



## NYE COUNTY BOARD OF COUNTY COMMISSIONERS AGENDA ITEM REQUEST FORM

<b>Department:</b> Finance	<b>Meeting Date:</b>
<b>Category:</b> Regular Agenda Item	April 4, 2023
<b>Prepared by:</b> Jessica McCutcheon, Grants Administrator	<b>Phone:</b> (775) 751-7091
<b>Presented by:</b> Ryan Muccio - NyECC	<b>Phone:</b> (702) 672-6559

**Action requested:** (Include what, with whom, when, where, why, and terms)

Presentation, discussion and deliberation to approve, amend and approve, or reject the program funding request from Nye Communities Coalition under the Nye County ARPA Recovery Plan and Policy: Public Health Assistance Mental Health Initiatives in the amount of \$81,096.91.

**Complete description of requested action:** (Include, if applicable, background, impact, long-term commitment, existing county policy, future goals, obtained by competitive bid, accountability measures)

Nye Communities Coalition has requested funding under the Nye County ARPA Recovery Plan and Policy to assist with their community project. Program presentation to be provided by the organization.

**Recommendation:**

**Financial Impact**

Cost: \$ 81,096.91	Fund Name: Grants	Fund #: 10340
Budgeted: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	FY: 2023	<input checked="" type="checkbox"/> One-Time <input type="checkbox"/> Recurring
Comments:		

**Review & Approval**

Legal Review Required: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Legal Approval Received: <input type="checkbox"/>	Date:
Financial Review Required: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Submitted to Finance: <input checked="" type="checkbox"/>	Date: 3/17/23
Administrative Manager Review: <input checked="" type="checkbox"/>	Place on Agenda: <input checked="" type="checkbox"/>	Initials: ST

Item # 25



## Nye County American Rescue Plan Act (ARPA) Recovery Plan and Policy

### Public Assistance Administered for Non-Profits, Not-For-Profits, and Charities Application

Please contact Jessica McCutcheon at [jemccutcheon@nyecountynv.gov](mailto:jemccutcheon@nyecountynv.gov) or by phone at (775) 751-7091 to assist with the agenda item and backup submission.

#### **Program Description:**

Non-profits, Not-for-profits, and Charities may request funding through the Nye County American Rescue Plan Act (“ARPA”) Recovery Plan and Policy to administer assistance to the public. Each applicant will present their program to the Nye County Commission (“Commission”) and highlight the program details and funding request. If the Commission approves the program, a grant agreement will be established between the applicant and Nye County. The applicant will be responsible for submitting monthly requests for reimbursements to Nye County Finance and present quarterly program progress reports to the Commission.

#### **Required Documentation:**

- Non-profit, Not-for-profit, or Charity name, address, and point of contact
- Non-profit, Not-for-profit, or Charity W9 or similar IRS documentation providing EIN, TIN, SSN
- Articles of Organization filed with the State of Nevada
  - Town of Pahrump Business License #, if applicable
- Project narrative and budget

#### **Review Process:**

The Commission will make final determination of program eligibility based on presentation by the applicant. Nye County Finance will review funding availability of the program and make a recommendation to the Commission during the application agenda item. If the program is

approved by the Commission and funding is available, Nye County will enter into a grant agreement with the applicant to administer their program.

**Certifications:**

Applicant shall attest that they will not submit a request for reimbursement under this program if they have requested funding under another federal or state program for the same line item. This practice constitutes "double dipping" and is not allowed for any federal and state programs. If the applicant "double dips", they will be required to repay Nye County for funds issued.

Applicant will follow the Nevada Revised Statutes ("NRS") under this program.

Applicant must certify that it was actively operating in Nye County on and before March 1, 2020 and that the information provided is true and accurate to the best of its ability.

By signing, I attest that I have read the Nye County ARPA Recovery Plan and Policy and that I have authority to bind the applicant.

