

U.S. Department of Commerce Performance Progress Report				2. Award or Grant Number:	50-10-S-13050
				4. EIN:	03-6000264
1. Recipient Name	Vermont Department of Public Safety			6. Report Date (MM/DD/YYYY)	3/31/2017
3. Street Address	45 State Drive			7. Reporting Period End Date: (MM/DD/YYYY)	3/31/2017
5. City, State, Zip Code	Waterbury, VT 05671-1300			8. Final Report Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	9. Report Frequency Quarterly <input checked="" type="checkbox"/>
<b>10a. Project/Grant Period</b>					
Start Date: (MM/DD/YYYY)	8/1/2013	10b. End Date: (MM/DD/YYYY)	1/31/2018		
<b>11. List the individual projects in your approved Project Plan</b>					
	Project Type (Capacity Building, SCIP Update,	Project Deliverable Quantity (Number & Indicator Description)	Description of Milestone Category		
1	Stakeholders Engaged	10	<i>Actual number of individuals reached via stakeholder meetings during the quarter</i>		
2	Individuals Sent to Broadband Conferences	0	<i>Actual number of individuals who were sent to third-party broadband conferences using SLIGP grant funds during the quarter</i>		
3	Staff Hired (Full-Time Equivalent)(FTE)	0	<i>Actual number of state personnel FTEs who began supporting SLIGP activities during the quarter (may be a decimal)</i>		
4	Contracts Executed	1	<i>Actual number of contracts executed during the quarter</i>		
5	Governance Meetings	1 (21) Attendees	<i>Actual number of governance, subcommittee, or working group meetings held during the quarter</i>		
6	Education and Outreach Materials Distributed	2,928	<i>Actual volume of materials distributed (inclusive of paper and electronic materials) plus hits to any website or social media account supported by SLIGP during the quarter</i>		
7	Subrecipient Agreements Executed	0	<i>Actual number of agreements executed during the quarter</i>		
8	Phase 2 - Coverage	Stage 4	<i>For each Phase 2 milestone category, please provide the status of the activity during the quarter:</i> <ul style="list-style-type: none"> <li>• Stage 1 - Process Development</li> <li>• Stage 2 - Data Collection in Progress</li> <li>• Stage 3 - Collection Complete; Analyzing/Aggregating Data</li> <li>• Stage 4 - Data Submitted to FirstNet</li> <li>• Stage 5 - Continued/Iterative Data Collection</li> <li>• Stage 6 - Submitted Iterative Data to FirstNet</li> </ul>		
9	Phase 2 – Users and Their Operational Areas	Stage 4			
10	Phase 2 – Capacity Planning	Stage 4			
11	Phase 2 – Current Providers/Procurement	Stage 5			
12	Phase 2 – State Plan Decision	Stage 5			
<b>11a. Describe your progress meeting each major activity/milestone approved in the Baseline Report for this project; any challenges or obstacles encountered and mitigation strategies you have employed; planned major activities for the next quarter; and any additional project milestones or information.</b>					
<p>In the first quarter our outreach focus was on preparing for the announcement of the winning bidder of the FirstNet RFP. We sent out both printed and E-newsletter editions to Vermont first responders to maintain contact with them and update them on the project. Upon the announcement of AT&amp;T as the winning bidder, we mailed a letter and project timeline from the SPOC to first responder leaders and updated our web site and Facebook page. We also successfully executed a contract for technical advising with Televate. This concluded a process that began in September to write an RFP, solicit and evaluate bids, and finally receive commission approval to execute a contract. Televate will provide technical support and advising to the Department of Public Safety and the Public Safety Broadband Network Commission as it goes through the review process of the draft state plan.</p>					

**11b. If the project team anticipates requesting any changes to the approved Baseline Report in the next quarter, describe those below. Note that any substantive changes to the Baseline Report must be approved by the Department of Commerce before implementation.**

No changes are anticipated as this time. However, we reserve the right to make changes as the Vermont program continues to develop.

**11c. Provide any other information that would be useful to NTIA as it assesses this project's progress.**

See remarks under box 11a.

