



OHIO DEPARTMENT OF HEALTH

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Columbus, Ohio 43215

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John R. Kasich / Governor

Theodore E. Wymyslo, M.D. / Director of Health

To: Prospective Applicants for Violence Against Women Act (VAWA)
Sexual Violence Prevention Projects 2013

From: Will McHugh, Chief
Division of Prevention and Health Promotion
Ohio Department of Health

Subject: Notice of Availability of Funds

Competitive Grant Applications for State Fiscal Year 2013
Violence Against Woman Act (VAWA) Sexual Violence Prevention
(11/01/12 through 10/31/13)

The Ohio Department of Health, Division of Prevention and Health Promotion, Bureau of Healthy Ohio, Sexual Assault and Domestic Violence Prevention Program announces the availability of grant funds to support Sexual Violence Prevention Projects. The Request for Proposals (RFP) will provide guidance in completing the online application for the FY 2013 competitive program period. **Proposals are due by Monday, August 20, 2012 for the funding period of November 1, 2012 through October 31, 2013. Late applications will not be accepted.**

Introduction / Background

The Ohio Department of Health (ODH), Division of Prevention and Health Promotion, Bureau of Healthy Ohio, Sexual Assault and Domestic Violence Prevention Program announces the availability of grant funds for rape prevention and operation of sexual assault hotlines. The purpose of the rape prevention program is to reduce the incidence of rape and other forms of sexual assault through prevention and education, and ensure that survivors, their families and friends have access to quality hotline services. Projects must designate 80 percent or more of their efforts toward primary prevention programming.

The RFP will provide detailed information about the background, intent and scope of the grant; policy, procedures, and performance expectations; and general information and requirements associated with submission of the grant application and administration of the grant.

Notice of Intent to Apply for Funding

All interested parties must submit a Notice of Intent to Apply for Funding (NOIAF) form (attached to this RFP), no later than **4:00 pm July 20, 2012** to be eligible to apply for funding.

Once the Notice of Intent to Apply for Funding form is received by ODH, the Grants Services Unit (GSU) will:

- a. Create a grant application account for your organization. This account number will allow you to submit an application via the Internet using the Grants Management Information System (GMIS). All grant applications must be submitted via the Internet using the GMIS.
- b. Assess your organization's GMIS training needs (as indicated on the completed *Notice of Intent to Apply for Funding* form) and contact you regarding those needs. Applicants must attend GMIS 2.0 training to be eligible to apply for funding. GMIS training is mandatory if your organization has never been trained on GMIS.

The RFP will provide detailed information about the background, intent and scope of the grant, policy, procedures, performance expectations, and general information about the grant. It will also provide requirements associated with submission of the grant application and administration of the grant.

Submit your NOIAF form to Debra Seltzer, Program Administrator, via U.S. mail, email at debra.seltzer@odh.ohio.gov or fax to 614-564-2409 by **Friday, July 20, 2012**.

Technical Assistance

A conference call will be scheduled to respond to questions about the RFP. Notice of the call will be provided to all agencies that have submitted an NOIAF or contact Debra Seltzer, Amanda Suttle or Beth Malchus at the contact information provided below to be notified of the conference call date.

Amanda Suttle at 614/644-7618, amanda.suttle@odh.ohio.gov

Beth Malchus at 614/466-8960 beth.malchus@odh.ohio.gov

Debra Seltzer at 614/728-2176 debra.seltzer@odh.ohio.gov

Important Dates to Remember:

GMIS 2.0 Training Request

Notice of Intent to Apply for Funding Due

Application Due

As soon as possible

Friday, July 20, 2012

Monday, August 20, 2012

NOTICE OF INTENT TO APPLY FOR FUNDING
Ohio Department of Health

ODH Program Title: *Violence Against Women Act (VAWA) Rape Prevention Education Program*

ALL INFORMATION REQUESTED MUST BE COMPLETED.
(Please Print Clearly or Type)

County of Applicant Agency _____

Federal Tax Identification Number _____

NOTE: The applicant agency/organization name must be the same as that on the IRS letter. This is the legal name by which the tax identification number is assigned.

Applicant Agency/Organization _____

Applicant Agency Address _____

Agency Contact Person/Title _____

Telephone Number _____

E-mail Address _____

- Please check all applicable:**
- Yes, our agency will need GMIS 2.0 training**
 - No, our agency has completed GMIS 2.0 training**
 - First time applying for an ODH grant**

Application Category: _____ **Rape Prevention Base Project**
_____ **Statewide Project**

Mail, E-mail or Fax To: **Debra Seltzer, Program Administrator**
Ohio Department of Health
246 North High Street, Columbus, Ohio 43215
E-mail: debra.seltzer@odh.ohio.gov
Fax: 614-564-2409
Phone: 614-728-2176



ALL APPLICATIONS MUST BE SUBMITTED VIA THE INTERNET

OHIO DEPARTMENT OF HEALTH

Division of
Prevention and Health Promotion

BUREAU OF
Healthy Ohio

Sexual Assault and Domestic Violence Prevention Program

REQUEST FOR PROPOSALS (RFP)

FOR

FISCAL YEAR 2013

(11/1/12– 10/31/13)

Local Public Applicant Agencies

Non-Profit Applicants

COMPETITIVE GRANT APPLICATION INFORMATION

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III. APPENDICES

- A. GMIS 2.0 Training Form
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I. APPLICATION SUMMARY and GUIDANCE

An application for an Ohio Department of Health (ODH) grant consists of a number of required parts – an electronic component submitted via the Internet Website: ODH Application Gateway – GMIS 2.0 which includes various paper forms and attachments. All the required parts of a specific application must be completed and submitted by the application due date. **Any required part that is not submitted on time will result in the entire application not being considered for review.**

The application summary information is provided to assist your agency in identifying funding criteria:

- A. Policy and Procedure:** Uniform administration of all the ODH grants is governed by the ODH Grants Administration Policies and Procedures (GAPP) Manual. This manual must be followed to ensure adherence to the rules, regulations and procedures for preparation of all subgrantee applications. The GAPP Manual is available on the ODH Website <http://www.odh.ohio.gov>. (Click on “Funding Opportunities” [located under At a Glance]; click on “ODH Grants” and then click on “GAPP Manual.”)
- B. Application Name:** Violence Against Women Act (VAWA) Rape Prevention Education Program.
- C. Purpose:** The purpose of the Sexual Violence Prevention Program is to reduce the incidence of rape and other forms of sexual violence through primary prevention and education, and to ensure that survivors and their families and friends have access to quality hotline services. Programs must designate the majority or all of their efforts toward comprehensive community-based primary prevention programming that will contribute to altering the public’s knowledge, attitudes and behaviors related to sexual violence. Primary prevention is defined as population based, using environmental and system-level strategies, policies, and actions that prevent sexual violence from initially occurring. The only permitted activity other than primary prevention efforts are activities related to operating a rape crisis hotline. For more information about Sexual Violence Prevention as intended by the Centers for Disease Control and Prevention (CDC), refer to the document “Sexual Violence Prevention: Beginning the Dialogue” available online at <http://www.cdc.gov/ncipc/dvp/SVPrevention.htm>
- D. Qualified Applicants:** – Eligible applicants include:
 - 1. Rape Prevention Education (RPE) Base Project – for the general rape prevention education project that supports and expands primary prevention efforts to reduce or stop sexual violence within communities. Primary prevention projects are designed to stop sexual violence before it occurs. **Note: Crisis intervention services outside of limited hotline services will not be funded. Additionally, victim response training on how service providers should respond to victims of sexual violence will not be funded (i.e., hospital advocacy, law enforcement training, SANE training, judicial response).**

Applicant agency must:

- a. Be an Ohio local public or non-profit tax exempt organization as determined by Section 501(c)(3) of the Internal Revenue Code, with a current, valid letter of exemption.
- b. Attend or document in writing prior attendance at Grants Management Information System 2.0 (GMIS)
- c. Have the capacity to accept an electronic funds transfer (EFT).
- d. Document that the main focus of the project is on primary prevention of sexual violence. Hotline services can make up no more than twenty percent (20%) of project.
- e. Meet the expectations as described in the Project Narrative section of this RFP.

2. Enhancement Projects for outreach to specific communities (including youth):

In addition to applying for funding under category 1 RPE Base Project, applicants can submit an application for enhancement of their RPE Base Project to sub-contract with another agency with experience and access to one or more specific communities within the geographic area they serve. Examples of specific communities include specific cultural or ethnic groups or youth-serving organizations. Applications must show that the Enhancement Project will increase the ability of the applicant agency to address primary prevention of sexual violence through reaching a population at risk for perpetration of sexual violence with prevention strategies in at least three levels of the Spectrum of Prevention. If approved for the Enhancement Project, the RPE Base Project staff will provide training and technical assistance to staff in the Contract Agency to implement primary prevention of sexual violence activities within that specific community. All funds received for the Enhancement Project funds are intended to be contracted to the agency with experience and expertise in working with the specific community to be served. If Enhancement Projects are approved, ODH will work with the RPE Base Project Staff to revise their work plan to reflect their time for the contract management and training and technical assistance to the Contract Agency.

Applications will first be reviewed for the RPE Base Project and Enhancement Projects will only be considered for those applicants approved for the RPE Base Project funding. Enhancement Projects can be for up to an additional \$20,000 over the RPE Base Project funding amount. Applicants can apply for more than one Enhancement Project. Funding decisions for Enhancement Projects will be made based on the quality of each Enhancement Project application as reviewed independently.

Requirements for Enhancement Projects are described in Attachment H.

3. Statewide Project – for statewide sexual violence prevention training and technical assistant activities

Applicant agency must:

- a. Be an Ohio local public or non-profit tax exempt organization as determined by Section 501(c)(3) of the Internal Revenue Code, with a current, valid letter of exemption.
- b. Attend or document in writing prior attendance at Grants Management Information System 2.0 (GMIS)

- c. Have the capacity to accept an electronic funds transfer (EFT).
- d. Have the mission to serve as a statewide coalition of sexual assault, allied organizations, and individuals throughout Ohio working to eliminate all forms of sexual violence.
- e. Meet the expectations as described in the Project Narrative section of this RFP.

E. Service Area: No more than one (1) project will be funded per county. Projects may serve more than one county. Where more than one county is to be served, letters of support should reflect partnerships in all counties to be served. One (1) statewide project will be funded; the location of the statewide project will not affect other applications from that county.

F. Number of Grants and Funds Available: Approximately \$1.2 million federal funds is expected to be available for funding. Funding levels will depend upon the availability of funds, number and size of the proposals received. Selection will be based on recommendations of the review panel, quality of each applicant, justification for the funding request and adherence to the goals and objectives outlined in this RFP. The majority of the grants will be awarded for up to \$65,000 with a minimum funding level of \$30,000. Approved applicants will be eligible to also receive approval of Enhancement Projects of up to an additional \$20,000. The level of funding awarded to the statewide project may differ based on statewide planning processes and resulting discussions with ODH SADVPP staff.

No grant award will be issued for less than **\$30,000**. The minimum amount is exclusive of any required matching amounts and represents only ODH funds granted. Applications submitted for less than the minimum amount will not be considered for review.

G. Due Date: Applications including any required forms and required attachments mailed or electronically submitted via GMIS 2.0 are due by **4:00 PM Monday, August 20, 2012**. Attachments and/or forms sent electronically must be transmitted by the application due date. Attachments and/or forms mailed that are non-Internet compatible must be postmarked or received on or before the application due date.

Please contact Amanda Suttle at 614/644-7618, amanda.suttle@odh.ohio.gov or Beth Malchus at 614/466-8960 beth.malchus@odh.ohio.gov with any questions.

H. Authorization: Authorization of federal funds for this purpose is contained in the Violence Against Women Act and Department of Justice Act Reauthorization Act of 2005, Pub. L. No 103-322 (September 13, 1994), and Catalog of Federal Domestic Assistance (CFDA) Number 93.136.

I. Goals: The goals of ODH in releasing funds for the Violence Against Women Act Rape Prevention Education (VAWA RPE) are to: 1) Reduce the incidence of rape; and 2) Ensure that rape victims and their families and friends have access to quality hotline services for immediate care.