Ryan Muccio  
Applicant Signature

3/16/23  
Date

Ryan Muccio, President-Elect, BOD NyECC  
Applicant Name and Title

**Application Information**

Organization Name NyE Communities Coalition

Organization Address 1020 East Wilson Road

Town Pahrump, NV Zip Code 89048

State Organization Filing Number NV Business ID:NV20021504003

Pahrump Business License (if applicable) N2247NC

Point of Contact Name Ryan Muccio/Stacy Smith

Phone 775-727-9970 Email rmuccio@nyecc.org

## Program Information

### Assistance Category:

- Mental Health
- \_\_\_\_\_ Public Homeless Assistance
- \_\_\_\_\_ Affordable Housing Grants
- \_\_\_\_\_ Childcare
- \_\_\_\_\_ Assistance to Households (Rent, Mortgage, Utilities)
- \_\_\_\_\_ Technical Assistance
- Other: Mental Health & Public Health

### Explanation of Program to be Administered:

At a recent general coalition meeting with our coalition partners, a need was identified within the community regarding AED availability and CPR/first aid training. The need was highlighted by a golf coach who expressed the desire for an AED kit when at game but the cost was prohibitive to their program. The discussion evolved and it was determined that there is a lack of available AED's in our communities especially within sports teams (youth and adult) as well as community groups, events, etc. We would like to put together 50 kits to include an AED, an advanced first aid kit, Narcan, mental health resources, etc. We would also like to pair this with certified AED/CPR/first aid training as well as psychological first aid training. There has been increased awareness of sudden cardiac arrest incidences within youth and adult sports and immediate access to an AED/First Aid supplies and proper training. According to the American Heart Association, Victims who received a defibrillator shock from a bystander had far greater chance of survival. These kits will be available to athletic clubs/programs for youth and adults, adult/youth community programs/events, etc. in Pahrump, Beatty, Amargosa, Tonopah, etc.

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Amount Requested:

BUDGET CATEGORIES	AMOUNT
(Example – Payroll, Supplies, Travel, etc.)	
<a href="#">Rolling Backback/Durable Emergency Bag (50)</a>	\$ 1,723.41
<a href="#">Emergency/Sports First Aid Kit (50)</a>	\$ 4,623.50
<a href="#">Automatic External Defibulators</a>	\$ 66,250.00
<a href="#">Mental Health First Aid Kit (50)</a>	\$ 2,500.00
<a href="#">CPR/First Aid/AED Training for up to 100 individuals</a>	\$ 5,500.00
<a href="#">Printed Resource/Training materials to be included in kit</a>	\$ 500.00
<b>TOTAL REQUEST</b>	<b>\$ 81,096.91</b>

Is there a similar program already in place at your organization?     Yes     No

**Applicant Certification and Signatures**

I, on behalf of applicant, certify that the organization was actively operating in Nye County on or before March 1, 2020.

I, on behalf of applicant, certify that the information provided in this application is true and accurate to the best of my knowledge, and certify under the penalty of perjury that no false or misleading statements have been made in order to secure approval of this application. Nye County is authorized to make all the inquiries it deems necessary to verify the accuracy of the information contained herein.

**Nevada Revised Statutes Certification**

I, on behalf of applicant, certify that approved funds under this program will be used in accordance with NRS.

**Duplication of Funding**

I, on behalf of applicant, attest that it will not submit a request for reimbursement under this program if it has requested funding under another federal or state program for the same line item. I, on behalf of applicant, understand that this practice constitutes “double dipping” and is not allowed for any federal and state programs. If the applicant “double dips” it will be required to repay Nye County for funds issued.

Ryan Muccio  
Applicant Signature

3.16.2023  
Date

Ryan Muccio, President-Elect, Nye Communities Coalition Board of Directors  
Applicant Name and Title

Please contact Jessica McCutcheon at [jemccutcheon@nyecountynv.gov](mailto:jemccutcheon@nyecountynv.gov) or by phone at (775) 751-7091 to assist with the agenda item and backup submission.

## **ARPA Recovery Plan and Policy: Uses of Funds**

The county's approach to providing a robust and equitable recovery from the COVID-19 Pandemic is to identify specific programs and projects that provide direct assistance across the entire county, as well as projects that have a meaningful impact on neighborhoods and communities that are disproportionately underserved and under-resourced. The county engaged its vast network of nonprofit partners, local chambers of commerce, community leaders, and direct constituent feedback to provide input and guidance on the community's specific needs. The county also utilized social media, as well as other media channels, to inform, educate and obtain the input of community leads to ensure low to moderate-income households are prioritized for assistance as well as beneficiaries of regional infrastructure projects. This includes services such as broadband assistance, water, sewer improvements, rental assistance, food and nutrition programs, and childcare.