**11d. Describe any success stories or best practices you have identified. Please be as specific as possible.**

We found the RFP and contracting procedures required to be followed to secure the expertise needed to evaluate Vermont's draft state plan to be a challenging process. Our team spent many hours researching appropriate text for our RFP and identifying qualified companies to perform such work. The contract represents a flexible tool that may be used by DPS and the commission to access the information and technical knowledge needed to responsibly evaluate the draft state plan and prepare a recommendation for our Governor. We would be happy to share our experience with other states seeking to put in place a similar tool to evaluate their state plans.

**12. Personnel**

**12a. If the project is not fully staffed, describe how any lack of staffing may impact the project's time line and when the project will be fully staffed.**

**12b. Staffing Table - Please include all staff that have contributed time to the project. Please do not remove individuals from this table.**

Job Title	FTE%	Project (s) Assigned	Change
IT Project Manager IV	100	Managing Education and Outreach, Project Managements of SLIGP, and contractor/sub-contractor management	Permanently Vacant New Position title added in April 2016
FirstNet Outreach Manager	100	Managing Education and Outreach, Project Managements of SLIGP, and contractor/sub-contractor management	
Project Manager	100	Temporary 100% FTE – Not to exceed 1,280 hours (State Funded Personnel)	
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**13. Subcontracts (Vendors and/or Subrecipients)**

**13a. Subcontracts Table – Include all subcontractors. The totals from this table must equal the "Subcontracts Total" in Question 14f.**

Name	Subcontract Purpose	Type (Vendor/Subrec.)	RFP/RFQ Issued (Y/N)	Contract Executed (Y/N)	Start Date	End Date	Total Federal Funds Allocated	Total Matching Funds Allocated
AppGeo	GIS Services and Technical advising	GIS Vendor	Y	Y	9/1/2015	10/30/2015		\$25,773.98
Televate	Technical support and advising	Personal Services Contract	Y	Y	3/1/2017	12/31/2017	\$90,000.00	

**13b. Describe any challenges encountered with vendors and/or subrecipients.**

No challenges.

<b>14. Budget Worksheet</b>						
Columns 2, 3 and 4 must match your current project budget for the entire award, which is the SF-424A on file. Only list matching funds that the Department of Commerce has already approved.						
Project Budget Element (1)	Federal Funds Awarded (2)	Approved Matching Funds (3)	Total Budget (4)	Federal Funds Expended (5)	Approved Matching Funds Expended (6)	Total funds Expended (7)
a. Personnel Salaries	\$262,926.00	\$81,364.00	\$344,290.00	\$115,803.00	\$64,175.00	\$179,978.00
b. Personnel Fringe Benefits	\$87,537.00	\$7,258.00	\$94,795.00	\$53,937.00	\$7,162.00	\$61,099.00
c. Travel	\$34,506.00	\$0.00	\$34,506.00	\$20,005.00	\$0.00	\$20,005.00
d. Equipment	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
e. Materials/Supplies	\$12,000.00	\$0.00	\$12,000.00	\$1,273.00	\$0.00	\$1,273.00
f. Subcontracts Total	\$178,285.00	\$89,113.00	\$267,398.00	\$0.00	\$25,765.00	\$25,765.00
g. Other	\$6,431.00	\$0.00	\$6,431.00	\$6,003.00	\$0.00	\$6,003.00
h. Indirect	\$129,256.00	\$0.00	\$129,256.00	\$37,925.00	\$0.00	\$37,925.00
i. Total Costs	\$710,941.00	\$177,735.00	\$888,676.00	\$234,946.00	\$97,102.00	\$332,048.00
j. % of Total	80%	20%	100%	71%	29%	100%
<b>15. Certification: I certify to the best of my knowledge and belief that this report is correct and complete for performance of activities for the purpose(s) set forth in the award documents.</b>						
<b>16a. Typed or printed name and title of Authorized Certifying Official:</b>				<b>16c. Telephone (area code, number, and extension)</b>	802-241-5216	
Terry LaValley, Radio Technology Services, Director, Vermont Department of Public Safety				<b>16d. Email Address:</b>	grantnotification@listserv.dps.state.vt.us	
<b>16b. Signature of Authorized Certifying Official:</b>				<b>Date:</b> 4/12/17		
						