The permitted use of these funds, according to the VAWA 2005 are:

1. Educational seminars;
2. Operation of hotlines;

3. Training programs for professionals;
4. Preparation of informational materials;
5. Education and training programs for students and campus personnel designed to reduce the incidence of sexual violence at colleges and universities;
6. Education to increase awareness about drugs used to facilitate rapes or sexual violence; and
7. Other efforts to increase awareness of the facts about, or to help prevent, sexual violence, including efforts to increase awareness in underserved communities and awareness among individuals with disabilities (as defined in Section 3 of the Americans with Disabilities Act of 1990 (42.U.S.C. 12102)).

J. Program Period and Budget Period: The program period is November 1, 2012 through October 31, 2016. The budget period for this application is November 1, 2012 through October 31, 2013.

K. Local Health Districts Accreditation Standards: This grant program will address PHAB standards 3.1: Provide Health Education and Health Promotion Policies, Programs, Processes, and Interventions to Support Prevention and Wellness. 3.2: Provide Information on Public Health Issues and Public Health Functions Through Multiple Methods to a Variety of Audiences. 4.1: Engage with the Public Health System and the Community in Identifying and Addressing Health Problems Through Collaborative Processes. 4.2: Promote the Community's Understanding of and Support for Policies and Strategies That will Improve the Public's Health. 10.1: Identify and Use the Best Available Evidence for Making Informed Public Health Practice Decisions and 10.2 Promote Understanding and Use of Research Results, Evaluations, and Evidence Based Practices With Appropriate Audiences. The PHAB standards are available at the following website:

<http://www.phaboard.org/wp-content/uploads/PHAB-Standards-Overview-Version-1.0.pdf>

L. Public Health Impact Statement: All applicant agencies that are not local health districts must communicate with local health districts regarding the impact of the proposed grant activities on the Local Health Districts Accreditation Standards.

1. *Public Health Impact Statement Summary* –Applicant agencies are required to submit a summary of the program to local health districts prior to submitting the grant application to ODH. The program summary, not to exceed one page, must include:

- a) The Local Health District Accreditation Board (PHAB)Standard(s) to be addressed by grant activities:
 - A description of the demographic characteristics (e.g., age, race, gender, ethnicity) of the target population and the geographical area in which they live (e.g. census tracts, census blocks, block groups);
 - A summary of the services to be provided or activities to be conducted; and,
 - A plan to coordinate and share information with appropriate local health districts.

The applicant must submit the above summary as part of their grant application to ODH. This will document that a written summary of the proposed activities was provided to the local health districts with a request for their support and/or comment

about the activities as they relate to the Local Health Districts Improvement Standards.

2. Public Health Impact Statement of Support - Include with the grant application a statement of support from the local health districts, if available. If a statement of support from the local health districts is not obtained, indicate that when the program summary is submitted with the grant application. If an applicant agency has a regional and/or statewide focus, a statement of support must be submitted from at least one local health district, if available.

M. Statement of Intent to Pursue Health Equity Strategies

The ODH is committed to the elimination of health inequities. All applicant agencies must submit a statement which outlines the intent of this application to address health disparities. This statement should not exceed 1 ½ pages and must: (1) explain the extent in which health disparities are manifested within the health status (e.g., morbidity and/or mortality) or health system (e.g., accessibility, availability, affordability, appropriateness of health services) focus of this application; (2) identify specific group(s) who experience a disproportionate burden for the disease or health condition addressed by this application; and (3) identify specific social and environmental conditions which lead to health disparities (social determinants). This statement must be supported by data. The following section will provide a basic framework and links to information to understand health equity concepts. This information will also help in the preparation of this statement as well as respond to other portions of this application.

- Basic Health Equity Concepts:

Certain groups in Ohio experience a disproportionate burden with regard to the incidence, prevalence and mortality of certain diseases or health conditions. These are commonly referred to as health disparities. Health disparities are not mutually exclusive to one disease or health condition and are measurable through the use of various public health data. Most health disparities affect groups marginalized because of socioeconomic status, race/ethnicity, sexual orientation, gender, disability status, geographic location or some combination of these factors. People in such groups also tend to have less access to resources like healthy food, good housing, good education, safe neighborhoods, freedom from racism and other forms of discrimination. These are referred to as social determinants. Social determinants are necessary to support optimal health. The systematic and unjust distribution of social determinants among these groups is referred to as health inequities. As long as health inequities persist, marginalized groups will not achieve their best possible health. The ability of marginalized groups to achieve optimal health (like those with access to social determinants) is referred to as health equity. Public health interventions that incorporate social determinants into the planning and implementation of programs will contribute to the elimination of health disparities. For more resources on health equity, please visit the ODH website at:

<http://www.healthyohioprogram.org/healthequity/equity.aspx>.

- N. **Appropriation Contingency:** Any award made through this program is contingent upon the availability of funds for this purpose. **In view of this, the subgrantee agency must be prepared to cover the costs of operating the program in the event of a delay in grant payments.**

- O. *Programmatic, Technical Assistance and Authorization for Internet Submission:*** Applicant must attend or must document, in writing, prior attendance at GMIS 2.0 training in order to receive authorization for Internet submission.

Initial authorization for Internet submission will be distributed at your GMIS 2.0 Training Session (new agencies). All other agencies will receive their authorization upon receipt of the “Notice of Intent to Apply for Funding” form showing GMIS 2.0 training has been previously completed.

- P. **Acknowledgment:**** An ‘Application Submitted’ status will appear in GMIS 2.0 that acknowledges ODH system receipt of the application submission.
- Q. **Late Applications:**** Applications are dated the time of actual submission via the Internet utilizing GMIS 2.0. Required attachments and/or forms sent electronically must be transmitted by the application due date. Required attachments and/or forms mailed that are non-Internet compatible must be postmarked or received **on or before the application due date of Monday, August 20, 2012.**

Applicants should request a legibly dated postmark, or obtain a legibly dated receipt from the U.S. Postal Service, or a commercial carrier. Private metered postmarks shall **not** be acceptable as proof of timely mailing. Applicants can hand-deliver attachments to ODH, Grants Services Unit, Central Master Files; but they must be delivered by **4:00 p.m.** on the application due date (Monday, August 20, 2012). FAX attachments will not be accepted. **GMIS 2.0 applications and required application attachments received late will not be considered for review.**

- R. **Successful Applicants:**** Successful applicants will receive official notification in the form of a “Notice of Award” (NOA). The NOA, issued under the signature of the Director of Health, allows for expenditure of grant funds.
- S. **Unsuccessful Applicants:**** Within 30 days after a decision to disapprove or not fund a grant application for a given program period, written notification, issued under the signature of the Director of Health, or his designee shall be sent to the unsuccessful applicant.
- T. **Review Criteria:**** All proposals will be judged on the quality, clarity and completeness of the application. Applications will be judged according to the extent to which the proposal:
1. Contributes to the advancement and/or improvement of the health of Ohioans;
 2. Is responsive to policy concerns and program objectives of the initiative/program/activity for which grant dollars are being made available;
 3. Is well executed and is capable of attaining program objectives;
 4. Describes specific objectives, activities, milestones and outcomes with respect to time-lines and resources;
 5. Estimates reasonable cost to the ODH, considering the anticipated results;

6. Indicates that program personnel are well qualified by training and/or experience for their roles in the program and the applicant organization has adequate facilities and personnel;
7. Provides an evaluation plan, including a design for determining program success;
8. Is responsive to the special concerns and program priorities specified in the request for proposal;
9. **Has demonstrated acceptable past performance in areas related to programmatic and financial stewardship of grant funds;**
10. **Has demonstrated compliance to Grants Administration Policy and Procedures (GAPP), Chapter 100; and**
11. **Explicitly identifies specific groups in the service area who experience a disproportionate burden of the diseases or health condition(s) and explains the root causes of health disparities;**
12. Addresses observance to the Ohio Department of Health, Rape Prevention Program Standards and Protocols. Copies are available upon request from the ODH Sexual Assault and Domestic Violence Prevention Program;
13. Indicates that crisis intervention services outside of limited hotline services are not part of the funded project, including victim response training on how service providers should respond to victims of sexual violence will not be funded (i.e., hospital advocacy, law enforcement training, SANE training, judicial response);
14. Demonstrates an understanding of the public health approach to prevention (emphasis on improving the health of populations rather than a single individual) and a focus on approaches that emphasize prevention of sexual violence *before* it occurs. Staffing levels should reflect a minimum of one staff person designated to spend .75 time (30 hours/week) or more on primary prevention of sexual violence, and both this staff person and the supervisor for this staff person are required to show training in primary prevention of sexual violence as a pre-requisite for employment or to be obtained within the first three months of employment.

The ODH will make the final determination and selection of successful/unsuccessful applicants and reserves the right to reject any or all applications for any given request for proposals. **There will be no appeal of the Department's decision.**

- U. **Freedom of Information Act:** The Freedom of Information Act and the associated Public Information Regulations (45 CFR Part 5) of the U. S. Department of Health and Human Services require the release of certain information regarding grants requested by any member of the public. The intended use of the information will not be a criterion for release. Grant applications and grant-related reports are generally available for inspection and copying except that information considered to be an unwarranted invasion of personal privacy will not be disclosed. For specific guidance on the availability of information, refer to 45 CFR Part 5.
- V. **Ownership Copyright:** Any work produced under this grant will be the property of the Ohio Department of Health/Federal Government. The department's ownership will include copyright. The content of any material developed under this grant **must** be approved in advance by the awarding office of the ODH. All material(s) must clearly state:

Funded by Ohio Department of Health/Federal Government (VAWA)
Bureau of Healthy Ohio
Sexual Assault and Domestic Violence Prevention Program

They also must bear the following disclaimer:

For PUBLICATIONS/MATERIALS: *“This publication/material was supported by the (number to be provided) from the Center for Disease Control and Prevention. Its contents are solely the responsibility of the authors and do not necessarily represent the official views of the Center for Disease Control and Prevention”*

For CONFERENCES/WORKSHOPS including promotional materials, agendas and internet sites: *“Funding for this conference was made possible in part by the cooperative agreement award (number to be provided) from the Center for Disease Control and Prevention. The views expressed in written conference material or publications and by speakers and moderators do not necessarily reflect the official policies of the Department of Health and Human Services; nor does mention of trade names, commercial practices, or practices, or organizations imply endorsement by the U.S. Government.”*

- W. Reporting Requirements:** Successful applicants are required to submit subgrantee program and expenditure reports. Reports must adhere to the ODH, GAPP manual. Reports must be received before the department will release any additional funds.

Note: Failure to assure quality of reporting such as submitting incomplete and/or late program or expenditure reports will jeopardize the receipt of agency flexibility status and/or further payments.

Reports shall be submitted as follows:

- 1. Program Reports:** Subgrantee Program Reports **must** be completed and submitted **via the Grants Management Information System (GMIS)** by the following dates:

1 st Quarter, November 1, 2012 – January 31, 2013.....	February 15, 2013
2 nd Quarter, February 1 – April 30, 2013	May 15, 2013
3 rd Quarter, May 1 – July 31, 2013	August 15, 2013
4 th Quarter, August 1 – October 31, 2013.....	November 15, 2013
Annual Report.....	December 15, 2013

Additionally:

- a. A *Yearly Site Visit* is conducted with all subgrantees to assure compliance with ODH program standards and continued progress toward program goals.
- b. The *Annual Conference and Regional Meeting(s)* must be attended by one representative from your agency. The objective for these meetings is to provide technical assistance and an opportunity for sharing successes and barriers in prevention program delivery. Costs associated with these meetings are an allowable cost for this grant proposal.
- c. Programs are expected to post quarterly information about their prevention programs, activities and strategies that have been successful and not successful on the sa-ohio email list.

- d. A success story is to be submitted as a part of the second and fourth quarter program reports.
- e. Programs are required to participate in the statewide evaluation project as requested by ODH.
- f. Programs are expected to respond to reasonable requests from ODH for input necessary to complete the annual CDC application, strategic plan and annual report.

Any paper non-Internet compatible report attachments must be submitted to Central Master Files by the specific report due date. **Program Reports that do not include required attachments (non-Internet submitted) will not be approved.** All program report attachments must clearly identify the authorized program name and grant number.

Submission of Subgrantee Program Reports via the ODH’s SPES indicates acceptance of the ODH GAPP.

2. **Subgrantee Program Expenditure Reports:** Subgrantee Program Expenditure Reports **must** be completed and submitted **via GMIS 2.0** by the following dates:
 - 1st Quarter, November 1, 2012 – January 31, 2013..... February 15, 2013
 - 2nd Quarter, February 1 – April 30, 2013May 15, 2013
 - 3rd Quarter, May 1 – July 31, 2013 August 15, 2013
 - 4th Quarter, August 1 – October 31, 2013..... November 15, 2013

Submission of Subgrantee Program Expenditure Reports via the ODH’s GMIS 2.0 system indicates acceptance of ODH GAPP. Clicking the “Approve” button signifies your authorization of the submission as an agency official and constitutes your electronic acknowledgment and acceptance of GAPP rules and regulations.

3. **Final Expenditure Reports:** A Subgrantee Final Expenditure Report reflecting total expenditures for the fiscal year must be completed and submitted **via GMIS 2.0** by 4:00 P.M. on or before December 15, 2013. The information contained in this report must reflect the program’s accounting records and supportive documentation. Any cash balances must be returned with the Subgrantee Final Expense Report. The Subgrantee Final Expense Report serves as an invoice to return unused funds.

Submission of the Subgrantee Final Expenditure Report via the GMIS 2.0 system indicates acceptance of ODH GAPP. Clicking the “Approve” button signifies authorization of the submission by an agency official and constitutes electronic acknowledgment and acceptance of GAPP rules and regulations.

4. **Inventory Report:** A listing of all equipment purchased in whole or in part with **current** grant funds (Equipment Section of the approved budget) must be submitted via GMIS 2.0 as part of the Subgrantee Final Expenditure Report. At least once every two years, inventory must be physically inspected by the subgrantee. Equipment purchased with ODH grant funds must be tagged as property of ODH for inventory control. Such equipment may be required to be returned to ODH at the end of the grant program period.

- X. Special Condition(s):** Responses to all special conditions **must be submitted via GMIS 2.0 within 30 days of receipt of the first quarter payment.** A Special Conditions link is available for viewing and responding to special conditions. This link is viewable only after the issuance of the subgrantee's first payment. The 30 day time period, in which the subgrantee must respond to special conditions, will begin when the link is viewable. Failure to submit satisfactory responses to the special conditions or a plan describing how those special conditions will be satisfied will result in the withholding of any further payments until satisfied.

Submission of response to grant special conditions via the ODH's GMIS 2.0 system indicates acceptance of ODH GAPP. Checking the "selection" box and clicking the "approve" button signifies authorization of the submission by an agency official and constitutes electronic acknowledgment and acceptance of GAPP rules and regulations.

- Y. Unallowable Costs:** Funds **may not** be used for the following:

1. To advance political or religious points of view or for fund raising or lobbying; but must be used solely for the purpose as specified in this announcement;
2. To disseminate factually incorrect or deceitful information;
3. Consulting fees for salaried program personnel to perform activities related to grant objectives;
4. Bad debts of any kind;
5. Lump sum indirect or administrative costs;
6. Contributions to a contingency fund;
7. Entertainment;
8. Fines and penalties;
9. Membership fees -- unless related to the program and approved by ODH;
10. Interest or other financial payments;
11. Contributions made by program personnel;
12. Costs to rent equipment or space owned by the funded agency;
13. Inpatient services;
14. The purchase or improvement of land; the purchase, construction, or permanent improvement of any building;
15. Satisfying any requirement for the expenditure of non-federal funds as a condition for the receipt of federal funds;
16. Travel and meals over the current state rates (see OBM Website: <http://obm.ohio.gov/MiscPages/TravelRule> Then click on OBM Travel Rule.
17. Costs related to out-of-state travel, unless otherwise approved by ODH, and described in the budget narrative;
18. Training longer than one week in duration, unless otherwise approved by ODH;
19. Contracts for compensation with advisory board members;
20. Grant-related equipment costs greater than \$300, unless justified and approved by ODH;
21. Payments to any person for influencing or attempting to influence members of Congress or the Ohio General Assembly in connection with awarding of grants;
22. Crisis intervention services outside of limited hotline services will not be funded;
23. Victim response training on how service providers should respond to victims of sexual violence will not be funded (i.e., hospital advocacy, law enforcement training, SANE training and judicial response); and
24. Advocate or promote gun control. Funds may not be spent on political action or

activities designated to affect the passage of specific Federal, State, or local legislation intended to restrict or control the purchase or use of firearms.

Use of grant funds for prohibited purposes will result in the loss and/or recovery of those funds.

- Z. Audit:** *Subgrantees currently receiving funding from the ODH are responsible for submitting an independent audit report that meets OMB Circular A-133 requirements, a copy of the auditor's management letter, a corrective action plan (if applicable) and a data collection form (for single audits) within 30 days of the receipt of the auditor's report, but not later than 9 months after the end of the subgrantee's fiscal year.*

Subgrantees that have an agency fiscal year that ends on or after January 1, 2004 (and expend \$500,000 or more in federal awards per fiscal year) are required to have a single audit. The fair share of the cost of the single audit is an allowable cost to federal awards provided that the audit was conducted in accordance with the requirements of OMB Circular A-133.

Subgrantees that have an agency fiscal year that ends on or after January 1, 2004 which expend less than the \$500,000 threshold require a financial audit conducted in accordance with Generally Accepted Government Auditing Standards. The financial audit is not an allowable cost to the program.

Once an audit is completed, **a copy must be sent to the ODH, Grants Services Unit, Central Master Files address within 30 days.** Reference: *GAPP Chapter 100, Section 108 and OMB Circular A-133, Audits of States, Local Governments, and Non-Profit Organizations for additional audit requirements.*

Subgrantee audit reports (finalized and published, and including the audit Management Letters, if applicable) **which include internal control findings, questioned costs or any other serious findings, must include a cover letter which:**

- Lists and highlights the applicable findings;
- Discloses the potential connection or effect (direct or indirect) of the findings on sub-grants passed-through the ODH;
- Summarizes a Corrective Action Plan (CAP) to address the findings. A copy of the CAP should be attached to the cover letter.

AA. Submission of Application:

Formatting Requirements:

- Properly label each item of the application packet (ex. budget narrative, program narrative, etc).
- Each section should use 1.5 spacing with one-inch margins.
- Program and Budget narratives must be submitted in portrait orientation.
- Number all pages (print on one side only).
- Program narrative should not exceed 20 pages (**excludes** appendices, attachments, budget and budget narrative).
- Use a 12 point font.
- Forms must be completed and submitted in the format provided by ODH.

The GMIS 2.0 application submission must consist of the following:

**Complete
& Submit
Via Internet**

1. Application Information
2. Project Narrative
3. Project Contacts
4. Budget
 - Primary Reason
 - Funding
 - Cash Needs
 - Justification
 - Personnel
 - Other Direct Costs
 - Equipment
 - Contracts
 - Compliance Section D
 - Summary
5. Civil Rights Review Questionnaire (EEO Survey)
6. Assurances Certification
7. Federal Funding Accountability and Transparency Act (FFATA) reporting form
8. Program Cover Page (Attachment A)
9. Logic Model (Attachment B)
10. Position descriptions for all staff
11. Resumes for all staff
12. Curriculum Description Content Form (Attachment C)
13. Employee/Contract Composition Form (Attachment D)
14. Volunteer Composition Form (Attachment E)
15. Agency Board Composition Form (Attachment F)
16. Program Advisory Board/Taskforce Composition Form (Attachment G)
17. Enhancement Project Cover sheet and narrative (Attachment H) – if needed
18. Table of Organization

An original and one copy of the following forms, available on GMIS 2.0, must be completed, printed, signed in blue ink with original signature by the Agency Head or Agency Financial Head and mailed to the address listed below:

**Complete,
Sign &
Mail To
ODH**

1. Electronic Funds Transfer (EFT) Form (**Required if new agency, thereafter only if banking information has changed.**)
2. IRS W-9 Form (**Required if new agency, thereafter only when tax identification number or agency address information has changed.**) **One of the following forms must accompany the IRS W-9 Form:**
 - a. Vendor Information Form (**New Agency Only**)
 - b. Vendor Information Change Form (**Existing Agency with tax identification number, name and/or address change(s).**)
 - c. Change request in writing on Agency letterhead (**Existing Agency with tax identification number, name and/or address change(s).**)

Two copies of the following documents must be mailed to the address listed below:

**Copy &
Mail To
ODH**

1. Public Health Impact Statement
2. Statement of Support from the Local Health Districts (**only if changed**)
3. **Statement of Intent to Pursue Health Equity Strategies**
4. Liability Coverage (**Non-Profit Organizations only; proof of current liability coverage and thereafter at each renewal period**)
5. Evidence of Non-Profit Status (**Non-Profit Organizations only**)

One copy of the following documents must be mailed to the address listed below:

**Complete
Copy &
Mail To
ODH**

1. Current Independent Audit (latest completed organizational fiscal period; **only if not previously submitted**)
2. Declaration Regarding Material Assistance/Non Assistance to a Terrorist Organization (DMA) Questionnaire (**Required by ALL Non-Governmental Applicant Agencies**)
3. An original and one copy of **Attachments** (non-Internet compatible) as required by program: Only if not attached as electronic documents on GMIS.

**Ohio Department of Health
Grants Services Unit
Central Master Files, 4th Floor
246 N. High Street
Columbus, Ohio 43215**

II. APPLICATION REQUIREMENTS AND FORMAT

Access to the on-line GMIS 2.0, will be provided after GMIS 2.0 training for those agencies requiring training. All others will receive access after the RFP is posted to the ODH Website.

All applications must be submitted via GMIS 2.0. Submission of all parts of the grant application via the ODH's GMIS 2.0 system indicates acceptance of ODH GAPP. Submission of the Application signifies authorization by an agency official and constitutes electronic acknowledgment and acceptance of GAPP rules and regulations in lieu of an executed Signature Page document.

- A. Application Information:** Information on the applicant agency and its administrative staff must be accurately completed. This information will serve as the basis for necessary communication between the agency and the ODH.
- B. Budget:** Prior to completion of the budget section, please review page 10 of the RFP for unallowable costs.

Match or Applicant Share is not required by this program. Do not include match or Applicant Share in the budget and/or the Applicant Share column of the Budget Summary. Only the narrative may be used to identify additional funding information from other resources.

For **Enhancement Project** applications, include the proposed contract or contracts in the budget and budget justification. If the Enhancement Project is not approved your budget will be revised to reflect the actual award amount.

- 1. Primary Reason and Justification Pages:** Provide a detailed budget justification narrative that describes how the categorical costs are derived. Discuss the necessity, reasonableness, and allocability of the proposed costs. Describe the specific functions of the personnel, consultants and collaborators. Explain and justify equipment, travel, (including any plans for out-of-state travel), supplies and training costs. If you have joint costs refer to GAPP Chapter 100, Section 103 and the Compliance Section D (9) of the application for additional information.
- 2. Personnel, Other Direct Costs, Equipment and Contracts):** Submit a budget with these sections and form(s) completed as necessary to support costs for the period November 1, 2012 to October 31, 2013.

Funds may be used to support personnel, their training, travel (see OBM Web site <http://obm.ohio.gov/MiscPages/TravelRule>) and supplies directly related to planning, organizing and conducting the initiative/program activity described in this announcement.

When appropriate, retain all contracts on file. The contracts should not be sent to ODH. A completed "Confirmation of Contractual Agreement" (CCA) form must be submitted via GMIS 2.0 for each contract once it has been signed by both parties. The submitted CCA must be approved by ODH before contractual expenditures are authorized.

Submission of the "Confirmation of Contractual Agreement" (CCA) via the ODH's GMIS 2.0 system indicates acceptance of ODH GAPP. Clicking the "Approve" button signifies authorization of the submission by an agency official and constitutes electronic acknowledgement and acceptance of GAPP rules and regulations. CCAs cannot be submitted until after the 1st quarter grant payment has been issued.

