

SUBGRANTEE AWARD APPROVAL NOTICE

Initial Submission	X
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To: Director of Health		DIRECTORS APPROVAL
From: Karen Hughes	Chief - Family	50529

Total Applicants Considered:	8	Program Title: GENETICS SERVICES
Number of Projects Awarded:	8	Grant Year: 2012 Award Period: 7/1/2011 thru 6/30/2012

APPLICANTS TO BE FUNDED:						
COUNTY	CITY	PROJECT	AGENCY NAME	AMOUNT	ADJUSTMENT	AWARDED
Cuyahoga	Cleveland	01830011GS0512	MetroHealth Medical Center	\$140,000.00	(\$6,228.00)	\$133,772.00
Cuyahoga	Cleveland	01830021GS0512	University Hospitals of Cleveland	\$299,500.00	(\$38,000.00)	\$261,500.00
Cuyahoga	Cleveland	01860081GS0112	Cleveland Clinic Foundation	\$116,905.05	(\$4,005.05)	\$112,900.00
Franklin	Columbus	02530011GS0512	Nationwide Children's Hospital	\$500,000.00	(\$14,500.00)	\$485,500.00
Hamilton	Cincinnati	03130011GS0512	Cincinnati Children's Hospital Medical Center	\$349,000.00	\$0.00	\$349,000.00
Lucas	Toledo	04840011GS0512	The University of Toledo-Health Science Campus	\$257,000.00	(\$59,000.00)	\$198,000.00
Montgomery	Dayton	05730011GS0512	Children's Medical Center - Dayton	\$274,000.00	(\$47,500.00)	\$226,500.00
Summit	Akron	07730011GS0512	Children's Hospital Medical Center - Akron	\$430,500.00	(\$40,500.00)	\$390,000.00
TOTAL AWARDS						\$2,157,172.00

SOURCE OF FUNDS SUPPORTING GRANT:	
FUND	DESCRIPTION
4D60	Genetics Services

OVERALL ACTIVITIES COVERED BY FUNDS SOURCE:

Regional Comprehensive Genetic Centers are required to conduct the following activities: 1) participate in a statewide genetics network and assure compliance with Genetic Center Standards and Criteria; provide access to genetic services through clinical and educational outreach; participate as a multidisciplinary team member on BCMH Specialty Clinics; and submit data to ODH; 2) Provide confirmatory testing and treatment services for individuals identified through newborn screening including cystic fibrosis; improve access to genetic services for infants identified with newborn hearing loss; and confirm diagnoses as requested by the Ohio Connections for Children with Special Needs birth defects system; 3) Improve access to genetic services for adults identified with hereditary cancer syndromes and cardiovascular disorders.

REVIEW CRITERIA USED FOR SELECTION:

The review criteria and score sheet were included in the Request for Proposals. Applicants assured compliance with the Genetic Standards and Criteria document and must have submitted a complete application with all forms and assurances. Applications were reviewed according to their responses to each component as well as budget and budget justification. Applicants submitted attachments designating staff to each required component and the percent of time spent in each component.

All applications went through the ODH Combined Application Review (CAR) process that included staff from Program, GAU and CAU.

REVIEW PROCESS:	Display Name
Internal	Anna Starr
Internal	Shelley Nottingham

APPLICANTS DENIED:						
COUNTY	CITY	PROJECT	AGENCY NAME	AMOUNT	ADJUSTMENT	AWARDED

REMARKS:

