

U.S. Department of Commerce Performance Progress Report				2. Award or Grant Number:	25-10-S13025
				4. EIN:	04-6002284
1. Recipient Name	Massachusetts Executive Office of Public Safety and Security			6. Report Date (MM/DD/YYYY)	7/27/2017
3. Street Address	12 Mercer Road			7. Reporting Period End Date: (MM/DD/YYYY)	6/30/2017
5. City, State, Zip Code	Natick, MA 01760			8. Final Report Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	9. Report Frequency Quarterly <input checked="" type="checkbox"/>
10a. Project/Grant Period					
Start Date: (MM/DD/YYYY)	8/1/2013	10b. End Date: (MM/DD/YYYY)	1/31/2018		
11. List the individual projects in your approved Project Plan					
	Project Type (Capacity Building, SCIP Update,	Project Deliverable Quantity (Number & Indicator Description)	Description of Milestone Category		
1	Stakeholders Engaged	170	Actual number of individuals reached via stakeholder meetings during the quarter		
2	Individuals Sent to Broadband Conferences	7	Actual number of individuals who were sent to third-party broadband conferences using SLIGP grant funds during the quarter		
3	Staff Hired (Full-Time Equivalent)(FTE)	0	Actual number of state personnel FTEs who began supporting SLIGP activities during the quarter (may be a decimal)		
4	Contracts Executed	0	Actual number of contracts executed during the quarter		
5	Governance Meetings	4	Actual number of governance, subcommittee, or working group meetings held during the quarter		
6	Education and Outreach Materials Distributed	2,308	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		
7	Subrecipient Agreements Executed	0	Actual number of agreements executed during the quarter		
8	Phase 2 - Coverage	Stage 5	For each Phase 2 milestone category, please provide the status of the activity during the quarter: • Stage 1 - Process Development • Stage 2 - Data Collection in Progress • Stage 3 - Collection Complete; Analyzing/Aggregating Data • Stage 4 - Data Submitted to FirstNet • Stage 5 - Continued/Iterative Data Collection • Stage 6 - Submitted Iterative Data to FirstNet		
9	Phase 2 - Users and Their Operational Areas	Stage 5			
10	Phase 2 - Capacity Planning	Stage 4			
11	Phase 2 - Current Providers/Procurement	Stage 4			
12	Phase 2 - State Plan Decision	Stage 3			
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.					
See attached document "Massachusetts SLIGP PPR Question 11A Narrative Q16 July 2017 v1.docx" for additional details.					
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.					

The Massachusetts SPOC submitted a request to deobligate excess grant funding during this period. In addition, Massachusetts requested a budget modification to accommodate estimated indirect costs for the duration of the grant.

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

Massachusetts has met all outstanding data requests from FirstNet to date.

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

As shared with the NTIA team during the September 2014 NTIA SLIGP site visit, the PSBO has identified the following best practices, success stories, or lessons learned in regard to SLIGP-funded activities:

1. FirstNet Involvement in regional outreach meetings
2. Participation in existing recurring stakeholder meetings
3. Conducting outreach on a regional basis
4. Participation preferences for morning sessions (going forward)
5. Combating misconceptions about FirstNet
6. Addressing up-front the impact on T-Band (BAPERIN)
7. Maintaining a comprehensive contact list
8. Multiple notification approach and lead time needed to improve attendance
9. Personalize emails improves response

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.

Contracts have been executed for the core project staff. No additional contracts are currently planned.