Where appropriate, itemize all equipment (**minimum \$300 unit cost value**) to be purchased with grant funds in the Equipment Section.

- 3. Compliance Section D:** Answer each question on this form as accurately as possible. Completion of the form ensures your agency's compliance with the administrative standards of ODH and federal grants.
 - 4. Funding, Cash Needs and Budget Summary Sections:** Enter information about the funding sources and forecasted cash needs for the program. Distribution should reflect the best estimate of need by quarter. Failure to complete and balance this section will cause delays in receipt of grant funds.
- C. Assurances Certification:** Each subgrantee must submit the Assurances (Federal and State Assurances for Subgrantees) form. This form is submitted as a part of each application via GMIS 2.0. The Assurances Certification sets forth standards of financial conduct relevant to receipt of grant funds and is provided for informational

purposes. The listing is not all-inclusive and any omission of other statutes does not mean such statutes are not assimilated under this certification. Review the form and then press the “Complete” button. By submission of an application, the subgrantee agency agrees by electronic acknowledgment to the financial standards of conduct as stated therein.

D. Project Narrative:

- 1. Executive Summary:** Keep the summary short and to the **point (400-500 words maximum)**. The body of the first paragraph should include a brief detail: who the project will be serving, including demographics, what the goals of the project are, where the activities/programs/services will be held and planning factors leading to the decision to propose this project. The second paragraph should describe the public health problem(s) to be addressed, total funds requested, what specific levels from the Spectrum of Prevention will be addressed and a summary of the implementation plan and evaluation efforts. The third paragraph should describe community collaboration for both planning and implementing the program. The final paragraph should be a summation.

Note: This summary will be used for legislative and public inquiries about local programs and services.

Enhancement Projects applications should include 1 – 3 sentences within the RPE Base Project Executive summary noting that the application includes an enhancement project component specifying the proposed contract agency and population that will be reached through the Enhancement Project.

- 2. Description of Applicant Agency/Documentation of Eligibility/Personnel**
Enhancement Project – do not include information about a proposed Enhancement Project here; See Attachment H for Enhancement Project submission.

- a. *Agency*

- Briefly discuss the applicant agency’s mission statement, guiding principles and focus of services or programs provided. Describe how primary prevention of sexual violence and the proposed project fits with the agency mission and strategic plan.
- Describe how long the agency has been in operation and has been involved or experienced with sexual violence and/or prevention work within the community to be served.
- Identify the strengths and resources the agency will bring to the design, implementation and evaluation of the proposed project. Note any personnel or equipment deficiencies that will need to be addressed in order to carry out this grant.
- Describe the capacity of your organization, its personnel or contractor’s ability to communicate effectively and convey information in a manner that is easily understood by diverse audiences. This includes persons of limited English proficiency, those who are not literate, have low literacy skills and individuals with disabilities.

b. *Community Outreach*

- Specifically discuss how activities will be linked to a broad community effort.
- Describe how the agency will actively participate in implementing the Ohio Sexual and Intimate Partner Violence Prevention (OSIP) Consortium statewide plan:
<http://www.odh.ohio.gov/~media/ODH/ASSETS/Files/hprp/sexual%20assault/pathwaysinpreventionaroadmapforchange.ashx>
- Describe existing agency networking, coordination and collaborations within the proposed community. Include reasons why it made sense to partner with the specific groups (e.g., serve similar populations, have expert knowledge) and how the community members are/will be involved in the project planning, implementation and evaluation.
- Describe any partnership and activities with 1) faith-based organizations, 2) youth serving organizations and, 3) organizations that serve men and boys.
- Letters of Support - Demonstrate community partnership and collaboration and show links with other community agencies addressing violence prevention through four (4) letters of support, including letters from organizations significantly represented in planned activities such as schools in which programming will be provided.
- For Statewide Project only: Include six (6) letters of support. At least four (4) letters should be from local rape crisis centers and/or sexual violence prevention programs representing diverse geographic parts of Ohio.

c. *Governing Board/Advisory Committee*

- Describe your governing board, advisory committee or community task force, which must have at least five (5) members.
 - If the agency is not a rape crisis center with a board specifically focused on sexual violence, the agency must have a project advisory committee that meets at least twice a year. Membership should include people knowledgeable about the community's needs for rape prevention and sexual violence.
- Describe how members are trained on sexual violence issues.
- Describe how often the board or advisory committee meets and the minutes taken and maintained.
- Provide assurance that the board has an adopted set of by-laws and they are reviewed annually.
- For Statewide Project only – Provide a description of how statewide representation of local rape crisis centers and sexual violence prevention programs will be developed and maintained.

d. *Contracts and Personnel*

Do not include information about a proposed Enhancement Project here; See Attachment H for Enhancement Project submission.

- Delineate key personnel who will be directly involved in program activities.
 - Include, as an attachment, a table of organization of the agency showing sexual violence prevention component.
 - Include, as attachments, position descriptions for these staff.
- Discuss the relationship between program staff members, other staff members of the applicant agency, and other partners and agencies that will be working on this program.
- Describe training efforts, including training and orientation required for all project staff, student interns, and volunteers.
- Staffing levels should reflect a minimum of one staff person designated to spend .75 time (30 hours/week) or more on primary prevention of sexual violence.
- ODH standards require a minimum of twenty (20) hours of basic training, plus additional training specific to job responsibilities. All funded staff and their supervisors should attend sexual violence primary prevention basics training that follows CDC recommended principles for prevention either prior to starting in their positions or within three months after starting in a grant funded position. Training can be achieved in multiple ways but should include the areas listed in the outline of the OSIPV Prevention Consortium Primary Prevention Educator Competencies: <http://www.odvn.org/images/stories/CompetenciesMatrixDRAFT.pdf>
 - For prevention educators, cross-training with other ODH funded Rape Prevention Programs is strongly encouraged.
 - Include plans for **ongoing training** based upon identified needs. State specific sexual violence prevention trainings, conferences, webinars and names of facilitating organizations.
 - Out-of-state travel must be submitted as part of the original grant, via a budget revision, or receive approval in writing from ODH program consultants in cases where no budget revision is necessary.

Statewide Project only: Designate a coordinator with prior experience working on statewide prevention and technical assistance efforts, particularly in the area sexual violence prevention. The designated coordinator must demonstrate knowledge and skills using the public health model, primary prevention strategies, Ecological Model and Spectrum of Prevention Model. Training can be achieved in multiple ways but should include the areas listed in the outline of the OSIPV Prevention Consortium Primary Prevention Educator Competencies, <http://www.odvn.org/images/stories/CompetenciesMatrixDRAFT.pdf>

- If the objectives of the grant are to be implemented through a contract, include information about the contracting agency or individual, if known. Include all work to be completed through contracts in the methodology. Contract personnel are held to the same training and orientation requirements as other staff.
- Describe procedures for annual evaluation and review of job performance for all project staff, interns and volunteers.

- Note: Executive Director review is to be conducted by the Board annually. This should be a narrative description; summarize, but do NOT include copies of the forms used.

e. *Agency Policies and Confidentiality*

- Confirm the ability and intent to meet the expectations of the ODH Rape Prevention Program Standards and Protocols (copies are available upon request from the Rape Prevention Program).
- You can either summarize the confidentiality policy, or if it is two (2) pages or less, include the actual policy in the attachments section, noting in the online application where it can be found in the attachments.
- The agency's confidentiality policy should address the following:
 - All services are provided in a confidential manner;
 - No information regarding a client may be disclosed without an individual's consent, except as required by law;
 - No information regarding a client's case is released to the media;
 - All agency staff/student interns/volunteers/contract workers are given confidentiality training and must sign a confidentiality statement;
 - Precaution is taken to ensure and maintain confidentiality of information transmitted to other parties through the use of computers, electronic mail, facsimile machines, telephones, cell phones, telephone answering machines and other electronic or computer technology; and
 - Explain the agency's policy regarding reporting and responding to disclosure of sexual violence that may occur during/after a program in accordance with Ohio Revised Code, Section 2151.421, found here: <http://codes.ohio.gov/orc/2151.421>. Discuss how the agency works with schools or community organizations in addressing this issue.

f. *Quality Assurance*

- Provide a description of the QA plan including review of the agency's services and prevention programs, mechanism for reporting results and procedures for corrective action plan. The plan should include professional and community input and consumer participation.
- Quarterly QA should include a committee of three (3) or more persons who:
 - Review cultural and linguistic competency of services and agency;
 - Review any unusual incidents for patterns and trends (including teacher/parent complaints or denial of services);
 - Review agency records (e.g., confidentiality, program evaluation forms);
 - Review the project's logic model, performance in meeting goals and objectives of the project, and data collection and

- analysis mechanisms;
- Identify success stories; and
- Review compliance with ODH Rape Prevention Program Standards.
- Annual QA should include:
 - Review of agency's policies and procedures;
 - Scheduled review of materials (e.g., brochures, handouts and posters) and curriculums used;
 - Employees, student interns and volunteer annual performance review;
 - Review of compliance with ODH Rape Prevention Program Standards.
- Include assurance that resources, successes and program design weaknesses will be shared with other local agencies statewide (e.g., ODH meetings, sa-ohio listserv) quarterly and annually.

g. *Funding and Sustainability*

- Describe how the project plans to sustain activities after funding period. The proposed outline should include:
 - Organization of a subcommittee or the board or advisory committee to address future funding.
 - Identification of resource availability and gaps.
 - Partnerships with community stakeholders
 - Review of other potential on-going funding, including:
 - Review of other potential resources to support the project after sources of ODH funding are terminated
 - Development of supplemental funding sources to allow for expansion of the project and increase in expenses above the ODH spending limit
 - How the program can be integrated into existing ongoing services.

3. Problem/Need: For each of the points below, describe the local health status concern to be addressed by the program and the intended population since the last submitted application.

Enhancement Project – do not include information about a proposed Enhancement Project here; See Attachment H for Enhancement Project submission.

a. *Community Problem: -*

- Describe the specific community problem(s)/issue(s) as they relate to sexual violence (e.g., high bullying rates, community tolerance of sexual violence, high domestic violence rates, high alcohol-related offenses, of institutional support from the community to prosecute perpetrators):
- Provide support as to why this is a problem in your community. Do not restate national or state data.
- Identify and describe how the problem affects the specific group/community and any un-served or underserved populations this project intends to reach (e.g., geographic diversity, urban/rural,

demographics – age, race, ethnicity, gender, etc).

- Explicitly describe segments of the intended population who experience a disproportionate burden of the local health status concern. This information must correlate with the Statement of Intent to Pursue Health Equity Strategies.
- Describe who has a stake in the problem.
 - Include a description of other agencies/organizations also addressing this problem/need.
- Specifically, describe who in the community cares whether or not the problems are resolved.

b. *Needs Assessment:* -

- Indicate if an in-depth needs assessment of sexual violence prevention programming has been completed for the community to be served within the past two (2) years. If so, include a summary of the results of the needs assessment.
- If it is beyond two (2) years since a needs assessment was conducted, include an in-depth needs assessment of sexual violence prevention programming for the community to be served *as an objective* for the upcoming grant year. This assessment should include:
 - An ongoing community process to identify demographic changes, changes in rates of sexual violence or rape, or changes in violence or sexual harassment that includes:
 - Sexual violence prevention needs of the community intended to be served.
 - How results are considered in the design and implementation of agency's project.
 - Reasons the particular strategies and activities to be used are appropriate to the community.
 - Existing strengths, including other organizations and resources within the community related to sexual violence prevention
 - Input from residents and service providers regarding awareness of services and areas of unmet needs
 - Results of evaluations, pre-program tests for prevention and awareness programs and community assessments completed by other entities, such as the local health department, family and children first councils or other local planning effort.
- Discuss how the community needs assessment will receive special attention from the agency's governing board or advisory committee on a set schedule, ideally every three (3) to five (5) years, and should be used in the development of the agency/program's strategic plan.
- Include potential gaps and barriers for addressing sexual violence in the intended community and strategies for overcoming these issues.

- 4. Methodology:** This section is intended to demonstrate the applicant’s knowledge, experience and ability to implement the project and meet the requirements set forth in the RFP. The selection of inputs, outputs, activities, and outcomes should reflect that the sexual violence prevention project builds on community strengths and resources, and that the activities selected will contribute to altering the public’s knowledge, attitudes, beliefs and behaviors related to sexual violence. This section will consist of two parts: **a. Logic Model and b. Evaluation Narrative.**

All activities should be based on the six-level Spectrum of Prevention Model: <http://www.nsvrc.org/publications/booklets/spectrum.html>

Enhancement Project – do not include information about a proposed Enhancement Project here; See Attachment H for Enhancement Project submission.

A. Logic Model

- Submit project’s working Logic Model (Attachment B), which serves as the project’s evaluation plan.
- See Appendix E for Examples of Content.
- All activities described in the narrative must be reflected in the Logic Model.
- Everyone listed in the Logic Model should be represented in the budget.
- Except for rape crisis hotline operation, **all activities must focus on primary prevention of sexual violence.**

B. Methodology Narrative

- This narrative section must match and **elaborate on** the activities, outputs, and outcomes identified on the Logic Model.
- The ODH Statewide Evaluation Project with Dr. Sandra Ortega will continue through 2013. Programs must indicate **and discuss** in this narrative their willingness to participate and progress in the implementation of the project, including: testing or reporting on standardized evaluation items from the Item Bank for Outcome Measure Guidance, completing the Primary Prevention Capacity Assessment (PPCA) Tool annually and attending trainings/webinars facilitated by Dr. Ortega. Information about the Item Bank, PPCA, and webinars can be found at <http://www.odh.ohio.gov/odhPrograms/hpr/sadv/svp.aspx>
- In each level of the Spectrum of Prevention selected for the year, describe how activities and outcomes were selected based on the gaps determined by the needs and resources assessment.

Spectrum of Prevention Level One - Strengthening Individual Knowledge and Skills: *Prevention programs for school-age youth, college-based prevention programs, and clubs*

- Educational programs must be multi-session.
- Complete the Curriculum Content Form (Attachment C) for each curriculum implemented.
- If your agency plans to continue or change an *existing* project/ curriculum/campaign that has been developed within the agency, describe the following:

- Details of project/curriculum/campaign and reason(s) it was chosen to accomplish the outcomes.
- How it was developed and evaluated and by whom and how it will be reviewed annually; evaluation must include direction from the statewide evaluation project included utilization of the Item Bank. The Item Bank can be reviewed at: [http://www.odvn.org/images/stories/Appendix Rape Prevention Education Item Bank.pdf](http://www.odvn.org/images/stories/Appendix_Rape_Prevention_Education_Item_Bank.pdf)
- If the project/curriculum/campaign was used last year, describe any challenges the agency experienced implementing it, including what worked, what did not work and what additional activities will be needed to accomplish the proposed outcomes.
- Describe how school or community educational sessions are supported by other agencies or activities in the community.

Spectrum of Prevention Level Two - Promoting Community Education: *Community prevention programs, social norms/media campaigns, resource libraries/informational materials preparation, media advocacy*

- Community programs:
 - Indicate that educational programs are multi-session (required).
 - Complete the Curriculum Content Form (Attachment C) for each curriculum implemented.
- Media advocacy:
 - Identify the following:
 - outcome of your media campaign (how you know the project was successful)
 - specific message and why it was chosen
 - specific audience the message is to reach
 - media to be used and why it was chosen

Spectrum of Prevention Level Three - Educating Providers: *Sexual violence prevention training, culturally specific and/or cultural competency training for service providers.*

- Discuss the rationale for choosing specific professionals for the educational program or training.
- Discuss if these professionals have an opportunity to engage men, youth or other community leaders as change agents.
- Indicate that educational programs are multi-session (required).
- Complete the Curriculum Content Form (Attachment C) for each curriculum implemented.

Spectrum of Prevention Level Four - Fostering Coalitions and Networks: *Community needs assessment, strategic planning, community partners, collaboration, and sustainability*

- Describe major accomplishments of and challenges with fostering or building the coalition or task force.

Spectrum of Prevention Level Five - Changing Organizational Practices: *School policies, community policies*

- Discuss school or organizational policy (e.g., teen dating violence prevention education [Tina’s Law], sexual harassment, bullying, sexual assault, domestic violence and/or disclosure of child abuse):
 - Review areas may include: disciplinary policy, training for all staff, training for students/staff that promotes/supports prevention elements and services offered following a crisis or injury that has affected the school/workplace community.
- Identify if the school/organization has appropriate community links for resources.
- For school policies, discuss the collaboration of prevention programming that occurs in the schools (e.g. parenting, healthy relationships, alcohol and drug prevention, bullying, sexual harassment, suicide and abstinence prevention).

Spectrum of Prevention Level Six - Influencing Policy and Legislation: *Community leaders and policymakers interaction, technical assistance, monitoring legislation/policies, policy assistance and response*

- Describe activities the project will conduct during publicized sexual violence prevention events, awareness weeks/months, etc.
- Identify audiences to whom the message will be directed.
- Describe how messages will be delivered.
- Discuss the project’s relationship with local community leaders and policymakers and how the project staff will provide technical assistance, legislation monitoring, response and analysis.
- Discuss participation in the implementation of the Ohio Sexual and Intimate Partner Violence Prevention Consortium Plan.
- Discuss active participation on state or national committees that influence policy and legislation.

Statewide Project Only: Include as objectives of the project:

Support for leadership of state planning efforts including participation in Ohio Department of Health (ODH) meetings, Ohio Sexual and Intimate Partner Violence Prevention Consortium and trainings, and rape prevention program evaluation planning as requested, by having a designated Statewide Rape Prevention Coordinator or more senior level member of the agency present.

Provision of technical assistance to local rape prevention programs and other agencies planning to do rape prevention programming through personal consulting, regional networking meetings and statewide trainings on basic sexual violence prevention concepts, including CDC recommended principles, as requested by ODH and/or local agencies.

5. Cultural Competency Plan:

Enhancement Project – do not include information about a proposed Enhancement Project here; See Attachment H for Enhancement Project submission.

Every community contains diversity. Some communities may have more or less cultural/ethnic diversity than others, but all have diversity related to geography,

age, religion, sexual orientation, socio-economic status, disability status and other factors. Communities with less clearly visible diversity will still need to be prepared to respond to cultural/ethnic diversity. Achieving cultural competency is an ongoing process.

In each of the following areas, identify your agency's strengths, gaps and areas of outreach/expansion that are priorities for the coming year. Each applicant is asked to include a quarterly in-service or staff discussion regarding issues of diversity.

- Access for the community to be served:
 - Are the hours of prevention education programming and hotline services adequate for the needs of the community to be served? Are you providing prevention programming to all populations within your community to be served as described in the "Problem Need Section?" How will the community know about your prevention programming?
 - Does your agency have resources in place for requests from communities with limited English proficiency and/or non-literate populations? Does your agency have a procedure for choosing interpreters and bilingual staff?
 - Are all materials and curricula reviewed by representatives reflecting the community to be served. Explain how this review is accomplished.
- Cultural competency in staffing:
 - Do the Sexual Violence Advisory Committee/Agency Board members reflect a broad representation of the community to be served that includes representatives from organizations serving diverse communities? If not, include a plan for achieving this representation.
 - Are agency staff, college interns and volunteers reflective of the community to be served? If not, include a plan for achieving representation.
 - Is there ongoing professional development and in-service training for staff, student interns, volunteers and board members related to culturally competent provision of service?

6. Enhancement Projects - Complete Attachment H and submit as an attachment on GMIS labeled "Enhancement Project Application."

E. Civil Rights Review Questionnaire - EEO Survey: The Civil Rights Review Questionnaire (EEO) Survey is a part of the Application Section of GMIS 2.0. Subgrantees must complete the questionnaire as part of the application process. This questionnaire is submitted automatically with each application via the Internet.

F. Federal Funding Accountability and Transparency Act (FFATA Requirements):

The Federal Funding Accountability and Transparency Act (FFATA) was signed on September 26, 2006. The intent is to empower every American with the ability to hold the government accountable for each spending decision. ODH is required to report all subgrants receiving \$25,000 or more of federal funds. All applicants applying for ODH grant funds required to complete the FFATA Reporting Form. A sample of the FFATA Reporting Form is attached to this RFP.

All applicants for ODH grants are required to obtain a Data Universal Number System (DUNS) and a Central Contractor Registration Number (CCR) and submit the information in the grant application, Appendix B. For information about the DUNS, go to <http://fedgov.dnb.com/webform>. For information about CCR go to www.ccr.gov.

Information on Federal Spending Transparency can be located at www.USAspending.gov or the Office of Management and Budget's website for Federal Spending Transparency at www.whitehouse.gov/omb/open.

(Required by all applicants, the FFATA form is located on the GMIS 2.0 Application Page and must be completed in order to submit the application.)

- G. Electronic Funds Transfer (EFT) Form:** Print in PDF format and mail to ODH, Grants Administration, Central Master Files address. The completed EFT form **must be dated and signed, in blue ink, with original signatures**. Submit the original and one copy. **(Required only if new agency, thereafter only when banking information has changed.)**
- H. Internal Revenue Service (IRS) W-9 and Vendor Forms:** Print in PDF format and mail to ODH, Grants Administration, Central Master Files address. The completed IRS W-9 form **must be dated and signed, in blue ink, with original signatures**. Submit the original and one copy. **(Required if new agency, thereafter only when tax identification number or agency address information has changed.) One of the following forms must accompany the IRS, W-9:**
- 1. Vendor Information Form (New Agency Only), or**
 - 2. Vendor Information Change Form (Existing Agency with tax identification number, name and/or address change(s).)**
 - 3. Change request in writing on Agency letterhead (Existing Agency with tax identification number, name and/or address change(s).)**

Print in PDF format and mail to ODH, Grants Services Unit, Central Master Files address. The completed appropriate Vendor Form **must be dated and signed, in blue ink, with original signatures**. Submit the original and one copy of each.

- I. Public Health Impact Statement Summary:** Submit two copies of a one-page program summary regarding the impact to proposed grant activities on the Local Health Districts Improvement Standards
- J. Public Health Impact & Intent to Pursue Health Equity Statements:** Submit two copies of the response/statement(s) of support from the local health district(s) to your agency's communication regarding the impact of the proposed grant activities on the PHAB Standards and [Intent to Pursue Health Equity Statements](#). If a statement of support from the local health district is not available, indicate that and submit a copy of the program summary your agency forwarded to the local health district(s)
- K. Liability Coverage:** Liability coverage is required for all non-profit agencies. Non-profit organizations **must** submit documentation validating current liability coverage. Submit two copies of the Certificate of Insurance Liability **(Non-Profit Organizations only; current liability coverage and thereafter at each renewal period.)**

L. Non-Profit Organization Status: Non-profit organizations **must** submit documentation validating current status. Submit two copies of the Internal Revenue Services (IRS) letter approving non-tax exempt status (**Non-Profit Organizations only; for competitive cycle only; for continuation, only if changed.**)

M. Declaration Regarding Material Assistance/Non-Assistance to a Terrorist Organization (DMA) Questionnaire: The DMA is a questionnaire that must be completed by all non-governmental grant applicant agencies to certify that they have not provided “material assistance” to a terrorist organization (Sections 2909.32, 2909.33 and 2909.34 of the Ohio Revised Code). The completed DMA Questionnaire **must be** dated and signed, **in blue ink**, with the Agency Head’s signature. The DMA Questionnaire (in PDF format. [Adobe Acrobat](http://www.adobe.com/products/acrobat) is required) is located at the Ohio Department of Public Safety /Ohio Homeland Security website:

<http://www.publicsafety.ohio.gov/links/HLS0038.pdf>

- Print a hard copy of the form once it has been downloaded. The form must be completed in its entirety and your responses must be truthful to the best of your knowledge. (**Required by all Non-Governmental Applicant Agencies.**)

N. Attachment(s): Attachments are documents deemed necessary to the application that are not a part of the GMIS 2.0 system. Attachments that are non-Internet compatible must be postmarked or received on or before the application due date. An original and one copy of non-Internet compatible attachments must be mailed to the ODH, Grants Administration Central Master Files address by 4:00 P.M. on or before **Monday, August 20, 2012**. All attachments must clearly identify the authorized program name and program number.

Attachments as Required by Program:

1. Program Cover Page (Attachment A)
2. Logic Model (Attachment B)
3. Position descriptions
4. Resumes
5. Curriculum Description Content Form (Attachment C)
6. Employee/Contract Composition Form (Attachment D)
7. Volunteer Composition Form (Attachment E)
8. Agency Board Composition Form (Attachment F)
9. Program Advisory Board/Taskforce Composition Form (Attachment G)
10. Table of Organization
11. Enhancement Project Addendum - (Attachment H) - Only needed for agencies applying for additional funds to support an Enhancement Project

IV. APPENDICES

- A. GMIS 2.0 Training Form
- B. FFATA Reporting Form (SAMPLE ONLY)
- C. Application Review Form – RPE Base Project/Statewide
- D. Application Review form – Enhancement Project
- E. Examples for Logic Model & Evaluation Plan Content

PROGRAM COVER PAGE

Ohio Department of Health

Sexual Assault and Domestic Violence Prevention Program

Please complete and attach this and all attachment forms in GMIS 2.0.

Budget Period: **November 1, 2012** to **October 31, 2013**

Project Title: VAWA Rape Prevention Education

Authorized User Name/Grant Number: _____

Applicant Agency (Fiscal Agent): _____

Address: _____

Project Director: _____

Telephone #: (_____) _____ FAX #: (_____) _____

E-Mail: _____ Web Address: _____

County: _____

Federal Vendor Tax ID Number of Fiscal Agent: _____

Rape Prevention Base project

Communities to be served:

Single County Program – Specify county: _____

Multi-County – List counties; designate below which services will be provided in each county:

Enhancement Project (also complete Attachment H and requested additional information)

Statewide Project

Services to be provided – Agencies are not expected to have planned activities occurring at every Level during the first cycle of the grant, but a plan should be in place to address them in the future:

Level 1 – Strengthening Individual Education (Est. numbers to be served): _____

Level 2 – Promoting Community Education (Est. numbers to be served): _____

Level 3 – Educating Providers (Est. numbers to be served): _____

Level 4 – Fostering Coalitions and Networks

Level 5 – Changing Organization Practices

Level 6 – Influencing Policy and Legislation

Crisis Hotline (Est. numbers to be served): _____

Rape Prevention Education Base Project Budget: \$ _____

Enhancement Project Budget \$ _____

Statewide Project Budget \$ _____

ATTACHMENT B

RAPE PREVENTION EDUCATION LOGIC MODEL
Ohio Department of Health
 Office of Healthy Ohio
Sexual Assault and Domestic Violence Prevention Program

Program Goal: To reduce the incidence of sexual violence in (Ohio or specific community) by implementing strategies/activities representing three or more levels of the Spectrum of Prevention Model.

INPUTS <i>What we invest/ resources indicate people responsible for activities</i>	STRATEGIES/ ACTIVITIES <i>What we do includes strategies, methods and mechanisms to be used in reaching outcomes</i>	OUTPUTS <i>Tangible results of our activities or whom we reach</i>	SHORT TERM OUTCOMES <i>Changes we expect to see soon (typically achieved during the program or at the end of program participation</i>	INTERMEDIATE OUTCOMES <i>Changes we want to see later (within one month to one year post-participation)</i>	LONG TERM OUTCOMES <i>Changes we hope to see in future/Impact (achieved one to five years or longer from program participation.</i>
<i>See Appendix E for examples</i>	<i>See Appendix E for examples</i>	<i>See Appendix E for examples</i>	<i>See Appendix E for examples</i>	<i>See Appendix E for examples</i>	<i>See Appendix E for examples</i>
Assumptions: <i>(your theory of how the program will work)</i>			External Factors: <i>(things that may influence your goal achievement)</i>		
Evaluation Measures: <i>(tools you will use to know you have achieved your outcomes) Methods for each activity should be well thought out, with specific evaluation tools ready before project begins. Ensure this list matches your narrative section. See Appendix 1 for examples</i>					

ATTACHMENT C

Curriculum Description Content Form

Directions: To be completed for each curriculum used.

Name of curriculum and edition to be used:	
Curriculum created by:	Publication date:
Web site address:	
Have you modified the curriculum? <input type="checkbox"/> Yes (If yes, describe below) <input type="checkbox"/> No	
Peer/Teen facilitated: <input type="checkbox"/> Yes <input type="checkbox"/> No	

Audience

Intended Age: <input type="checkbox"/> Pre-K-K <input type="checkbox"/> 1-3 Grades <input type="checkbox"/> 4-5 Grades <input type="checkbox"/> 6-8 Grades <input type="checkbox"/> Grades 9-12 <input type="checkbox"/> College <input type="checkbox"/> Adults
Specific audience? (e.g., incarcerated youth, GLTB, language, boys only, girls only, mixed audience, sensory, cognitive, developmental, or mental disability) <input type="checkbox"/> Yes (if yes, describe) <input type="checkbox"/> No

Sessions

Number of sessions:
Length of time per session:

Components

Teacher component: <input type="checkbox"/> Yes (if yes, describe) <input type="checkbox"/> No
Parent component: <input type="checkbox"/> Yes (if yes, describe) <input type="checkbox"/> No

ATTACHMENT H

Enhancement Project Cover Sheet and Checklist – Only needed for agencies applying for additional funds to support an Enhancement Project.

Budget Period: **November 1, 2012** to **October 31, 2013**

Project Title: **VAWA Rape Prevention Education - Enhancement**

Authorized User Name/Grant Number: _____

Applicant Agency (Fiscal Agent): _____

Proposed Contract Agency: _____

Address: _____

Lead contact person at Contract Agency: _____

Telephone #: (_____) _____ FAX #: (_____) _____

E-Mail: _____ Web Address: _____

County: _____

Specific population to be served: _____

Services to be provided – Application should address three or more levels.

Level 1 – Strengthening Individual Education (Est. numbers to be served): _____

Level 2 – Promoting Community Education (Est. numbers to be served): _____

Level 3 – Educating Providers (Est. numbers to be served): _____

Level 4 – Fostering Coalitions and Networks

Level 5 – Changing Organization Practices

Level 6 – Influencing Policy and Legislation

Enhancement Project Budget \$ _____

Be sure you included in the Rape Prevention Education Base Project application:

Proposed Contract Agency costs and narrative included in the budget and budget justification

1 – 3 sentences about the Enhancement Project in the Executive Summary

Attach as a separate narrative in GMIS, following after this cover sheet:

Description of Proposed Contract Agency

- Briefly discuss the proposed Contract Agency's mission statement and focus of their existing services or programs. Describe how primary prevention of sexual violence and the proposed project fits with the agency mission and strategic plan.
- Describe the specific community the proposed contract agency serves that will be reached through this project, and provide information showing the capacity of the agency to access and provide services with that community. Describe how the agency ensures competency in reaching the community to be served. Does the agency staff, board and volunteers reflect a broad representation of the community to be served? In what other ways will representatives of the community to be served be included in the planning and implementation of this project.
- Identify the strengths and resources the agency will bring to the design, implementation and evaluation of the proposed project.

- Describe existing relationship between the Applicant Agency and the Contract Agency. Include reasons why it made sense to partner with this agency and how the two agencies will work together if funded.
- Delineate key personnel from the Contract Agency who will be directly involved in program activities.
- Describe plans to provide training in the primary prevention of sexual violence to the agency staff, board and volunteers of the Contract Agency as appropriate.

Problem/Need:

- Identify and describe how sexual violence affects the specific community which this Enhancement Project will reach. Describe how the population to be reached is at risk for perpetration of sexual violence and how this Enhancement Project will be able to impact primary prevention within the community.
- Indicate if a needs assessment of sexual violence prevention programming has been completed for the community to be served within the past two (2) years.
 - If so, include a summary of the results of the needs assessment.
 - If it is beyond two (2) years since a needs assessment was conducted, include a needs assessment of sexual violence prevention programming for the community to be served *as an objective* for the upcoming grant year.

Methodology:

Logic Model: Additional pages of your logic model (Attachment D) outlining your objectives for the Enhancement Project should be attached as a part of this addendum. If the Enhancement Project is approved these pages will become a part of the Applicant Agency’s Logic Model. Follow the directions as provided for the RPE Base Project for completion of these pages. For the community to be reached through the Enhancement Project, include activity on at least three levels of the Spectrum of Prevention.

Narrative: This narrative section must match and **elaborate on** the activities, outputs, and outcomes identified on the Logic Model. In each level of the Spectrum of Prevention selected for the year, describe how activities and outcomes were selected based on the gaps determined by the needs and resources assessment. Follow the outline provided in the directions for the RPE Base Project for completion of this narrative. Confirm participation in implementation of the OSIP Violence Prevention Consortium statewide plan.

Letters of support:

Attach a letter of commitment from the Contract Agency. The letter should be on agency letterhead, signed by the Director of the Contract Agency, and should confirm that the agency has reviewed this Enhancement Project narrative and agrees to participate as described in the application. The letter should also acknowledge the expectations of the Contract Agency staff including participation in training on the primary prevention of sexual violence, representation at regional and statewide meetings and conferences, responding to reasonable requests from ODH for input necessary to the statewide prevention plan and evaluation project and sharing information about the agency’s prevention programs and activities through the statewide email list and at statewide and regional meetings.

Attach two (2) letters of support from individuals or representatives of other organizations who are members of or primarily work with the specific community to be served. At least one (1) should be from a representative of a community organization, faith community or business that is interested in preventing sexual violence within the identified community, and the other can also be from community members who are concerned about this issue.



OHIO DEPARTMENT OF HEALTH

246 North High Street
Columbus, Ohio 43215

614/466-3543
www.odh.ohio.gov

John R. Kasich / Governor

Theodore E. Wymyslo, M.D. / Director of Health

GMIS 2.0 TRAINING REQUEST

Please complete a request for each employee from your agency who will attend GMIS 2.0 APPLICATION SUBMISSION training. A request without a signature from the Agency or Fiscal Head will not be accepted.

(Please Print Clearly or Type)

ODH Grant Program _____ RFP Due Date _____

County of Applicant Agency _____

Federal Tax Identification Number _____

NOTE: The applicant agency/organization name must be the same as that on the IRS letter. This is the legal name by which the tax identification number is assigned and as listed, if applicable, currently in GMIS.

Applicant Agency/Organization _____

Applicant Agency Address _____

Agency Employee to attend training _____

Telephone Number _____

E-mail Address _____

GMIS Training Authorized by: _____

(*Signature of Agency/ Financial Head) ***Required**

(*Printed Name of Agency/ Financial Head) ***Required**

Please list names below if at least two (2) people in the AGENCY have attended GMIS 2.0 training and are willing to train the new employee. If none, write N/A

1.) _____ 2.) _____

Requests may be mailed, faxed or e-mailed to:

Evelyn Suárez
Grants Services Unit
246 N. High Street, 4th fl.
Columbus, Ohio 43215
Fax: 614-752-9783
evelyn.suarez@odh.ohio.gov

CONFIRMATION OF YOUR GMIS TRAINING SESSION WILL BE E-MAILED WHEN A SLOT IS AVAILABLE

**Ohio Department of Health Sub-Awardee
Federal Funding Accountability and Transparency Act (FFATA) Reporting Form
SAMPLE ONLY – COMPLETE FFATA IN GMIS 2.0**

Submission Date
____/____/____

Sub-Awardee Data

1	DUNS #	
2	DUNS # plus 4	
3	Name	
4	DBA Name	
5	Address - Street # 1	
6	Address - Street # 2	
7	Address - Street # 3	
8	City	
9	State	
10	County (select from list of Ohio counties)	
11	Zip plus 4	
12	Congressional District	
13	Sub-awardee - Parent DUNS #	
14	Amount of Sub-award/Contract	Completed by ODH
15	Sub-award Obligation/Action Date (i.e., date the NOA and/or Contract is signed/approved)	Completed by ODH
16	CFDA and Program Title	Completed by ODH
17	Federal Agency Name	Completed by ODH
18	Principal Place of Performance (PPP)- City (or County if as a whole)	
19	PPP - State	
20	PPP - County	
21	PPP - Zip + 4	
22	PPP - Congressional District	
23	Sub-award/Contract # (i.e., the project ID for sub-grants)	
24	Q1. In organization's previous FY did it receive 80% or more from federal contracts and \$25,000,000 or more from federal contracts? If yes, please see Q2.	

25	Q2. Does the public have access to compensation of senior executives via the section 6104 of the IRS Code of 1986? If "yes", then the project is not required to report the compensation information. If "no" please enter the compensation information.	
26	1 of 5 highest compensated officials - Name	
27	1 of 5 highest compensated officials - Amount	
28	2 of 5 highest compensated officials - Name	
29	2 of 5 highest compensated officials - Amount	
30	3 of 5 highest compensated officials - Name	
31	3 of 5 highest compensated officials - Amount	
32	4 of 5 highest compensated officials - Name	
33	4 of 5 highest compensated officials - Amount	
34	5 of 5 highest compensated officials - Name	
35	5 of 5 highest compensated officials - Amount	
36	Project Description	Completed by ODH
37	Agency Director/President	
38	Agency Program/Project Director	
39	Agency Phone Number	
40	Program Source/Treasury Account Symbol	Completed by ODH
41	CCR # (of Parent Agency if applicable)	

Complete section below if Agency is not in the State of Ohio

42	If 'Other' County Selected, name of county outside of Ohio	
43	If 'Out of State' Congressional District Selected, provide State and Congressional District	
44	If 'Out of State' PPP - County	
45	If 'Out of State' PPP - Congressional District	

**Ohio Department of Health
Bureau of Health Promotion and Risk Reduction
Sexual Assault and Domestic Violence Prevention Program
Grant Application Review Rating Form – COMPETITIVE
VAWA Sexual Assault Prevention FY 2013**

Agency _____ County _____

Indicates: RPE Base Project Statewide efforts

Reviewed by _____ Recommended funding level _____

CRITERIA	SCORE
1. Executive Summary (8 possible)	
2. Description of Applicant Agency/Documentation of Eligibility (36 possible)	
3. Problem/Need (12 possible)	
4. Methodology (32 possible)	
5. Cultural Competency (4 possible)	
6. Financial Management (8 possible)	
TOTAL (100 possible)	

Recommendation of Reviewer:

Approval (funding) of proposal as submitted (no conditions)

Approval (funding) of proposal with conditions (please list conditions below)

- 1.
- 2.
- 3.

Disapproval of project. State reason(s) below:

- 1.
- 2.
- 3.

Signature of Reviewer

Date

1. Executive Summary

Scoring Range		
NONE 0	POOR 1	GOOD - EXCELLENT 2

Component	Comments	Score
Identifies who the project will be serving. Discusses the demographics of the area to be served. (up to 2 points)		
Describes the project goals and where the activities will be held. Identifies planning factors leading to the decision to propose the project. (up to 2 points)		
Describes community collaboration and identifies the levels from the Spectrum of Prevention to be addressed. (up to 2 points)		
States how the project will be evaluated, total funds requested and summarizes how these funds will be used. (up to 2 points)		
Total points received Out of 8 possible points		

2. Description of Applicant Agency

Scoring Range			
NONE 0	POOR 1-3	GOOD 4 - 5	EXCELLENT 6

Component	Comments	Score
<p>Agency</p> <ul style="list-style-type: none"> Briefly discusses the applicant agency’s mission statement, guiding principles and focus of services or programs provided. Describes how primary prevention of sexual violence and this project fits with the agencies mission and strategic plan Describes how long the agency has been in operation and has been involved or experienced with sexual violence and/or prevention work within the community to be served. Identifies the strengths and resources the agency will bring to the design, implementation and evaluation of the proposed project. Notes any personnel or equipment deficiencies that will need to be addressed in order to carry out this grant. Describes the capacity of the organization, its personnel or contractor’s ability to communicate effectively and convey information in a manner that is easily understood by diverse audiences. This includes persons of limited English proficiency, those who are not literate, have low literacy skills and individuals with disabilities. <p>(up to 6 points)</p>		
<p>Community Outreach</p> <ul style="list-style-type: none"> Describes how the agency will actively participate in implementing the Ohio Sexual and Intimate Partner Violence Prevention (OSIP) Consortium statewide plan. Describes existing agency networking, coordination and collaborations within the proposed community. Includes reasons why it made sense to partner with the specific groups (e.g., serve similar populations, have expert knowledge) and how the community members are/will be involved in the project planning, implementation and evaluation. Describes any partnership and activities with 1) faith-based organizations, 2) youth serving organizations and, 3) organizations that serve men and boys. <p>(up to 6 points)</p>		

<p><i>Letters of Support</i> Includes appropriate letters of support as described in the RFP (up to 4 points)</p>		
<p><i>Governing Board/Advisory Committee</i></p> <ul style="list-style-type: none"> • Describes agency’s governing board, advisory committee or community task force, which has at least five (5) members. • Describes how members are trained on sexual violence issues. • Describes how often the board or advisory committee meets and the minutes taken and maintained. • Provides assurance that the board has an adopted set of by-laws and they are reviewed annually. <p>For Statewide Project only – Provides a description of how statewide representation of local rape crisis centers and sexual violence prevention programs is developed and maintained.</p> <p>(up to 6 points)</p>		
<p><i>Contracts and Personnel</i> <i>Information about a proposed Enhancement Project should NOT be included here.</i></p> <ul style="list-style-type: none"> • Delineates key personnel who will be directly involved in program activities. • Includes, as an attachment, a table of organization of the agency showing sexual violence prevention component. • Includes, as attachments, position descriptions for these staff. • Describes training efforts, including training and orientation required for all project staff, student interns, and volunteers. Includes plans for ongoing training based upon identified needs. State specific sexual violence prevention trainings, conferences, webinars and names of facilitating organizations. • Staff levels reflect a minimum of one staff person designated to spend .75 (30 hours/week) or more on primary prevention of sexual violence, and both this staff person and the supervisor of this staff person show training in primary prevention of sexual violence as a pre-requisite for employment or to be obtained in the first three months of employment. • For Statewide Project only, staffing plan reflects 		

<p>prior experience on statewide prevention and technical assistance efforts, particularly in the area of sexual violence prevention.</p> <ul style="list-style-type: none"> • Describes procedures for annual evaluation and review of job performance for all project staff, interns and volunteers. Executive Director review is to be conducted by the Board annually. <p>(up to 6 points)</p>		
<p><i>Agency Policies and Confidentiality</i></p> <p>Confirms the ability and intent to meet the expectations of the ODH Rape Prevention Program Standards and Protocols (copies are available upon request from the Rape Prevention Program). Either summarizes the confidentiality policy, or if it is two (2) pages or less, includes the actual policy in the attachments section, noting in the online application where it can be found in the attachments. Includes summary of the agency’s policy regarding reporting and responding to disclosures of sexual violence.</p> <p>Points – No/0; Yes/2</p>		
<p><i>Quality Assurance</i></p> <p>Provides a description of the QA plan including review of the agency's services and prevention programs, mechanism for reporting results and procedures for corrective action plan. The plan should include professional and community input and consumer participation.</p> <p>Points – No/0; Yes/2</p>		
<p>Include assurance that resources, successes and program design weaknesses will be shared with other local agencies statewide (e.g., ODH meetings, sa-ohio listserv) quarterly and annually.</p> <p>Points – No/0; Yes/2</p>		
<p><i>Funding and Sustainability</i></p> <p>Describe how the project plans to sustain activities after funding period, including:</p> <ol style="list-style-type: none"> 1) Organization of a subcommittee or the board or advisory committee to address future funding; 2) Identification of resource availability and gaps; 3) Review of other potential on-going funding <p>Points – No/0; Yes/2</p>		
<p>Total points received Out of 36 possible points</p>		

3. Problem/Need

Scoring Range			
NONE 0	POOR 1-3	GOOD 4-5	EXCELLENT 6

Component	Comments	Score
<p>Community Problem</p> <ul style="list-style-type: none"> • Describes the specific community problem(s)/issue(s) as they relate to sexual violence (e.g., high bullying rates, community tolerance of sexual violence, high domestic violence rates, high alcohol-related offenses, of institutional support from the community to prosecute perpetrators). • Provides support as to why this is a problem in your community. Do not restate national or state data. • Identify and describe how the problem affects the specific group/community and any un-served or underserved populations this project intends to reach (e.g., geographic diversity, urban/rural, demographics – age, race, ethnicity, gender, etc). Explicitly describes segments of the intended population who experience a disproportionate burden of the local health status concern. This information must correlate with the Statement of Intent to Pursue Health Equity Strategies. • Describes who has a stake in the problem. Includes a description of other agencies/organizations also addressing this problem/need. Specifically describes who in the community cares whether or not the problems are resolved. <p>(up to 6 points)</p>		
<p>Needs Assessment</p> <p>Indicates if an in-depth needs assessment of sexual violence prevention programming has been completed for the community to be served within the past two (2) years. If so, include a summary of the results of the needs assessment.</p> <p>or</p> <p>If it is beyond two (2) years since a needs assessment was conducted, includes an in-depth needs assessment of sexual violence prevention programming for the community to be served <i>as an objective</i> for the upcoming grant year.</p> <p>(up to 6 points)</p>		
<p>Total points received Out of 12 possible points</p>		

4. Methodology

Scoring Range			
NONE 0	POOR 1-3	GOOD 4-5	EXCELLENT 6

Component	Comments	Score
<p>Logic Model Application includes Logic Model (Attachment B), which reflects the expectations as described in the RFP including:</p> <ul style="list-style-type: none"> • Strategies/activities at three or more levels of the spectrum of prevention are represented • Each of the following is clearly included and appropriate: <ul style="list-style-type: none"> ○ Inputs ○ Strategies/activities ○ Outputs ○ Short term, intermediate and long term outcomes ○ Evaluation <p>(up to 6 points)</p>		
<p>All activities described in the narrative are reflected in the Logic Model. Everyone listed in the Logic Model is represented in the budget. Except for rape crisis hotline operation, all activities focus on primary prevention of sexual violence.</p> <p>(up to 6 points)</p>		
<p>Methodology Narrative: Matches and <u>elaborates on</u> the activities, outputs, and outcomes identified on the Logic Model by answering the questions asked in the RFP with each level of the Spectrum of Prevention selected. <u>Statewide Project only</u> includes the required objectives related to leadership and technical assistance.</p> <p>(up to 6 points)</p>		
<p>Indicates <u>and discusses</u> in this narrative their willingness to participate and progress in the implementation of the ODH Evaluation Project facilitated by Dr. Sandra Ortega.</p> <p>Points – No/0; Yes/2</p>		
<p>In each level of the Spectrum of Prevention selected for the year, describes how activities and outcomes were selected based on the gaps determined by the needs and resources assessment.</p> <p>(up to 6 points)</p>		
<p>Complete Curriculum Content Form (Attachment C) provided for each curriculum implemented. Educational programs identified are multi-session.</p> <p>(up to 6 points)</p>		
<p>Total points received Out of 32 possible points</p>		

5. Cultural Competency Plan

Scoring Range			
NONE 0	POOR 1	GOOD 2-3	EXCELLENT 4

Component	Comments	Score
Identifies agency's strengths, gaps and areas of outreach/expansion that are priorities for the coming year in the following areas: - Access for the community to be served - Cultural competency in staffing (up to 4 points)		
Total points received Out of 4 possible points		

6. Financial Management

Scoring Range			
NONE 0	POOR 1	GOOD 2 - 3	EXCELLENT 4

Component	Comments	Score
The online budget is reasonable and adequate to meet the goals and objectives of the project. The budget narrative explains the proposed line items. Where applicable, include in-kind contributions essential to the success of the project. Includes discussion justifying unusual or high cost items. • Includes statewide efforts, if appropriate. (up to 4 points)		
The online budget demonstrated a staffing pattern that is realistic, appropriate and adequate to carry out the goals and objectives of the project. (up to 4 points)		
Total points received Out of 8 possible points		

**Ohio Department of Health
Bureau of Health Promotion and Risk Reduction
Sexual Assault and Domestic Violence Prevention Program
Grant Application Review Rating Form - COMPETITIVE
VAWA Sexual Assault Prevention FY 2013**

Enhancement Project

Applicant agency _____ County _____
 Proposed Contract Agency _____
 Reviewed by _____ Recommended funding level _____

CRITERIA		SCORE
1. Description of Proposed Contract Agency	(45 possible)	
2. Problem/Need	(16 possible)	
3. Methodology	(33 possible)	
4. Financial Management	(6 possible)	
TOTAL	(100 possible)	

Recommendation of Reviewer:

Approval (funding) of proposal as submitted (no conditions)

Approval (funding) of proposal with conditions (please list conditions below)

- 1.
- 2.
- 3.

Disapproval of project. State reason(s) below:

- 1.
- 2.
- 3.

Signature of Reviewer

Date

Scoring Range

NONE 0	POOR 1-2	GOOD 3-4	EXCELLENT 5
-----------	-------------	-------------	----------------

1. Description of Proposed Contract Agency

Component	Comments	Score
Describes proposed Contract Agency mission and focus of current services or programs provided, and how primary prevention of sexual violence and the proposed project fits with the agency mission and strategic plan.. (up to 5 points)		
Describes the specific community to be served. (up to 5 points)		
Describes the capacity of the proposed Contract Agency to reach the specific community, including how the community to be served will be represented in planning and implementation of the project. (up to 5 points)		
Identifies the strengths and resources the proposed Contract Agency will bring to the project. (up to 5 points)		
Describes the relationship between the Applicant Agency and the proposed Contract Agency, including why it makes sense to partner and how the two agencies will work together. (up to 5 points)		
Delineates key personnel from the Contract Agency who will be directly involved in program activities. (up to 5 points)		
Describes plans to provide training to the Contract Agency staff. (up to 5 points)		
Letter of commitment from the Contract Agency is provided and contains appropriate commitments. (up to 5 points)		
Two (2) additional letters of support are provided, from respondents representing the community to be served and demonstrating support for the Enhancement Project. (up to 5 points)		
Total points received (out of forty-five [45] possible points)		

Scoring Range

NONE 0	POOR 1-3	GOOD 4-6	EXCELLENT 7-8
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2. Enhancement Project - Problem/Need

Component	Comments	Score
Identifies and describes how sexual violence affects the community which this Enhancement Project will reach. Describes how the population to be reached is at risk for perpetration of sexual violence and how this Enhancement Project will be able to impact primary prevention within the community. (up to 8 points)		
Indicates if an in-depth needs assessment of sexual violence prevention programming has been completed for the community to be served within the past two years. Assessment has been completed within two years and summary of results is provided. (up to 8 points) OR If it is beyond two (2) years since a needs assessment was conducted, the proposal includes an in-depth needs assessment of sexual violence prevention programming for the community to be served <i>as an objective</i> for the upcoming grant year. (up to 8 points)		
Total points received (out of sixteen [16] possible points)		

Scoring Range			
NONE 0	POOR 1-3	GOOD 4-5	EXCELLENT 6

3. Enhancement Project - Methodology

Component	Comments	Score
<p>Logic Model Application includes Logic Model (Attachment B), which reflects the expectations as described in the RFP:</p> <ul style="list-style-type: none"> • Strategies/activities at three or more levels of the spectrum of prevention are represented • Each of the following is clearly included and appropriate: <ul style="list-style-type: none"> ○ Inputs ○ Strategies/activities ○ Outputs ○ Short/intermediate/long term outcomes ○ Evaluation <p>(up to 6 points)</p>		
<p>All activities described in the narrative are reflected in the Logic Model. Everyone listed in the Logic Model is represented in the budget.</p> <p>(up to 6 points)</p>		
<p>Methodology Narrative: Matches and <u>elaborates</u> on the activities, outputs, and outcomes identified on the Logic Model by answering the questions asked in the RFP with each level of the Spectrum of Prevention selected.</p> <p>(up to 6 points)</p>		
<p>Indicates and <u>discusses</u> Contract Agency willingness to participate in the implementation of the ODH Evaluation Project facilitated by Dr. Sandra Ortega and in implementation of the OSIP Violence Prevention consortium statewide plan.</p> <p>Points – No/0; Yes/3</p>		
<p>In each level of the Spectrum of Prevention selected for the year, describes how activities and outcomes were selected based on the gaps determined by the needs and resources assessment.</p> <p>(up to 6 points)</p>		
<p>Completed Curriculum Content Form provided (Attachment C) for each curriculum implemented. Educational programs identified are multi-session.</p> <p>(up to 6 points)</p>		
Total points received Out of 33 possible points		

Scoring Range

NONE 0	POOR 1	GOOD 2	EXCELLENT 3
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4. Enhancement Project - Financial Management

Component	Comments	Score
The online budget is reasonable and adequate to meet the goals and objectives of the Enhancement Project. The budget narrative explains the proposed line items. Where applicable, include in-kind contributions essential to the success of the project. Includes discussion justifying unusual or high cost items. (3 points)		
The online budget demonstrated a staffing pattern that is realistic, appropriate and adequate to carry out the goals and objectives of the project. (3 points)		
Total points received (out of six [6] possible points)		

Examples for Logic Model & Evaluation Plan Content
These are examples only for your guidance and not required.

Inputs

- Staff
- Funding
- Resources

Strategies/Activities

Spectrum of Prevention Level 1: Strengthening Individual Knowledge and Skills

- Provide Prevention Programs for School Aged Youth – (Pre-K, elementary, middle or high school) presentations that promote healthy relationships/healthy sexuality, are primary prevention focused, and have sufficient dosage that is likely to change knowledge, attitudes, behaviors and/or beliefs
- Provide College-based Prevention Programs – may focus on reducing the incidence of sexual violence on campus, promote healthy relationships/healthy sexuality, are primary prevention focused, and have sufficient dosage that is likely to change knowledge, attitudes, behaviors and/or beliefs
- Coordinate Clubs – refers to sexual violence prevention education/information provided in a group setting to promote in-person social-emotional support and change social norms to reduce perpetration of sexual violence

Spectrum of Prevention Level 2: Promoting Community Education

- Provide Community Prevention Programs – presentations to community groups on issues related to the prevention of sexual violence; one part of a comprehensive social norm/media campaign, not one-time presentations
- Implement Social Norms/Media Campaigns – based on a plan that includes goals and outcomes, input from the intended audience on how to promote the primary prevention message, and has an evaluation component
- Create and distribute Resource Libraries/Informational Materials – prevention-focused, part of comprehensive media campaign, developed and/or purchased with input by intended audience, and has an evaluation plan
- Provide Media Advocacy – the use of the mass media to gain visibility and advance a specific sexual violence prevention message, and/or a social or public policy change or initiative through the use of editorials, interviews, media events, letters to the editor and/or paid ads

Spectrum of Prevention Level 3: Educating Providers

- Provide Basic Sexual Violence and Prevention Training for Providers –educating those who influence others on sexual violence prevention, such as education/health/legal/other professionals (coaches, journalists, etc.), community activists, or peers to ensure that these providers have increased capacity to effectively promote sexual violence prevention with youth, parents, colleagues, and policy makers.
- Provide Advanced/In-depth Sexual Violence Prevention Training and/or Culturally Specific and/or Cultural Competency Training - information regarding eliminating health disparities, social inequalities and other forms of oppression that contributes to a culture that condones sexual violence. Note: a culture that condones sexual violence also condones/promotes other forms of oppression which must be addressed in conjunction with sexual violence prevention.

Spectrum of Prevention Level 4: Fostering Coalitions and Networks

- Convene Community Partners – recruiting and educating new members, community partners or stakeholders
- Promote Collaboration – A relationship of working cooperatively with stakeholders and partners toward a common goal, community response, or specific project by sharing information and resources, coordinating communication, and building consensus
- Conduct Community Needs Assessment – includes identifying the community/climate/culture that supports sexual violence and other community agencies or resources that are stakeholders in preventing sexual violence
- Create a Strategic Plan – developing a strategic plan to promote sexual violence prevention through communication, changing systems and policies, and strengthening collaboration
- Enhance Sustainability – increasing financial capacity and sustainability by exploring other funding opportunities

Spectrum of Prevention Level 5: Changing Organizational Practices

- Review and Revise School Policies – reflects practices that promote primary prevention of sexual violence and healthy relationships within school communities.
- Review and Revise Community Policies – reflects local government, businesses, faith communities and other local organizations’ policies that promote primary prevention of sexual violence and healthy relationships.

Spectrum of Prevention Level 6: Influencing Policy and Legislation

- Promote Interactions With Community Leaders and Policy Makers – includes inviting community leaders and policy makers to observe or participate in a sexual violence prevention activity, agency open house, annual meeting or public event.
- Provide Technical Assistance – includes providing technical assistance to a legislative body, committee or public official.
- Monitor Legislation/Policies – includes observing those that have an impact on sexual violence prevention and the health and safety of the community, and updating board, advisory committee and coalition members, without a call to action.
- Provide Policy Assistance and Response – responding to state and local legislation, school, and college policies that have an impact on sexual violence prevention, healthy relationships and the health and safety of the community.
- Provide Reports and Analysis – making available nonpartisan analysis, study or research to officials and the public about sexual violence problems and their potential solutions within the community.

Rape Crisis Hotline -

Note: Crisis intervention services outside of limited rape crisis hotline services are not an allowable activity with RPE Funds.

- Provide Rape Crisis Hotline – refers to the operation of a 24-hour telephone service seven days a week, which provides guidance, emotional support, information and referral, etc.
- Provide Basic Crisis Intervention Training – on sexual violence, including other topics necessary to providing a basic crisis response for victims.

Outputs

Spectrum of Prevention Levels 1, 2, and 3

- Identify population(s) reached
- For each population, identify number to be served and number of sessions
- Identify the number of doses/sessions each audience received
- Identify the number of times resource was used
- Identify the methods used in community education (i.e., letter to the editor, interviews)

Spectrum of Prevention Level 4

- List the community partners within the strategic plan and resources they are sharing to develop/implement the plan
- Document meeting agendas and meeting minutes
- Provide a report that documents the results of a community needs assessment
- Identify a strategic plan based on a community needs assessment
- Document how the plan is being implemented and deliverables identified
- Identify a strategic plan to increase financial capacity and sustainability

Spectrum of Prevention Level 5

- Identify the number of school or community organization policies reviewed with recommendations
- Identify the number of schools or community organizations that have implemented recommendations
- Identify the number of reports provided to legislators
- Identify the number of responses provided
- Identify the number of advisory committee meetings attended – internal documentation: meeting agenda and meeting minutes

Spectrum of Prevention Level 6

- Identify the number of community leaders/policy makers attending an event
- Identify the number of bills and policies reviewed

Short Term Outcomes

- By October 31, 2012, participants of primary prevention activities will be able to demonstrate an overall increase by x% in a positive change in knowledge and attitude towards preventing sexual violence and promoting healthy relationships as measured by items on the post-test evaluation.
- By October 31, 2012, community groups will be able to identify three ways to prevent sexual violence and promote healthy relationships as measured by items on the post-test evaluation.
- By October 31, 2012, service providers who attend educational sessions will increase their promotion of healthy relationships within their field of expertise by x% as measured by items on the post-test evaluation.
- By October 31, 2012, a Sexual Violence Prevention Task Force/Coalition will implement a community-specific strategic plan that contributes to sustainable policy and systems change that support sexual violence prevention and healthy relationships.
- By October 31, 2012, x of community organizations will have policies and systems in place that promote prevention, reduce sexual violence and related health consequences as measured by _____.
- By October 31, 2012, provide technical assistance and/or advocacy to (number) community leaders and policy makers focusing on increasing their ability to make informed decisions with regards to sexual violence prevention policies as measured by _____.

Evaluation Measures

- Pre/post tests with questions from Item Ban. Item Bank can be found at <http://www.odh.ohio.gov/odhPrograms/hprt/sadv/svp.aspx>
- Follow-up survey, or post-post survey
- Chart audits – audit measure reviewed: hotline callers were provided at least three community resources.