

## SUBGRANTEE AWARD APPROVAL NOTICE

Initial Submission	X
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To: Director of Health		<b>DIRECTORS APPROVAL</b>
From: Karen Hughes	Chief - Family	44424

<b>Total Applicants Considered:</b>	9		Program Title: REGIONAL INFANT HEARING
<b>Number of Projects Awarded:</b>	9	Grant Year: 2011	Award Period: 7/1/2010 thru 6/30/2011

APPLICANTS TO BE FUNDED:						
COUNTY	CITY	PROJECT	AGENCY NAME	AMOUNT	ADJUSTMENT	AWARDED
Allen	Lima	00230011IH0411	Lima Memorial Joint Operating Company	\$58,109.00	\$0.00	\$58,109.00
Clermont	Batavia	01310021IH0411	Clermont County Board of MR/DD	\$152,076.00	\$0.00	\$152,076.00
Cuyahoga	Cleveland	01860041IH0411	Cleveland Hearing & Speech Center	\$279,018.00	\$0.00	\$279,018.00
Franklin	Columbus	02550011IH0411	Columbus Public Schools	\$172,979.00	\$0.00	\$172,979.00
Lucas	Sylvania	04830011IH0411	Flower Hospital	\$89,349.00	\$0.00	\$89,349.00
Montgomery	Dayton	05760061IH0411	Deaf Community Resource Center, Inc.	\$122,814.00	\$0.00	\$122,814.00
Noble	Caldwell	06110011IH0311	Noble County Health Department	\$58,109.00	\$0.00	\$58,109.00
Scioto	Portsmouth	07360011IH0411	Referral and Educational Association for Child Health, Inc.	\$62,112.00	\$0.00	\$62,112.00
Summit	Akron	07730011IH0411	Children's Hospital Medical Center - Akron	\$114,434.00	\$0.00	\$114,434.00
<b>TOTAL AWARDS</b>						<b>\$1,109,000.00</b>

<b>SOURCE OF FUNDS SUPPORTING GRANT:</b>	
<b>FUND</b>	<b>DESCRIPTION</b>
320	Maternal Child Health Block Grant
392	Federal Public Health Programs

**OVERALL ACTIVITIES COVERED BY FUNDS SOURCE:**

The Regional Infant Hearing Program (RIHP) has two responsibilities: 1. To provide follow-up and tracking of infants who did not pass their newborn hearing screening; and 2. To provide appropriate habilitative services to infants and toddlers (birth to three) who have been diagnosed as deaf or hard-of-hearing and their families.

**REVIEW CRITERIA USED FOR SELECTION:**

All proposals will be judged on the quality, clarity and completeness of the application as outlined in the RFP, Section I. S. Review Criteria.



REVIEW PROCESS:	Display Name
Internal	Sheryl Silver
Internal	Reena Kothari
Internal	Susan Wendt
Internal	Naomi Halverson

APPLICANTS DENIED:						
COUNTY	CITY	PROJECT	AGENCY NAME	AMOUNT	ADJUSTMENT	AWARDED

REMARKS:

