u>Click here to enter text.</u>	communication
Perso	nnel	□ N/A
VII	I. Are all grant-authorized positions filled? <i>If not,</i> please provide an explanation.	☐ Yes ☐ No
	Click here to enter text.	
IX.	Is a copy of personnel positions duties/responsibilities available?	☐ Yes ☐ No
Χ.	How does the subrecipient ensure position goals and objectives are achieved (i.e., personnel performance appraisals)?	
	Click here to enter text.	
Opera	ation Stonegarden	□ N/A
XI.	What is the pre-coordination process with CBP/BP?	
	Click here to enter text.	
XII.	How are OPSG overtime deployments internally scheduled?	
	Click here to enter text.	
XIII	. What is the post-deployment approval process?	
	Click here to enter text.	

Overview:						
Review or inform subrecipient of any processes/procedures or upcoming events.						
 □ Processes/Procedures □ Upcoming events (Meetings – RAC, SAC, OPSG, etc.) □ Modification and Extension forms □ Disposition of Equipment Policies □ Record Retention Policies 						
Comments: Click here to enter text.						
Additional Notes:						
Page Number Section Question Number Comments						
General Comments: Click here to enter text						
Section E: Post Site Visit Summary:						
\square No issues identified.						
☐ The items below were identified as areas for improvement. These issues do not constitute non-compliance and no formal follow-up is necessary:						
Click here to enter text. ☐ The project was found to be non-complian	t in the following areas:					
Click here to enter text. I. Recommendation:						
 □ None □ Submit Corrective Action Plan within 30 days: Enter Date □ AZDOHS staff conduct a follow-up site visit: Enter Date □ Other: Click here to enter text. 						
II. It is recommended that the AZDOHS assist the agency by providing technical assistance in the following areas: Click here to enter text.						