

U.S. Department of Commerce Performance Progress Report				2. Award or Grant Number:	60-10-513060
1. Recipient Name	AMERICAN SAMOA DEPARTMENT OF HOMELAND SECURITY			4. EIN:	97-0000676
3. Street Address	P.O. BOX 4567			6. Report Date (MM/DD/YYYY)	1/30/2018
5. City, State, Zip Code	PAGO PAGO, AS 96799			7. Reporting Period End Date: (MM/DD/YYYY)	12/31/2017
				8. Final Report Yes No X	9. Report Frequency Quarterly X
10a. Project/Grant Period					
Start Date: (MM/DD/YYYY)	9/1/2013	10b. End Date: (MM/DD/YYYY)	2/28/2018		
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	121	Actual number of individuals reached via stakeholder meetings during the quarter		
2	Individuals Sent to Broadband Conferences	2	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)	4	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	6	Actual number of governance, subcommittee, or working group meetings held during the quarter		
6	Education and Outreach Materials Distributed	32	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 6	For each Phase 2 milestone category, please provide the status of the activity during the quarter: <ul style="list-style-type: none"> • 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 6			
10	Phase 2 – Capacity Planning	Stage 6			
11	Phase 2 – Current Providers/Procurement	Stage 6			
12	Phase 2 – State Plan Decision	Stage 5			
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.					
<p>October 2017 activities included bringing on the SWIC full time to assist with the release of the state portal and subsequent state plan. Activities also included adding the administrative support staff on full time to also assist with the release of the state portal and subsequent state plan. Receiving access of the FirstNet State Portal for American Samoa and reviewing its contents.</p> <p>November 2017 activities included FirstNet meetings and discussions on the aspects of the State Plan and access to the portal. For the first part of the month, stakeholders were still having trouble access the portal due to password and connectivity issues. Had several stakeholder meetings to gain feedback, questions and input on items in the state portal pages. Other activities included the continued outreach awareness program via the local cable access channel.</p> <p>December 2017 activities included meeting with new members of the AT&T Technical Team and discussion with them about issues with the state portal pages and concerns on some of the content. Activities also included additional meetings and ongoing discussions with local stakeholders on the state portal and the release of the official state plan to the Governor. The receiving of the Final State Plan by the Governor and working group discussion of Opting In or Out of FirstNet.</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.					
The Project team looks to organize a final major outreach activity for the first responders. The project team also looks to work with the grantor in updating and submitting an updated final Project Narrative and Budget proposal for review.					

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

ASDHS leadership and program management envisions FirstNet activities to wrap up with a final outreach activity for first responders before the transition to SLIGP 2.0. These actions or activities will be reflected in the next quarter PPR.

11d. Describe any success stories or best practices you have identified. Please be as specific as possible.
 The Governor has made the final decision to Opt-In

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.

The project was adequately and fully staffed for the first time which reflected in the increased awareness to first responders as well as the final outcome of the Governor's Opt-In to FirstNet. During the quarter, the staffing included 4 full time

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
SWIC	100	Duties of the SWIC are performed collaterally by the Deputy Director of ASDHS.	Increase to 100% FTE
SLIGP Program Coordinator	100	Coordinate and manage the program and all its related activities including the compilation and timely submission of the required PPR.	
IT Support Staff	100	Provide IT/technical support to the program.	
IT/Administrative Support Staff	100	Provide administrative/technical support to the program.	Increase to 100% FTE

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
Blue Sky Communications	Provide Awareness Outreach via local cable channel	Vendor	N	Y	9/1/2017	2/28/2018	\$1,835.94	

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

No RFP/RFQ issued because the vendor is the only cable channel vendor in the territory.

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	\$166,231.00	\$0.00	\$166,231.00	\$170,736.30		\$170,736.30
b. Personnel Fringe Benefits	\$33,326.00	\$0.00	\$33,326.00	\$34,229.25		\$34,229.25
c. Travel	\$155,891.00	\$0.00	\$155,891.00	\$118,701.33		\$118,701.33
d. Equipment	\$7,950.00	\$0.00	\$7,950.00	\$7,950.00		\$7,950.00
e. Materials/Supplies	\$24,797.00	\$0.00	\$24,797.00	\$25,090.85		\$25,090.85
f. Subcontracts Total	\$46,446.00	\$0.00	\$46,446.00	\$8,801.75		\$8,801.75
g. Other	\$20,802.00	\$0.00	\$20,802.00	\$9,076.96		\$9,076.96
h. Indirect	\$47,487.00	\$0.00	\$47,487.00	\$52,067.25		\$52,067.25
i. Total Costs	\$502,390.00	\$0.00	\$502,930.00	\$426,653.69	\$0.00	\$426,653.69
j. % of Total	100%	0%	100%	100%	0%	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:				16c. Telephone (area code, number, and extension)	(684) 699-0411	
Samana Semo Ve'vea'e'a				16d. Email Address:	s.veavea@asdhs.as.gov	
16b. Signature of Authorized Certifying Official:				Date: February 12, 2018		
						