The following are the projected expenditure levels for the categories and key intended outcome goals as listed below:

- **Mental Health Initiatives**

<b>Cost</b>	<b>Project Descriptions</b>	<b>Intended Outcomes</b>
\$580,000	<p>Assisting vulnerable populations, including children &amp; families, through nonprofits and Nye County Health and Human Services</p> <p>Expansion of clinical services, case management &amp; continuity of care</p> <p>Expansion of assertive community treatment, intensive mental health &amp; substance abuse services, wraparound support, counseling, skills training</p> <p>Clinical staff for assessment &amp; trauma-focused services for children, adults, first responders/essential workers</p>	<p>Support the provision of assertive community treatment (ACT) services for persons with serious mental illness and/or co-occurring mental illness &amp; reduce barriers to care with increased engagement</p> <p>Increase protective factors and residency</p> <p>Increase reunification of children and families (CPS cases)</p> <p>Decrease length of incarceration and recidivism for individuals connected to services</p> <p>Improve access to timely evaluations</p>



# ARPA

## Funding Allocation Plan as of 3/21/2023

<u>Category</u>	<u>Project</u>	<u>Total for Each Category</u>	<u>Expenditures/Obligations</u>	<u>Remaining Balance</u>
Public Health	Community Center - Refuge/Pandemic Facility	2,430,000	2,430,000	-
Public Health	Mental Health	580,000	367,247	212,753
Public Health	Public Homeless Assistance	300,000	300,000	-
Public Health	Affordable Housing Grants	400,000	400,000	-
Public Health	PVFRS Signage	175,000	175,000	-
Public Health	TPH Childcare	300,000		300,000
Economic Impacts	Rental Assistance - Rent, Mortgage, Utilities	882,291	882,291	-
Economic Impacts	Small Business Assistance-Rent, Inventory, Payroll, etc.	2,000,000	775,047	1,224,953
Economic Impacts	Tourism - All Locations Visitor Guides	130,000		130,000
Premium Pay	Premium Pay	53,046		53,046
Infrastructure - Sewer & Water	Cloud Seeding	285,000	285,000	-
Infrastructure - Broadband	IT-Cyber Security Multi-Factor Auth	85,000	85,000	-
Infrastructure - Broadband	IT-Cyber Security New Harbor	512,556	512,556	-
Contingency/Payroll 10%		903,654	244,530	659,124
<b>Combined Totals</b>		<b>9,036,547</b>	<b>6,456,671</b>	<b>2,579,876</b>

7473 W. Lake Mead Blvd Ste 204  
 Las Vegas, Nevada 89128  
 ph.702-937-0514  
 email: [pumplifecpr@gmail.com](mailto:pumplifecpr@gmail.com)  
 website: [pumplifecpr.com](http://pumplifecpr.com)



*pumpLife CPR Plus*  
 Professional Training Courses

**QUOTE** Ref No.: 144774

Final Invoice will be sent upon customer approval

**DATE:** 03/16/2023

*For HSI Authorized Independent AED Sales Agents Only*

**Customer Information**

INFO	BILL TO	SHIP TO (if different than Bill To)	AED CONTACT PERSON
Company:	Nye Communitis Coalition	1020 E. Wilson Rd.	Ryan Muccio
Name:		Pahrump, Nevada 89048	
Phone:	775-727-9970		
Fax:			
Email:			
Address:	1020 E. Wilson Rd.		
City, ST., Zip:	Pahrump NV 89048		
Type:	Commercial or Residential		
Alt Contact:			
Alt Phone:			
Alt Email:			

Package #	Regular Price	Sale Price	Qty.	Total Price
Phillips Heartstart FRx Defibrillator (861304) W/carry case	\$ 1,721.00	\$1,325.00	50	\$ 66,250.00
			0	\$ -
			0	\$ -
			0	\$ -
			0	\$ -
			0	\$ -
			0	\$ -

Notes: customer is a nonprofit organization and appropriate document must be presented to remain tax exempt

**THIS QUOTE IS VALID FOR 30 DAYS FROM THE DATE ISSUED ABOVE**

**Subtotal: \$ 66,250.00**

Company:	Comments
<a href="http://pumplifecpr.com">pumplifecpr.com</a>	<b>*approved to use agent discount</b>
Name: Darla Miller	
Instructor #: 95-NV552	
Phone: 702-937-0514	
Email: <a href="mailto:pumplifecpr@gmail.com">pumplifecpr@gmail.com</a>	

