

## SUBGRANTEE AWARD APPROVAL NOTICE

Initial Submission	X
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To: <b>Director of Health</b>	<b>DIRECTORS APPROVAL</b>
From:	39879

<b>Total Applicants Considered:</b>	7	<b>Program Title:</b>	REGIONAL HEALTH CARE SYSTEM COORDINATION FOR DISASTER PREPAREDNESS
<b>Number of Projects Awarded:</b>	7	<b>Grant Year:</b>	2010
		<b>Award Period:</b>	8/9/2009 thru 6/30/2010

APPLICANTS TO BE FUNDED:						
COUNTY	CITY	PROJECT	AGENCY NAME	AMOUNT	ADJUSTMENT	AWARDED
Cuyahoga	Cleveland	01860052RP0310	The Center for Health Affairs	\$1,501,617.00	\$123,268.00	\$1,624,885.00
Franklin	Columbus	02560102RP0310	Research & Education Foundation of the Ohio Hospital Association	\$826,178.00	\$452,171.00	\$1,278,349.00
Franklin	Columbus	02560112RP0310	Central Ohio Trauma System	\$1,473,992.00	\$125,064.00	\$1,599,056.00
Hamilton	Cincinnati	03160182RP0110	Greater Cincinnati Health Council	\$1,263,473.00	\$138,747.00	\$1,402,220.00
Lucas	Toledo	04860042RP0310	Hospital Council of Northwest Ohio	\$1,265,591.00	\$423,610.00	\$1,689,201.00
Montgomery	Dayton	05760052RP0310	Greater Dayton Area Health Information Network	\$889,234.00	\$448,073.00	\$1,337,307.00
Summit	Akron	07760042RP0310	Akron Regional Hospital Association	\$1,648,754.00	\$113,704.00	\$1,762,458.00
			<b>TOTAL AWARDS</b>			<b>\$10,693,476.00</b>

<b>SOURCE OF FUNDS SUPPORTING GRANT:</b>	
<b>FUND</b>	<b>DESCRIPTION</b>
3920	Federal Public Health Programs

**OVERALL ACTIVITIES COVERED BY FUNDS SOURCE:**

The primary purpose of this funding is to improve the healthcare systems ability to develop and implement activities within the following two priority areas, in preparation for a pandemic influenza event:

- Healthcare Workforce Protection
- Comprehensive Coalition Strategy for Optimization of Health Care

Awardees are expected to undertake planning and execute strategies in preparation for a fall influenza event.

**REVIEW CRITERIA USED FOR SELECTION:**

Agencies must submit a revised budget, budget justification, and workplan to identify proposed activities in response to the NOA and the H1N1 supplemental funding.



REVIEW PROCESS:	Display Name
Internal	Nichole Robinson

APPLICANTS DENIED:						
COUNTY	CITY	PROJECT	AGENCY NAME	AMOUNT	ADJUSTMENT	AWARDED

**REMARKS:**

Initial funding award for each agency on this grant was reduced due to reduction in overall federal funding to the program. Each subgrantee will receive additional funding on this same grant due to additional funding due to H1N1 preparedness funding received. Subgrantees must submit all invoices for H1N1 funding at the agency level as well as a detailed final expenditure report to document expenditures for H1N1. Funds for the H1N1 activities and the base RHC grant may not be commingled. Each subgrantee must maintain a tracking and documentation system to ensure that funds are not commingled.