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
Undersecretary of EOPSS	20%	SLIGP executive oversight	No change.
Deputy Director State 911 Department	10%	Stakeholder liaison for emergency dispatch	No change.
State Police Radio Engineer	10%	Statewide radio area network subject matter expert; needs analysis	No change.
Acting Commissioner of DCJS	10%	Stakeholder liaison for criminal justice; subject matter expert for criminal justice needs	No change.
EOPSS Special Projects, Project Manager	10%	Setup of PSBO office logistics, coordination of EOPSS resources, managing SharePoint resources	No change.
Compliance and Data Coordinator (OGR)	15%	Grant management, program reporting, site visits, data collection and program close out.	No change.
Director HS Division (OGR)	5%	Grant Administrative Management	No change.
Budget Director (OGR)	7%	Grant set-up, Accounting and Reconciliation, Fiscal Monitoring, Financial Reporting and Fiscal Close Out	No change.
Fiscal Management and Audit Support	5%	Grant set-up, Accounting and Reconciliation, Fiscal Monitoring, Financial Reporting and Fiscal Close Out Fiscal Management and Audit Support	No change.

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
McInnis Consulting Services	Project Director Staff Augmentation	Vendor	N/A *	Y	10/1/2013	1/31/2018	\$375,480	
The Innovations Group, Inc.	Broadband Subject Matter Expert Staff Augmentation	Vendor	N/A *	Y	10/1/2013	1/31/2018	\$499,298	\$280,702
SWBailey Consulting LLC	Project Manager Staff Augmentation	Vendor	N/A *	Y	11/18/2013	1/31/2018	\$450,000	
SWBailey Consulting LLC	Education and Outreach Coordinator Staff Augmentation	Vendor	N/A *	Y	11/18/2013	1/31/2018	\$337,500	
SWBailey Consulting LLC	Data Collection Coordinator Staff Augmentation	Vendor	N/A *	Y	11/18/2013	1/31/2018	\$50,000	
TBD	Legal and Policy Services	Vendor	N	N	TBD	TBD	\$132,665	
SWBailey Consulting LLC	Project and Collaboration Web Site and Admin	Vendor	N/A *	Y	11/18/2013	1/31/2018	\$72,000	

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

None.

14. Budget Worksheet

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	\$114,688.00	\$253,029.00	\$367,717.00	\$95,227.34	\$224,924.39	\$320,151.73
b. Personnel Fringe Benefits	\$34,537.00	\$0.00	\$34,537.00	\$28,208.98	\$0.00	\$28,208.98
c. Travel	\$33,400.00	\$0.00	\$33,400.00	\$27,899.47	\$0.00	\$27,899.47
d. Equipment	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
e. Materials/Supplies	\$0.00	\$6,799.00	\$6,799.00	\$0.00	\$5,898.82	\$5,898.82
f. Subcontracts Total	\$1,856,943.00	\$280,702.00	\$2,137,645.00	\$1,305,799.85	\$262,152.74	\$1,567,952.59
g. Other	\$24,000.00	\$0.00	\$24,000.00	\$16,196.98	\$0.00	\$16,196.98
h. Indirect	\$98,552.00	\$0.00	\$98,552.00	\$122,180.85	\$0.00	\$122,180.85
i. Total Costs	\$2,162,120.00	\$540,530.00	\$2,702,650.00	\$1,595,513.47	\$492,975.95	\$2,088,489.42
j. % of Total	80%	20%	100%	76%	24%	100%

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.

16a. Typed or printed name and title of Authorized Certifying Official:

David Cruz, Program Coordinator III
 Executive Office of Public Safety and Security
 Homeland Security Division

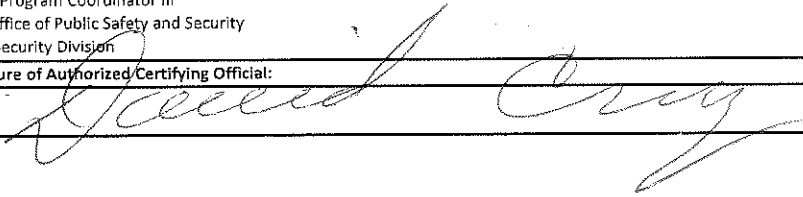
16c. Telephone (area code, number, and extension)

508-650-4514

16d. Email Address:

david.cruz@state.ma.us

16b. Signature of Authorized Certifying Official:



Date:

8/14/2017