Initials:	Order Processed	Invoice #:
Date Received	Initials:      Date:	Tracking #:
Note:	Pay Req submitted	Method: ACH      Book/Card Credit
	Initials:      Date:	Note:

7473 W. Lake Mead Blvd Ste 204  
 Las Vegas, Nevada 89128  
 ph.702-937-0514  
 email: [pumplifecpr@gmail.com](mailto:pumplifecpr@gmail.com)  
 website: [pumplifecpr.com](http://pumplifecpr.com)



*pumpLife CPR Plus*  
 Professional Training Courses

**QUOTE** Ref No.: 22555

Final Invoice will be sent upon customer approval



DATE: 03/16/2023

**Customer Information**

INFO	BILL TO	SHIP TO (if different than Bill To)	AED CONTACT PERSON
Company:	Nye Communités Coalition	1020 E. Wilson Rd.	Ryan Muccio
Name:		Pahrump, Nevada 89048	
Phone:	775-727-9970		
Fax:			
Email:			
Address:	1020 E. Wilson Rd.		
City, ST., Zip:	Pahrump NV 89048		
Type:	Commercial or Residential		
Alt Contact:			
Alt Phone:			
Alt Email:			

Package #	Regular Price	Sale Price	Qty.	Total Price
AHA CPR AED FIRST AID W/ CARD	\$ 65.00	\$55.00	100	\$ 5,500.00
			0	\$ -
			0	\$ -
			0	\$ -
			0	\$ -
			0	\$ -
			0	\$ -

Notes: customer is a nonprofit organization and appropriate document must be presented to remain tax exempt

**THIS QUOTE IS VALID FOR 30 DAYS FROM THE DATE ISSUED ABOVE**

**Subtotal: \$ 5,500.00**

Company:	Comments
<a href="http://pumplifecpr.com">pumplifecpr.com</a>	
Name: Darla Miller	<p><b>*All participants 16 and up will receive CPR AED first aid total card</b></p> <p><b>*All participants 15 and under will receive AHA K-12</b></p>
Instructor #: 95-NV552	
Phone: 702-937-0514	
Email: <a href="mailto:pumplifecpr@gmail.com">pumplifecpr@gmail.com</a>	

Initials:	Order Processed	Invoice #:
Date Received	Initials:      Date:	Tracking #:
Note:	Pay Req submitted	Method: ACH      Book/Card Credit
	Initials:      Date:	Note:

# QUOTE



Quote Number: 01647

Payment Type: Purchase Order

Sales Representative: Marissa Rivas

Quote Date: 3/16/2023

Payment Terms: NET 30

775 Cochran Street, STE F  
Simi Valley, CA 93065

Quote Expires: 4/15/2023

Shipping Service: Federal Express Ground

Marissa.Rivas@EmergencyKits.com

(800) 270-2889

Billing Address:

Ryan Muccio  
Nye Communities Coalition  
1020 East Wilson  
Pahrump, NV 89048

Shipping Address:

Ryan Muccio  
Nye Communities Coalition  
1020 East Wilson  
Pahrump, NV 89048

#	Description	SKU	Qty	Price	Ext Price
1.	Premium Rolling EP-FLEX4R Backpack - Red	EP-FLEX4R-R	20	\$79.99	\$1,599.80
2.	CUSTOM CARDS	EP-CUSTOM	20	\$3.20	\$64.00

Important Notes:

Color:  
Red  
Removable Pouches:  
4 Large and 2 Small  
Hard Hat Net:  
No  
Label:  
EMERGENCY  
Custom Card

SUBTOTAL:	\$1,663.80
SALES TAX - :	\$0.00
SHIPPING - 80.lbs:	\$59.61
<b>TOTAL:</b>	<b>\$1,723.41</b>

Shipping Info: Federal Express Ground Service Delivery:

- Delivery will take place with no signature required.
- Driver may leave package at doorstep.
- Delivery insurance is not part of this service.
- Additional services or Fees not pre-paid for are the responsibility of the customer.
- Any fees associated with redeliveries, or return fees are the responsibility of the customer.

Accepted By:

Accepted Date: