



MEMORANDUM

Date: April 8, 2022

To: Occupant Protection Regional Coordination for the OBB Program Applicants

From: Jolene DeFiore-Hyrmer, MPH *JDH*
Bureau of Health Improvement and Wellness
Ohio Department of Health

Subject: Occupant Protection Regional Coordination for the OBB Program Applicants (BB23)
October 1, 2022 – September 30, 2023

The Ohio Department of Health (ODH), Bureau of Health Improvement and Wellness announces the availability of grant funds.

All electronic applications and attachments are due by 4:00 p.m., on Tuesday, May 31, 2022. Applications received after the due date will not be considered for funding. Faxed, hand-delivered or mailed applications will not be accepted.

All potential applicants are encouraged to attend a Bidders' Conference that will be held via webinar on **Tuesday, April 26, 2022, from 11:00 am to 12:00 pm.** The Bidders' Conference will provide an opportunity for interested parties to learn more about the Request for Solicitation.

Microsoft Teams Meeting Link

[Click here to join the meeting](#)

Call-in Information

(614) 721-2972, Meeting ID: 775829457#

*ODH is using Microsoft Teams for this virtual meeting. We will be sharing our screen through this platform. To join the meeting, please click on "Join Microsoft Teams Meeting" above. If your agency does not have Microsoft Teams, you will be given the option to "Join on the web instead". There is also a call-in number above if you do not plan to use your device's audio. **Please note, this program works best in Google Chrome.***

This is a competitive solicitation; all interested parties must submit a Notice of Intent to Apply for Funding (NOIAF— Appendix A), no later than 4:00 p.m. on Monday, April 27, 2022 to be eligible for these funds.

All grant applications must be submitted via the Internet, using the Grants Management Information System (GMIS 2.0). Applicants must attend or must document, in writing, prior attendance at GMIS 2.0 training in order to receive authorization for Internet submission. **Please complete and submit the ODH GMIS 2.0 Form (Appendix B) no later than 4:00 p.m. on Monday, April 27, 2022, to the Grants Administration Unit to begin the process to authorize your account.**

ODH encourages the immediate submission of the Notice of Intent to Apply for Funding. If you have questions, please contact Tiffany Boykins at Tiffany.Boykins@odh.ohio.gov.

Important Date Reminders:

- Bidders' Conference— Tuesday April 26, 2022, from 11:00 am to 12:30 am
 - Notice of Intent to Apply for Funds (Appendix A)— Monday, April 27, 2022, by 4:00 pm
 - ODH GMIS 2.0 Form (Appendix B), *if applicable*— Monday, April 27, 2022, by 4:00 pm
 - Applications Due— Tuesday, May 31, 2022, by 4:00pm
-

ALL APPLICATIONS MUST BE SUBMITTED VIA THE INTERNET

OHIO DEPARTMENT OF HEALTH

OFFICE OF Health Improvement
and Wellness

BUREAU OF [Health
Improvement and Wellness]

Occupant Protection Regional Coordination for the OBB Program
SOLICITATION FOR FISCAL YEAR 2023 BB23
(10/01/2022 – 09/30/2023)

Local Public Applicant Agencies Non-Profit Applicants

COMPETITIVE GRANT APPLICATION INFORMATION
100% Deliverable Funding

Revised 9/20/2021

For grant starts 7/1/2022 and thereafter

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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 components including an electronic portion submitted via the Internet website “ODH Application Gateway” and various paper forms and attachments. All the required components of a specific application must be completed and submitted by the application due date. **If any of the required components are not submitted by the due date indicated in sections D, G and R, the entire application will not be considered for review.**

This is a competitive solicitation; a Notice of Intent to Apply for Funding (NOIAF – Appendix A) must be submitted by, **Tuesday May 31, 2022** so access to the application via the Internet website “ODH Application Gateway” can be established.

Bidders Conference

A Bidders Conference is scheduled for via Microsoft Teams. All potential applicants are encouraged to attend on **Tuesday April 26th, 2022 at 11 AM**. The Bidders’ Conference will provide an opportunity for interested parties to learn more about the Request for Solicitation.

Bidders Conference Call Link –

Microsoft Teams meeting

Join on your computer or mobile app:

https://teams.microsoft.com/l/meetup-join/19%3ameeting_NzgyN2M1YWQtMDg2MS00ZGM0LWEyYmQtYmU5MzlkNTE2Mjcz%40thread.v2/0?context=%7b%22id%22%3a%2250f8fcc4-94d8-4f07-84eb-36ed57c7c8a2%22%2c%22oid%22%3a%22a0deeb25-9570-44a6-bf43-0f2585f17a99%22%7d

To call in (audio only): 614-721-2972 and conference ID: 775 829 457#

ODH is using Microsoft Teams for this virtual meeting. To join the meeting, please click on “Join Microsoft Teams Meeting” below. If your agency does not have Microsoft Teams, you will be given the option to “Join on the web instead” (screenshot below). There is also a call-in number below if you do not plan to use your device’s audio. Please note, this program works best in Google Chrome.

NEW AGENCIES ONLY or if UPDATES are needed: For non-profit agencies, the NOIAF must be accompanied by proof of non-profit status. Both non-profit and local public agencies must submit proof of liability coverage. Potential applicants and current subrecipients are required to maintain their current supplier information in the State of Ohio Supplier Portal. This information includes, but is not limited to, Electronic Funds Transfer (EFT), 1099 Form and current address.

This information is maintained on the following website: <http://supplier.ohio.gov/>

Note: Subrecipients future payments will be held if the agency receives a paper check due to the EFT information not being properly maintained in the supplier portal.

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

A. Policy and Procedures: Uniform administration of all the ODH grants is governed by the ODH Grants Administration Policies and Procedures (OGAPP) manual and updates in policies that have been posted on the GMIS Bulletin Board. This manual and GMIS Bulletin Board policy updates must be followed to ensure adherence to the rules, regulations and procedures for preparation of all Subrecipient applications. The OGAPP manual is available on the ODH website: click or copy and paste the following link into your web browser: <https://odh.ohio.gov/wps/portal/gov/odh/about-us/funding-opportunities/resources/grants-administrative-policies-and-procedures-ogapp-manual>

Updates to policies and procedures can be found on the GMIS bulletin board.

All budget justifications must include the following language and be signed by the agency head listed in GMIS. Please refer to the Budget Justification Templates listed on the GMIS bulletin board.

Budget Justification Certification language

- Subrecipient understands and agrees that it must follow the federal cost principle that applies to its type of organization (2 CFR, Part 225; 2 CFR, Part 220; or, 2 CFR, Part 230).
- Subrecipient's budgeted costs are reasonable, allowable and allocable under OGAPP and federal rules and regulations.
- The OGAPP and the rules and regulations have been read and are understood.
- Subrecipient understands and agrees that costs may be disallowed if deemed unallowable or in violation of OGAPP and federal rules and regulations.
- The appropriate programmatic and administrative personnel involved in this application are aware of agency policy with regard to subawards and are prepared to establish the necessary inter-institutional agreements consistent with those policies.
- Subrecipient agrees and understands that costs incurred in the fulfillment of the Deliverables must be allowable under OGAPP and federal rules and regulations to qualify for reimbursement.

B. Application Name: Occupant Protection Regional Coordination for the OBB Program

C. Purpose:

This grant supports the occupant protection regional coordination which serves as the infrastructure for the statewide network of the child passenger safety program, known as Ohio Buckles Buckeyes (OBB), required by ORC 4511.81. The Occupant Protection Regional Coordinators will serve as the regional liaisons between ODH and the county-level contacts at the OBB Sites/Coordinators. Motor vehicle injuries are a leading cause of death among children in the United States and the leading cause of injury in Ohio. Programs are needed at the state, regional, and local levels to educate parents and caregivers about the safest way to transport their children. This grant supports the regional coordinators as they work with local OBB sites to educate parents, lower child occupant protection misuse rates in Ohio, provide community resources, especially those in underserved and high-risk communities, and provide appropriate car seats to families that qualify under Women Infant and Children federal guidelines.

There are three supplemental opportunities in this grant. The first opportunity will support one agency to pilot the integration of the NDCF in their region. This is needed to improve statewide tracking and reporting of car seat activities and car seat use and misuse. The second opportunity will support one agency to plan and implement Child Passenger Safety Technician Instructor Development trainings and communication within Ohio. This is needed to maintain and increase current number of Child Passenger Safety Technician Instructors and assure continuity of the

program provided by the instructors throughout Ohio. The third opportunity will support one agency to plan and implement Buckeye Update with Techs, to provide communication and trainings to Child Passenger Safety Technicians in Ohio. This is needed to maintain current number of Child Passenger Safety Technicians in Ohio and ensure they are up to date on state and national news and education/resources.

D. Qualified Applicants: All applicants must be a local public or non-profit agency.

-Qualified Applicants are individuals, agencies or organizations that can demonstrate the ability to provide service within the region and have at least 3 years of experience successfully providing similar services within the region or multiple counties within the region. Competitive and Supplemental scoring requirements are outlined in Appendix D.

- Qualified Applicants must also be a certified Child Passenger Safety Technician Instructor (CPSTI), or the parent agency or organization must have access to a CPSTI, the highest certification level available through the standardized national certification process, on staff, or demonstrated willingness to enter into a sub contractual agreement with someone who is a CPSTI.

- Qualified Applicants for the Supplemental Funding opportunities, can find guidance outlined in Appendix E.

- Applicant agencies must have the capacity to accept an electronic funds transfer (EFT). If an applicant agency needs GMIS access, then a GMIS access form must be submitted (Appendix B). State who is eligible to apply. Indicate whether local public and/or non-profit agencies can apply.]

The following criteria must be met for grant applications to be eligible for review:

1. Applicant does not owe funds to ODH and has repaid any funds due within 45 days of the invoice date.
2. Applicant has not been certified to the Attorney General's (AG's) office.
3. Applicant has submitted application and all required attachments by **4:00 p.m. on Tuesday May 31, 2022.**

E. Service Area: OPRC Map designating the various regions is available in Appendix F. Only 1 applicant per region will be granted funding, and only 1 applicant total will be awarded for each of the supplemental funding.

F. Number of Grants and Funds Available: The source of funding is the National Highway Safety Transportation Administration, through the Ohio Traffic Safety Office. The entire project period is 10/1/2022-9/30/2027. Funding is based on percentage of counties in region compared to total number of counties in Ohio. Up to 8 regional grants will be awarded with a maximum of one per region for a total of \$472,000 for base activities (See Appendix C2 for specifics on regions), with up to one grant being awarded for each of the 3 additional supplemental funding amount. Total grant amount is \$505,000 with the addition of the 3 supplemental funding opportunities.

The first program year from 10/1/2022 to 9/30/2023, applicants are eligible for the following according to their region Please see Appendix F for OPRC Map:

Region	Maximum Grant Awarded
#1: Northwest	\$61,000
#2: West	\$65,000
#3: Southwest	\$53,000
#4: South	\$57,000

#5: Central	\$65,000
#6: North	\$57,000
#7: East	\$65,000
#8: Northeast	\$49,000

Continuation program years will span 12 months on the following schedule:

***Year 2** (10/1/2023 – 9/30/2024)

***Year 3** (10/1/2024 – 9/30/2025)

***Year 4** (10/1/2025 – 9/30/2026)

***Year 5** (10/1/2026 – 9/30/2027)

An additional (3) three OPTIONAL Supplemental Funding Opportunities are available.

#1 National Digital Check Form (NDCF) Pilot: One awardee will be eligible for up to an additional \$15,000 to pilot the integration of the NDCF in their region.

#2 Child Passenger Safety Technician Instructor Development: One awardee will be eligible for up to an additional \$10,000 to implement networking and educational opportunities for Child Passenger Safety Technician Instructors in Ohio.

#3 Buckeye Update with Techs: One awardee will be eligible for up to an additional \$8,000 to implement networking and educational opportunities for Child Passenger Safety Technicians in Ohio, with the purpose of gathering CPSTs across Ohio to update on state and national news, network opportunities, and gain CEUs.

*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:** All parts of the application, including any required attachments, must be completed and received by ODH electronically via GMIS by **4:00 p.m. by Tuesday, May 31, 2022**. Applications and required attachments received after this deadline will not be considered for review.

Contact Tiffany Boykins at Tiffany.Boykins@odh.ohio.gov with any questions.

- H. Authorization:** Authorization of funds for this purpose is contained in Amended Substitute House Bill [] and/or the *Catalog of Federal Domestic Assistance (CFDA) Number- 20.600*
- I. Goals:** Ohio is required to maintain a child passenger safety program, per ORC 4511.81. This approach helps address objectives and activities set forth in the Preventive Health and Health Services Block Grant, such as “In an effort to reduce injury related to motor vehicle crashes among children, the Violence and Injury Prevention Program will provide access to child safety seats for low-income families in Ohio by providing 4 shipments of at least 16 seats to each of Ohio's 88 county Ohio Buckles Buckeyes (OBB) sites.” The Core State Injury Prevention Program (SIPP) also identified data metrics to track, hospital discharge and emergency department (ED) injury-related visit date to track injury related visits related to child vehicle traffic injuries and motor vehicle crash data will be used to monitor crashes involving children and examine factors such as safety equipment use. ODH has identified the long-term

outcome that, “By 2026, reduce the emergency department visit rate for motor vehicle crashes-related injury to Ohio youth occupants ages 0 to 9 years by 10% from 282.6 per 100,000 in 2019 to 254.3 per 100,000.” The Occupant Protection Regional Coordinators provide the infrastructure for Ohio’s child passenger safety program. Programs are needed at the state, regional, and local level to educate parents and caregivers about the safest way to transport their children. Eight regional subgrantees will be selected to complete the following: manage the 88 Ohio Buckles Buckeye sites on behalf of ODH; train Child Passenger Safety Technicians and assist technicians in Ohio with maintaining and increasing their skills; conduct annual trainings with their OBB sites; conduct community-based car seat checks to ensure families have seats fitted correctly and technicians have the opportunities to maintain/enhance skills; monitor and provide technical assistance to all Ohio Child Passenger Safety Fitting Stations; conduct awareness and education outreach to Ohio families through local and national initiatives; and manage and serve as a support to the 88 OBB Sites, which allows ODH to provide seats to the OBB sites. The goals of this proposed approach are to increase the number of child passenger safety technicians, and child passenger safety education and car seat check events in high burden counties. In addition, streamline and improve data collection to establish a more accurate baseline and measure impact and evaluate child passenger safety activities in Ohio. Grant activities will be targeted in high burden counties in each region in order to reach underserved populations.

J. Program Period and Budget Period: The program period will begin [10/01/2022] and end on [09/30/2027]. The budget period for this application is [10/01/2022] through [09/30/2023].

K. Public Health Accreditation Board (PHAB) Standard(s): Identify the PHAB Standard(s) that will be addressed by grant activities. *This grant program will address PHAB standard 3.1: Provide Health Education and Health Promotion Policies, Programs, Processes, and Interventions to Support Prevention and Wellness; and PHAB standard 4.2: Promote the Community’s Understanding of and Support for Policies and Strategies that will improve the Public’s Health.* The PHAB standards are available at the following website:

http://www.phaboard.org/wp-content/uploads/PHABSM_WEB_LR1.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 PHAB Standards.

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

Public Health Accreditation Board (PHAB) Standard(s) to be addressed by grant activities. Please select from the following:

- **Standard 1.3:** Analyze Public Health Data to Identify Trends in Health Problems, Environmental Public Health Hazards, and Social and Economic Factors that Affect the Public’s Health.
- **Standard 1.4:** Provide and Use the Results of Health Data Analysis to Develop Recommendations Regarding Public Health Policy, Processes, Programs, or Intervention.
- **Standard 2.2:** Contain/Mitigate Health Problems and Environmental Public Health Hazards.
- **Standard 3.2:** Provide Information on Public Health Issues and Public Health Functions Through Multiple Methods to a Variety of Audiences.
- **Standard 4.1:** Engage with the Public Health System and the Community in Identifying and Addressing Health Problems through Collaborative Processes.
- **Standard 10.2:** Promote Understanding and Use of the Current Body of Research Results, Evaluations, and Evidence-Based Practices with Appropriate Audiences.

The applicant must submit the above summary as part of the 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 PHAB 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 point when submitting the program summary with the grant application. If an applicant agency has a regional and/or statewide focus, a statement of support should be submitted from at least one local health district, if available.

3. *Evidence of Health Equity Strategies*

The ODH is committed to the elimination of health disparities and achieving health equity for all Ohioans. The items below are requirements for all applicants to ensure health equity is embedded within all components of the application (e.g., Goals, Program Narrative, and Objectives.)

1) Identify specific groups who experience a disproportionate burden of disease, health condition or health outcome targeted by this solicitation See Ohio's State Health Assessment Ohio's health data. <https://odh.ohio.gov/wps/portal/gov/odh/explore-data-and-stats/interactive-applications/2019-online-state-health-assessment>

2) Identify geographic reference points (i.e., census tracts, census block groups or zip codes) to specify where program activities are focused.

Consider using the Ohio Health Improvement Zones Dashboard to determine or refine your priority service areas. The dashboard was created to support and aid efforts to reach Ohioans living in communities that may experience barriers to health. The dashboard quantifies specific factors that affect the resilience of individuals and communities to achieve optimal health and overcome a disaster like COVID-19.

By understanding where these populations are located and what factors contribute to their levels of risk and overall health outcomes, subrecipients can collectively and holistically develop strategies to improve health in the communities that need it most. Interactive maps, census tract information and more can be found on the Ohio Health Improvement Zones Dashboard, here: <https://odh.ohio.gov/wps/portal/gov/odh/know-our-programs/health-equity/health-improvement-zones>.

3) Use direct or indirect feedback from the prioritized population, community, group, or community agency to identify specific social and environmental conditions (social determinants of health) associated with health disparities and health inequities.

4) Identify measurable health equity targets that demonstrate reducing disparities and improving health equity are critical goals to be achieved through program activities. This information must also be supported by data. For guidance on methodology to establish equity targets, review [2030 Target Setting Methodologies for Objectives in Healthy People 2030](#).

<https://www.healthypeople.gov/sites/default/files/TargetSettingReport-8-6-18%20FINAL.pdf>

5) Outline specific evaluation strategies to measure the impact of program activities on decreasing and/or eliminating health disparities and health inequities.

The following are best practices toward eliminating disparities and achieving health equity and are not required, but highly encouraged.

1) Link proposed activities to health equity strategies identified in local, state or national planning documents.

These documents include, but are not limited to strategies, goals and objectives outlined in [Healthy People 2030](#), the [State Health Improvement Plan \(SHIP\)](#) and local Community Health Assessments .

- State Health Improvement Plan - <https://odh.ohio.gov/wps/portal/gov/odh/about-us/sha-ship>
- Healthy People 2030 - <https://health.gov/healthypeople>

- 2) Develop staffing plans where board members, leadership and program staff reflect the race, ethnicity, background, and/or culture of the population being served.
- 3) Identify up- and downstream approaches to address social determinants of health and reduce disparities. Upstream factors like food, housing and income insecurity that focus on addressing social determinants of health decrease barriers and improve supports that provide opportunity for people to achieve their full health potential. Downstream approaches focus on providing equitable access to care and services to reduce the negative impact of social determinants on health outcomes.
- 4) Establish non-traditional partnerships among different sectors of the community (e.g., faith-based organizations, local industries, businesses, universities, businesses, healthcare) that can provide valuable insight, new perspective, and more effective ways to achieve program goals. Non-traditional partners create opportunity to collaborate across sectors and may serve as a new source of support for the program.

Understanding Health Disparities, Health Inequities, Social Determinants of Health & Health Equity: The following information is provided to explain key health equity concepts and terms.

Racial and ethnic minorities, those living in rural communities, people with disabilities, the LGBTQ community and Ohio's economically disadvantaged residents do not have the same opportunities as other groups to achieve and sustain optimal health. Health disparities occur when these groups experience more disease, death or disability beyond what would normally be expected based on their relative size of the population. Health disparities are often characterized by such measures as disproportionate incidence, prevalence and/or mortality rates of diseases or health conditions. Health is largely determined by where people live, learn, work, play, and age. Health disparities are unnatural and occur because of low socioeconomic status, race/ethnicity, sexual orientation, gender, disability status, geographic location or some combination of these factors. Those most impacted by health disparities also tend to have less access to resources like healthy food, safe housing, quality education, safe neighborhoods and freedom from racism and other forms of discrimination. These are referred to as **social determinants of health (SDOH)**. SDOH are a root cause of health disparities. The systematic nature of health disparities is considered unjust and is referred to as **health inequities**. The ability of everyone to have the same opportunity to achieve the best health possible is referred to as **health equity**. Programs that incorporate social determinants into the planning and implementation of interventions will greatly contribute to advancing health equity.

M. Human Trafficking: The ODH is committed to the elimination of human trafficking in Ohio. If applicable to the subrecipient program, ODH will give priority consideration to those subrecipients who can demonstrate the following:

- a. Victims of human trafficking are included in your agency's target population;
 1. At-risk population
 2. Mental health population
 3. Homeless population
- b. Agency promotes the expansion of services to identify and serve those affected by human trafficking.

[xx Applicable Not Applicable to Occupant Protection Regional Coordination for OBB Program]

- N. Appropriation Contingency:** Any award made through this program is contingent upon the availability of funds for this purpose. **The subrecipient agency must be prepared to support the costs of operating the program in the event of a delay in grant payments.**
- O. Programmatic, Technical Assistance and Authorization for Internet Submission:** Initial authorization for Internet submission, for new agencies, will be granted after participation in the GMIS training session. All other agencies will receive their authorization after the posting of the Solicitation to the ODH website and the receipt of the NOIAF. Please contact [Contact Tiffany Boykins at Tiffany.Boykins@odh.ohio.gov for questions regarding this Solicitation]
- P. Acknowledgment:** An Application Submitted status will appear in GMIS that acknowledges ODH system receipt of the application submission.
- Q. Late Applications:** GMIS automatically provides a time and date system for grant application submissions. 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 **Tuesday, May 31, 2022, at 4:00 p.m.**
- 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 (GSU), via the front desk at 246 N. High St., Columbus, Ohio; but they must be delivered by **4:00 p.m.** on the application due date. Fax attachments will not be accepted. **GMIS 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 over the signature of the Director of the Ohio Department 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, written notification, issued over 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. Workplan and/or logic model demonstrate how activities reduce health disparities and inequities (See Appendix G for workplan template).
 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. Describe Specific, Measurable, Attainable, Realistic & Time-Phased (S.M.A.R.T.) 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 reflect the communities served through grant funds;
7. Provides an evaluation plan, including a design for determining program success and demonstrates that the community being served will be meaningfully engaged in formative and outcome evaluations;
8. Is responsive to the special concerns and program priorities specified in the Solicitation;
9. Has demonstrated acceptable past performance in areas related to programmatic and financial stewardship of grant funds;
10. Has demonstrated compliance to OGAPP;
11. Explicitly identifies specific groups in the service area who experience a disproportionate burden of the diseases; health condition(s); or who are at an increased risk for problems addressed by this funding opportunity; and,
12. Describe activities which support the requirements outlined in sections I. thru M. of this Solicitation. Programs can insert further information about program specific review criteria (if applicable) *[Programs will include an Application Review Form (Appendix D) and/or provide further details of scoring.]*

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 Solicitations; **There will be no appeal of the Department's decision.**

- U. **Freedom of Information Act:** The Freedom of Information Act (5 U.S.C.552) and the associated Public Information Regulations 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 being an unwarranted invasion of personal privacy will not be disclosed. For guidance regarding specific funding sources, refer to: 45 CFR Part 5 for funds from the U.S. Department of Health and Human Service; 34 CFR Part 5 for funds from the U.S. Department of Education or, 7 CFR Part 1 for funds from the U.S. Department of Agriculture. [Select only the appropriate reference.]
- V. **Ownership Copyright:** Any work produced under this grant, including any documents, data, photographs and negatives, electronic reports, records, software, source code, or other media, shall become the property of ODH, which shall have an unrestricted right to reproduce, distribute, modify, maintain, and use the work produced. If this grant is funded in whole, or in part, by the federal government, unless otherwise provided by the terms of that grant or by federal law, the federal funder also shall have an unrestricted right to reproduce, distribute, modify, maintain, and use the work produced. No work produced under this grant shall include copyrighted matter without the prior written consent of the owner, except as may otherwise be allowed under federal law.

ODH must approve, in advance, the content of any work produced under this grant. All work must clearly state:

“This work is funded either in whole or in part by a grant awarded by the Ohio Department of Health, Bureau of Health Improvement and Wellness, Violence and Injury Prevention Section and as a sub-award of a grant issued by Ohio Traffic Safety Office, under the Occupant Protection for Children grant, grant award number (number has not yet been issued), and CFDA number 20.600”

W. **Reporting Requirements:** Successful applicants are required to submit Subrecipient program and expenditure reports. Reports must adhere to the requirements of the OGAPP manual. Reports must be received in accordance with the requirements of the OGAPP manual and this Solicitation; before the department will release any additional funds.

Note: Failure to ensure the quality of reporting by submitting incomplete and/or late program or expenditure reports will jeopardize the receipt of future agency payments.

Reports shall be submitted as follows:

- a. **Program Reports:** Subrecipients Program Reports must be completed and submitted via GMIS, as required by the subgrant program by the following dates. Quarterly Program Reports will be completed in a REDCap survey and confirmation of REDCap Survey completion will be uploaded to GMIS each quarter. **Program reports that do not include required attachments will not be approved.** All program report attachments must clearly identify the authorized program name and grant number.

☒ Program Reports Required

☐ No Program Reports Required

Period	Report Due Date
October 1 – December 31, 2022	December 31, 2022
January 1 – March 31, 2023	March 31, 2023
April 1 – June 30, 2023	June 30, 2023
July 1 – September 30, 2023	September 30, 2023

Submission of Subrecipient Program Reports via GMIS indicates acceptance of the OGAPP.

Subrecipients will be required to participate in the following conference calls and virtual or in-person meetings:

- Bi-monthly grantee conference calls on the first Tuesday of even months at 10 AM

- Must attend at least two (2) Ohio Injury Prevention Partnership meetings and at least two (2) Child Injury Action Group meetings which will be held virtually or in-person

-

- b. **Subrecipient Reimbursement Expenditure Reports:** Subrecipients will complete quarterly reimbursement (expenditure report submission) from ODH (please check the reimbursement type on the attached NOI AF). Please note that no changes can be made to the reimbursement type during the fiscal year once the project numbers have been established in GMIS. Subrecipient Quarterly Reimbursement Expenditure Reports **must** be completed and submitted **via GMIS** by the following dates:

[Period	Report Due Date
October 1 – December 31, 2022	January 5, 2023
January 1 – March 31, 2023	April 5, 2023
April 1 – June 30, 2023	July 5, 2023
July 1 – September 30, 2023	October 5, 2023

Note: Obligations not reported on the final monthly or 4th quarter expenditure report will not be considered for payment with the final expenditure report.

- a. Final Expenditure Reports:** A Subrecipient Final Expenditure Report reflecting total expenditures for the fiscal year must be completed and submitted **via GMIS by 4:00 p.m. on or before October 5th, 2023**. The information contained in this report must reflect the program's accounting records and supportive documentation. Any cash balances must be returned with the Subrecipient Final Expense Report. The Subrecipient Final Expense Report serves as an invoice to return unused funds.

Submission of the Quarterly and Final Subrecipient Expenditure reports via the GMIS system indicates acceptance of OGAPP. Clicking the "Approve" button signifies authorization of the submission by an agency official and constitutes electronic acknowledgment and acceptance of OGAPP rules and regulations.

- X. Special Condition(s):** A Special Conditions link is available for viewing and responding to special conditions within GMIS. The 30 day time period, in which the subrecipient must respond to special conditions will begin when the link is viewable. Subsequent payments will be withheld until satisfactory responses to the special conditions or a plan describing how those special conditions will be satisfied is submitted in GMIS.

- 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;
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. Contributions to a contingency fund;
6. Entertainment;
7. Fines and penalties;
8. Membership fees — unless related to the program and approved by ODH;
9. Interest or other financial payments (including but not limited to bank fees);
10. Contributions made by program personnel;
11. Costs to rent equipment or space owned by the funded agency;
12. Inpatient services;
13. The purchase or improvement of land; the purchase, construction, or permanent improvement of any building;
14. Satisfying any requirement for the expenditure of non-federal funds as a condition for the receipt of federal funds;
15. Payments to any person for influencing or attempting to influence members of Congress or the Ohio General Assembly in connection with awarding of grants;
16. *Per Program, the following are also considered unallowable costs:* Advertising/Public Communications (cost to purchase paid media, including but not limited to television, radio, print, outdoor, or internet); alcohol; vehicle fuel; entertainment; office furnishings and fixtures; grant proposal preparation and submission; car seats for distribution and food.

Subrecipients will not receive payment from ODH grant funds used for prohibited purposes. ODH has the right to recover funds paid to Subrecipients for purposes later discovered to be prohibited.

AA. Audit: Subrecipients currently receiving funding from the ODH are responsible for submitting an independent audit report. Every subrecipient will fall into one of two categories which determine the type of audit documentation required.

Subrecipients that expend \$750,000 or more in federal awards per fiscal year are required to have a single audit which meets OMB's Federal Uniform Administrative Requirements. The subrecipient must submit, 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 no later than nine months after the end of the Subrecipient's fiscal year. 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's Federal Uniform Administrative Requirements.

Subrecipients that expend less than the \$750,000 threshold require a financial audit conducted in accordance with Generally Accepted Government Auditing Standards. The Subrecipient must submit a copy of the audit report, the auditor's management letter, and a corrective action plan (if applicable) within 30 days of the receipt of the auditor's report, but no later than nine months after the end of the Subrecipient's fiscal year. **The financial audit is not an allowable cost to the program.**

Once an audit is completed, a copy must be sent to <https://harvester.census.gov/facweb/> or to the ODH, Grants Services Unit, (GSU) within 30 days. Reference: OGAPP and OMB's Omni Circular Federal Uniform Administrative Requirements regarding Audits of States, Local Governments, and Non-Profit Organizations for additional audit requirements.

Subrecipient 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 subgrants passed through the ODH; and,
- Summarizes a Corrective Action Plan (CAP) to address the findings. A copy of the CAP should be attached to the cover letter.

AB. Submission of Application:

Formatting Requirements:

- Properly label each item of the application packet (e.g., Budget Narrative, Program Narrative).
- Each section should use 1.5 spacing with one-inch margins.
- Program and Budget Narratives must be submitted in portrait orientation on 8 ½ by 11 paper.
- 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 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
 - Justification
 - Personnel
 - Other Direct Costs
 - Equipment
 - Contracts
 - Compliance Section
 - Summary
5. Civil Rights Review Questionnaire
6. Assurances Certification
7. Federal Funding Accountability and Transparency Act (FFATA) reporting form
8. Change request in writing on agency letterhead **(Existing agency with tax identification number, name and/or address change(s))**.
9. Health Equity Module
10. Public Health Impact Statement Summary (non-health department only)
11. Statement of Support from the Local Health Districts (non-health department only)
12. Attachments as required by Program: Workplan, Letter to Authorize Travel, Position Description, Resumes and Contingency Plans, Supplemental Workplan, if applicable, Supplemental Letters of Support, if applicable.

One copy of the following document(s) must be e-mailed to <https://harvester.census.gov/facweb/> or mailed to the address listed below:

**Complete
Copy &
E-mail or
Mail to
ODH**

Current Independent Audit
(latest completed organizational fiscal period; **only if not previously submitted**)

Ohio Department of Health Grants
Services Unit
Central Master Files, 4th Floor 35
E. Chestnut Street Columbus,
Ohio 43215

II. APPLICATION REQUIREMENTS AND FORMAT

Agencies will receive GMIS access after the Notice of Intent to Apply for Funding for is submitted to ODH.

All applications must be submitted via GMIS. Submission of all parts of the grant application via the ODH's GMIS system indicates acceptance of OGAPP. Submission of the application signifies authorization by an agency official and constitutes electronic acknowledgment and acceptance of OGAPP 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 #15 of the Solicitation 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.

- 1. Primary Reason and Justification Pages:** Provide a budget justification narrative outlining how the deliverable will be met. (A budget justification example can be found on GMIS).
- 2. Other Direct Costs:** Submit a budget for this section and the necessary form(s) to support costs for the period October 1, 2022 – September 30, 2023.

The applicant shall retain all original fully executed contracts on file.

- 3. Compliance Section:** Answer each question on this form in GMIS as accurately as possible. *Completion of the form ensures your agency's compliance with the administrative standards of ODH and federal grants.*

- C. Assurances Certification:** Each subrecipient must submit the Assurances (Federal and State Assurances for subrecipients) form within GMIS. This form is submitted as a part of each application via GMIS. 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 subrecipient agency agrees by electronic acknowledgment to the financial standards of conduct as stated therein.

D. Project Narrative:

1. Executive Summary:

- Describe segments of the target population who experience disproportionate burdens of the local child injury rates in your region due to inadequate use or lack of car and booster seats and education. This includes an overview of the demographic characteristics of race, ethnicity and age groups target audiences that are less likely to use car or booster seats; and documenting how the program engaged underserved populations to better inform program interventions.
- Provide a description of how agency will work with other local occupant protection partners and/or community members to address the high risk and underserved populations in your region related to child occupant protection.
- Identify geographic reference points (i.e., Ohio Health Improvement Zones, census tracts, census block groups or zip codes) to specify where program activities are focused
- Describe how your agency will work toward the project goals of improving data collection to establish a more accurate baseline in each region for child occupant protection misuse rate and identify success and impact of the program through data in Ohio by September 30, 2028.
- Include requested funding amount.

2. Description of Applicant Agency/Documentation of Eligibility/[Personnel]:

- Briefly discuss the applicant agency's eligibility to apply. Summarize the agency's structure as it relates to this program and, as the lead agency, how it will manage the program and serve high-risk and underserved communities.
- Applicants must be local public health or non-profit agency. Discuss agency services provided to the community that relate to this program and success in providing similar services over the last 3 years. Discuss agency's structure as it relates to this program, how agency will manage the program and the OBB sites in their region.
- Describe the capacity of your organization, its personnel, or contractors to communicate effectively and convey information in accordance with National Standards for Culturally and Linguistically Appropriate Services (CLAS) and Americans with disabilities Act (ADA) Standards for Effective Communication in a manner and method 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.
 - National CLAS Standards
<https://thinkculturalhealth.hhs.gov/clas#:~:text=The%20National%20CLAS%20Standards%20are,culturally%20and%20linguistically%20appropriate%20services>.
 - ADA Standards for Effective Communication
 - <https://www.ada.gov/effective-comm.htm>

3. Experience and capacity to address child injury and occupant protection

- Summarize existing injury prevention efforts managed by your agency including those that address the needs of high risk and underserved populations.
- Provide information on other grant and local funds your agency has for injury prevention activities. Describe how this funding will expand on your current injury prevention activities and not supplant current funding.

4. Personnel:

- Explain how agency employs or contracts at least one staff assigned to the Occupant Protection

Regional Coordination whose duties are to administer the OPRC Program and related grant activities. Provide explanation that demonstrates compliance with this requirement or plans for hiring and training additional staff.

- OPRC must be a Certified Passenger Safety Technician Instructor (CPSTI), or the parent agency must have access to a CPSTI, the highest certification level available through the standardized national certification process, on staff, or through a sub contractual agreement. Agency should provide documentation that demonstrates compliance with this requirement, such as CPSTI certification number and expiration date; or agency must explain how they will meet this requirement.
- How many program staff within your agency also work on child occupant protection related efforts and to what degree?

5. **Problem/Need:** Identify and describe the local health status concern(s) that will be addressed by the program. Only provide national and state data if local data is not available. Outline need using child injury and motor vehicle crash data. Clearly identify the target population. The specific health status concerns that the program intends to address may be stated in terms of disparity (e.g. population, location) health status (e.g., morbidity and/or mortality) or health system (e.g., accessibility, availability, affordability, appropriateness, quality of health services) indicators. The indicators should be measurable in order to serve as baseline data upon which evaluation will be based.

Explicitly describe segments of the target population who experience a disproportionate burden for the health concern or issue; or who are at an increased risk for the problem addressed by this funding opportunity.

Include a description of other agencies/organizations, in your area, also addressing this problem/need.

6. **Methodology:**

- **OBB Sites:** Describe how communication and support will be built and/or maintained with OBB sites in region.
- **Community Outreach:** Describe how priority community residents will be reached through car seat education and events.
- **Fitting Stations:** Provide current number of active fitting stations in region. Describe plans to increase number of active fitting stations, maintain regular communication and how ongoing support will be provided.
- **Data Collection & Evaluation:** Describe agency experience with data collection and evaluation. How will this be applied to collection of data for OPRC program (e.g. misuse rate)?
- **Data to Action:** Using Appendix I as a reference, provide a detailed summary of steps agency will take to prioritize grant activities in target counties identified. Detail plans and partner agencies that will be involved.
- **Sustainability:** Describe child passenger safety activities will continue if funding is no longer available through ODH. How will new CPS technicians and instructors in region assist with sustainability?

- E. **Civil Rights Review Questionnaire — EEO Survey:** The Civil Rights Review Questionnaire Survey is a part of the Application Section of GMIS. Subrecipients 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):** All applicants applying for ODH grantfunds are required to complete the FFATA reporting form in GMIS. Applicants must ensure that the information contained in SAM.gov, DUN & Bradstreet and the FFATA reporting form match. ODH willhold all payments if an applicant's information does not successfully upload into the federal system.

All applicants for ODH grants are required to obtain a Data Universal Number System (DUNS), registerin SAM.gov and submit the information in the grant application. For information about the DUNS,go to www.dnb.com. For information about System for Award Management (SAM) go to <https://beta.sam.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 <https://www.whitehouse.gov/>.

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

- G. Attachment(s):** Attachments are documents which are not part of the standard GMIS application but are deemed necessary to a given grant program. All attachments must clearly identify the authorized program name and program number. All attachments submitted to GMIS must be attached in the "Project Narratives" section and be in one of the following formats: PDF, Microsoft Word or Microsoft Excel. Please see the GMIS bulletin board for instructions on how to submit attachments in GMIS. Attachments that are non-Internet compatible must be postmarked or received on or before the application due date. An original and the required number of copies of non-Internet compatible attachments must be mailed to the ODH, Grants Services Unit, Central Master Files address by **4:00 p.m. on or before Tuesday May 31, 2022.**

[A minimum of an original and the indicated number of copies of non-Internet attachments are required. If program requires more copies, then insert the appropriate number.]

III APPENDICES

- A. Notice of Intent to Apply For Funding
- B. GMIS Training, User Access, Access Change or Deactivation
- C. C1 Deliverable – Objective Descriptions (if applicable)
C2 Deliverable – Objective Allocations (if applicable)
- D. Application Review Form
- E. Supplemental Funding Guidance
- F. OPRC Map
- G. Year 1 Workplan Template
- H. Year 1 Guidance
- I. Data to Action Guidance
- J. OBB Criteria Form
- K. OBB Reporting Tool
- L. Conference Call Documentation Template
- M. TA Tracking Sheet
- N. Fitting Station Tracking Document
- O. OPRC Program Income Form

Appendix A

NOTICE OF INTENT TO APPLY FOR FUNDING

Ohio Department of Health

Bureau of Health Improvement and
Wellness

ODH Program Title:

Occupant Protection Regional Coordination for OBB
BB23 Program

Submission Required

See due date below.

New Applicants must submit the
GMIS Access form with the Notice of
Intent to Apply for Funding Form

Reimbursement
Type
Select one of the
options below:
☐ Monthly
OR
☒ Quarterly

ALL INFORMATION REQUESTED MUST BE COMPLETED.

County of Applicant Agency _____ Federal Tax Identification Number _____

Geographic Area Applying to Cover _____

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.

Type of Applicant Agency (Check One)

<input type="checkbox"/> County Agency	<input type="checkbox"/> Hospital	<input type="checkbox"/> Local Schools
<input type="checkbox"/> City Agency	<input type="checkbox"/> Higher Education	<input type="checkbox"/> Not-for Profit

Applicant Agency/Organization _____

Applicant Agency Address _____

Agency Contact Person Name and Title _____

Telephone Number _____ E-mail Address _____

Agency Head (Print Name)

Agency Head (Signature)

Please note that the agency head listed above must match the agency head listed in GMIS. Unless a new agency, NOIAF's will not be accepted if name doesn't match what is listed in GMIS. If the agency head needs updated in GMIS, please include a letter on agency letterhead outlining the change. The new agency head's signature will be accepted with receipt of the update letter.

Does your agency have at least two staff members who currently have access to the ODH GMIS system? YES ☐ NO ☐

If yes, no further action is needed. If no, ODH Grants Services Unit staff will email the GMIS reference guide to the email addresses listed on the GMIS Access Request form.

The NOIAF must be accompanied by the agency's Proof of Non-Profit status (if applicable) and Proof of Liability Coverage (if applicable). Potential applicants and current subrecipients are required to set-up and maintain their current supplier information in the State of Ohio Supplier Portal. This information includes, but is not limited to, Electronic Funds Transfer (EFT), 1099 Form and current address.

This information must be set-up and maintained in the following website: <http://supplier.ohio.gov/>.

Note: Subrecipients future payments will be held if the agency receives a paper check due to the EFT information not being properly maintained in the supplier portal.

Forms are only required for NEW AGENCIES or if UPDATES are needed for current agencies. THE NOIAF AND REQUIRED FORMS MUST BE EMAILED TO Tiffany.Boykins@odh.ohio.gov BY April 27, 2022.

NOTE: NOIAF's will be considered late if any of the required forms listed above are not received by NEW AGENCIES by the due date. NOIAF's considered late will not be accepted.

Appendix B

If new applicant, this form must be submitted with the Notice of Intent to Apply for Funding Form.

GMIS Training, User Access, Access Change or Deactivation Request

One request per person. Requests will only be honored when signed by your **Agency Head** or **Agency Financial Head** and complete. In addition, if a user leaves your agency, you are to notify ODH so that their account is rendered inactive and submit a form for the replacement. The user will receive his/her username and password via e-mail once the request is processed. *Refresher guides can be found on the ODH web site: <https://odh.ohio.gov/wps/portal/gov/odh/about-us/funding-opportunities/ODH-Grants/>. ODH Grants Page – “GMIS Training Resource” Section.*

Date: _____

Check the type of access and complete the information requested:

☐ Employee — needs GMIS Training

☐ New Employee — needs GMIS Access. Effective Date of Activation: _____

☐ Existing Employee — New GMIS User or GMIS User Access Change.

Effective/Change Date: _____

☐ Deactivation — User no longer needs access to ODH Application Gateway/GMIS 2.0 or GMIS 2.0 only: Effective Date of Deactivation (ODH Application Gateway/GMIS 2.0): _____

Or Effective Date of Deactivation (GMIS 2.0 access only): _____

Agency Name & Address: _____

Employee Name (no nicknames): _____

Employee Job Title: _____

Employee Office Phone Number: _____

Employee Office Fax Number: _____

Employee Office Email Address: _____

User Access Section: Please check all that applies and enter requested information: Email

Notifications: ☐ Yes ☐ No

GMIS Project Number(s) user needs access to: _____

Authorization Signature for User Access/Change/Deactivation:

Signature of Agency Head or Agency Financial Head Printed Name of Agency Head or Agency Financial Head

To be completed by Grants System Officer ONLY—Date Received: _____ Date Processed: _____

Deliver Requests to Karen Tinsley, Grants System Officer, 614-644-7546

Mail: ODH/OFA, 35 E. Chestnut St., 4th Floor, Columbus, Ohio 43215 Or

Scan & Email: karen.tinsley@odh.ohio.gov

Appendix C1

Name of Subgrant Program: Occupant Protection Regional Coordination (BB)

Budget Period: 10/1/2022-9/30/2023

of Deliverables: 28

Use Budget Justification Scenario: #3

 Base and Deliverables

 X Deliverables Only

Deliverable – Ohio Buckles Buckeyes (OBB) Monitoring & Reporting

Description: Between October 1, 2022 and September 30, 2023, the subrecipient's Occupant Protection Regional Coordinator (OPRC) will provide monitoring and collect quarterly data of region's Ohio Buckles Buckeye (OBB) Sites and provide the required documentation to their Ohio Department of Health (ODH) OPRC Program Consultant via REDCap for the following:

- OBB Program Criteria Forms (Appendix J)
- Annual OBB Regional Meeting
- OBB Site Monitoring (included in Appendix K)
- OBB Contact List (included in Appendix K)
- OBB Quarterly Data Reports (included in Appendix K)

Objective 1: By December 31, 2022, the subrecipient will submit to the ODH Program Consultant a signed ODH OBB Program Criteria Forms from each OBB Site Coordinator in that region via REDCap.

Objective 2: By June 30, 2023, the subgrantee will submit to the ODH Program Consultant the following documentation for the Annual OBB Regional Meeting held by OPRC via REDCap:

- Agenda
- Sign-in Sheet with date
- If needed, documentation that those OBB Coordinators who could not attend the meeting received the required agenda and information.

Objective 3: The subgrantee will complete the 'Site Monitoring' tab of the OBB Reporting Tool as they are conducted with OBB sites. Site Monitoring visits can be conducted in-person or virtually. *(50% of deliverable amount can be submitted for reimbursement once half of site visits have been completed).*

Objective 4: The subgrantee will complete the 'Contact Information' tab of the OBB Reporting Tool quarterly *(reimbursement should be submitted quarterly for 25%).*

Objective 5: The subgrantee will complete the 'Data' tab of the OBB Reporting Tool quarterly *(reimbursement should be submitted quarterly for 25%).*

Deliverable – Required OPRC & OIPP Conference Calls & Meetings

Description: Subgrantee or a representative from their agency will participate in all scheduled OPRC conference calls with ODH and actively participate in Ohio Injury Prevention Partnership (OIPP) Child Injury Action Group meetings and Child Passenger Safety subcommittee conference calls. Representative should have updates available for agency as required by

ODH.

Objective 6: OPRC will participate in either one or two scheduled conference calls quarterly and submit the Conference Call Documentation Template (Appendix L) to their ODH Program Consultant via REDCap (*each quarter, deliverable can be claimed for reimbursement for attending the scheduled conference calls*).

- By December 31, 2022 (reporting period Oct. 1, 2022-Dec. 31, 2022) the OPRC will have participated in 2 scheduled conference calls with ODH
- By March 31, 2023 (reporting period Jan. 1, 2023-March 31, 2023) the OPRC will have participated in 1 scheduled conference calls with ODH
- By June 30, 2023 (for period April 1, 2023-June 30, 2023) the OPRC will have participated in 2 scheduled conference calls with ODH
- By September 30, 2023 (for period July 1, 2023-September 30, 2023) the OPRC will have participated in 1 scheduled conference calls with ODH

Objective 7: By September 30, 2023, OPRC will attend at least 2 in person OIPP meetings in Columbus, Ohio and/or virtually, as evidence by sign-in sheet and submitted Conference Call Documentation Template (Appendix L) to their ODH Program Consultant via REDCap.

Objective 8: By September 30, 2023, OPRC will participate in at least 2 OIPP Child Injury Action Group subcommittee conference calls related to Child Passenger Safety and will submit the Conference Call Documentation Template (Appendix L) to their ODH Program Consultant via REDCap.

Deliverable – Child Passenger Safety Technician Level

Description: By September 30, 2023, the OPRC will attempt to maintain or increase current levels of Child Passenger Safety Technicians (CPST) in the region by remaining a Child Passenger Safety Technician Instructor (CPSTI), offering at least **1 Child Passenger Safety Technician certification course in an underserved area (see Appendix I), at least 2 Continuing Education opportunities**, and offer/provide at least **1 Refresher or Renewal course** within the region per grant year. If applicant agency does not have a Certified Instructor on Staff, they must demonstrate access to one through a sub contractual agreement.

Objective 9: The subgrantee will submit documentation to ODH Program Consultant via GMIS showing they continue to be certified as a CPST-I or have access to one through a subcontract agreement and submit documentation to ODH Program Consultant via REDCap.

- By December 31, 2022, submit documentation showing CPST-I status or have access to one through a subcontract agreement. (*once completed 50% of deliverable can be claimed for reimbursement*)
- By March 31, 2023, submit documentation showing CPST-I status or access to one through subcontract agreement. (*once completed 50% of deliverable can be claimed for reimbursement*)

Objective 10: By September 30, 2023, the OPRC will conduct one 24-hour CPST Certification Class within their region and target technicians from priority counties identified in Appendix I in solicitation. Submit agenda and sign-in sheet to ODH Program Consultant via REDCap.

Objective 11: By September 30, 2023, the OPRC will facilitate two (2) continuing education opportunities for techs in their region and submit flyer or agenda and sign-in sheet to ODH Program Consultant via REDCap.

Objective 12: By September 30, 2023, the OPRC will offer and/or provide one (1) refresher or renewal course for techs within their region and submit email correspondences offering course, and flyer, agenda and sign-in sheet, if applicable, to ODH Program Consultant via REDCap.

Deliverable – Child Passenger Safety Resources & Technical Assistance

Description: Between October 1, 2022 and September 31, 2023, the OPRC will act as liaison between ODH and OBB sites. OPRC will provide the required documentation to their ODH Program Consultant via REDCap for the following:

- Technical Assistance conducted via email or phone
- Sharing of materials or resources for CPS events, CPS education, or OBB classes

Objective 13: OPRC will submit the Technical Assistance Tracking Sheet (Appendix M) to reflect at least two (2) instances of TA or materials provided to OBB Program Sites quarterly in their region to ODH Program Consultant via REDCap (*reimbursement should be submitted quarterly for 25%*).

Deliverable – Child Passenger Safety Expert

Description: OPRC will serve as the Child Passenger Safety expert in their region by providing culturally and linguistically appropriate media releases, and occupant protection public awareness and education.

Objective 14: By September 30, 2023, OPRC will submit the following documentation to the ODH Program Consultant via REDCap:

- 1 Child Passenger Safety education presentations or outreach done in the community. Documentation should include, location of presentation (name of agency, city and county), PowerPoint or handouts provided and number of participants.

Objective 15: By September 30, 2023, OPRC will submit documentation to the ODH Program Consultant the following via REDCap:

- 8 examples of Child Passenger Safety public awareness efforts. Documentation should include, social media posts, radio/tv interviews, press conferences, or TV/radio PSA.

Deliverable – Community Based Seat Checks

Description: By September 30, 2023, the OPRC will educate parents/caregivers on proper restraint use for children of all ages by **conducting 3 Community Based Seat Check events** within the region and **supporting 3 Community Based Seat Check events** within the region. **At least 4 of these events must take place in priority counties identified in Appendix I in solicitation.**

Objective 16: By September 30, 2023, the OPRC will submit to the ODH Program Consultant via REDCap the following:

- 3 advertisements for community-based car seat check events held in OPRC region that OPRC conducted,
- Detailed description in REDCap that documents where the events were held, when, how many seats were checked, and how many seats were distributed.

Objective 17: By September 30, 2023, the OPRC will submit to the ODH Program Consultant via REDCap the following:

- Documentation of 3 community-based car seat check events held in OPRC region that OPRC provided assistance. Documentation could include flyer with date, location, and agency hosting event, or pictures of each car seat event.
- Detailed description in REDCap that documents where the events were held, when, how many seats were checked, and how many seats were distributed.

Deliverable – National Mobilizations for Child Passenger Safety

Description: By September 30, 2023, OPRC will support and promote national or state mobilization/campaigns such as Click it or Ticket and National Child Passenger Safety Week within their region.

Objective 18: By September 30, 2023, the subrecipient will provide a summary in a Word document and documentation to demonstrate how agency engaged in a mobilization/campaign outside of National Child Passenger Safety Week (e.g. Click it or Ticket, Distracted Driving, etc.). Summary should include name of event, location, date and time, number of attendees, and any other relevant information. Documentation should include flyer to advertise event or social media post, pictures of events, etc. Summary and documentation should be submitted to ODH Program Consultant via REDCap.

Objective 19: By June 30, 2023 the OPRC will plan for National Child Passenger Safety Week, **to include Car Seat Check Saturday**, and document tentative plans in a Word document and report submitted to ODH Program Consultant via REDCap.

Objective 20: By August 30, 2023 the OPRC will submit to ODH in a Word document via REDCap their schedule for the 2023 National Child Passenger Safety Week of September 17-23, 2023, **which is to include a car seat check on National Seat Check Saturday**.

Objective 21: By September 30, 2023 the OPRC will submit examples of documents used to advertise events to be held during National Child Passenger Safety Week in their region to ODH Program Consultant via REDCap.

Objective 22: By September 30, 2023 the OPRC will submit pictures of events held during National Child Passenger Safety Week in their region and submit to ODH Program Consultant via REDCap.

Objective 23: By September 30, 2023 the OPRC will documentation of events held in their region during National Child Passenger Safety Week and submit word document to ODH Program Consultant via REDCap.

Deliverable – Fitting Stations (Optional)

****OBB Fitting Station tab of Fitting Station Tracking Document should still be completed and submitted even if OPRC chooses not to complete optional deliverable****

Description: Between October 1, 2022 and September 30, 2023, the subgrantee will report activities conducted with regional OBB and non-OBB Fitting Stations that go above and beyond what they offer normally in their region. The OPRC should maintain regular communication (email or phone) and complete Fitting Station Tracking Document (Appendix N) with up-to-date information. Above and beyond activities to complete this deliverable must include:

- Site Visits (virtual or in-person)
- Assistance with appointments (virtual or in-person)
- Technical Assistance/Materials Provided (sharing of materials/resources, response to questions or providing guidance (email or phone)

Deliverable 24: The subgrantee will submit an updated and complete list of active OBB and non-OBB Fitting Stations in the region and documentation of involvement with at least 50% of their counties and completing a minimum of 2 of the 3 activities: technical assistance/materials provided; assistance at appointments; or onsite visits for the quarter, to the ODH Program Consultant using the Fitting Station Tracking Document (Appendix N) via REDCap (*reimbursement should be submitted quarterly for up to 25%*).

- By December 31, 2022, OPRC will submit an updated and complete list of active OBB and non-OBB Fitting Stations in the region and documentation of involvement with at least 50% of their counties and completing a minimum of 2 of the 3 activities.
- By March 31, 2023, OPRC will submit an updated and complete list of active OBB and non-OBB Fitting Stations in the region and documentation of involvement with at least 50% of their counties and completing a minimum of 2 of the 3 activities.
- By June 30, 2023, OPRC will submit an updated and complete list of active OBB and non-OBB Fitting Stations in the region and documentation of involvement with at least 50% of their counties and completing a minimum of 2 of the 3 activities.
- By September 30, 2023, OPRC will submit an updated and complete list of active OBB and non-OBB Fitting Stations in the region and documentation of involvement with at least 50% of their counties and completing a minimum of 2 of the 3 activities.

IF YOU ARE NOT APPLYING FOR THE SUPPLEMENTAL FUNDING, PLEASE STOP HERE.

Supplemental Option #1: FY23 Occupant Protection Regional Coordination –National Digital Check Form (NDCF) Pilot

Description: Between October 1, 2022 and September 30, 2023, the OPRC awarded the supplemental funding will

- Identify fitting station locations that will participate in pilot
- Survey readiness of fitting station agency
- Submit signed MOU by fitting stations participating in pilot
- Participate in required NDCF training with fitting stations
- Track evaluation and identify policies and procedures to sustain NDCF activities statewide
- Complete *supplemental survey in REDCap*

Deliverable 25: The subgrantee will submit detailed updates quarterly in REDCap detailing progress of activities listed above (*20% of deliverable amount should be submitted for reimbursement each quarter*).

- By December 31, 2022, the OPRC will submit required documentation to ODH Program Consultant in REDCap.
- By March 31, 2023, the OPRC will submit required documentation to ODH Program Consultant in REDCap.
- By June 30, 2023, the OPRC will submit required documentation to ODH Program Consultant in REDCap.
- By September 30, 2023, the OPRC will submit required documentation to ODH Program Consultant in REDCap.

Deliverable 26: By September 30, 2023, the subgrantee will submit an evaluation summary report of the pilot. The evaluation summary report should include, challenges, successes, barriers, and lessons learned and, procedure template that could serve as guidance for other OPRCs to utilize when implementing the NDCF with fitting stations in their region, and additional suggestions on how to implement project statewide. Report should be submitted as a Word document and uploaded to REDCap.

Supplemental Option #2: FY23 Occupant Protection Regional Coordination–Child Passenger Safety Instructor Development

Description: Between October 1, 2022 and September 30, 2023, the OPRC awarded the supplemental funding will enhance Ohio's instructor development for Child Passenger Safety Technician-Instructors through the following:

- Develop and disseminate ODH approved quarterly newsletter
- Plan and implement ODH approved quarterly one-hour webinar with at least 2 offering CEUs to CPST-I recertification
- Develop and disseminate post webinar survey evaluation
- Create and manage Facebook group for Ohio Child Passenger Safety Technician Instructor networking
- Complete *supplemental survey in REDCap*

Deliverable 27: The subgrantee will submit documentation of quarterly newsletter, webinar and Facebook group. This includes, submission of approved newsletter, evidence of dissemination and reach of newsletter, advertisement for webinar, summary of webinar survey results, attendance metrics, and Facebook group posts (*25% of deliverable amount should be submitted for reimbursement each quarter*).

- By December 31, 2022, the OPRC will submit required documentation to ODH Program Consultant in REDCap.
- By March 31, 2023, the OPRC will submit required documentation to ODH Program Consultant in REDCap.
- By June 30, 2023, the OPRC will submit required documentation to ODH Program Consultant in REDCap.
- By September 30, 2023, the OPRC will submit required documentation to ODH Program Consultant in REDCap.

Supplemental Option #3: FY23 Occupant Protection Region Coordination –Buckeye Update with Techs

Description: Between October 1, 2022 and September 30, 2023, the OPRC awarded the supplemental funding will support Child Passenger Safety Technicians in Ohio through the following:

- Plan and implement Buckeye Update with Techs quarterly webinar forum with at least 2 offering CEUs to CPST recertification
- Develop and disseminate post forum webinar survey evaluation
- Develop and disseminate ODH approved quarterly newsletter
- Complete *supplemental survey in REDCap*

Deliverable 28: The subgrantee will submit documentation of webinar forum conducted, and quarterly newsletter. This includes, submission of approved newsletter, evidence of dissemination and reach of newsletter, advertisement for webinar, summary of webinar survey results, and attendance metrics. *(25% of deliverable amount should be submitted for reimbursement each quarter).*

- By December 31, 2022, the OPRC will submit required documentation to ODH Program Consultant in REDCap.
- By March 31, 2023, the OPRC will submit required documentation to ODH Program Consultant in REDCap.
- By June 30, 2023, the OPRC will submit required documentation to ODH Program Consultant in REDCap.
- By September 30, 2023, the OPRC will submit required documentation to ODH Program Consultant in REDCap.

Appendix C2

**Name of Subgrant Program: Occupant Protection Regional
Coordination**

**Budget Period: 10/1/2022 -
9/30/2023**

of Deliverables: 28

Use Budget Justification Scenario

#: 3

☐ **Base Only**

☐ **Base and**

Deliverables

☒ **Deliverables**

Only

	Region #1	Region #2	Region #3	Region #4	Region #5	Region #6	Region #7	Region #8
Deliverable - Objective 1 OBB Criteria Forms	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable
Deliverable - Objective 2 Annual Regional Meeting	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable
Deliverable - Objective 3 OBB Site Monitoring	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable
Deliverable - Objective 4 OBB Contact Information	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable
Deliverable - Objective 5 OBB Data	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable
Deliverable - Objective 6	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable

OPRC Conference Calls								
Deliverable - Objective 7 OIPP Meetings	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable
Deliverable - Objective 8 CIAG/CPS Meetings	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable
Deliverable - Objective 9 CPST-I Certification	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable
Deliverable - Objective 10 CPST Course	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable
Deliverable - Objective 11 CEU Opportunities	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable
Deliverable - Objective 12 Refresher/Renewal	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable
Deliverable - Objective 13 TA Tracking	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable
Deliverable - Objective 14 CPS Education/Outreach	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable
Deliverable - Objective 15 CPS Public Awareness	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable
Deliverable - Objective 16 OPRC Led Car Seat Check Events	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable

Deliverable - Objective 17 OPRC Supported Car Seat Check Events	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable
Deliverable - Objective 18 Mobilization Participation	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable
Deliverable - Objective 19 CPS Week Plans	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable
Deliverable - Objective 20 CPS Week Schedule	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable
Deliverable - Objective 21 CPS Week Ads	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable
Deliverable - Objective 22 CPS Week Pictures	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable
Deliverable - Objective 23 CPS Week Summary	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable
Deliverable - Objective 24 Fitting Stations (Optional)	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable	Enter Amt for Deliverable
TOTAL:	\$61,000.00	\$65,000.00	\$53,000.00	\$57,000.00	\$65,000.00	\$57,000.00	\$65,000.00	\$49,000.00
BASE TOTAL: \$472,000.00								

Supplemental #1 -			
Deliverable - Objective 25 NDCF (Supplemental #1)	Enter Amt for Deliverable		
Deliverable - Objective 26 NDCF Evaluation Summary Report (Supplemental #1)	Enter Amt for Deliverable		
Total Supplemental #1	\$15,000		
Supplemental #2 -			
Deliverable - Objective 27 CPST Instructor Development (Supplemental #2)	\$10,000		
Supplemental #3 -			
Deliverable - Objective 28 Buckeye Update with Techs (Supplemental #3)	\$8,000	Grant Total:	\$505,000.00

FY23 Application Review Form
Ohio Department of Health, Office of Health Improvement and Wellness
Violence and Injury Prevention Section – Occupant Protection Regional Coordination Program

Applicant Agency _____	Region to Be Served _____
Applicant Number _____	Requested Budget \$ _____
Reviewer Name _____	Date _____

Grant Focus Area(s): OCCUPANT PROTECTION REGIONAL COORDINATION (FFY23)

Overall Scoring Summary

Section	Maximum Score	Reviewer Score
Executive Summary	10	_____
Program Narrative (excluding methodology narrative)	25	_____ _____
Methodology Narrative	30	_____
Work Plan	20	_____
Other Requirements	4	_____
Budget Review	6	_____
Total Score	95	_____
	Minimum score 67 (70%)	
Funding Recommendation:	Y N	

Technical Assistance or Training Needs (Suggestions for this grantee to strengthen the application)

Recommended Special Conditions (Reviewer note: please complete last.)	Comments		
Reviewer Note: The word “satisfactorily” is implied in each statement throughout review sheet. Points should be awarded accordingly. Poor quality responses should receive points at the lower end of the scale and high quality at the high end.			
Review by Sections			
Category I. Executive Summary (10 points)	Comments	Maximum Score	Reviewer's Score
<input type="checkbox"/> Describes segments of the target population who experience disproportionate burdens of the local child injury rates due to inadequate use or lack of car and booster seats and education.		2 points	
<input type="checkbox"/> Describes overview of the demographic characteristics of race, ethnicity and age groups target audiences that are less likely to use car or booster seats; and documenting how the program engaged underserved populations to better inform program interventions.		2 points	
<input type="checkbox"/> Describes how agency will work with other local occupant protection partners to address the high risk and underserved populations in region related to child occupant protection.		2 points	
<input type="checkbox"/> Describes how agency will work toward the project goals of improving data collection to establish a more accurate baseline in each region for child occupant protection misuse rate and identify success and impact of the program through data in Ohio by September 30, 2028.		2 points	
<input type="checkbox"/> Describes funding amount requested.		2 points	
Total Executive Summary		10 points	

Category II: Program Narrative (25 points)	Comments	Maximum Score	Reviewer's Score
<u>Eligibility:</u> <input type="checkbox"/> Summarizes agency's structure as it relates to this program and as lead agency, how it will manage the program in coordinating the OBB Sites in their region.		4 points	
<input type="checkbox"/> Discusses agency services provided to the community that relate to this program and success in providing similar services over the last 3 years.		2 points	
<input type="checkbox"/> Describes the capacity of agency, its personnel, or contractors to communicate effectively and convey information in accordance with National Standards for Culturally and Linguistically Appropriate Services (CLAS) and Americans with disabilities Act (ADA) Standards for Effective Communication in a manner and method that is easily understood by diverse audiences.		2 points	
<u>Experience in and capacity to address injury prevention as it relates to child occupant protection:</u> <input type="checkbox"/> Summarizes existing injury prevention efforts managed by agency.		4 points	
<input type="checkbox"/> Provides information on other sources of grant and local funding agency has for existing child occupant protection activities and describes how that funding will be used to expand upon or address other areas, and not supplant current funding source.		2 points	
<u>Personnel</u> <input type="checkbox"/> Describes how agency employs or contracts at least one staff assigned to the Occupant Protection Regional Coordination whose duties are to administer the OPRC Program and related grant activities. Explanation should demonstrate compliance or hiring plans for additional staff.		2 points	
<input type="checkbox"/> Demonstrates that the project coordinator is a Child Passenger Safety Technician Instructor (CPSTI), or the parent agency or organization has access to a CPSTI, the highest certification level available through the		2 points	

national certification process, on Staff, or plans to implement a subcontractual agreement.			
<input type="checkbox"/> Describes additional program staff within agency that also work on child occupant protection related efforts and to what degree.		2 points	
<u>Problem/Need</u> <input type="checkbox"/> Describes the local health status concern(s) that will be addressed by the program. Should use child injury and motor vehicle crash data and clearly identify the target population, the specific health status concerns that the program intends to address may be stated in terms of disparity (e.g. population, location) health status (e.g., morbidity and/or mortality) or health system (e.g., accessibility, availability, affordability, appropriateness, quality of health services) indicators. <i>Should only provide national and state data if local data is not available.</i>		5 points	
Project Narrative (minus methodology narrative) Total		25 points	

Category III. Methodology Narrative (30 points)	Comments	Maximum Score	Reviewer's Score
<input type="checkbox"/> Describes how communication and support will be built and/or maintained with OBB sites in region.		5 points	
<input type="checkbox"/> Describes how priority community residents will be reached through car seat education and events.		5 points	
<input type="checkbox"/> Provides current number of active fitting stations in region and describe plans to increase number of active fitting stations, maintain regular communication and how ongoing support will be provided.		5 points	
<input type="checkbox"/> Describes agency experience with data collection and evaluation and how it will applied to collection of data for OPRC program (e.g. misuse rate).		5 points	
<input type="checkbox"/> Describes steps agency will take to prioritize grant activities in target counties identified in Appendix I guidance and detailed plans and partner agencies that will be involved.		5 points	
<input type="checkbox"/> Describes how child passenger safety activities will continue if funding is no longer available through ODH and how new CPS technicians and instructors in region assist with sustainability.		5 points	
Total Methodology Narrative		30 points	

Category IV. Work Plan (20 points)	Comments	Maximum Score	Reviewer's Score
<input type="checkbox"/> Includes sufficient detail to describe how the agency intends to move the required activities forward and capacity to successfully perform required activities.		4 points	
<input type="checkbox"/> Includes consideration for high-need counties in region based on Data to Action guidance (Appendix I).		4 points	
<input type="checkbox"/> Process objectives are population-based and written in S.M.A.R.T. format.		3 points	
<input type="checkbox"/> Describes how the population-based process objectives will be achieved by listing activities/steps proposed in detail.		3 points	
<input type="checkbox"/> Each activity identifies agency and staff person responsible for completing.		2 points	
<input type="checkbox"/> Includes a specific timeline for each activity (e.g., all activities should not say 10/1 – 9/30).		2 points	
<input type="checkbox"/> Provides a satisfactory evaluation measure to indicate achievement of process objectives. How will the grantee determine if they are successful?		2 points	
Total Base Work Plan		20 points	

Category V. Other Requirements (4 points)	Comments	Maximum Score	Reviewers Score
****All or nothing scoring for this section only. If applicant did not meet the bullet point, they should not be awarded a point.			
<input type="checkbox"/> Agency provided letter of support from agency to authorize travel outside of county for a minimum of two Ohio Injury Prevention Partnership, Child Injury Action Group meetings.		1 point	
<input type="checkbox"/> Agency provided position descriptions and resumes for Occupant Protection Regional Coordinator already identified or position description for staff to be hired.		1 point	
<input type="checkbox"/> Agency provided tentative contingency plan if OPRC leaves agency.		1 point	
<input type="checkbox"/> Agency did not exceed page limits on documents submitted for application review.		1 point	
Other Requirements		4 points	

Category VI. Budget Review (6 points)	Comments	Maximum Score	Reviewers Score
<input type="checkbox"/> Budget aligns with other documents in application (e.g. narrative, workplan, GMIS budget, etc.)		2 points	
<input type="checkbox"/> Budget justification followed required template listed in solicitation (scenario #3)		2 points	
<input type="checkbox"/> Agency determined costs for deliverables are reasonable. If agency's budget did not reach ceiling of funding level after budgeting for required activities, agency expanded activities appropriately.		2 points	
Total Budget Review		6 points	

Additional Comments/Reviewer Notes

IF YOU ARE NOT APPLYING FOR THE OPTIONAL SUPPLEMENTAL FUNDING, STOP HERE!!!!

FY23 Reviewer Score Sheet - SUPPLEMENTAL FUNDING #1 (National Digital Check Form Pilot)
Ohio Department of Health, Office of Health Improvement and Wellness
Violence and Injury Prevention Section – Occupant Protection Regional Coordination Program

Applicant Agency _____

Applicant Number _____ Requested Budget \$ _____

Reviewer Name _____ Date _____

Grant Focus Area(s): OCCUPANT PROTECTION REGIONAL COORDINATION (FFY23) - SUPPLEMENTAL FUNDING

Overall Scoring Summary

Section	Maximum Score	Reviewer Score
Supplemental Narrative	48	
Supplemental Work Plan	32	
Other Requirements	2	

Total Score

82

Minimum 57 score (70%)

Funding Recommendation:

Y N

Technical Assistance or Training Needs (Suggestions for this grantee to strengthen the application)

Recommended Special Conditions (Reviewer note: please complete last.)	Comments
Reviewer Note: The word “satisfactorily” is implied in each statement throughout review sheet. Points should be awarded accordingly. Poor quality responses should receive points at the lower end of the scale and high quality at the high end.	
Review by Sections	

Category I. Supplemental Narrative (48 points)	Comments	Maximum Score	Reviewer's Score
<u>Eligibility:</u>			
<input type="checkbox"/> Identified Child Passenger Safety Technician Instructor that has the required minimum 2 years of experience in Ohio.		3 points	
<input type="checkbox"/> Identified that agency has at least one year experience utilizing NDCF.		2 points	
<input type="checkbox"/> Identified that agency has ability to support oversight and evaluation of Fitting Stations participating in pilot.		5 points	
<u>Project Description:</u>			
<input type="checkbox"/> Describes agency's experience with NDCF and their ability to oversee fitting station locations.		10 points	
<input type="checkbox"/> Included detailed list of staff that will directly work on the NDCF pilot project.		5 points	
<input type="checkbox"/> Detailed description of recruitment of the minimum number of fitting stations and how relationships will be maintained and ensure data and feedback will be collected.		10 points	
<input type="checkbox"/> Detailed description of how evaluation measures will be collected, and written evaluation summary will be developed.		10 points	

<input type="checkbox"/> Required due dates established by ODH are included in narrative.		3 points	
Total Supplemental Narrative		48 points	

Category II. Supplemental Work Plan (32 points)	Comments	Maximum Score	Reviewer's Score
<input type="checkbox"/> Includes sufficient detail to describe how the agency intends to move the required activities forward and capacity to successfully perform required activities.		8 points	
<input type="checkbox"/> Describes how the population-based process objectives will be achieved by listing activities/steps proposed in detail		6 points	
<input type="checkbox"/> Process objectives are population-based and written in S.M.A.R.T. format		6 points	
<input type="checkbox"/> Each activity identifies agency and staff person responsible for completing		4 points	
<input type="checkbox"/> Includes a specific timeline for each activity (e.g., all activities should not say 10/1 – 9/30)		4 points	
<input type="checkbox"/> Provides a satisfactory evaluation measure to indicate achievement of process objectives. How will the grantee determine if they are successful?		4 points	
Total Supplemental Work Plan		32 points	

Category III. Other Requirements (2 points)	Comments	Maximum Score	Reviewers Score
<input type="checkbox"/> Supplemental deliverables included in the budget justification and used the correct format indicated in the solicitation (Scenario 3 required from template)		2 points	

Other Requirements		2 points	
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Additional Comments/Reviewer Notes

FY23 Reviewer Score Sheet - SUPPLEMENTAL FUNDING #2 (Child Passenger Safety Technician Instructor Development)
Ohio Department of Health, Office of Health Improvement and Wellness
Violence and Injury Prevention Section – Occupant Protection Regional Coordination Program

Applicant Agency _____

Applicant Number _____

Requested Budget \$ _____

Reviewer Name _____

Date _____

Grant Focus Area(s): OCCUPANT PROTECTION REGIONAL COORDINATION (FFY23)-SUPPLEMENTAL FUNDING

Overall Scoring Summary

Section	Maximum Score	Reviewer Score
Supplemental Narrative	48	
Supplemental Work Plan	32	
Other Requirements	5	

Total Score

85

Minimum 60 score (70%)

Funding Recommendation:

Y N

Technical Assistance or Training Needs (Suggestions for this grantee to strengthen the application)

☐ **Special Conditions and/or Changes Needed** (Please list):

Recommended Special Conditions (Reviewer note: please complete last.)	Comments
Reviewer Note: The word “satisfactorily” is implied in each statement throughout review sheet. Points should be awarded accordingly. Poor quality responses should receive points at the lower end of the scale and high quality at the high end.	
Review by Sections	

Category I. Supplemental Narrative (43 points)	Comments	Maximum Score	Reviewer's Score
<u>Eligibility:</u> <input type="checkbox"/> Identified Child Passenger Safety Technician Instructor that has the required minimum 4 years of experience in Ohio.		5 points	
<input type="checkbox"/> Identified that agency has ability to support distribution of newsletter and hosting webinars with evaluation component.		5 points	
<u>Project Description:</u> <input type="checkbox"/> Describes agency's experience with instructor development outside of holding CPS courses, experience with newsletter and webinar development, and managing social media page.		10 points	
<input type="checkbox"/> Detailed description of development of quarterly newsletters (content development, how reach will be measured).		5 points	

<input type="checkbox"/> Detailed description of development of webinars (plan for offering at least 2 CEUs)		5 points	
<input type="checkbox"/> Detailed description of management of Facebook group (post development, group engagement).		5 points	
<input type="checkbox"/> Detailed description of evaluation metrics and reach that will be collected from webinar, newsletter, and Facebook Group.		10 points	
<input type="checkbox"/> Required due dates established by ODH are included in narrative.		3 points	
Total Supplemental Narrative		48 points	

Category II. Supplemental Work Plan (32 points)	Comments	Maximum Score	Reviewer's Score
<input type="checkbox"/> Includes sufficient detail to describe how the agency intends to move the required activities forward and capacity to successfully perform required activities.		8 points	
<input type="checkbox"/> Describes how the population-based process objectives will be achieved by listing activities/steps proposed in detail		6 points	
<input type="checkbox"/> Process objectives are population-based and written in S.M.A.R.T. format		6 points	
<input type="checkbox"/> Each activity identifies agency and staff person responsible for completing		4 points	
<input type="checkbox"/> Includes a specific timeline for each activity (e.g., all activities should not say 10/1 – 9/30)		4 points	
<input type="checkbox"/> Provides a satisfactory evaluation measure to indicate achievement of process objectives. How will the grantee determine if they are successful?		4 points	
Total Supplemental Work Plan		32 points	

Category III. Other Requirements (5 points)	Comments	Maximum Score	Reviewers Score
<input type="checkbox"/> Includes letters of support from at least 3 key partners related to child occupant protection and supports your agency in CPST-I instructor development. Does not have to be on agency letterhead, but LOS should be from individuals and/or agencies that specifically work on child passenger safety.		3 points	
<input type="checkbox"/> Supplemental deliverables included in the budget justification and used the correct format indicated in the solicitation (Scenario 3 required from template).		2 points	
Other Requirements		5 points	

Additional Comments/Reviewer Notes

FY23 Reviewer Score Sheet - SUPPLEMENTAL FUNDING #3 (Buckeye Update with Techs)
Ohio Department of Health, Office of Health Improvement and Wellness
Violence and Injury Prevention Section – Occupant Protection Regional Coordination Program

Applicant Agency_____

Applicant Number_____

Requested Budget \$_____

Reviewer Name_____

Date_____

Grant Focus Area(s): OCCUPANT PROTECTION REGIONAL COORDINATION (FFY23)-SUPPLEMENTAL FUNDING

Overall Scoring Summary

Section	Maximum Score	Reviewer Score
Supplemental Narrative	48	
Supplemental Work Plan	32	
Other Requirements	5	
Total Score	85	_____
	Minimum 60 score (70%)	
Funding Recommendation:	Y N	

Technical Assistance or Training Needs (Suggestions for this grantee to strengthen the application)

Recommended Special Conditions (Reviewer note: please complete last.)	Comments
Reviewer Note: The word “satisfactorily” is implied in each statement throughout review sheet. Points should be awarded accordingly. Poor quality responses should receive points at the lower end of the scale and high quality at the high end.	
Review by Sections	

Category I. Supplemental Narrative (48 points)	Comments	Maximum Score	Reviewer's Score
<u>Eligibility:</u> <input type="checkbox"/> Identified Child Passenger Safety Technician Instructor that has the required minimum 2 years of experience in Ohio.		5 points	
<input type="checkbox"/> Identified agency has ability to support distribution of newsletter and hosting webinars with evaluation.		5 points	
<input type="checkbox"/> Identified that agency has experience in meeting and/or webinar facilitation.		5 points	
<u>Project Description:</u> <input type="checkbox"/> Describes agency's experience with webinar facilitation and newsletter development.		10 points	

<input type="checkbox"/> Detailed description of development of quarterly newsletters (content development, how reach will be measured).		5 points	
<input type="checkbox"/> Detailed description of development of webinars (plan for offering at least 2 CEUs).		5 points	
<input type="checkbox"/> Detailed description of evaluation metrics and reach that will be collected from webinar and newsletter.		10 points	
<input type="checkbox"/> Required due dates established by ODH are included in narrative.		3 points	
Total Supplemental Narrative		48 points	

Category II. Supplemental Work Plan (32 points)	Comments	Maximum Score	Reviewer's Score
<input type="checkbox"/> Includes sufficient detail to describe how the agency intends to move the required activities forward and capacity to successfully perform required activities.		8 points	
<input type="checkbox"/> Describes how the population-based process objectives will be achieved by listing activities/steps proposed in detail		6 points	
<input type="checkbox"/> Process objectives are population-based and written in S.M.A.R.T. format		6 points	
<input type="checkbox"/> Each activity identifies agency and staff person responsible for completing		4 points	
<input type="checkbox"/> Includes a specific timeline for each activity (e.g., all activities should not say 10/1 – 9/30)		4 points	
<input type="checkbox"/> Provides a satisfactory evaluation measure to indicate achievement of process objectives. How will the grantee determine if they are successful?		4 points	
Total Supplemental Work Plan		32 points	

Category III. Other Requirements (5 points)	Comments	Maximum Score	Reviewers Score
<input type="checkbox"/> Includes letters of support from at least 3 key partners related to child occupant protection and supports your agency in leading state webinar forums. Does not have to be on agency letterhead, but LOS should be from individuals and/or agencies that specifically work on child passenger safety.		3 points	
<input type="checkbox"/> Supplemental deliverables included in the budget justification and used the correct format indicated in the solicitation (Scenario 3 required from template).		2 points	
Other Requirements		5 points	

Additional Comments/Reviewer Notes

FFY23 Occupant Protection Regional Coordination Supplemental Funding Guidance

There are three (3) separate optional supplemental funding opportunities for FFY23. Scoring criteria can be found in this guidance document. Only one OPRC region will be funded for each opportunity. If OPRC is funded for a select supplemental opportunity, they will be the only agency eligible to apply each year. To be considered for funding, applicant must meet a minimum score of 70%.

Each opportunity will be funding for program year 1 which will span 12 months from October 1, 2022 to September 30, 2023.

Supplemental Option #1 – National Digital Check Form (NDCF) Pilot

One Awardee will be eligible for **up to an additional \$15,000** to pilot the integration of the NDCF in their region. Awardee will be responsible for the following:

- a. Identify fitting station locations that will participate in pilot. Must be at least 3 OBB fitting stations and 2 non-OBB fitting stations (at least two sites must be outside of OPRC county). If region only has OBB sites, you may select 5 OBB sites. Of those pilot sites, a maximum of 2 are permitted to be using NDCF at the beginning of the grant.
- b. OPRC will survey readiness of fitting station agency and their ability to utilize the NDCF and log seat checks (supplies needed, number of CPSTs on staff, additional staff time, etc.)
- c. Provide electronic tablets to Fitting Stations, if needed, with clear guidance on how FS will report data back to OPRC.
- d. OPRC will require a signed Memorandum of Understanding (MOU) by fitting stations participating in pilot to ensure data will be reported back and evaluation is conducted. Evaluation will measure ease and effectiveness of using NDCF, track feedback, suggestions, and supply needs of agency.
- e. OPRC agency and pilot sites will be required to attend training organized by ODH.
- f. OPRC will be responsible for tracking evaluation of pilot and identify policies and procedures to sustain NDCF activities statewide
 - i. submit evaluation summary of project to include summary of pilot for the entire grant period; challenges, barriers, successes, and lessons learned; procedure template for other OPRCs to utilize when working with fitting stations to implement NDCF, and suggestions on how to implement statewide.
- g. Provide updates on all activities in your quarterly REDCap survey

To be considered for this funding, applicants must meet the following requirements

- a. Agency has ability to support oversight and evaluation of fitting station pilot locations and their use of the NDCF
- b. Agency has at least 1 (one) year experience utilizing the National Digital Check Form (NDCF)
- c. At least 2 years' experience as a CPST-I in Ohio

Submit the following with application:

- a. Submit **Project Narrative (5-page maximum)** to address the following:
 - i. Description of applicant agency: describe how your agency meets eligibility requirements for the supplemental funding (experience with NDCF and ability to oversee fitting station locations).
 - ii. Staffing/Personnel: list all personnel who will directly work on the NDCF pilot program activities. Identify all CPST-I's who will administer the supplemental deliverables and certification dates for CPST-I's. Include the relationship between program staff members, staff members of the applicant agency and other partners and agencies that will be working on this project.
 - iii. Ability to reach minimum number of fitting stations to participate in pilot and maintain relationship with fitting stations to ensure data is being collected and feedback is continuously received.
 - iv. Ability to collect evaluation measures from pilot in order to provide the written evaluation summary at the end of the grant year.
 - v. Methodology to complete the required project activities: please see the "Required Project Activities" above. Methodology must describe in detail how your agency will accomplish the activities, timeline of how activities will be completed to execute successful pilot, how fitting stations will be recruited, how evaluation will be collected, modes of communication with fitting stations to ensure data is inputted correctly, plan for developing evaluation summary report, etc. It should include who, how, when, and where, when applicable.
- Complete **"Supplemental: NDCF" tab in Supplemental Workplan** template (use Appendix G). Workplan should include sufficient detail to describe how the agency intends to move the required activities forward and capacity to successfully perform required activities. Process objectives should be written in SMART objectives and described by listing activities/steps proposed in detail. Each activity should identify agency and staff responsible for completing and specific timeline. Evaluation measure should also indicate achievement of process objectives.

Supplemental Option #2 - Child Passenger Safety Technician Instructor Development

Awardee will be eligible for **up to an additional \$10,000** to implement networking and educational opportunities for Child Passenger Safety Technician Instructors in Ohio. Awardee would be responsible for the following:

- a. Quarterly webinars (2 out of the 4 must offer CEU opportunities)
- b. Quarterly newsletters to include data to ODH on reach
- c. Submit tentative webinar agendas and newsletters to ODH at least one month prior for ODH approval
- d. Maintain Facebook group
- e. Provide updates on all activities in your quarterly REDCap survey

To be considered for this funding, applicants must meet the following requirements:

- a. Agency has ability to support distribution of newsletter and hosting webinars with evaluation
- b. At least 2 years' experience in meeting and/or webinar facilitation
- c. At least 4 years' experience as a CPST-I in Ohio

Submit with application the following:

- a. Submit **Project Narrative (5-page maximum)** to address the following:
 - i. Description of applicant agency: describe how your agency meets eligibility requirements for the supplemental funding (experience with instructor development outside of holding CPS classes, experience with newsletter development, webinar hosting/facilitation and managing social media page).
 - ii. Staffing/Personnel: list all personnel who will directly work on the Instructor Development program activities. Identify all CPST-I's who will administer the supplemental deliverables and certification dates for CPST-I's. Include the relationship between program staff members, staff members of the applicant agency and other partners and agencies that will be working on this project.
 - iii. Ability to collect reach of activities: quarterly webinar and newsletter, and Facebook posts (# of instructors engaged, educated, etc.)
 - iv. Methodology to complete the required project activities: please see the "Required Project Activities" above. Methodology must describe in detail plans to develop and distribute newsletter, including plans for dissemination, evaluation and how reach will be collected of newsletter. Detailed plans to develop and plan webinars and plan for offering at least 2 CEUs, including plans for dissemination, evaluation and how reach will be collected of instructors engaged in webinar. And management of Facebook group, including post development. It should include who, how, when, and where, when applicable.
- b. Complete **"Supplemental: CPSTI Development" tab in Supplemental Workplan** template (use Appendix G). Workplan should include sufficient detail to describe how the agency intends to move the required activities forward and capacity to successfully perform required activities. Process objectives should be written in SMART objectives

- and described by listing activities/steps proposed in detail. Each activity should identify agency and staff responsible for completing and specific timeline. Evaluation measure should also indicate achievement of process objectives.
- c. Submit at least **3 letters of support** from external partners to support your agency in CPST-I instructor development.

Supplemental Option #3 - Buckeye Update with Techs

Awardee will be eligible for **up to an additional \$8,000** to implement networking and educational opportunities for Child Passenger Safety Technicians in Ohio, with the purpose of gathering CPSTs across Ohio to update on state and national news, network opportunities, and gain CEUs. Awardee would be responsible for the following:

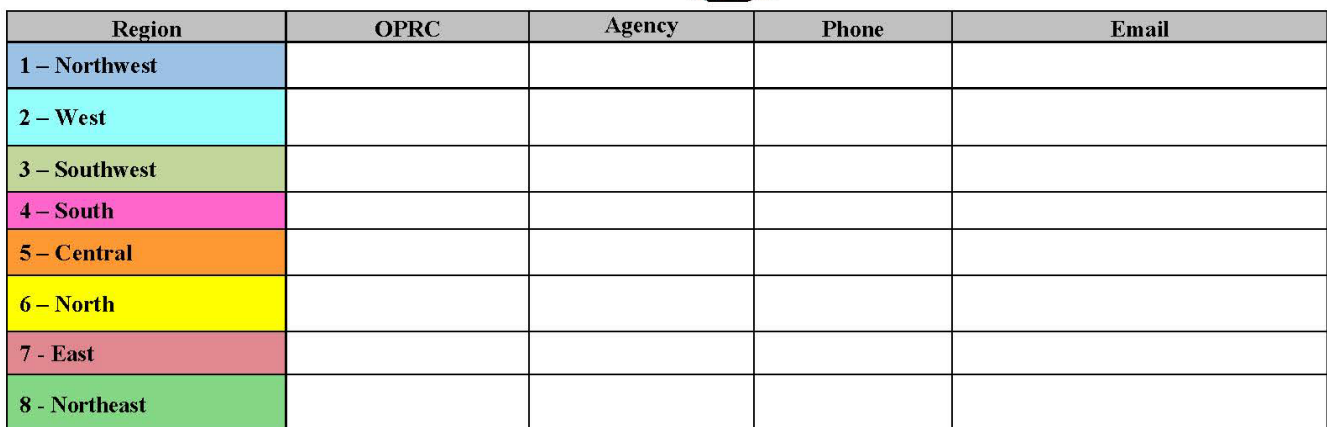
- a. Facilitate quarterly webinar forum (2 out of the 4 must offer CEU opportunities) for Ohio technicians.
- b. Develop quarterly newsletters aimed at CPSTs in Ohio to include the following, state and national level technician updates, networking opportunities, additional CEU opportunities, recertification updates, available resources, and education.
- c. Submit tentative webinar agendas and newsletters to ODH at least one month prior for ODH approval and additions of state updates.
- d. Include feedback from Safe Kids Ohio and Occupant Protection Regional Coordinators (OPRCs) in activities
- e. Provide updates on all activities in your quarterly REDCap survey

To be considered for this funding, applicants must meet the following requirements:

- a. Agency has ability to support distribution of newsletter and hosting webinars with evaluation
- b. At least 2 years' experience in meeting and/or webinar facilitation
- c. At least 2 years' experience as a CPST-I in Ohio

Submit with application the following:

- a. Submit **project narrative (5-page maximum)** to address the following:
 - i. Description of applicant agency: describe how your agency meets eligibility requirements for the supplemental funding (experience with webinar facilitation, and newsletter development)
 - ii. Staffing/Personnel: list all personnel who will directly work on the Buckeye Update with Techs program activities. Identify all CPST-I's who will administer the supplemental deliverables and certification dates for CPST-I's. Include the relationship between program staff members, staff members of the applicant agency and other partners and agencies that will be working on this project.
 - iii. Ability to collect reach of activities: quarterly webinar and newsletter (# of technicians engaged, educated, etc.)
 - iv. Methodology to complete the required project activities: please see the "Required Project Activities" above. Methodology must describe in detail plans to develop and distribute newsletter, including plans for dissemination, evaluation and how reach will be collected of newsletter. Detailed plans to develop and plan webinar forums and plan for offering at least 2 CEUs, including plans for dissemination, evaluation and how reach will be collected of technicians engaged in webinar. It should include who, how, when, and where, when applicable.
- b. Complete **"Supplemental: Buckeye Update" tab in Supplemental Workplan** template (use Appendix G). Workplan should include sufficient detail to describe how the agency intends to move the required activities forward and capacity to successfully perform required activities. Process objectives should be written in SMART objectives and described by listing activities/steps proposed in detail. Each activity should identify agency and staff responsible for completing and specific timeline. Evaluation measure should also indicate achievement of process objectives.
- c. Submit at least **3 letters of support** from external partners to support your agency in leading a state webinar forum.



**2023 Occupant Protection Regional Coordination
ANNUAL WORK PLAN 2022-2023**

OPRC County:		Agency:	
Grant#:		Contact Name:	
Project Title:	Occupant Protection Regional Coordination (OPRC)		

SECTION I - ANNUAL WORK PLAN (2022 - 2023)

The purpose of the Annual Work Plan is to state your intended activities for each objective to demonstrate how the project intends to move the required activities forward. Please enter the program objectives that you intend to work on in the appropriate section and complete the tables that follow.

Deliverables 1-5: Ohio Buckles Buckeyes (OBB) Monitoring & Reporting

Process Objective (Write objective)	Person and Agency Responsible (list all partners)	Timeline (Month/Year)		Activities/Steps Proposed (Describe the significant activities/steps proposed for each process objective)	Evaluation Measure (How do you know you are successful?)
		Start	End		

Deliverable 6-8: Required OPRC & OIPP Conference Calls & Meetings

Process Objective (Write objective)	Person and Agency Responsible (list all partners)	Timeline (Month/Year)		Activities/Steps Proposed (Describe the significant activities/steps proposed for each process objective)	Evaluation Measure (How do you know you are successful?)
		Start	End		

Deliverables 9-12: Child Passenger Safety Technician Level

Process Objective (Write objective)	Person and Agency Responsible (list all partners)	Timeline (Month/Year)		Activities/Steps Proposed (Describe the significant activities/steps proposed for each process objective)	Evaluation Measure (How do you know you are successful?)
		Start	End		

Deliverable 13: Child Passenger Safety Resources and Technical Assistance

Process Objective (Write objective)	Person and Agency Responsible (list all partners)	Timeline (Month/Year)		Activities/Steps Proposed (Describe the significant activities/steps proposed for each process objective)	Evaluation Measure (How do you know you are successful?)
		Start	End		

Deliverables 14-15: Child Passenger Safety Expert

Process Objective (Write objective)	Person and Agency Responsible (list all partners)	Timeline (Month/Year)		Activities/Steps Proposed (Describe the significant activities/steps proposed for each process objective)	Evaluation Measure (How do you know you are successful?)
		Start	End		

Deliverables 16-17: Community-Based Seat Checks

Process Objective (Write objective)	Person and Agency Responsible (list all partners)	Timeline (Month/Year)		Activities/Steps Proposed (Describe the significant activities/steps proposed for each process objective)	Evaluation Measure (How do you know you are successful?)
		Start	End		

Deliverables 18-23: National Mobilization for Child Passenger Safety

Process Objective (Write objective)	Person and Agency Responsible (list all partners)	Timeline (Month/Year)		Activities/Steps Proposed (Describe the significant activities/steps proposed for each process objective)	Evaluation Measure (How do you know you are successful?)
		Start	End		

Deliverable 24: Fitting Stations (OPTIONAL)

(OBB Fitting Station tab of Fitting Station Tracking Document should still be completed and submitted even if OPRC chooses not to complete optional deliverable)

Process Objective (Write objective)	Person and Agency Responsible (list all partners)	Timeline (Month/Year)		Activities/Steps Proposed (Describe the significant activities/steps proposed for each process objective)	Evaluation Measure (How do you know you are successful?)
		Start	End		

**2023 Supplemental Funding for Occupant Protection Regional Coordination
ANNUAL WORK PLAN 2022 - 2023**

County/Countries:		Agency:	
Grant#:		Contact Name:	
Project Title:			

SECTION I - ANNUAL WORK PLAN (2022 - 2023)

The purpose of the Annual Work Plan is to state your intended activities for each objective to demonstrate how the project intends to move the required activities forward. **Please enter your the program objectives that you intend to work on in the appropriate section and complete the tables that follow.**

Deliverables 25 & 26: National Digital Check Form (NDCF) Pilot

Process Objective (Write objective)	Person and Agency Responsible (list all partners)	Timeline (Month/Year)		Activities/Steps Proposed (Describe the significant activities/steps proposed for each process objective)	Evaluation Measure (How do you know you are successful?)
		Start	End		

Copy cell and insert copied cells for additional objectives

**2023 Supplemental Funding for Occupant Protection Regional Coordination
ANNUAL WORK PLAN 2022 - 2023**

County/Countries:		Agency:	
Grant#:		Contact Name:	
Project Title:			

SECTION I - ANNUAL WORK PLAN (2022 - 2023)

The purpose of the Annual Work Plan is to state your intended activities for each objective to demonstrate how the project intends to move the required activities forward. **Please enter the program objectives that you intend to work on in the appropriate section and complete the tables that follow.**

Deliverables 27: Child Passenger Safety Technician Instructor State Lead

Process Objective (Write objective)	Person and Agency Responsible (list all partners)	Timeline (Month/Year)		Activities/Steps Proposed (Describe the significant activities/steps proposed for each process objective)	Evaluation Measure (How do you know you are successful?)
		Start	End		

Copy cell and insert copied cells for additional objectives

**2023 Supplemental Funding for Occupant Protection Regional Coordination
ANNUAL WORK PLAN 2022 - 2023**

County/Countries:		Agency:	
Grant#:		Contact Name:	
Project Title:			

SECTION I - ANNUAL WORK PLAN (2022 - 2023)

The purpose of the Annual Work Plan is to state your intended activities for each objective to demonstrate how the project intends to move the required activities forward. **Please enter the program objectives that you intend to work on in the appropriate section and complete the tables that follow.**

Deliverables 28: Support CPSTs statewide through Buckeye Update with Techs

Process Objective (Write objective)	Person and Agency Responsible (list all partners)	Timeline (Month/Year)		Activities/Steps Proposed (Describe the significant activities/steps proposed for each process objective)	Evaluation Measure (How do you know you are successful?)
		Start	End		

Copy cell and insert copied cells for additional objectives

FFY23 Occupant Protection Regional Coordination Year 1 Guidance

Only one application per agency will be reviewed. A word document of this Appendix and all required attachments will be available to applicants once solicitation is posted, upon request, and a Notice of Intent to Apply has been submitted. Attachments uploaded to GMIS should be named as outlined below and attached in GMIS as outlined in solicitation.

1. Notice of Intent to Apply (Appendix A)

- Deadline to complete is April 27, 2022. Email to Karen Tinsley (karen.tinsley@odh.ohio.gov)
- Every agency that is applying must submit this form or ODH will not know to initiate your application in GMIS.

2. Appendix C2

- Appendix C2 should be completed based on your specific agency estimated costs to complete each deliverable. Please use Appendix C1 as guidance when setting cost. If agency overall cost are lower than the amount agency can ask for the region, subgrantee can increase activities within deliverables to meet previous costs and reach total allotted grant amount. For example, subgrantee could increase number of child passenger safety presentation to be completed in community from the required 1 to 3 presentations. Please make sure your workplan reflect what you are proposing.

3. Project Narrative Guidance:

- Max 20 pages. *Named: "Insert Agency Name_Narrative_2023"*.
- Each section in the Project Narrative should be labeled as listed below.

1. Executive Summary

- Describe segments of the target population who experience disproportionate burdens of the local child injury rates due to inadequate use or lack of car and booster seats and education. This includes an overview of the demographic characteristics of race, ethnicity and age groups target audiences that are less likely to use car or booster seats; and documenting how the program engaged underserved populations to better inform program interventions.
- Identify geographic reference points (i.e., Ohio Health Improvement Zones, census tracts, census block groups or zip codes) to specify where program activities are focused.
- Provide a description of how agency will work with other local occupant protection partners and/or community members to address the high risk and underserved populations in your region related to child occupant protection.

- Describe how your agency will work toward the project goals of improving data collection to establish a more accurate baseline in each region for child occupant protection misuse rate and identify success and impact of the program through data in Ohio by September 30, 2028.
- Include requested funding amount.

2. Description of Applicant Agency and Documentation of Eligibility

- Briefly discuss the applicant agency's eligibility to apply. Summarize the agency's structure as it relates to this program and, as the lead agency, how it will manage the program and serve high-risk and underserved communities.
- Applicants must be local public health or non-profit agency. Discuss agency services provided to the community that relate to this program and success in providing similar services over the last 3 years. Discuss agency's structure as it relates to this program, how agency will manage the program and the OBB sites in their region.
- Describe the capacity of your organization, its personnel, or contractors to communicate effectively and convey information in accordance with National Standards for Culturally and Linguistically Appropriate Services (CLAS) and Americans with disabilities Act (ADA) Standards for Effective Communication in a manner and method 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.
 - National CLAS Standards
<https://thinkculturalhealth.hhs.gov/clas#:~:text=The%20National%20CLAS%20Standards%20are,culturally%20and%20linguistically%20appropriate%20services.>
 - ADA Standards for Effective Communication
<https://www.ada.gov/effective-comm.htm>

3. Experience and capacity to address child injury and occupant protection

- Summarize existing injury prevention efforts managed by your agency including those that address the needs of high risk and underserved populations.
- Provide information on other grant and local funds your agency has for injury prevention activities. Describe how this funding will expand on your current injury prevention activities and not supplant current funding.

4. Personnel

- Explain how agency employs or contracts at least one staff assigned to the Occupant Protection Regional Coordination whose duties are to administer the OPRC Program and related grant activities. Provide explanation that

demonstrates compliance with this requirement or plans for hiring and training additional staff.

- OPRC must be a Certified Passenger Safety Technician Instructor (CPSTI), or the parent agency must have access to a CPSTI, the highest certification level available through the standardized national certification process, on staff, or through a sub contractual agreement. Agency should provide documentation that demonstrates compliance with this requirement, such as CPSTI certification number and expiration date; or agency must explain how they will meet this requirement.
- How many program staff within your agency also work on child occupant protection related efforts and to what degree?

5. Problem/Need

- Identify and describe the local health status concern(s) that will be addressed by the program. Only provide national and state data if local data is not available. Outline need using child injury and motor vehicle crash data. Clearly identify the target population. The specific health status concerns that the program intends to address may be stated in terms of disparity (e.g. population, location) health status (e.g., morbidity and/or mortality) or health system (e.g., accessibility, availability, affordability, appropriateness, quality of health services) indicators. The indicators should be measurable in order to serve as baseline data upon which evaluation will be based. Clearly identify the target population.
 - *Explicitly describe segments of the target population who experience a disproportionate burden for the health concern or issue; or who are at an increased risk for the problem addressed by this funding opportunity.*
 - *Include a description of other agencies/organizations, in your area, also addressing this problem/ need.*

6. Methodology

- **OBB Sites:** Describe how communication and support will be built and/or maintained with OBB sites in region.
- **Community Outreach:** Describe how priority community residents will be reached through car seat education and events.
- **Fitting Stations:** Provide current number of active fitting stations in region. Describe plans to increase number of active fitting stations, maintain regular communication and how ongoing support will be provided.
- **Data Collection & Evaluation:** Describe agency experience with data collection and evaluation. How will this be applied to collection of data for OPRC program (e.g. misuse rate)?

- **Data to Action:** Using Appendix I as a reference, provide a detailed summary of steps agency will take to prioritize grant activities in target counties identified. Detail plans and partner agencies that will be involved.
- **Sustainability:** Describe child passenger safety activities will continue if funding is no longer available through ODH. How will new CPS technicians and instructors in region assist with sustainability?

4. Workplan (Appendix G) Guidance

- Named: *"Insert Agency Name_Workplan_2023"* (no page limit)
- Workplan should address all deliverables in Appendix C1.
- Appendix I should be considered and included in activities/steps proposed when considering prioritizing target counties.
- Workplan must include S.M.A.R.T. (Specific, Measurable, Achievable, Results-Oriented, and Time-Based) goals and objectives and clearly demonstrates steps you will take to complete each activity.
 - Process Objective: Each deliverable should be outlined as a Process Objective. Deliverable language can be found in Appendix C1.
 - Person and Agency Responsible: Include additional staff, agencies or partners that will contribute to the completion of the process objectives. Who will contribute in moving the work and activities forward?
 - Timeline (Month/Year): Each activity/steps proposed should include a timeline with a start and end date. Consider the length of time each process objective will take to accomplish and note those dates here. Activity/steps proposed that span a full year is discouraged.
 - Activities/Steps Proposed: For each process objective write the required activities/steps proposed that explain what you are going to do and how you are going to do it. Activities/steps proposed should logically connect and illustrate how the process objectives will be completed.
 - Evaluation Measures: Evaluation can help identify needed changes, find out how well objectives are being met, determine the effects of the program, and identify ways to improve to the program. Consider how you will measure success once the process objective is complete. What metrics or information will be collected?

5. Budget

- Budget should be completed in GMIS.
- Budget Justification: should follow Scenario #3 (Template can be found in GMIS)
- Agency will determine cost for deliverables. If agency budget does not reach ceiling of funding level after budgeting for required activities, agency is permitted to expand activities. In this case, budget narrative, narrative and workplan should reflect this expansion.
- Named: *"Insert Agency Name_Budget Justification_2023"*

6. Position Descriptions/Resumes and Contingency Plans

- Provide position descriptions and resumes for the Occupant Protection Regional Coordinator already identified or position description for any new positions created for this project.
 - Named: *"Insert Agency Name_Resume & Position Descriptions_2023"*
 - Provide documentation that shows compliance with Child Passenger Safety Instructor requirement.
 - Named: *"Insert Agency Name_CPSTI status_2023"*
- Provide tentative contingency plan if OPRC leaves agency
 - Name *"Insert Agency Name_Contingency Plan_2023"*

8. Additional Guidance

- Letter to authorize travel to OIPP Meetings. Named: *"Insert Agency Name_Travel Letter_2023"*
- Other required federal forms indicated by GSU in GMIS

Data to Action Metrics for OPRC Program

The Data to Action framework was designed to provide data to inform decisions and guide public health action. This framework can assist in promoting program improvements that are data informed. The framework encourages a plan in place for how data will be used, how it relates to program performance and guidance on what actions should be taken.

The OPRC program will be moving towards data to action outcomes throughout this grant cycle. We have defined a set of metrics below that were collected from the previous grant cycle from FY18 to FY22 (as of Jan 2022). These metrics reflect the number of car seat check events that took place, the number of active fitting stations and the number of new child passenger safety technicians (CPSTs) in each county. Based on the metrics, we have defined high need counties and those counties are highlighted. Identified high-need counties in each region should be considered in planning of grant activities throughout this grant cycle. Guidance can be found in Appendix H. Applicants should outline their plans to reach underserved counties in their region for year 1 in the Program Narrative and Workplan. If your region does not have high need counties identified for a specific activity, you must select other underserved counties in your region not highlighted.

Underserved communities include:

- Counties that had no reported car seat check events over 5 years.
- Counties that active fitting station numbers reduced or stayed the same from FY18 through FY22.
- Counties that have 3 CPSTs or less or both 3 CPSTs or less and no new CPSTs over 5 years.

Target those counties in yellow. These counties had no reported car seat check events reported to ODH in past 5 years.						
Car Seat Check Events						
	FY18	FY19	FY20	FY21	FY22 (as of 1/2022)	totals
REGION 1						
Defiance	1	0	0	0	0	1
Fulton	1	1	0	0	0	2
Hancock	0	0	2	3	1	6
Henry	0	0	1	0	0	1
Lucas	4	5	3	2	3	17
Ottawa	1	0	0	0	0	1
Paulding	0	0	0	0	0	0
Putnam	0	0	0	0	0	0
Sandusky	0	0	0	0	0	0

Seneca	0	0	0	0	0	0
Williams	1	0	0	0	0	1
Wood	0	0	0	1	0	1
REGION 2						
Allen	0	1	0	0	0	1
Auglaize	0	1	0	0	0	1
Champaign	0	0	0	0	0	0
Clark	0	0	0	0	0	0
Darke	0	0	1	0	0	1
Greene	0	1	0	1	0	2
Hardin	0	0	0	1	0	1
Logan	0	0	0	0	0	0
Mercer	0	0	0	0	0	0
Miami	0	0	1	0	0	1
Montgomery	15	13	5	13	4	35
Preble	0	0	0	0	0	0
Shelby	0	0	0	0	0	0
Van Wert	1	1	0	0	0	1
REGION 3						
Adams	0	0	0	0	0	0
Brown	0	0	0	0	0	0
Butler	0	0	0	1	0	1
Clermont	2	2	0	0	0	4
Clinton	0	0	0	2	0	2
Hamilton	4	3	2	5	1	15
Highland	0	0	0	0	0	0
Warren	0	0	0	0	0	0
REGION 4						

Athens	0	0	0	0	1	1
Gallia	0	0	0	1	0	1
Hocking	0	0	0	0	0	0
Jackson	1	0	0	0	1	2
Lawrence	0	0	0	1	0	1
Meigs	0	0	0	0	0	0

Pike	1	1	0	0	0	2
Ross	0	1	0	1	0	2
Scioto	2	4	2	4	0	12
Vinton	0	0	0	1	0	1
REGION 5						
Crawford	0	0	0	0	0	0
Delaware	0	0	0	0	0	0
Fairfield	0	1	0	0	0	1
Fayette	0	0	0	0	0	0
Franklin	17	25	6	7	3	58
Knox	1	0	0	0	0	1
Licking	2	2	0	1	0	5
Madison	0	1	0	0	0	1
Marion	0	0	0	0	0	0
Morrow	0	0	0	0	0	0
Perry	0	0	0	0	0	0
Pickaway	0	0	0	0	0	0
Union	1	0	0	0	0	1
Wyandot	0	0	0	0	0	0
REGION 6						
Ashland	1	0	2	0	0	3
Cuyahoga	15	8	3	10	4	40
Erie	0	2	1	2	0	5
Geauga	0	0	0	1	0	1
Huron	0	0	0	0	0	0
Lake	0	1	0	0	0	1
Lorain	2	0	0	1	0	3
Medina	1	0	0	0	0	1
Richland	0	1	0	1	0	2
Wayne	0	0	0	0	0	0
REGION 7						
Belmont	0	0	0	0	0	0
Carroll	1	0	0	0	0	1
Coschocton	0	0	1	2	0	3

Guernsey	2	0	0	0	0	2
Harrison	2	0	0	0	0	2
Holmes	0	0	0	0	0	0
Jefferson	1	1	0	1	1	4
Monroe	0	0	0	0	0	0
Morgan	0	0	0	0	0	0

Muskingum	0	0	0	0	0	0
Noble	1	1	0	0	0	2
Stark	6	6	3	3	1	19
Tuscarawas	1	2	1	0	0	4
Washington	0	1	0	0	1	2
REGION 8						
Ashtabula	0	3	0	2	0	5
Columbiana	0	0	1	2	0	3
Mahoning	0	3	1	1	0	5
Portage	0	3	1	0	1	5
Summit	3	7	13	14	7	44
Trumbull	0	0	1	1	0	2

Target those counties in red and orange. These counties reported active fitting stations have reduced or stayed the same from FY18 to FY22.				FS # reduced from FY18 to FY22	FS # stayed same from FY18 to FY22	FS # increased from FY18 to FY22
Active Fitting Stations						
	FY18	FY19	FY20	FY21	FY22 (as of 1/2022)	Difference (FY18 - FY22)
REGION 1						
Defiance	1	1	1	1	1	0
Fulton	2	2	2	2	2	0
Hancock	1	1	1	1	1	0
Henry	1	1	1	2	2	1
Lucas	10	1	2	4	10	0
Ottawa	2	0	1	2	1	-1

Paulding	1	1	1	1	1	0
Putnam	1	1	1	1	1	0
Sandusky	2	1	1	0	0	-2
Seneca	2	1	1	1	1	-1
Williams	1	2	2	1	1	0
Wood	2	1	1	2	2	0

REGION 2

Allen	0	1	1	2	2	2
Auglaize	0	2	2	2	2	2
Champaign	0	1	1	1	1	1
Clark	0	1	1	4	3	3
Darke	1	3	3	1	1	0
Greene	3	5	5	4	3	0
Hardin	0	1	1	1	1	1
Logan	0	0	0	0	0	0
Mercer	0	1	1	1	1	1
Miami	1	2	2	2	2	1
Montgomery	5	8	8	8	8	3
Preble	0	1	1	1	1	1
Shelby	0	1	1	1	1	1
Van Wert	0	2	2	2	1	1

REGION 3

Adams	1	0	1	1	1	0
Brown	1	0	1	1	1	0
Butler	4	4	4	4	3	-1
Clermont	3	6	6	6	6	3
Clinton	1	1	1	1	1	0
Hamilton	25	19	19	20	19	-6
Highland	1	1	1	1	1	0
Warren	1	3	3	3	3	2

REGION 4

Athens	1	0	0	1	1	0
Gallia	1	1	1	1	1	0
Hocking	0	1	1	1	1	1

Jackson	1	1	1	2	2	1
Lawrence	0	1	1	1	1	1
Meigs	0	1	1	1	1	1
Pike	0	1	1	1	1	1
Ross	1	1	1	1	1	0
Scioto	1	1	1	1	1	0
Vinton	1	1	1	1	1	0
REGION 5						
Crawford	2	1	1	1	1	-1
Delaware	3	1	1	1	1	-2
Fairfield	1	1	1	1	1	0
Fayette	1	1	1	1	1	0
Franklin	14	11	7	8	8	-6
Knox	1	1	1	1	2	1
Licking	2	1	1	1	1	-1
Madison	0	1	1	1	2	2
Marion	1	1	1	3	2	1
Morrow	0	1	1	1	1	1
Perry	0	1	1	1	1	1
Pickaway	1	1	1	1	1	0
Union	2	1	1	1	1	-1
Wyandot	0	1	0	1	1	1
REGION 6						
Ashland	0	1	0	2	0	0
Cuyahoga	8	7	7	7	7	-1
Erie	0	0	0	1	1	1
Geauga	0	0	1	1	1	1
Huron	1	1	1	1	1	0
Lake	0	2	2	4	2	2
Lorain	0	1	1	3	3	3
Medina	1	2	2	2	4	3
Richland	1	1	1	1	1	0
Wayne	1	1	1	1	1	0
REGION 7						
Belmont	1	1	1	1	1	0

Carroll	1	1	1	1	1	0
Coschocton	0	0	0	0	1	1
Guernsey	0	1	0	0	0	0
Harrison	1	1	1	1	1	0
Holmes	1	1	0	0	1	0
Jefferson	3	1	1	3	2	-1
Monroe	1	1	1	1	2	1
Morgan	1	1	1	0	1	0

Muskingum	2	2	1	1	1	-1
Noble	1	1	1	1	1	0
Stark	10	9	9	6	4	-6
Tuscarawas	1	1	0	2	1	0
Washington	1	1	1	2	3	2

REGION 8

Ashtabula	3	3	3	3	5	2
Columbiana	1	1	1	2	2	1
Mahoning	3	2	2	2	2	-1
Portage	2	2	2	2	1	-1
Summit	1	2	3	5	5	4
Trumbull	2	1	1	2	1	-1

Target those counties in yellow and green. These counties have 3 CPSTs or less or both 3 CPSTs or less and no new CPSTs reported in past 5 years.					counties with 3 or less techs	Counties that had no new techs in 5 years	BOTH
New CPS Technicians							
	FY18	FY19	FY20	FY21	FY22 (as of 1/2022)	total # of new techs during 5 year cycle	total # of active techs in county (as of 1/2022)
REGION 1							
Defiance	0	3	0	0	0	3	2
Fulton	0	0	0	0	0	0	5

Hancock	0	0	4	0	4	8	9
Henry	2	8	0	3	0	13	12
Lucas	7	6	1	16	3	33	34
Ottawa	0	1	0	1	0	2	2
Paulding	1	0	0	3	0	4	3
Putnam	0	0	0	0	0	0	3
Sandusky	0	0	0	0	0	0	1
Seneca	0	0	0	0	0	0	2
Williams	0	2	1	0	0	3	3
Wood	2	1	1	1	0	5	3
REGION 2							
Allen	2	0	0	0	0	2	7
Auglaize	0	1	0	0	0	1	2
Champaign	0	1	0	2	0	3	4
Clark	2	2	5	2	1	12	12
Darke	0	2	3	0	0	5	8
Greene	0	7	1	1	0	9	7
Hardin	1	0	2	0	0	3	3
Logan	0	0	0	0	0	0	0
Mercer	0	1	0	0	0	1	5
Miami	0	6	4	1	5	16	23
Montgomery	2	16	7	5	7	37	43
Preble	5	0	1	0	0	6	1
Shelby	0	7	0	2	1	10	9
Van Wert	0	0	0	1	0	1	2
REGION 3							
Adams	0	2	0	0	0	2	
Brown	2	0	0	1	0	3	7
Butler	4	11	7	6	0	28	29
Clermont	1	0	0	4	0	5	16
Clinton	0	0	0	2	0	2	5
Hamilton	6	13	6	26	1	52	112
Highland	0	0	0	0	0	0	3

Warren	0	4	0	6	0	10	13
REGION 4							
Athens	1	1	1	1	6	10	11
Gallia	1	1	0	0	1	3	3
Hocking	0	0	1	0	1	2	4
Jackson	0	0	0	1	0	1	3
Lawrence	0	1	0	1	1	3	2
Meigs	0	0	0	0	3	3	4
Pike	0	0	0	1	0	1	1
Ross	0	0	0	3	1	4	5
Scioto	2	1	0	2	0	5	4
Vinton	1	0	0	1	1	3	7
REGION 5							
Crawford	1	0	0	0	0	1	2
Delaware	7	5	0	3	1	16	24
Fairfield	3	2	1	1	2	9	9
Fayette	0	3	0	0	0	3	4
Franklin	21	26	8	21	3	79	86
Knox	1	1	0	0	0	2	7
Licking	1	1	0	2	1	5	14
Madison	3	3	2	0	1	9	5
Marion	0	0	1	0	0	1	4
Morrow	0	1	0	0	0	1	2
Perry	0	0	0	0	0	0	1
Pickaway	0	2	0	0	1	3	4
Union	1	1	0	0	0	2	8
Wyandot	0	0	1	1	0	2	2
REGION 6							
Ashland	0	1	0	0	0	1	3
Cuyahoga	15	13	0	14	8	50	66
Erie	0	4	0	6	0	10	9
Geauga	0	0	1	2	0	3	4
Huron	0	0	1	0	0	1	5
Lake	0	3	10	3	0	16	14
Lorain	6	12	0	3	5	26	37

Medina	0	3	1	3	3	10	17
Richland	0	2	0	0	0	2	6
Wayne	0	0	1	0	0	1	3

REGION 7

Belmont	0	0	1	0	1	2	2
Carroll	0	1	1	2	0	4	5
Coschocton	0	1	0	1	1	3	3
Guernsey	0	0	0	0	0	0	0
Harrison	2	0	0	0	1	3	5
Holmes	0	0	0	0	1	1	1
Jefferson	0	0	0	0	1	1	4

Monroe	0	0	0	1	0	1	4
Morgan	0	0	0	0	0	0	0
Muskingum	0	1	0	0	0	1	3
Noble	0	1	0	0	0	1	2
Stark	6	7	5	2	1	21	29
Tuscarawas	0	2	0	0	2	4	7
Washington	0	3	0	0	1	4	4

REGION 8

Ashtabula	0	0	0	11	0	11	20
Columbiana	0	4	0	0	0	4	5
Mahoning	2	12	0	0	0	14	13
Portage	0	3	0	0	0	3	4
Summit	11	7	1	1	0	20	23
Trumbull	0	1	1	1	0	3	7

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5990006/#:~:text=The%20Data%2Dto%2DAction%20framework%20was%20designed%20to%20provide%20actionable,over%20a%203%2Dyear%20period.>
https://www.psi.org/wp-content/uploads/2020/03/psi_kdp_deliver_tracking_adaptation-external-2.pdf

Ohio Buckles Buckeye (OBB) Program Criteria

Parent Eligibility Criteria

1. Income is within current WIC income guidelines
2. Caregiver must provide verification of income to prove WIC eligibility to include one of the following: paystubs for the last 30 days, WIC card, Medicaid Card, W2s/most recent tax transcript, or benefits/award letter for unemployment. ODH will follow the most recent WIC Income Eligibility Guidelines found <https://www.fns.usda.gov/wic>
3. Caregiver must have a child who is within the age/weight/height requirements for a car seat as follows:
 - a. Child is over 5 lbs and does not exceed the weight limits for a convertible car seat, or
 - b. Child is at least one-year old, over 22 lbs. and does not exceed the weight limits for a combination forward-facing seat, or
 - c. Child is 40 lbs or over and does not exceed the weight or height limits of the booster seat.
4. Caregiver must be present to receive seat and must attend an educational session.

OBB Coordinator Site Requirements

1. Ensure *OBB WIC Income Verification Form* has been complete.
2. Provide caregiver with a written referral for WIC to include location and phone number of closest WIC clinic using the *OBB Referral and Follow-up Form*.
3. An educational session (virtual or in-person) and virtual or hands-on installation must be provided to each caregiver receiving a child restraint system. Anyone conducting virtual education, installation or seat checks must be following national guidance:
 - a. <https://live-skcert.pantheonsite.io/sites/default/files/2020-08/2020%20Virtual%20CPS%20EDUC-GUIDE.pdf>
 - b. https://www.saferidenews.com/wp-content/uploads/2020/03/Guide_CPSTs_Virtual_Car_Seat_Check_2.pdf
4. ODH requires that each OBB site have a certified CPS technician available to conduct the education/installation sessions with the caregiver. If the OBB Coordinator is not a technician, a CPS tech on staff at the agency or partnering with nearby CPS technician within the county, is permitted. Clear written documentation of this partnership should be provided to the OPRC and ODH.
5. Coordinator/Technician distributing restraint must complete the *ODH Child Restraint System Distribution and Education Checklist* or similar checklist as approved by OPRC for each restraint distributed.
6. Educational session content must include the following:
 - Use of the *ODH Child Restraint System Distribution and Education Checklist* or other similar OPRC-approved checklist to guide the session.
 - Provide hands-on installation demonstration for correct use and installation of the restraint being issued.
 - Provide up-to-date information about Ohio's Child Restraint Law.
 - View up-to-date educational video ("*Don't Risk Your Child's Life*") as provided by OPRC through ODH or other relevant educational materials.

(Established Fitting Stations, that are not OBB Sites, and Community-Based Car Seat Events are exempt, but OBB must provide caregiver with the equivalent verbal education)

 - Provide written and/or other media educational materials provided and approved by OPRC through ODH.
7. Maintain all records, either printed or electronic, for five years from the time of the initial education session with the parent, or according to your agency's policy.
8. Coordinator is responsible for submitting the following data each quarter: (submitted in *OBB Quarterly Summary Form*):
 - Current car seat inventory, seats shared with other counties, seat distribution (both OBB and non-OBB seats and type of seat), number of seats checked at OBB Seat Distributions, Car Seat Check Events, Educational Events and Fitting Stations, county misuse rate based on seats checked, hours coordinator spent on OBB program, # of funds raised/donations leveraged/services in-kind, and any other information deemed important.
9. Review child restraint allocations and adjust seat type and quantities as needed and provide changes to OPRC on an annual basis.
10. Agency must include information about Ohio Buckles Buckeye Program on their website for their county.

**These materials will be provided to the OPRCs or OBB sites by ODH.*

Ohio Buckles Buckeye (OBB) Program Criteria (continued)

ODH Policy on Collecting Donations for OBB Seats

ODH prohibits selling OBB seats or requiring a co-pay from eligible families for the OBB seats that ODH provides. OBB seats are intended for families who are WIC income-eligible in all 88 counties. Demand has always exceeded the supply of and need for OBB seats in most counties. OBB sites may collect donations in conjunction with the distribution of OBB seats to purchase additional seats. OBB sites may inform clients that there is a suggested donation and/or may have a donation box present, but this should not be done in a manner or with language that would imply a mandatory charge. These seats are meant to be a safety net program for children from low-income families statewide. OBB sites that receive additional non-ODH seats through other mechanisms may handle the distribution of those seats per their parent organization's established procedures. OBB seats, however, need to remain separate, be tracked on the OBB tracking form and be provided to families demonstrating eligibility free of charge or for a suggested donation only. OBB Sites must submit ***OBB Quarterly Summary (Appendix O)*** report to their OPRC, as instructed.

ODH Responsibilities

As defined in ORC 4511.81, all revenue deposited into the Child Highway Safety Fund is used by ODH to administer the Child Passenger Safety Program. These funds are primarily used to purchase child safety seats to be distributed by the OBB sites to low-income families. To support the OBB sites, ODH will:

- Provide child safety seats and booster seats in regular shipments as program funding allows.
- Provide an annual opportunity for OBB sites to adjust their shipments in terms of the quantities of seat type.
- Provide up-to-date educational materials such as manuals, fact sheets, brochures, videos and access to CPS technician resources.
- ODH will assist OBB sites in accessing training and continuing education opportunities such as the bi-annual CPS Conference as funding allows.
- ODH will share up-to-date and relevant guidance on COVID-19 and virtual activities with OPRCs, who will then share with OBB sites.

Acknowledgement of OBB Criteria

County: _____

Agency Name: _____

Address: _____

Telephone Number: _____

OBB Coordinator Email Address: _____

OBB Site Coordinator Name: _____

Site Coordinator Supervisor Name: _____

Site Coordinator Supervisor phone and email: _____

OBB Site Coordinator Signature

Date

Please keep the original and send a copy to your OPRC. Your OPRC will then send ODH a copy at:
Ashton.Grigley@odh.ohio.gov

For New OBB Sites Only: OBB Site and OPRC Responsibilities

- Conduct **meeting** with OPRC, agency head and staff who will be responsible for seat distribution. Please specify meeting date and who was in attendance?
 - **Meeting date:** _____
 - **Attendance:**
 - **OPRC:** _____
 - **Agency Head or Designee:** _____
 - **OBB Program Staff:** _____
 - **Other, please specify:** _____
- The meeting should include discussion of the following:
 - **Commitment of at least 24 months**– Can the agency commit to these responsibilities for a minimum of 24 months?
 - **Contingency plans**– What are the contingency plans if the staff person who is trained is unable to continue these duties? Is the agency willing and able to commit additional staff to the project? Will they allow additional staff to attend a minimum 24-hour CPS technician training? Who will distribute seats in the interim period?
 - **Data Collection** –What data is required to be submitted quarterly (*OBB Quarterly Summary template*); type of format for data collection; in what format (i.e., electronic or paper copies) and how often (must be at least quarterly) will the required data from the **OBB Child Restraint Distribution Checklist** forms or hard copies of the completed forms be sent to the OPRC.
 - **WIC Referral**– How to complete the WIC Income Verification Form
 - **Income Eligibility**-What is the process to determine the income eligibility of the families and what are acceptable forms of income verification?
 - **Program Funding** - The main source of funding for the seats is the Child Highway Safety Fund as defined in ORC 4511.81. The number and timing of seats received is variable depending on the amount of money collected because of child restraint violation fines. We currently estimate 64 seats per year, but this will be dependent on funds.
 - **ODH Seat Donation Policy** – See above.

For new OBB sites, the agency head's signature is required.

Agency Head Name: _____

Agency Head Signature

Date

Please keep the original and send a copy to your OPRC. Your OPRC will then send ODH a copy at:
Ashton.Grigley@odh.ohio.gov

Questions? Please email Ashton Grigley @ Ashton.Grigley@odh.ohio.gov

OBB Annual "Site Visit" Quality Assurance Checks for Oct. 1, 2022 - Sept. 30, 2023

1	2	3	4	5		6	7	8	9	10
Please list each county in Region	OBB Site Coordinator Name	Date of Site Visit	Is OBB Coordinator a certified CPS-T? ** (Y/N)	Evidence demonstrated compliance with OBB Program Criteria established by ODH (Y/N)	Non-compliance issues identified and addressed? Please explain.	Properly completion of the ODH Child Safety Seat Distribution and Education checklist (Y/N)	Reporting of OBB seat tracking data on a quarterly basis. (Y/N)	Compliant with minimum educational requirements for instructing seat recipients about proper installation and use (Y/N)	Dissemination of approved educational materials? (Y/N)	Verified that OBB information listed on agency website? (Y/N)
At least one "site visit" must be conducted with each OBB site on an annual basis. If "N" on any, please explain in the space below.										
Please explain any "No's" from above in this space and plans for corrective action. Is there anything ODH can assist with?										

FY23 OBB Site Coordinator Contact List - Region _

County	Contact Name & Agency	Shipping Address for Car Seats	Shipping Address Outside of Seats	Phone	Email

APPENDIX K													
County	Quarter # (autofilled by ODH)	Date shipment received	Types of seats received in quarter	# of seats left from when you submitted your last report (should be column H after first quarter)	# of each seat received this quarter by ODH	# of seats transferred out to another county this quarter	# of seat received by another county this quarter	Comments about transfers in and out (should include county and date)	# of OBB seats distributed this quarter	Total # of OBB Seats remaining in inventory (Please confirm this number is the same as on the OBB Form submitted)	# on your current wait list	# of non-OBB seats that have been distributed this quarter	Comments
COUNTY #1	Quarter #1		Convertibles							0			
			High Back Booster						0				
			Backless Booster						0				
	Quarter #2		Convertibles	0					0				
			High Back Booster	0					0				
			Backless Booster	0					0				
	Quarter #3		Convertibles	0					0				
			High Back Booster	0					0				
			Backless Booster	0					0				
Quarter #4		Convertibles	0					0					
		High Back Booster	0					0					
		Backless Booster	0					0					

# of community based car seat checks held	# of Fitting Station dates held	# of Education Classes held for OBB seats	# of seats checked total for this quarter at all events (includes classes, Fitting Stations, and events)	# of seats installed in all events in column S	# of seats checked that were not installed correctly in Column S	Misuse rate (calculated automatically)	# of hours OBB Coordinator spent on program for quarter	New Partnerships formed
						#DIV/0!		
						#DIV/0!		
						#DIV/0!		
						#DIV/0!		
						#DIV/0!		
			Form# OFA-017			#DIV/0!		Page 93

**Ohio Department of Health
Occupant Protection Regional Coordination (OPRC)
FFY23 Conference Call Documentation**

The OPRC Grant with the Ohio Department of Health (ODH) stipulates that subgrantee or their agency representative will participate in all scheduled OPRC conference calls with ODH, at least 2 OIPP Child Injury Action Group subcommittee conference calls related to Child Passenger Safety and participate in at least 2 OIPP conference calls. In order to receive compensation for these deliverables, written documentation must be submitted via GMIS. This is a progressive form, so please don't delete previously entered information.

Please complete and submit the following form in GMIS on the following dates:

Quarter 1: December 31, 2022

Quarter 3: June 30, 2023

Quarter 2: March 31, 2023

Quarter 4 (final): September 30, 2023

Check quarter you are submitting for:

1st ☐

2nd ☐

3rd ☐

4th/Final ☐

OPRC Conference Calls

Quarter	Month	Date of Conference Call	Name of individual at your agency that participated
1	October		
1	December		
2	February		
3	April		
3	June		
4	August		

CIAG – CPS Subcommittee Conference Calls

Quarter	Date of Conference Call	Name of individual at your agency that participated

OIPP Conference Calls

Quarter	Date of Conference Call	Name of individual at your agency that participated

Signature of OPRC

Date

Appendix M Technical Assistance Tracking Sheet

*This form should be completed as documentation for Deliverable 13 (Child Passenger Safety Resources & Technical Assistance) One form should be completed for each instance of TA.
Agency should complete two instances of TA with OBB Sites each quarter.*

Description: Between October 1, 2022 and September 31, 2023, the OPRC will act as liaison between ODH and OBB sites. OPRC will provide the required documentation to their ODH Program Consultant via REDCap for the following:

- Technical Assistance via email or phone
- Sharing of materials or resources for CPS events, CPS education, or OBB classes

Objective 13: OPRC will submit the Technical Assistance Tracking Sheet (Appendix M) to reflect at least two (2) instances of TA or materials provided to OBB Program Sites quarterly in their region to ODH Program Consultant via REDCap. (reimbursement should be submitted quarterly for 25%)

Upon request, agency should provide documentation that reflects the activities reported in this form

TA #1:

County:		
Agency:		
Date of TA provided:		
Method of Communication:	<input type="checkbox"/> Phone	<input type="checkbox"/> Email <input type="checkbox"/> In-person
Materials Provided?	<input type="checkbox"/> Yes	<input type="checkbox"/> No
If yes, Quantity?		
Type of Materials:		
Description of TA provided:		

TA #2:

County:			
Agency:			
Date of TA provided:			
Method of Communication: <input type="checkbox"/> Phone <input type="checkbox"/> Email <input type="checkbox"/> In-person			
Materials Provided? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If yes, Quantity?			
Type of Materials:			
Description of TA provided:			

Please copy and paste chart above for additional counties to be added

Appendix N - OBB Fitting Stations for 10/1/2022 - 9/30/2023

<p>Fitting station (FS) is defined as a place that takes appointments or walks-in for car seat checks/installs and has a tech that conducts these checks/installs. Fitting station list should include all known FS in your region.</p> <p>Optional Deliverable 24: In order for OPRC to be eligible for reimbursement, OPRC is required to complete the following at <u>Fitting Stations in 50% of counties in Region:</u></p> <p><i>*An updated and complete list of active OBB FS in the region. This includes all information below to be completed fully.</i></p> <p><i>*Regular communication and completion of 2 out of the 3 indicated activities each quarter.</i></p>						<p><i>In addition to regular communication, OPRCs must indicate 2 out of the 3 activities completed below. **please be prepared to share documentation during annual ODH site visit or upon request**</i></p>			Quarter 1	Quarter 2	Quarter 3	Quarter 4
Fitting Station Agency	FS Coordinator Contact Name	FS complete address to be posted on NHTSA website	FS phone number to be posted on NHTSA website	# of CPS Techs normally utilized at this Fitting Station	Indicate is this FS serves rural (R), urban (U), low-income (L), or minority populations (M)-please indicate corresponding letter(s) in column below	Technical Assistance (TA) & Materials Provided (please indicate date of TA or # and type of materials provided)	Onsite or Virtual assistance with appointments (yes or no - please include dates)	Onsite or Virtual Visit (yes or no)	Regular Communication Conducted: include type (email or phone) and dates of communication	Regular Communication Conducted: include type (email or phone) and dates of communication	Regular Communication Conducted: include type (email or phone) and dates of communication	Regular Communication Conducted: include type (email or phone) and dates of communication

Appendix N – Non-OBV Fitting Stations for 10/1/2022 - 9/30/2023

<p>Fitting station (FS) is defined as a place that takes appointments or walks-in for car seat checks/installs and has a tech that conducts these checks/installs. Fitting station list should include all known FS in your region.</p> <p>Optional Deliverable 24: In order for OPRC to be eligible for reimbursement, OPRC is required to complete the following at <u>Fitting Stations in 50% of counties in Region:</u></p> <p><i>*An updated and complete list of active OBV FS in the region. This includes all information below to be completed fully.</i></p> <p><i>*Regular communication and completion of 2 out of the 3 indicated activities each quarter.</i></p>						<p><i>In addition to regular communication, OPRCs must indicate 2 out of the 3 activities completed below. **please be prepared to share documentation during annual ODH site visit or upon request**</i></p>			Quarter 1	Quarter 2	Quarter 3	Quarter 4
Fitting Station Agency	FS Coordinator Contact Name	FS complete address to be posted on NHTSA website	FS phone number to be posted on NHTSA website	# of CPS Techs normally utilized at this Fitting Station	Indicate is this FS serves rural (R), urban (U), low-income (L), or minority populations (M)-please indicate corresponding letter(s) in column below	Technical Assistance (TA) & Materials Provided (please indicate date of TA or # and type of materials provided)	Onsite or Virtual assistance with appointments (yes or no - please include dates)	Onsite or Virtual Visit (yes or no)	Regular Communication Conducted: include type (email or phone) and dates of communication	Regular Communication Conducted: include type (email or phone) and dates of communication	Regular Communication Conducted: include type (email or phone) and dates of communication	Regular Communication Conducted: include type (email or phone) and dates of communication

Region xx - OBB Quarterly Summary for 10/01/2022 to 9/30/2023

Contact Information (A)

County	
Agency	
Name	
Phone	
Email	

What quarter are you reporting for? (please check box) (B)

October 1, 2022, to December 31, 2022	January 1, 2023, to March 31, 2023	April 1, 2023, to June 30, 2023	July 1, 2023, to September 30, 2023

Shipments during this reporting quarter (add additional rows as necessary) (C) & (F)

Date Received	# Convertible	# High Back Booster	# Backless Booster

Car Seat Inventory (E)

	# Convertible	# High Back Booster	# Backless Booster
# of seats left from when you submitted your last report			

of seats transferred out to another county this quarter (add additional rows as necessary) (G) & (I)

Date Received	County receiving seats	# Convertible	# High Back Booster	# Backless Booster

of seats received by another county this quarter (add additional rows as necessary) (H) & (I)

Date Received	County sending seats	# Convertible	# High Back Booster	# Backless Booster

OBB Seat Distribution (J)

# Convertible	# High Back Booster	# Backless Booster

Ending OBB Car Seat Inventory (K)

	# Convertible	# High Back Booster	# Backless Booster
Inventory on last day of reporting period			

Wait List (L)

	# Convertible	# High Back Booster	# Backless Booster
# currently on wait list			

of non-OBB seats that have been distributed this quarter (M)

# Convertible	# High Back Booster	# Backless/No Back Booster

Record type of event per Zip Code (refer to descriptions & abbreviations provided below)

(J) OBB Seat Distribution: car seat education & installation of OBB seats (regular car seat distribution process)

(P) Car Seat Check Event: one time event (i.e., non-routine event open to the public, scheduled car seat check appointment at a special event, etc.)

(R) Educational Event: booth where CPS education only is being provided (i.e., health fair, education class with JFS caseworkers, etc.)

(Q) Fitting Station: permanent site that takes car seat check appointments on a routine basis (i.e., scheduled car seat check appointment)

Type of Event OBB Seat Distribution=OBB, Car Seat Check Event=CSC, Educational Event=EE, and Fitting Station=FS	How many events occurred	Zip Code	How many OBB car seats distributed per zip code	How many non-OBB car seats distributed per zip code

All Events *(all sections must be completed)*

Type of event	# Seats Checked	# Installed	# Uninstalled	# Correct	# Incorrect	Misuse Rate (For Official Use Only)
OBB						
CSC						
EE						
FS						
total	(S)	(T)			(U)	

Additional Information

(W)	# Hours Spent on OBB Program	
(X)	Amount of \$ fundraised or donated/in-kind	
(Y)	How were above funds used?	
(Z)	What types of funds (if any) does your agency have access to for other car seats?	
(AA)	New partnerships formed	

Comments/Feedback

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**Ohio Department of Health Child Passenger Safety Program
FFY23 Program Income Breakdown
(Occupant Protection Regional Coordination-BB Grant)**

***Report Quarterly – If no Program Income this quarter, note in REDCap**

Name of Agency:	
Name of Individual Completing:	Date:
Program Income: CPST Class <input type="checkbox"/> OBB Program Donations <input type="checkbox"/> Other Grant Funded Car Seat Activity Donations <input type="checkbox"/> Conferences <input type="checkbox"/>	

CPST Class

Class Name/Type: <input type="checkbox"/> Certification <input type="checkbox"/> Recertification	Class Dates:	
Class Location/Address:		
Safe Kids Cost per Student: \$		
Local Fee Cost per Student: \$		
Lead CPSTI (name, email, telephone, address):		
Anticipated Income		
<i>Item</i>	<i>Details</i>	
Registration Fee (provide detail):	# of Days: # of People: Cost per Person:	
Local Fee (provide detail):	Amount of Local Fee (per person):	
Total Program Income from Local Fee	\$	
Anticipated Expenses for Program Income		
<i>Items</i>	<i>Details</i>	<i>Amount</i>
CPSTIs	(Instructor/Instructor Candidate (Name & Safe Kids ID #)): 1. 2.	
Miscellaneous Items	(Type, quantity & amount per item): 1. <i>LATCH manual, pens, clipboards, face mask, hand sanitizer, etc.</i> 2.	
Total Expenses	\$	

OBB Program Donations

Quarter of Distribution:		
Program Income Received		
<i>Item</i>	<i>Name of Event</i>	<i>Amount</i>
Donations	1. 2. 3. 4. 5.	1. 2. 3. 4. 5.
Total Income	\$	
Expenses		
<i>Item</i>	<i>Details</i>	<i>Amount</i>
Supplies	(Type, Quantity & Amount per item): 1. <i>LATCH manuals, car seats, printing, etc.</i> 2. 3.	Total Amount: 1. 2. 3.
Personnel	(Staffing for activities not paid by grant): 1. 2. 3.	1. 2. 3.
Misc.		
Total Expenses	\$	

Other Grant Funded Car Seat Activity Donations

Quarter of Distribution:			
Program Income Received			
<i>Item</i>	<i>Date</i>	<i>Name of Event</i>	<i>Amount</i>
Donations	1. 2. 3. 4. 5.	1. 2. 3. 4. 5.	1. 2. 3. 4. 5.
Total Income	\$		
Expenses			
<i>Item</i>	<i>Details</i>		<i>Amount</i>
Supplies	(Type, quantity & amount per item): 1. <i>LATCH manuals, car seats, printing</i> 2. 3.		Total Amount: 1. 2. 3.
Personnel	(Staffing for activities not paid by grant): 1. 2. 3.		1. 2. 3.
Misc.			
Total Expenses	\$		

Conferences

Date(s) of conference:			
Program Income Received			
<i>Item</i>	<i>Details</i>		
Registration (provide detail):	# of Days:	# of People:	Cost per Person:
Total Program Income	\$		
Expenses			
<i>Item</i>	<i>Details</i>	<i>Amount</i>	
Supplies	(Type, Quantity & Amount per item): 1. <i>printing, badges, pens etc.</i> 2. 3.	Total Amount: 1. 2. 3.	
Personnel	(Staffing for activities not paid by grant): 1. 2. 3.	1. 2. 3.	
Misc.	(rentals, equipment, speaker fees, etc.)		
Total Expenses	\$		

Please Note: Food/beverages cannot be purchased with program income, and agency must be able to provide receipts of expenses upon ODH request.

Per Code of Federal Regulations, **Program income** means gross income earned by the non-Federal entity that is directly generated by a supported activity or earned as a result of the Federal award during the period of performance except as provided in §200.307 paragraph (f).

§200.307 Program income.

(a) *General.* Non-Federal entities are encouraged to earn income to defray program costs where appropriate. (OBB Class donations, OBBs seeking non-profit donations and small grants - to leverage funds)

(b) *Cost of generating program income.* If authorized by Federal regulations or the Federal award, costs incidental to the generation of program income may be deducted from gross income to determine program income, provided these costs have not been charged to the Federal award.

(c) *Governmental revenues.* Taxes, special assessments, levies, fines, and other such revenues raised by a non-Federal entity are not program income unless the revenues are specifically identified in the Federal award or Federal awarding agency regulations as program income.

(d) *Property.* Proceeds from the sale of real property, equipment, or supplies are not program income; such proceeds will be handled in accordance with the requirements of the Property Standards §§200.311, 200.313, and 200.314, or as specifically identified in Federal statutes, regulations, or the terms and conditions of the Federal award.

(e) *Use of program income.* If the Federal awarding agency does not specify in its regulations or the terms and conditions of the Federal award or give prior approval for how program income is to be used, paragraph (e)(1) of this section must apply. For Federal awards made to IHEs and nonprofit research institutions, if the Federal awarding agency does not specify in its regulations or the terms and conditions of the Federal award how program income is to be used, paragraph (e)(2) of this section must apply. In specifying alternatives to paragraphs (e)(1) and (2) of this section, the Federal awarding agency may distinguish between income earned by the recipient and income earned by subrecipients and between the sources, kinds, or amounts of income. When the Federal awarding agency authorizes the approaches in paragraphs (e)(2) and (3) of this section, program income in excess of any amounts specified must also be deducted from expenditures.

(1) *Deduction.* Ordinarily program income must be deducted from total allowable costs to determine the net allowable costs. Program income must be used for current costs unless the Federal awarding agency authorizes otherwise. Program income that the non-Federal entity did not anticipate at the time of the Federal award must be used to reduce the Federal award and non-Federal entity contributions rather than to increase the funds committed to the project.

(2) *Addition.* With prior approval of the Federal awarding agency (except for IHEs and nonprofit research institutions, as described in this paragraph (e)) program income may be added to the Federal award by the Federal agency and the non-Federal entity. The program income must be used for the purposes and under the conditions of the Federal award.

(3) *Cost sharing or matching.* With prior approval of the Federal awarding agency, program income may be used to meet the cost sharing or matching requirement of the Federal award. The amount of the Federal award remains the same.

(f) *Income after the period of performance.* There are no Federal requirements governing the disposition of income earned after the end of the period of performance for the Federal award, unless the Federal awarding agency regulations or the terms and conditions of the Federal award provide otherwise. The Federal awarding agency may negotiate agreements with recipients regarding appropriate uses of income earned after the period of performance as part of the grant closeout process. See also §200.344.

(g) *License fees and royalties.* Unless the Federal statute, regulations, or terms and conditions for the Federal award provide otherwise, the non-Federal entity is not accountable to the Federal awarding agency with respect to program income earned from license fees and royalties for copyrighted material, patents, patent applications, trademarks, and inventions made under a Federal award to which 37 CFR part 401 is applicable.