



MEMORANDUM

Date: December 22, 2021

To: Subrecipient agencies

From: Dyane Gogan Turner, MPH, RD/LD, IBCLC
Chief, Bureau of Maternal, Child and Family Health
Ohio Department of Health *DGT*

Subject: Save Our Sight (SV23)
July 1, 2022 – June 30, 2023

The Ohio Department of Health (ODH), Maternal, Child and Family Health announces the availability of grant funds.

Qualified applicants for grant funds under this initiative may be a local, private, nonprofit, university, research institution, community-based, or government entity. Applicants should have specific experience and capacity to successfully complete the project within the requested timeframe as stated in this competitive solicitation. Additionally, subrecipient(s) should have experience in the following areas: addressing health disparities, racial disparities, maternal health, infant mortality reduction, and social determinants of health.

This is a competitive solicitation. All interested applicants must submit a Notice of Intent to Apply for Funding (NOIAF– Appendix A) no later than December 29, 2021, so access to the application via the internet website “ODH Application Gateway” can be established.

To be eligible for funding, all applicant agencies must be 1) a local, private, nonprofit, university, research institution, community-based, or government entity, 2) attend or document in writing prior attendance at Grants Management Information System (GMIS) training and 3) have the capacity to accept an electronic funds transfer (EFT). If an applicant agency needs GMIS training prior to the establishment of access to the application, then a GMIS training form must be submitted (Appendix B).

Potential applicants are encouraged to participate in an Information Session to be held via conference call on December 27, 2021 from 9:00-10:00 a.m. The conference call is being offered to allow potential applicants the opportunity to discuss the solicitation and learn about the elements of a successful application. To participate in this call, utilize conference call number 614-721-2972 and use 933 426 856# as the conference call ID. Refer the solicitation for more information regarding the Information Session.

All applications, including any required attachments, must be completed and received by ODH electronically via GMIS by 4:00 p.m. on Monday, January 31, 2022. Applications received after the due date will not be considered for review.

If you have questions, please contact Cindy Penn at 614.466.5274 or e-mail at Cynthia.Penn@odh.ohio.gov

ALL APPLICATIONS MUST BE SUBMITTED VIA THE INTERNET

OHIO DEPARTMENT OF HEALTH

Bureau of Maternal Child and Family Health

Save Our Sight

SOLICITATION FOR FISCAL YEAR 2023 (07/01/22 –
06/30/23)

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

TABLE OF CONTENTS

I.	APPLICATION SUMMARY and GUIDANCE	
A.	Policy and Procedure	2
B.	Application Name	3
C.	Purpose	3
D.	Qualified Applicants	3
E.	Service Area	3
F.	Number of Grants and Funds Available	3
G.	Due Date	4
H.	Authorization	4
I.	Goals	4
J.	Program Period and Budget Period	4
K.	Public Health Accreditation Board Standards	4
L.	Public Health Impact Statement	4
M.	Human Trafficking	6
N.	Appropriation Contingency	7
O.	Programmatic, Technical Assistance and Authorization for Internet Submission	7
P.	Acknowledgment	7
Q.	Late Applications	7
R.	Successful Applicants	7
S.	Unsuccessful Applicants	7
T.	Review Criteria	7
U.	Freedom of Information Act	8
V.	Ownership Copyright	8
W.	Reporting Requirements	9
X.	Special Condition(s)	10
Y.	Unallowable Costs	10
AA.	Audit	11
AB.	Submission of Application	12
II.	APPLICATION REQUIREMENTS AND FORMAT	
A.	Application Information	13
B.	Budget	13
C.	Assurances Certification	13
D.	Project Narrative	14
E.	Civil Rights Review Questionnaire – EEO Survey	14
F.	Federal Funding Accountability and Transparency Act (FFATA) Requirement	15
G.	Attachment(s)	15
III.	APPENDICES	
A.	Notice of Intent to Apply For Funding	
B.	GMIS Access Request Form	
C.	C1. Deliverable – Objective Descriptions C2. Deliverable – Objective Allocations	
D.	Application Review Form <i>(required)</i>	
E.	Save Our Sight Program Goals, Objectives and Strategies	
F.	Save Our Sight Program Plan	
G.	Save Our Sight Monthly Reporting Template	
H.	Community Engagement Assessment Tool Simplified Form	

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, December 29, 2021 so access to the application via the Internet website “ODH Application Gateway” can be established.

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: Save Our Sight

C. Purpose: The purpose of the Save Our Sight Program is to ensure that children in Ohio have good vision and healthy eyes.

The Ohio Amblyope Registry component strives to provide education and voluntary case management to parents or caregivers of children that are diagnosed with amblyopia. In addition, the Save Our Sight Fund seeks to provide opportunities to raise awareness of amblyopia and through educational efforts to families, health professionals and the general public to identify more children with amblyopia who currently are not receiving treatment.

The Protective Eyewear component strives to prevent eye injuries by purchasing and distributing protective eyewear to youth participating in community-based sports settings and instruction-based school settings; educating parents and youth in the proper use of protective eyewear; and assisting local communities and the Ohio Department of Health in the development of policies and procedures regarding the proper use of protective eyewear.

The Vision Health and Safety Education component strives to provide developmentally and culturally appropriate vision health and safety programs and materials for traditional and non-traditional classrooms. Eighty percent of what a child learns is learned visually. In Ohio, one in four school-aged children and one in twenty preschoolers have a vision problem.

The Vision Screening Training component provides a voluntary children's vision screener training and certification programs to vision screening programs serving preschool and school aged children.

Funds for the Save Our Sight Program are generated by donations. Motor vehicle owners in Ohio are asked to donate \$1 to the Save Our Sight Fund when they register their vehicles and/or renew license plates. Generated funds support all of these programs.

D. Qualified Applicants: All applicants must be a local public or non-profit agency, must be a 501(c) organization with demonstrated experience in the delivery of vision services. 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).

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 Monday, January 31, 2022.**

E. Service Area: Applicants must provide vision services for the entire state of Ohio.

F. Number of Grants and Funds Available: State funds for the Save Our Sight Program are generated by donations. Motor vehicle owners in Ohio are asked to donate to the Save Our Sight Fund when they register their vehicles and/or renew license plates. This program is completely funded by the Save Our Sight Fund (State funds). Only one successful applicant will be awarded per component. Applicants for the Save Our Sight Program may apply for up to four components:

Eligible agencies may apply for up to \$475,000 for the Ohio Amblyope Registry component.

Eligible agencies may apply for up to \$475,000 for the Protective Eyewear component.

Eligible agencies may apply for up to \$475,000 for the Vision Health and Safety component.

Eligible agencies may apply for up to \$475,000 for the Vision Screening Training component.

*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 or via ground delivery at 246 N. High St., Columbus, Ohio by **4:00 p.m. by Monday, January 31, 2022**. Applications and required attachments received after this deadline will not be considered for review. Contact Cindy Penn, 614. 466.5274 or Cynthia.Penn@odh.ohio.gov with any questions.

H. Authorization: Authorization of funds for this purpose is contained in Amended Substitute House Bill Section 3701.21 of the Ohio Revised

I. Goals: The goal of the Save Our Sight Program is to ensure that children have good vision and healthy eyes. This is accomplished by providing funding to 501(c) organizations that offer vision services in all counties of the state. These organizations must have demonstrated experience in the delivery of vision services to implement and evaluate program objectives listed in Appendix E

J. Program Period and Budget Period: The program period will begin July 1, 2022 and end on June 30, 2025. The budget period for this application is July 1, 2022 through June 30, 2023.

K. Public Health Accreditation Board (PHAB) Standard(s): 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 3.2: Provide Information on Public Health Issues and Public Health Functions Through Multiple Methods to a Variety of Audiences. 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:

- **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.

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.](#)
- 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>
- HealthyPeople 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.

[☐ Applicable ☒ Not Applicable to Save Our Sight

- 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 Cindy Penn, 614. 466.5274 or Cynthia.Penn@odh.ohio.
- 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 **Monday, January 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.
 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 timelines 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 detail 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. [Authorization of funds for this purpose is contained in Sections 3701.21 of the Ohio Revised Code.]
- 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 Maternal, Child and Family Health, Save Our Sight Program"

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. **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.

X ☐ Program Reports Required ☐ No Program Reports Required

Period	Report Due Date
July 1 – 31, 2022	August 10, 2022
August 1 – 31, 2022	September 10, 2022
September 1 – 30, 2022	October 10, 2022
October 1 – 31, 2022	November 10, 2022
November 1 – 30, 2022	December 10, 2022
December 1 – 31, 2022	January 10, 2023
January 1 – 31, 2023	February 10, 2023
February 1 – 28 or 29, 2023	March 10, 2023
March 1 – 31, 2023	April 10, 2023
April 1 – 30, 2023	May 10, 2023
May 1 – 31, 2023	June 10, 2023
June 1 – 30, 2023	July 10, 2023

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

- b. Subrecipient Reimbursement Expenditure Reports:** Subrecipients can choose monthly or quarterly reimbursement (expenditure report submission) from ODH (please check the reimbursement type on the attached NOIAF). 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 Monthly Reimbursement Expenditure Reports **must** be completed and submitted **via GMIS** by the following dates:

Period	Report Due Date
July 1 – 31, 2022	August 10, 2022
August 1 – 31, 2022	September 10, 2022
September 1 – 30, 2022	October 10, 2022
October 1 – 31, 2022	November 10, 2022
November 1 – 30, 2022	December 10, 2022
December 1 – 31, 2022	January 10, 2023
February 1 – 28, 2023	March 10, 2023
March 1 – 31, 2023	April 10, 2023
April 1 – 30, 2023	May 10, 2023
May 1 – 31, 2023	June 10, 2023
June 1 – 30, 2023	July 10, 2023

Subrecipient Quarterly Reimbursement Expenditure Reports **must** be completed and submitted **via GMIS** by the following dates:

Period	Report Due Date
July 1 – September 30, 2022	October 10, 2022
October 1 – December 31, 2022	January 10, 2023
January 1 – March 31, 2023	April 10, 2023
April 1 – June 30, 2023	July 10, 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 August 5, 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 Monthly/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;

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 25 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: Attachment 1 Save Our Sight Assurances

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:** A match of 10% is only required for the Protective Eyewear component portion of this grant for the purchase cost of protective eyewear. This match amount must be included in the applicant share column of the Budget Summary page with a match plan in the narrative.

Match or Applicant Share is not required by this program for the Ohio Amblyope Registry component, Vision Health and Safety component and Vision Screening Training component. 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 July 1, 2022 to June 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:** Identify the target population, services and programs to be offered and what agency or agencies will provide those services, and describe the burden of health disparities and health inequities in regards to ensuring children in Ohio have good vision and healthy eyes. Describe the public health problem(s) that the program will address.
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.

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,cultural%20and%20linguistically%20appropriate%20services.>
- ADA Standards for Effective Communication <https://www.ada.gov/effective-comm.htm>

3. **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. 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.

Methodology: In narrative form, identify the program goals, **SMART** process, impact, or outcome objectives and activities. Indicate how they will be evaluated to determine the level of success of the program. If health disparities and/or health inequities have been identified, describe how program activities are designed to address these issues. Complete a program activities timeline to identify program objectives and activities and the start and completion dates for each.

- 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 grant funds 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 will hold 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), register in 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 Monday, January 31, 2022.**

III APPENDICES

- A. Notice of Intent to Apply For Funding
- B. GMIS Training, User Access, Access Change or Deactivation
- C. Request C1 Deliverable – Objective Descriptions (if applicable)
C2 Deliverable – Objective Allocations (if applicable)
- D. Application Review Form
- E. Save Our Sight Program Goals, Objectives and Strategies
- F. Save Our Sight Program Plan
- G. Save Our Sight Monthly Reporting Template
- H. Community Engagement Assessment Tool Simplified Form

ATTACHMENT 1
SAVE OUR SIGHT PROGRAM ASSURANCES

Applicant must provide signed assurance that the following ODH Save Our Sight Program statements of assurance will be in place by July 1, 2022. A signed assurance must be submitted for each component the applicant applies for funds.

Save Our Sight Children's Amblyope Registry Program Assurances

1. Assurance that the applicant will comply with the Ohio Revised Code 3701.21 and OAC 3701-48 that pertain to the Save Our Sight program and ODH standards and guidelines.
2. Assurance that this public health program will address amblyopia awareness, increase the number of registrants and case management participants, and expand of the registry in all counties of the state.
3. Assurance that customer questions, inquiries and complaints will be responded to in a timely manner. When possible, complaints, questions and requests for service should be resolved in "real time" but must be responded to in 7 business days.
4. Assurance that patching kits, educational materials and compliance materials must be sent within 10 business days of receipt of request in ODH web-based amblyope registry database.
5. Assurance that all data generated by the Ohio Amblyope Registry will be owned by ODH.
6. Assurance that registry participants will be contacted on a regular basis (30, 90 and 180 days) to determine if registry participants are following through with care recommendations and are under the care of a vision professional. Contact must be in the form of phone call, email and/or letter on an individual basis.
7. Assurance that an amblyope advisory committee, representative of all regions of the state, will be created and maintained that consists of providers of care and parents of children who have/had amblyopia (both individual and organizations including but not limited to ophthalmology, optometry, pediatricians, family practice doctors, and school nurses); healthcare institutions (including but not limited to children's hospitals, health centers and health departments); educational institutions (including but not limited to school districts, preschools, universities); and community organizations (including but not limited to advocacy organizations, community centers, libraries).
8. Assurance that the program does not discriminate in the provision of services based on an individual's religion, race, national origin, handicapping condition, age, sex, number of pregnancies or marital status.
9. Assurance that the Health Insurance Portability and Accountability Act (HIPAA) is instituted in the agency.
10. Assurance that the agency has the capacity to provide services to persons with Limited English Proficiency (LEP).
11. Assurance the agency has one representative available for the annual project directors meeting. (This will be held on the 3rd Thursday of September at 10:00am)
12. Assurance the agency will verify the person receiving and/or providing services is an Ohio resident.

Name of Agency: _____

GMIS Number: _____ Signature: _____

Save Our Sight Children's Vision Protective Eyewear Program Assurances

Applicant must provide signed assurance that the following ODH Save Our Sight Program components and/or statements of assurance will be in place by July 1, 2022.

1. Assurance that the applicant will comply with the Ohio Revised Code 3701.21 and OAC 3701-48 that pertain to the Save Our Sight program and ODH standards and guidelines.
2. Assurance that ten percent of the protective eyewear equipment budget must be in the form of a match.
3. Assurance that customer questions, inquiries and complaints will be responded to in a timely manner. When possible, complaints, questions and requests for service should be resolved in "real time" but must be responded to in 7 business days.
4. Assurance that receipt of equipment is a three-year commitment. A league agrees to complete and return pre- and post- season evaluations for three years. At the end of three years, the equipment becomes property of the participating league. In addition, the league agrees to provide educational materials to the parents/caregiver, players and coaches in the program. If the league fails to submit information as requested, the league will be required to return all equipment at the league's expense to the Program.
5. Assurance that receipt of equipment is a one-year commitment for individual use. At the end of one year, the equipment becomes property of the individual.
6. Assurance that the program does not discriminate in the provision of services based on an individual's religion, race, national origin, handicapping condition, age, sex, number of pregnancies or marital status.
7. Assurance that the Health Insurance Portability and Accountability Act (HIPAA) is instituted in the agency.
8. Assurance that the agency has the capacity to provide services to persons with Limited English Proficiency (LEP).
9. Assurance the agency has one representative available for the annual project directors meeting. (This will be held on the 3rd Thursday of September at 10:00am)
10. Assurance the agency will verify the person receiving and/or providing services is an Ohio resident.

Name of Agency: _____

GMIS Number: _____ Signature: _____

Save Our Sight Children's Vision Health and Safety Component Assurances

Applicant must provide signed assurance that the following ODH Save Our Sight Program components and/or statements of assurance will be in place by July 1, 2022.

1. Assurance that the applicant will comply with the Ohio Revised Code 3701.21 and OAC 3701-48 that pertain to the Save Our Sight program and ODH standards and guidelines.
2. Assurance that research-based curricula will be used in traditional and non-traditional classroom settings.
3. Assurance that the vision health and safety program curriculum in traditional classroom settings will include measurable outcomes measures in addition to process measures. Evaluation should be conducted at two levels: 1) process--that looks at tasks and procedures of the program (and 2) outcome-- that looks at results/changes in the target age group from the program (e.g., the number of children with improved post-test results in comparison to a pre-test).
4. Assurance that customer questions, inquiries and complaints will be responded to in a timely manner. When possible, complaints, questions and requests for service should be resolved in "real time" but must be responded to in 7 business days.
5. Assurance that the provision of vision health and safety program curriculums in non-traditional classroom settings is supported through formative and summative evaluations.
6. Assurance the vision health and safety curriculum will meet state academic standards.
7. Assurance that vision health and safety curriculum will offer developmentally appropriate learning opportunities and materials.
8. Assurance that the program does not discriminate in the provision of services based on an individual's religion, race, national origin, handicapping condition, age, sex, number of pregnancies or marital status.
9. Assurance that the Health Insurance Portability and Accountability Act (HIPAA) is instituted in the agency.
10. Assurance that the agency has the capacity to provide services to persons with Limited English Proficiency (LEP).
11. Assurance the agency has one representative available for the annual project directors meeting. (This will be held on the 3rd Thursday of September at 10:00am)
12. Assurance the agency will verify the person receiving and/or providing services is an Ohio resident.

Name of Agency: _____

GMIS Number: _____ Signature: _____

Vision Screening Training Component Assurances

Applicant must provide signed assurance that the following ODH Save Our Sight Program components and/or statements of assurance will be in place by July 1, 2022.

1. Assurance that the applicant will comply with the Ohio Revised Code 3701.21 and OAC 3701-48 that pertain to the Save Our Sight program and ODH standards and guidelines.
2. Assurance that this public health program is a voluntary vision screener training, certification and equipment program for nurses, teachers, childcare providers and staff, health care professionals and other volunteers screening children on a continual and frequent basis.
3. Assurance that certified screeners will report actual children screened and referred and any follow-up data to ODH.
4. Assurance that a system is in place to track the following data elements: number of trained and certified; number recertified; demographic data about trainees; number receiving screening equipment; the quantity and type of equipment distributed to those screeners; and other information requested by ODH as needed.
5. Assurance the subgrantee agency will develop and implement a formal, written agreement between the subgrantee agency and each individual certified screener; in exchange for free certification and/or equipment the certified screener agrees to report actual children screened and referred and any follow-up data yearly for the initial certification period. Receipt of equipment is a three-year commitment. A certified screener agrees to complete and return screening data each year for three years. If the certified screener fails to submit information as requested, the certified screener will be required to return all equipment after one year of not submitting data. At the end of three years, the equipment becomes property of the certified screener.
6. Assurance that the subgrantee agency will offer trainings in each of the four quarters of each fiscal year, or as approved by ODH, throughout the grant period. Training attendance must be limited to a maximum amount of thirty attendees per session.
7. Assurance that the subgrantee agency will recruit screeners who serve the most economically vulnerable population (<200% Federal Poverty Level), minorities and other segments of the population that experience a disproportionate burden as the priority population.
8. Assurance that the program does not discriminate in the provision of services based on an individual's religion, race, national origin, handicapping condition, age, sex, number of pregnancies or marital status.
9. Assurance that the Health Insurance Portability and Accountability Act (HIPAA) is instituted in the agency.
10. Assurance that the agency has the capacity to provide services to persons with Limited English Proficiency (LEP).
11. Assurance the agency has one representative available for the annual project directors meeting. (this will be held on the 3rd Thursday of September at 10:00am)
12. Assurance the agency will verify the person receiving and/or providing services is an Ohio resident.

Name of Agency: _____

GMIS Number: _____ Signature: _____

Appendix A

Reimbursement
Type

Select one of the
options below:

☐ Monthly

OR

☐ Quarterly

NOTICE OF INTENT TO APPLY FOR FUNDING

Ohio Department of Health Office of

Bureau of Maternal, Child and

Family Health

Save Our Sight - SV23

Submission Required

See due date below.

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

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)

☐

County Agency

☐

Hospital

☐

Local Schools

☐

City Agency

☐

Higher Education

☐

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 Cynthia.Penn@odh.ohio.gov BY **December 29, 2021**.

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:SV

Budget Period:SFY23

of Deliverables:30

Use Budget Justification Scenario #:

X Deliverables Only

Deliverable – Objective 1: Ohio Amblyope Registry Component Number 1

By June 30, 2023, create and maintain a statewide network to identify and register children diagnosed with Amblyopia to participate in Amblyope Registry services in all areas of the State, coordinate a comprehensive program to provide education, tools, resources and case management to children and families during patching therapy/treatment. All communications are to be within 10 business days of the received registration request. Reimbursement per month is not to exceed \$22,000. Total reimbursement for this deliverable is not to exceed \$264,000

Deliverable – Objective 2: Ohio Amblyope Registry Component Number 2

By October 10, 2022, submit the results of the Community Engagement Tool and provide a list a of stakeholders who were invited to participate in survey. Reimbursement for the submission is \$500.

Deliverable – Objective 3: Ohio Amblyope Registry Component Number 3

By March 10, 2023 submit Community Engagement plan that will improve and enhance your engagement with stakeholders as determined by survey tool. Reimbursement for the submission is \$1,500.

Deliverable – Objective 4: Ohio Amblyope Registry Component Number 4

By June 30, 2023 Provide a monthly update on the submitted approved monitoring plan of current and newly recruited healthcare professionals. Recruitment must target potential healthcare members who serve the most economically vulnerable population (<200% Federal Poverty Level), minorities and other segments of the population that experience a disproportionate burden as the priority population. Total reimbursement is not to exceed \$1,800.

Deliverable – Objective 5: Ohio Amblyope Registry Component Number 5

By June 30, 2023, purchase and provide invoices for ODH approved Amblyope Registry reading storybook for all new registrants regardless of services selected to ensure compliance with treatment regimens prescribed by eye care providers. Reimbursement for this deliverable is up to \$12.00 per book. Reimbursement for purchase is based on invoice amount. Total reimbursement for this deliverable is not to exceed 28,000.

Deliverable – Objective 6: Ohio Amblyope Registry Component Number 6

By June 30, 2023, purchase and provide invoices for adhesive packs of patches for children in Ohio. Reimbursement for this deliverable is up to \$9.00 per pack (1 pack equals 30 adhesive patches). Purchase and provide invoices for cloth patches as needed for children in Ohio. Reimbursement for this deliverable is up to \$9.00 per cloth patch. Reimbursement for purchase is based on invoice amount. Total reimbursement for this deliverable is not to exceed \$165,350.

Deliverable – Objective 7: Ohio Amblyope Registry Component Number 7

By the 10th of every month enter, track and report data in ODH data system. Provide a brief narrative describing efforts towards accomplishing deliverables by meeting the goals, objectives and strategies of the Amblyope Registry Component using the monthly reporting template. Reimbursement for this deliverable is \$1,000.00 monthly. Total reimbursement for this deliverable is \$12,000.

Deliverable – Objective 8: Ohio Amblyope Registry Component Number 8

Every month establish or maintain a dedicated social media presence. Post on social media at least 4 times a month about your work and programmatic successes. (Examples may include share photos of your staff and programs in action; Thank donors whenever you have an opportunity.) Reimbursement for this deliverable is \$50.00 a month. Total reimbursement for this deliverable is not to exceed \$600.

Deliverable – Objective 9: Ohio Amblyope Registry Component Number 9

By July 10, 2023, Submit a final report that demonstrates how the OAR case management system met the needs of participants through a customer satisfaction survey. Report must include outcomes of participants parent satisfaction surveys, any barriers to compliance and strategies to be used to address identified barriers. Report must also include success stories and other pertinent information. Reimbursement for this deliverable is \$1,250. Total reimbursement for this deliverable is \$1,250.

Deliverable – Objective 10: Protective Eyewear Component Number 1

By June 30, 2023, process applications and distribute protective eyewear equipment. The program should target the most economically vulnerable population (<200% Federal Poverty Level), minorities and underserved population that experience a disproportionate burden of vision health and safety concerns. Reimbursement per month is not to exceed \$11,875.00. Total reimbursement for this deliverable is not to exceed \$142,500.

Deliverable – Objective 11: Protective Eyewear Component Number 2

By October 10, 2022, submit the results of the Community Engagement Tool and provide a list of stakeholders who were invited to participate in survey. Reimbursement for the submission is \$500.

Deliverable – Objective 12: Protective Eyewear Component Number 3

By March 10, 2023 submit Community Engagement plan that will improve and enhance your engagement with stakeholders as determined by survey tool. Reimbursement for the submission is \$1,500.

Deliverable – Objective 13: Protective Eyewear Component Number 4

By June 30, 2023, purchase and provide invoices to ODH for pieces of protective eyewear equipment. Equipment may include ASTM-certified protective baseball/softball helmets, protective polycarbonate masks for baseball and softball players pitching and playing first and third bases, nonprescription sports goggles with polycarbonate lenses for any youth sports league activity, prescription sports goggles with polycarbonate lenses to aid youth players who are at high-risk for eye injuries and ANSI-approved eye/facial protective equipment for distribution to children enrolled in vocational training or other activities. Reimbursement for this deliverable is up to \$100.00 per piece of equipment. Total reimbursement for this deliverable is not to exceed \$299,250. Reimbursement for purchase is based on invoice amount. The total match for this deliverable is \$29,925.

Deliverable – Objective 14: Protective Eyewear Component Number 5

By June 30, 2023, develop and distribute materials in community-based sports/activity settings and instruction-based school settings to educate each target audience about children's vision safety in all counties of the state. Reimbursement per month is not to exceed \$1,450.00. Total reimbursement for this deliverable is \$17,400.

Deliverable – Objective 15: Protective Eyewear Component Number 6

By the 10th of every month report the actual number of children receiving Protective Eyewear services per county and provide a brief narrative describing efforts towards accomplishing deliverables by meeting the goals, objectives and strategies of the Protective Eyewear Component. Narrative must also include how the Protective Eyewear interfaced and shared information amongst all Save Our Sight Fund components. Report this monthly data using approved outcomes grid and the Protective Eyewear narrative template. Reimbursement for this deliverable is \$1,000 monthly. Total reimbursement for this deliverable is \$12,000.

Deliverable – Objective 16: Protective Eyewear Component Number 7

Every month establish or maintain a dedicated social media presence. Post on social media at least 4 times a month about your work and programmatic successes. (Examples may include share photos of your staff and programs in action; Thank donors whenever you have an opportunity.) Reimbursement for this deliverable is \$50.00 a month. Total reimbursement for this deliverable is not to exceed \$600.00.

Deliverable – Objective 17: Protective Eyewear Component Number 8

By June 30, 2023, submit a final report that demonstrates how the Protective Eyewear Component met the needs of participants through a customer satisfaction survey. Report must include outcomes of participants parent satisfaction surveys and any barriers to participation, success stories and other pertinent information. Include eye injuries prevented and pre- and post- test results. This report must also include an infographic of all services provided during the year. Total reimbursement for this deliverable is \$1,250.

Deliverable – Objective 18: Vision Health and Safety Component Number 1

By June 30, 2023, schedule and provide ODH approved research-based children's vision health and safety education program in traditional and nontraditional settings to at least 100,000 children (virtual, in person). The education program should serve the most economically vulnerable population (<200% Federal Poverty Level), who experience a disproportionate burden of health. The education programs should occur in all counties of the State and should include the distribution of vision health education materials and supplies to children who have received the ODH approved research-based children's vision health and safety education program. Reimbursement per month is not to exceed \$38,262.50. Total reimbursement for this deliverable is not to exceed \$ 459,150.

Deliverable – Objective 19: Vision Health and Safety Component Number 2

By October 10, 2022, submit the results of the Community Engagement Tool and provide a list a of stakeholders who were invited to participate in survey. Reimbursement for the submission is \$500.

Deliverable – Objective 20: Vision Health and Safety Component Number 3

By March 10, 2023 submit Community Engagement plan that will improve and enhance your engagement with stakeholders as determined by survey tool. Reimbursement for the submission is \$1,500.

Deliverable – Objective 21: Vision Health and Safety Component Number 4

Every month establish or maintain a dedicated social media presence. Post on social media at least 4 times a month about your work and programmatic successes. (Examples may include share photos of your staff and programs in action; Thank donors whenever you have an opportunity.) Reimbursement for this deliverable is \$50.00 a month. Total reimbursement for this deliverable is not to exceed \$600.

Deliverable – Objective 22 Vision Health and Safety Component Number 5

By the 10th of every month report the actual number of children receiving educational programming per county and provide a brief narrative describing efforts towards accomplishing deliverables. Report this monthly data using approved outcomes grid.

Reimbursement for this deliverable is \$1,000 monthly. Total reimbursement for this deliverable is \$12,000.

Deliverable – Objective 23: Vision Health and Safety Component Number 6

By June 30, 2023, submit a final report that demonstrates knowledge change as measured by the administration of pre- and post- tests. For classroom-based sessions, pre- and post-tests must be administered to a statistically significant percentage of attendees. Include in the report how the needs of the participants were met through a customer satisfaction survey. Qualitative surveys of faculty are acceptable but can only be used to supplement the pre- and post- tests. Include in the report any barriers to providing parent/child education, success stories and other pertinent information. Report must include outcomes how parents/children were notified about healthy vision and vision screening. This report must also include an infographic of all services provided during the year. Total reimbursement for this deliverable is \$1,250.

Deliverable – Objective 24: Vision Screening Training Component Number 1

By June 30, 2023, schedule and provide an ODH approved evidence-based vision screener training to train and certify a minimum of 700 screeners receiving training in all counties of the State. Individuals trained will be staff employed at public or private schools that have preschool and school aged children; staff employed at public or private licensed childcare centers; health care professionals employed in primary care settings; and a maximum of 50 screeners trained may be volunteers. Training dates and registration availability must be posted to the dedicated website. The vision screener training program should serve schools/childcare centers that serve the most economically vulnerable population (<200% Federal Poverty Level), who experience a disproportionate burden of health. Reimbursement per month is not to exceed \$23,250.00 Total reimbursement for this deliverable is not to exceed \$279,000.

Deliverable – Objective 25: Vision Screening Training Component Number 2

By October 10, 2022, submit the results of the Community Engagement Tool and provide a list a of stakeholders who were invited to participate in survey. Reimbursement for the submission is \$500.

Deliverable – Objective 26: Vision Health and Safety Component Number 3

By March 10, 2023 submit Community Engagement plan that will improve and enhance your engagement with stakeholders as determined by survey tool. Reimbursement for the submission is \$1,500.

Deliverable – Objective 27: Vision Screening Training Component Number 4

By June 30, 2023, purchase, distribute and provide invoices for equipment to ODH for certified screeners serving preschool and school aged children. Equipment must comply with ODH requirements and guidelines for the screening of preschool and school aged children (ORC 3313.69). Total reimbursement for this deliverable is not to exceed \$179,900. Reimbursement for purchase is based on invoice amount.

The following equipment is approved for purchase.

- Occluder – Frosted Lens Glasses (preschool and school aged)
- Occluder – Mardi Gras Mask (age 10 and older)
- LEA VIP Single, Crowded 5 Feet (preschool and school aged)
- LEA Symbols, 10 Feet (kindergarten and 1st)
- SLOAN Chart 10 Feet (school age children)
- Light Box (school aged)
- PASS 2 (Smiley Face) (preschool and school aged)
- Ishihara 14 Plates (K, 1st or initial screening)
- Pseudoisochromatic Color Testing 16 Plates (K, 1st or initial screening)

- Color Vision Testing Made Easy (K, 1st or initial screening)

Deliverable – Objective 28: Protective Eyewear Component Number 5

Every month establish or maintain a dedicated social media presence. Post on social media at least 4 times a month about your work and programmatic successes. (Examples may include share photos of your staff and programs in action; Thank donors whenever you have an opportunity.) Reimbursement for this deliverable is \$50.00 a month. Total reimbursement for this deliverable is not to exceed \$600.

Deliverable – Objective 29: Vision Screening Training Component Number 6

By the 10th of every month report the actual number of screeners receiving training per county and provide a brief narrative describing efforts towards accomplishing deliverables. Report this monthly data using approved outcomes grid. Reimbursement for this deliverable is \$1,000 monthly. Total reimbursement for this deliverable is \$12,000.

Deliverable – Objective 30: Vision Screening Training Component Number 7

By June 30, 2023, submit a final report that demonstrates knowledge change as measured by the administration of pre- and post- tests. Report must include how the Vision Screener Certification Training Program met the needs of recipients through a customer satisfaction survey. Report must also include outcomes of recipient's frequency of equipment use, satisfaction surveys about trainings, any barriers to providing equipment in hard-to-reach counties, success stories and other pertinent information. This report must also include an infographic of all services provided during the year. Total reimbursement for this deliverable is \$1,500.

Use Budget Justification Scenario #:

X Deliverables Only

[illegible]

Appendix D
Ohio Department of Health
Save Our Sight Amblyope Registry Component
SFY 2023 Application Review Form

Reviewer: _____ Date: _____ Agency: _____ Funding: _____

Program Narrative 25 points possible

Applications to be scored based on the extent that the applicant agency provided a summary of the purpose, methodology, and evaluation plan for each objective of this project. Narrative included the following: public health problems that this project will address; priority population; services and programs to be offered; and agency/ agencies providing the services. (Refer to Section II.D. of the RFS, page 17.)

Score		Comments/Special Conditions
/5	The Executive Summary provided the target population, services and programs to be offered and what agency or agencies will provide those services, burden of health disparities and health inequities. The summary described the public health problem(s) that the program will address. (Refer to Section II.D.1. of the RFS, 17.)	
/5	Program narrative described applicant agency and agency(ies) that will provide services (one paragraph). (Refer to Section II.D. 2. of the RFS, page 17.)	
/5	Program narrative described public health problems that this project will address. The specific health status concerns that the program intends to address may be stated in terms of health status (e.g., morbidity and/or mortality) or health system (e.g., accessibility, availability, affordability, appropriateness of health services) indicators. (Refer to Section II.D.3. of the RFS, page 17.)	
/5	Program narrative identified the priority population and explicitly described segments of the target population who experience a disproportionate burden of the health status concern. (Refer to Section II.D.3. of the RFS, page 17.)	
/5	Program narrative detailed services and programs to be offered. (Refer to Section II.D.3. of the RFS, page 17.)	
	Subtotal Score: /25	Number of Special Conditions:

Program Plan 50 points possible

The completed Program Plan (Appendix F) should be scored based on the extent that the applicant identified program objectives and the strategies and activities to accomplish stated objectives. The applicant identified how the strategies and activities will be evaluated to determine whether or not the objectives are being met and the tracking and reporting mechanism for program outcome measures. (Refer to Section II.D.4 and Appendix E of the RFS.)

Objective 1: Implement and evaluate the Ohio Department of Health web-based data system registry for children with amblyopia in all counties of the State. (Refer to Section II.D.4, page 16, and Appendix E of the RFS.)

Score		Comments/Special Conditions
/10	<p>Provides detailed description of the plan for a web-based amblyope registry database.</p> <p>Collect the following data variables: demographics of the child: name, address, date of birth, economic status (% of Federal Poverty Level), race, ethnicity, insurance status; provider information: name, practice, address, number of referrals; and case management information: whether or not children registered with amblyopia are receiving professional eye care, patches distributed, treatment follow up.</p> <p>Describes how data collected will be maintained and stored for the following: data security and disaster recovery plan for the Amblyope Registry; how client confidentiality will be protected; how the data entry error will be maintained at no more than .5 percent; and an audit trail for data collected via the Amblyope Registry: how data will be processed and how long data will be maintained.</p> <p>Describes the communication plan regarding how data collected in the Amblyope Registry will be transmitted to ODH using the Outcome Grid.</p>	

Objective 2: Implement and evaluate a voluntary case management system for newly diagnosed children participating in the registry. Voluntary case management includes the provision of patching kits, educational and compliance materials and periodic phone call and email contact for consultation for every new registrant at time of enrollment. Patching kits, educational materials and compliance materials must be sent within 10 business days of receipt of request in ODH web-based amblyopia registry database. Children should be from all counties of the State.

(Refer to Section II.D.4, page 16, and Appendix E of the RFS.)

Score		Comments/Special Conditions
/10	<p>Provides detailed description of the written protocol that outlines the information and support to be used in providing comprehensive case management on an individual basis.</p> <p>Describes how they will contact families of registry children to provide information and support at 30 calendar days; at 90 calendar days; at 180 calendar days; and at closure of case management services' or as negotiated. Submit standardized script that outlines information and support provided to families for ODH review and approval</p> <p>Describes how they will distribute ODH approved educational materials/tools/resources to diagnosed children to assure compliance with treatment regimens prescribed by eye care providers.</p> <p>Describes how they will distribute patching kits and educational materials and compliance materials to each of the newly enrolled unique children in Ohio.</p>	

Objective 3: Increase recruitment of healthcare providers and children diagnosed with amblyopia.

(Refer to Section II.D.4, page 16, and Appendix E of the RFS.)

Score		Comments/Special Conditions
/10	<p>Provides detailed description of the recruitment plan to establish and maintain healthcare members and recruit new healthcare members. Recruitment must target potential healthcare members who serve the most economically</p>	

	<p>vulnerable population (<200% Federal Poverty Level), minorities and other segments of the population that experience a disproportionate burden as the priority population.</p> <p>Provides a detailed description of a monitoring plan of current and newly recruited healthcare professionals.</p>	
Objective 4: Promote awareness of amblyopia in all counties of the State by expanding the use of community partners. (Refer to Section II.D.4, page 16, and Appendix E of the RFS.)		
Score /10	<p>Provides a detailed description of how to establish and maintain formal, working relationships with critical partners to expand amblyopia awareness and registry program awareness through the convening of the OAR advisory committee. The Amblyopia Advisory Committee must include representation from ODH and Save Our Sight Project Directors or designee, healthcare providers and family members of diagnosed children.</p> <p>Submits the list of members and their roles within the Amblyopia Advisory Committee.</p> <p>Describes how they will promote awareness of amblyopia utilizing culturally and linguistically appropriate materials.</p> <p>Describes how the committee will be engaged in promoting awareness of Amblyopia and make recommendations to the OAR.</p> <p>Provides detailed description of how to establish and maintain formal, working relationships with critical community partners to expand Amblyopia Registry awareness.</p> <p>Describes how they will by October 10 ,2022 utilize the Community Engagement Assessment Tool Survey (Appendix H) and complete with community partners to determine initial community engagement and areas of improvement.</p>	Comments/Special Conditions

	Describes how they will by March 10, 2023 develop and submit your plan in partnership with stakeholders that will improve and enhance your engagement with stakeholders as determined by survey tool. (Appendix H)	
Objective 5: Plan, develop and implement cross program collaboration amongst all Save Our Sight Fund components (Refer to Section II.D.4, page 16, and Appendix E of the RFS.)		
Score /10	<p>Describes how they will develop and implement a communication strategy/plan that expresses the goals and methods of the Ohio Amblyope Registry's outreach activities, including how the Ohio Amblyope Registry will interface and share information amongst all Save Our Sight Fund components as well as the public.</p> <p>Describes how they will develop or maintain a dedicated website and social platform and provide at minimum four posts a month.</p>	
Subtotal Score: /50		Number of Special Conditions:

Budget Narrative Justification 25 points possible

Applications to be scored based on the extent that the applicant agency provided a detailed budget justification narrative outlining how the deliverable will be met. (A budget justification example can be found on GMIS). Submit a budget for this section and the necessary form(s) to support costs for the period [(July 1, 2022) to (June 30, 2023).] (Refer to Section II. B. of the RFS, page 16.)

Score		Comments/Special Conditions
/15	Provide a budget justification narrative outlining how the deliverable will be met.	
/10	Submit a budget for this section and the necessary form(s) to support costs for the period.	
Subtotal Score: /25		Number of Special Conditions:

Total Score: /100

Total Number of Special Condition

**Ohio Department of Health
Save Our Sight Protective Eyewear Component
SFY 2023 Application Review Form**

Reviewer: _____ Date: _____ Agency: _____ Funding: _____

Program Narrative 25 points possible

Applications to be scored based on the extent that the applicant agency provided a summary of the purpose, methodology, and evaluation plan for each objective of this project. Narrative included the following: public health problems that this project will address; priority population; services and programs to be offered; and agency/ agencies providing the services. (Refer to Section II.D. of the RFS, page 17.)

Score		Comments/Special Conditions
/5	The Executive Summary provided the target population, services and programs to be offered and what agency or agencies will provide those services, burden of health disparities and health inequities. The summary described the public health problem(s) that the program will address. (Refer to Section II.D.1. of the RFS, 17.)	
/5	Program narrative described applicant agency and agency(ies) that will provide services (one paragraph). (Refer to Section II.D. 2. of the RFS, page 17.)	
/5	Program narrative described public health problems that this project will address. The specific health status concerns that the program intends to address may be stated in terms of health status (e.g., morbidity and/or mortality) or health system (e.g., accessibility, availability, affordability, appropriateness of health services) indicators. (Refer to Section II.D.3. of the RFS, page 17.)	
/5	Program narrative identified the priority population and explicitly described segments of the target population who experience a disproportionate burden of the health status concern. (Refer to Section II.D.3. of the RFS, page 17.)	
/5	Program narrative detailed services and programs to be offered. (Refer to Section II.D.3. of the RFS, page 17.)	
	Subtotal Score: /25	Number of Special Conditions:

Program Plan 50 points possible

The completed Program Plan (Appendix F) should be scored based on the extent that the applicant identified program objectives and the strategies and activities to accomplish stated objectives. The applicant identified how the strategies and activities will be evaluated to determine whether or not the objectives are being met and the tracking and reporting mechanism for program outcome measures. (Refer to Section II.D.4 and Appendix E of the RFS.)

Objective 1: Purchase and distribute (ANSI- approved eye/ facial protective equipment for distribution to children enrolled in community settings) protective eyewear to prevent child eye injuries in sports/activity related community-based settings.
(Refer to Section II.D. of the RFS, page 16.)

Score		Comments/Special Conditions
/10	<p>Provides detailed description of the plan to purchase and distribute sports and activity-related protective eyewear for children in community-based settings to prevent eye injuries.</p> <p>Provides information on how they will track detailed information regarding program outcomes (at a minimum, leagues contacted; coaches trained; goggles distributed; helmets distributed; children served; pre/post survey data; inquiries; pre/post tests; interest packets provided). Specify the number of eye injuries prevented in sports and activity related community-based settings.</p> <p>Describes how they serve the most economically vulnerable population (<200% Federal Poverty Level), minorities and underserved population that experience a disproportionate burden of vision health and safety concerns. Plan is to include how successful applicant will ensure access to the provision of protective eyewear for children.</p>	

	<p>Describes how they will collect and report program data.</p> <p>Describes how they will report program data monthly using approved outcomes grid.</p> <p>Describes how they will collect and maintain a data security and disaster recovery plan; protection of client confidentiality; and an audit trail for data collected</p>	
Objective 2 Purchase and distribute (ANSI- approved eye/facial protective equipment for distribution to children enrolled in vocational training) protective eyewear to prevent child eye injuries in instruction-based programs. (Refer to Section II.D. of the RFS, page 16.)		
Score		Comments/Special Conditions
/10	<p>Provides detailed description of the plan to purchase and distribute protective eyewear for children in schools in instruction-based programs (e.g., wood crafting, auto mechanics, welding, and chemistry classes) to prevent eye injuries.</p> <p>Describes how they will track detailed information regarding program outcomes (at a minimum, schools contacted; instructors trained; goggles distributed; children served; pre/post survey data; inquiries; interest packets provided; and research-based estimates of eye injuries prevented each year). Specify the number of eye injuries prevented in instructional based programs.</p> <p>Describes how they will serve the most economically vulnerable population (<200% Federal Poverty Level), minorities and underserved population that experience a disproportionate burden of vision health and safety concerns.</p> <p>Describes how they will collect and report program data.</p> <p>Describes how they will report program data monthly using approved outcomes grid.</p> <p>Describes how they will collect and maintain a data security and</p>	

	disaster recovery plan; protection of client confidentiality; and an audit trail for data collected.	
Objective 3: Implement a research-based children’s vision safety educational program specifically for sports and activities related community-based settings and instructional-based programs to educate each target audience about children’s vision safety in all counties of Ohio. All presentations and awareness materials about the Protective Eyewear program must be submitted to the Ohio Department of Health for review and approval before distribution. (Refer to Section II.D.4, page 16, and Appendix E of the RFS.)		
Score		Comments/Special Conditions
/10	<p>Provides a detailed plan of how educational information and materials will be distributed for children in schools in instruction-based programs (e.g., wood crafting, auto mechanics, welding, and chemistry classes) to prevent eye injuries.</p> <p>Describes how they will report program data monthly using approved outcomes grid.</p> <p>Describes how they will collect and maintain a data security and disaster recovery plan; protection of client confidentiality; and an audit trail for data collected.</p> <p>Describes how they will report demonstrated increases in the knowledge gained as measured by the administration of pre- and post- tests. For instruction based programs, pre- and post-tests must be administered to each attendee and the results must be collected for each session. Qualitative surveys of faculty are acceptable but can only be used to supplement the pre- and post- tests.</p> <p>Provides a detailed plan of how educational information and materials will be distributed for children in sports/activity related community-based settings.</p> <p>Describes how they will report program data monthly using approved outcomes grid.</p>	

	<p>Describes how they will collect and maintain a data security and disaster recovery plan; protection of client confidentiality; and an audit trail for data collected.</p> <p>Describes how they will report demonstrated increases in the knowledge gained as measured by the administration of pre- and post- tests. For sports/activity -based sessions, pre- and post-tests must be administered to each attendee and the results must be collected for each session. Qualitative surveys of faculty are acceptable but can only be used to supplement the pre- and post- tests.</p> <p>Describes how they will serve the most economically vulnerable population (<200% Federal Poverty Level), minorities and underserved population that experience a disproportionate burden of vision health and safety concerns.</p>	
Objective 4: Promote good vision and healthy eyes through the prevention of eye injuries by expanding the use of community partners. (Refer to Section II.D. of the RFS, page 16.)		
Score		Comments/Special Conditions
/10	<p>Provides detailed description of how to establish and maintain formal, working relationships with critical community partners to expand eye injury prevention.</p> <p>Describes how they will by October 10, 2022 utilize the Community Engagement Assessment Tool Survey (Appendix H) and complete with community partners to determine initial community engagement and areas of improvement.</p> <p>Describes how they will by March 10, 2023 develop and submit your plan in partnership with stakeholders that will improve and enhance your engagement with stakeholders as determined by survey tool. (Appendix H)</p>	

Objective 5: Plan, develop and implement cross program collaboration amongst all Save Our Sight Fund components. (Refer to Section II.D. of the RFS, page 16.)

Score		Comments/Special Conditions
/10	<p>Describes how they will develop and implement a communication strategy/plan that expresses the goals and methods of the Protective Eyewear program's outreach activities, including how the Protective Eyewear program will interface and share information amongst all Save Our Sight Fund components as well as the public.</p> <p>Describes how they will develop or maintain a dedicated website and social platform and provide at minimum four posts a month.</p>	
	Subtotal Score: /50	Number of Special Conditions:

Budget Narrative Justification 25 points possible

Applications to be scored based on the extent that the applicant agency provided a detailed budget justification narrative outlining how the deliverable will be met. (A budget justification example can be found on GMIS). Submit a budget for this section and the necessary form(s) to support costs for the period [(July 1, 2022) to (June 30, 2023).] (Refer to Section II. B. of the RFS, page 16.)

Score		Comments/Special Conditions
/15	Provide a budget justification narrative outlining how the deliverable will be met.	
/10	Submit a budget for this section and the necessary form(s) to support costs for the period.	
	Subtotal Score: /25	Number of Special Conditions:

Total Score: /100

Total Number of Special Condition

**Ohio Department of Health
Save Our Sight Vision Health and Safety Component
SFY 2023 Application Review Form**

Reviewer: _____ Date: _____ Agency: _____ Funding _____

Program Narrative 25 points possible

Applications to be scored based on the extent that the applicant agency provided a summary of the purpose, methodology, and evaluation plan for each objective of this project. Narrative included the following: public health problems that this project will address; priority population; services and programs to be offered; and agency/ agencies providing the services. (Refer to Section II.D. of the RFS, page 17.)

Score		Comments/Special Conditions
/5	The Executive Summary provided the target population, services and programs to be offered and what agency or agencies will provide those services, burden of health disparities and health inequities. The summary described the public health problem(s) that the program will address. (Refer to Section II.D.1. of the RFS, 17.)	
/5	Program narrative described applicant agency and agency(ies) that will provide services (one paragraph). (Refer to Section II.D. 2. of the RFS, page 17.)	
/5	Program narrative described public health problems that this project will address. The specific health status concerns that the program intends to address may be stated in terms of health status (e.g., morbidity and/or mortality) or health system (e.g., accessibility, availability, affordability, appropriateness of health services) indicators. (Refer to Section II.D.3. of the RFS, page 17.)	
/5	Program narrative identified the priority population and explicitly described segments of the target population who experience a disproportionate burden of the health status concern. (Refer to Section II.D.3. of the RFS, page 17.)	

/5	Program narrative detailed services and programs to be offered. (Refer to Section II.D.3. of the RFS, page 17.)	
	Subtotal Score: /25	Number of Special Conditions:

Program Plan 50 points possible

The completed Program Plan (Appendix F) should be scored based on the extent that the applicant identified program objectives and the strategies and activities to accomplish stated objectives. The applicant identified how the strategies and activities will be evaluated to determine whether or not the objectives are being met and the tracking and reporting mechanism for program outcome measures. (Refer to Section II.D.4 and Appendix E of the RFS.)

Objective 1: Implement research-based children's vision health and safety education program for children in to educate each applicant identified target age group about children's vision health and safety in all counties of the State. (Refer to Section II.D.4, page 16, and Appendix E of the RFS.)		
Score		Comments/Special Conditions
/30	<p>Provides detailed description of the research-based children's vision health and safety education program for traditional and non traditional classroom settings. Development and funding of new children's vision health and safety education curriculum for traditional and non traditional classroom settings will only be considered for funding if supported through formative and summative evaluations.</p> <p>Describes how they will identify the specific, measurable learning goal per proposed education program.</p> <p>Describes how they will identify the specific, measurable learning objective per proposed education program.</p> <p>Describes how they will identify the target age group per proposed education program.</p> <p>Describes how they will identify the specific assessment and evaluation plan per proposed education program.</p>	

	<p>Identifies the current State of Ohio academic standards met per proposed education program.</p> <p>Identifies specific handouts and materials that will be given to teachers/organization representatives and target age group students per proposed education program. Materials must be culturally and linguistically appropriate.</p> <p>Submits a copy of the research-based resources used to demonstrate effectiveness of the traditional and non traditional classroom education program.</p> <p>Describes a plan to target the most economically vulnerable population (<200% Federal Poverty Level), minorities and underserved population that experience a disproportionate burden of vision health and safety concerns. Specify attainable number, or percentage, of population to be reached.</p> <p>Describes how they will collect and report program data.</p> <p>Describes how they will report program data monthly using outcomes grid.</p>	
Objective 2: Promote vision health in all counties of the State by expanding the use of community partners. Refer to Section II.D.4, page 16, and Appendix E of the RFS.)		
Score		Comments/Special Conditions
/10	<p>Provides detailed description of how to establish and maintain formal, working relationships with critical community partners to expand vision health awareness.</p> <p>Describes how they will by October 10 ,2022 utilize the Community Engagement Assessment Tool Survey (Appendix H) and complete with community partners to determine initial community engagement and areas of improvement.</p>	

	Describes how they will by March 10, 2023 develop and submit your plan in partnership with stakeholders that will improve and enhance your engagement with stakeholders as determined by survey tool. (Appendix H)	
Objective 3: Plan, develop and implement cross program collaboration amongst all Save Our Sight Fund components. Refer to Appendix E. (Refer to Section II.D.4, page 16, and Appendix E of the RFS.)		
Score		Comments/Special Conditions
/10	Describes how they will develop and implement a communication strategy/plan that expresses the goals and methods of the Vision Health outreach activities, including how the Vision Health Program will interface and share information amongst all Save Our Sight Fund components as well as the public. Describes how they will develop or maintain a dedicated website and social platform and provide at minimum four posts a month.	
	Subtotal Score: /50	Number of Special Conditions:

Budget Narrative Justification 25 points possible

Applications to be scored based on the extent that the applicant agency provided a detailed budget justification narrative outlining how the deliverable will be met. (A budget justification example can be found on GMIS). Submit a budget for this section and the necessary form(s) to support costs for the period [(July 1, 2022) to (June 30, 2023).] (Refer to Section II. B. of the RFS, page 16.)

Score		Comments/Special Conditions
/15	Provide a budget justification narrative outlining how the deliverable will be met.	
/10	Submit a budget for this section and the necessary form(s) to support costs for the period.	
	Subtotal Score: /25	Number of Special Conditions:

Total Score: /100

Total Number of Special Condition

**Ohio Department of Health
Save Our Sight Vision Screener Training Component
SFY 2023 Application Review Form**

Reviewer: _____ Date: _____ Agency: _____ Funding: _____

Program Narrative 25 points possible

Applications to be scored based on the extent that the applicant agency provided a summary of the purpose, methodology, and evaluation plan for each objective of this project. Narrative included the following: public health problems that this project will address; priority population; services and programs to be offered; and agency/ agencies providing the services. (Refer to Section II.D. of the RFS, page 17.)

Score		Comments/Special Conditions
/5	The Executive Summary provided the target population, services and programs to be offered and what agency or agencies will provide those services, burden of health disparities and health inequities. The summary described the public health problem(s) that the program will address. (Refer to Section II.D.1. of the RFS, 17.)	
/5	Program narrative described applicant agency and agency(ies) that will provide services (one paragraph). (Refer to Section II.D. 2. of the RFS, page 17.)	
/5	Program narrative described public health problems that this project will address. The specific health status concerns that the program intends to address may be stated in terms of health status (e.g., morbidity and/or mortality) or health system (e.g., accessibility, availability, affordability, appropriateness of health services) indicators. (Refer to Section II.D.3. of the RFS, page 17.)	
/5	Program narrative identified the priority population and explicitly described segments of the target population who experience a disproportionate burden of the health status concern. (Refer to Section II.D.3. of the RFS, page 17.)	
/5	Program narrative detailed services and programs to be offered. (Refer to Section II.D.3. of the RFS, page 17.)	

	Subtotal Score: /25	Number of Special Conditions:

Program Plan 50 points possible

The completed Program Plan (Appendix F) should be scored based on the extent that the applicant identified program objectives and the strategies and activities to accomplish stated objectives. The applicant identified how the strategies and activities will be evaluated to determine whether or not the objectives are being met and the tracking and reporting mechanism for program outcome measures. (Refer to Section II.D.4 and Appendix E of the RFS.)

Objective 1: Implement the ODH Children's Vision Screening training vision screening certification program. This is a voluntary evidence-based screener training and certification program for volunteers, child care providers, nurses, teachers, health care professionals practicing in primary care settings, and others serving preschool and school aged children.
(Refer to Section II.D.4, page 16, and Appendix E of the RFS.)

Score		Comments/Special Conditions
/30	<p>Explain plans to ensure vision screening trainers must successfully meet the requirements and complete the ODH vision screening train the trainer program by July 13th and July 14th 2022. Meeting information and times will be provided to the successful applicant following the notice of award.</p> <p>Submit resumes for all individuals conducting the vision screening training.</p> <p>Document that vision screening trainers must have demonstrated experience with conducting vision screenings on at least 100 children.</p> <p>Ensure that trainers must be at least 18 years old in order to participate in the ODH vision screening train the trainer program.</p> <p>Ensure that Vision screener trainer must demonstrate the ability and proficiency to the ODH to provide the training.</p> <p>Ensure that all vision screener trainers will be trained by ODH.</p> <p>Describes how they will Implement the ODH approved Vision Screening Certification program.</p>	

	<p>Describes how they will recruit potential vision screeners who will be trained, certified and equipped. Recruitment must target potential screeners who serve the most economically vulnerable population (<200% Federal Poverty Level) minorities and other segments of the population that experience a disproportionate burden as the priority population. Plan is to include how successful applicant will increase diversity and competency of the health workforce and related industry workforces through recruitment, retention and training of racially, ethnically and culturally diverse individuals and through leadership action by healthcare organizations and systems.</p> <p>Describes how they will retain vision screeners who have been trained, certified and equipped.</p> <p>Describes how they will collect and report certification data as approved by ODH. Collecting of data must only be used for purposes outlined within the purpose, goals, objectives and strategies outlined within this grant component.</p> <p>Certification data includes all required components</p> <p>Describes plan to monitor screeners, screenings and use of equipment after trainings.</p> <p>Describes how they will distribute vision screener equipment to certified screeners. Equipment must comply with ODH requirements and recommendations for the screening of preschool children and school aged children (ORC 3313.69).</p> <p>Describes policy for equipment distribution and return.</p> <p>Submit the template to be used that serves as the formal agreement between the subgrantee agency and the individual screener. See Assurance 5.</p> <p>Describes how they will collect and report program data.</p>	
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	<p>Describes how they will report program data monthly using outcomes grid.</p> <p>Describes how they will report the actual number of screeners trained and certified per county.</p> <p>Describes how they will report the actual number of screeners receiving training and certification per county by type of employment</p> <p>Describes how they will report actual number of screeners receiving screening equipment; specify location (county/geographic area).</p> <p>Describes how they will report the actual number and type of vision screening equipment distributed.</p> <p>Describes how they will report other information requested by ODH.</p>	
Objective 2: Promote good vision and healthy eyes through a voluntary children's vision screener training and certification program. (Refer to Section II.D.4, page 16, and Appendix E of the RFS.)		
Score		Comments/Special Conditions
/10	<p>2a Provide detailed description of how to establish and maintain formal, working relationships with critical community partners to expand children's vision screener training and certification program.</p> <p>Describes how they will by October 10, 2022 utilize the Community Engagement Assessment Tool Survey (Appendix H) and complete with community partners to determine initial community engagement and areas of improvement.</p> <p>Describes how they will by March 10, 2023 develop and submit your plan in partnership with stakeholders that will improve and enhance your engagement with stakeholders as determined by survey tool. (Appendix H)</p>	

Objective 3: Plan, develop and implement cross program collaboration amongst all Save Our Sight Fund components.
(Refer to Section II.D.4, page 16, and Appendix E of the RFS.)

Score		Comments/Special Conditions
/10	<p>Describes how they will develop and implement a communication strategy/plan that expresses the goals and methods of the Vision Screening program's outreach activities, including how the Vision screening program will interface and share information amongst all Save Our Sight Fund components as well as the public.</p> <p>Describes how they will develop or maintain a dedicated website and social platform and provide at minimum four posts a month.</p>	
	Subtotal Score: /50	Number of Special Conditions:

Budget Narrative Justification 25 points possible

Applications to be scored based on the extent that the applicant agency provided a detailed budget justification narrative outlining how the deliverable will be met. (A budget justification example can be found on GMIS). Submit a budget for this section and the necessary form(s) to support costs for the period [(July 1, 2022) to (June 30, 2023).] (Refer to Section II. B. of the RFS, page 16.)

Score		Comments/Special Conditions
/15	Provide a budget justification narrative outlining how the deliverable will be met.	
/10	Submit a budget for this section and the necessary form(s) to support costs for the period.	
	Subtotal Score: /25	Number of Special Conditions:

Total Score: /100

Total Number of Special Condition

Appendix E
Purpose, Goals, Objectives and Strategies
Ohio Amblyope Registry Component SFY 2023

Purpose: Funds for the Save Our Sight Program are generated by donations. Motor vehicle owners in Ohio are asked to donate \$1 to the Save Our Sight Fund when they register their vehicles and/or renew license plates. The Amblyope Registry program strives to provide education and voluntary case management to parents or caregivers of children who are residents of Ohio that are diagnosed with amblyopia. In addition, the Save Our Sight Fund seeks to provide opportunities to raise awareness of amblyopia and through educational efforts to families, health professionals and the general public to identify more children with amblyopia who currently are not receiving treatment.

Goals:

1. Maintain a registry and voluntary case management system to determine whether children with amblyopia are receiving professional eye care and to provide their parents/caregivers with information and support regarding their child's vision care.
2. Promote awareness of amblyopia to families, health professionals and the general public in all counties of the State to identify children with amblyopia who currently are not receiving treatment.

Objective 1: Implement and evaluate the Ohio Department of Health web-based data system registry for children with amblyopia in all counties of the State.

Strategies:

1a Describe how data collected will follow Data Guide on how to utilize the ODH Amblyope Registry web-based data system

1a1 Ensure data entry staff are trained on how to enter data into the ODH Amblyope Registry web-based data system by July 15, 2022. Any new hires will be trained within 30 days of hire date.

1a2 Describe and provide an evaluation plan of children utilizing Amblyope Registry services specifically highlighting social determinants of health and health equity using data collected through the ODH web-based system. Must be submitted with final expenditure report.

1a3 Submit a final report that demonstrates how the OAR case management system met the needs of participants through a customer satisfaction survey. Report must include outcomes of participants parent satisfaction surveys, any barriers to compliance and strategies to be used to address identified barriers. Report must also include success stories and other pertinent information.

Objective 2: Implement and evaluate a voluntary case management system for newly diagnosed children participating in the registry. Voluntary case management includes the provision of patching kits, educational and compliance materials and periodic phone call and email contact for consultation for every new registrant at time of enrollment. Patching kits, educational materials and compliance materials must be sent within 10 business days of receipt of request in ODH web-based amblyope registry database. Children should be from all counties of the State.

Strategies:

2a Provide detailed description of the written protocol that outlines the information and support to be used in providing comprehensive case management on an individual basis.

2a1 Contact families of registry children to provide information and support at 30 calendar days; at 90 calendar days; at 180 calendar days; and at closure of case management services' or as negotiated. Submit standardized script that outlines information and support provided to families for ODH review and approval

2a2 Distribute ODH approved educational materials/tools/resources to diagnosed children to assure compliance with treatment regimens prescribed by eye care providers. Distribute patching kits and educational materials and compliance materials to each of the newly enrolled unique children in Ohio.

Objective 3: Increase recruitment of healthcare providers and children diagnosed with amblyopia.

Strategies:

3a Provide detailed description of the recruitment plan to establish and maintain healthcare members and recruit new healthcare members. Recruitment must target potential healthcare members who serve the most economically vulnerable population (<200% Federal Poverty Level), minorities and other segments of the population that experience a disproportionate burden as the priority population.

3b Provide a detailed description of a monitoring plan of current and newly recruited healthcare professionals.

Objective 4: Promote awareness of amblyopia in all counties of the State by expanding the use of community partners.

Strategies:

4a Provide detailed description of how to establish and maintain formal, working relationships with critical partners to expand amblyopia awareness and registry program awareness through the convening of the OAR advisory committee. The Amblyopia Advisory Committee must include representation from ODH and Save Our Sight Project Directors or designee, healthcare providers and family members of diagnosed children.

4a1 Submit the list of members and their roles within the Amblyopia Advisory Committee. Submit all meeting minutes and recommendations.

4a2 Promote awareness of amblyopia utilizing culturally and linguistically appropriate materials.

4a3 Describe how the committee will be engaged in promoting awareness of Amblyopia and make recommendations to the OAR.

4b Provide detailed description of how to establish and maintain formal, working relationships with critical community partners to expand Amblyopia Registry awareness.

4b1 By October 10, 2022 utilize the Community Engagement Assessment Tool Survey (Appendix H) and complete with community partners to determine initial community engagement and areas of improvement.

4b2 By March 10, 2023 develop and submit your plan in partnership with stakeholders that will improve and enhance your engagement with stakeholders as determined by survey tool (Appendix H).

Objective 5: Plan, develop and implement cross program collaboration amongst all Save Our Sight Fund components.

Strategies:

5a Develop and implement a communication strategy/plan that expresses the goals and methods of the Ohio Amblyope Registry's outreach activities, including how the Ohio Amblyope Registry will interface and share information amongst all Save Our Sight Fund components as well as the public.

5b Develop or maintain a dedicated website and social platform and provide at minimum four posts a month.

Protective Eyewear Component

Purpose: The purpose of the Save Our Sight Program is to ensure that children in Ohio have good vision and healthy eyes. This program strives to prevent eye injuries by purchasing and distributing protective eyewear to youth who are residents of Ohio participating in community-based sports/activity settings and instruction-based school settings; educating parents and youth in the proper use of protective eyewear; and assisting local communities and the Ohio Department of Health in the development of policies and procedures regarding the proper use of protective eyewear.

Funds for the Save Our Sight Program are generated by donations. Motor vehicle owners in Ohio are asked to donate \$1 to the Save Our Sight Fund when they register their vehicles and/or renew license plates.

Ten percent of the purchase of protective eyewear must be in the form of a match from local agency funding or donated private funding.

Protective eyewear is defined as industrial quality eyewear that meets the standards of the American National Standard Practice for Occupational and Educational Eye and Face Protection approved by the American National Standards Institute (ANSI) or other approved protective devices for the head and eyes.

Goal: The goal of the Save Our Sight Children's Protective Eyewear Program is to ensure that children have good vision and healthy eyes through the prevention of eye injuries.

Objective 1: Purchase and distribute (ANSI- approved eye/facial protective equipment for distribution to children enrolled in community settings) protective eyewear to prevent child eye injuries in sports/activity related community-based settings.

Strategies:

1a Provide detailed description of the plan to purchase and distribute sports and activity-related protective eyewear for children in community-based settings to prevent eye injuries.

1b Track detailed information regarding program outcomes (at a minimum, leagues contacted; coaches trained; goggles distributed; helmets distributed; children served; pre/post survey data; inquiries; pre/post tests; interest packets provided). Specify the number of eye injuries prevented in sports and activity-related community-based settings.

1c Serve the most economically vulnerable population (<200% Federal Poverty Level), minorities and underserved population that experience a disproportionate burden of vision health and safety concerns. Plan is to include how successful applicant will ensure access to the provision of protective eyewear for children.

1d Collect and report program data.

1d1 Report program data monthly using approved outcomes grid.

1d2 Collect and maintain a data security and disaster recovery plan; protection of client confidentiality; and an audit trail for data collected.

Objective 2: Purchase and distribute (ANSI- approved eye/facial protective equipment for distribution to children enrolled in vocational training) protective eyewear to prevent child eye injuries in instruction-based programs.

2a Provide detailed description of the plan to purchase and distribute protective eyewear for children in schools in instruction-based programs (e.g., wood crafting, auto mechanics, welding, and chemistry classes) to prevent eye injuries.

2b Track detailed information regarding program outcomes (at a minimum, schools contacted; instructors trained; goggles distributed; children served; pre/post survey data; inquiries; interest packets provided; and research-based estimates of eye injuries prevented each year). Specify the number of eye injuries prevented in instructional based programs.

2c Serve the most economically vulnerable population (<200% Federal Poverty Level), minorities and underserved population that experience a disproportionate burden of vision health and safety concerns.

2d Collect and report program data.

2d1 Report program data monthly using approved outcomes grid.

2d2 Collect and maintain a data security and disaster recovery plan; protection of client confidentiality; and an audit trail for data collected.

Objective 3: Implement a research-based children's vision safety educational program specifically for sports and activities related community-based settings and instructional-based programs to educate each target audience about children's vision safety in all counties of Ohio. All presentations and awareness materials

about the Protective Eyewear program must be submitted to the Ohio Department of Health for review and approval before distribution.

Strategies:

3a Provide a detailed plan of how educational information and materials will be distributed for children in schools in instruction-based programs (e.g., wood crafting, auto mechanics, welding, and chemistry classes) to prevent eye injuries.

3a1 Report program data monthly using approved outcomes grid.

3a2 Collect and maintain a data security and disaster recovery plan; protection of client confidentiality; and an audit trail for data collected.

3a3 Report demonstrated increases in the knowledge gained as measured by the administration of pre- and post- tests. For instruction based programs, pre- and post-tests must be administered to each attendee and the results must be collected for each session. Qualitative surveys of faculty are acceptable but can only be used to supplement the pre- and post-tests.

3a4 Submit a final report that demonstrates how the Protective Eyewear component met the needs of recipients through a customer satisfaction survey. Report must include outcomes of recipient's parent satisfaction surveys and any barriers to providing equipment in hard to reach counties, success stories and other pertinent information. Include eye injuries prevented and pre/post test results.

3b Provide a detailed plan of how educational information and materials will be distributed for children in sports/activity related community-based settings.

3b1 Report program data monthly using approved outcomes grid.

3b2 Collect and maintain a data security and disaster recovery plan; protection of client confidentiality; and an audit trail for data collected.

3b3 Report demonstrated increases in the knowledge gained as measured by the administration of pre- and post- tests. For sports/activity-based sessions, pre- and post-tests must be administered to each attendee and the results must be collected for each session. Qualitative surveys of faculty are acceptable but can only be used to supplement the pre- and post-tests.

3b4 Submit a final report that demonstrates how the Protective Eyewear component met the needs of recipients through a customer satisfaction survey. Report must include outcomes of recipient's parent satisfaction surveys and any barriers to providing equipment in hard to reach counties, success stories and other pertinent information. Include eye injuries prevented and pre/post test results.

3c Serve the most economically vulnerable population (<200% Federal Poverty Level), minorities and underserved population that experience a disproportionate burden of vision health and safety concerns.

Objective 4: Promote good vision and healthy eyes through the prevention of eye injuries by expanding the use of community partners.

Strategies:

4a Provide detailed description of how to establish and maintain formal, working relationships with critical community partners to expand eye injury prevention.

4a1 By October 10, 2022 utilize the Community Engagement Assessment Tool Survey (Appendix H) and complete with community partners to determine initial community engagement and areas of improvement.

4a2 By March 10, 2023 develop and submit your plan in partnership with stakeholders that will improve and enhance your engagement with stakeholders as determined by survey tool (Appendix H).

Objective 5: Plan, develop and implement cross program collaboration amongst all Save Our Sight Fund components.

Strategies:

5a Develop and implement a communication strategy/plan that expresses the goals and methods of the Protective Eyewear program's outreach activities, including how the Protective Eyewear program will interface and share information amongst all Save Our Sight Fund components as well as the public.

5b Develop or maintain a dedicated website and social platform and provide at minimum four posts a month.

Vision Health and Safety Component

Purpose: The purpose of the Save Our Sight Program is to ensure that children in Ohio have good vision and healthy eyes. The Save Our Sight Children's Vision Health and Safety Education Program strives to provide developmentally and culturally appropriate vision health and safety programs and materials for traditional and non-traditional classrooms. Eighty percent of what a child learns is learned visually. In Ohio, one in four school-aged children and one in twenty preschoolers have a vision problem. Funds for the Save Our Sight Program are generated by donations. Motor vehicle owners in Ohio are asked to donate \$1 to the Save Our Sight Fund when they register their vehicles and/or renew license plates.

Goal: The goal of the Save Our Sight Children's Vision Health and Safety Education Program is to ensure that children in Ohio have good vision and healthy eyes by providing funding to 501(c) organizations that offer vision services in all counties of the state to reach the objectives and strategies listed below. The goals and objectives are to be accomplished by engaging in focused and collaborative approaches to ensuring vision health and eye safety in children and aim to serve groups that are disproportionately affected by this health issue.

Objective 1: Implement research-based children’s vision health and safety education program for children in to educate each applicant identified target age group about children’s vision health and safety in all counties of the State.

1a Provide detailed description of the research-based children’s vision health and safety education program for traditional and non-traditional classroom settings. Development and funding of new children’s vision health and safety education curriculum for traditional and nontraditional classroom settings will only be considered for funding if supported through formative and summative evaluations.

1a1 Identify the specific, measurable learning goal per proposed education program.

1a2 Identify the specific, measurable learning objective per proposed education program.

1a3 Identify the target age group per proposed education program.

1a4 Identify the specific assessment and evaluation plan per proposed education program.

1a5 Identify the current State of Ohio academic standards met per proposed education program.

1a6 Identify specific handouts and materials that will be given to teachers/organization representatives and target age group students per proposed education program. Materials must be culturally and linguistically appropriate.

1a7 Submit a copy of the research-based resources used to demonstrate effectiveness of the traditional and non-traditional classroom education program.

1b Describe a plan to target the most economically vulnerable population (<200% Federal Poverty Level), minorities and underserved population that experience a disproportionate burden of vision health and safety concerns. Specify attainable number, or percentage, of population to be reached.

1c Collect and report program data.

1c1 Report program data monthly using outcomes grid.

1c2 Report the actual traditional settings receiving research-based children’s vision health and safety education programs per county.

1c3 Report the actual non-traditional settings receiving research-based children’s vision health and safety education programs per county.

1c4 Report the actual number of children receiving educational programming (specify method of data collection) per county.

1c5 Report demonstrated increases in the knowledge gained as measured by the administration of pre- and post- tests. For classroom-based sessions, pre- and post-tests must be administered to each attendee and the results must be collected for each session. Qualitative surveys of faculty are acceptable but can only be used to supplement the pre- and post- tests.

Objective 2: Promote vision health in all counties of the State by expanding the use of community partners.

Strategies:

2a Provide detailed description of how to establish and maintain formal, working relationships with critical community partners to expand vision health awareness.

2a1 By October 10, 2022 utilize the Community Engagement Assessment Tool Survey (Appendix H) and complete with community partners to determine initial community engagement and areas of improvement.

2a2 By March 10, 2023 develop and submit your plan in partnership with stakeholders that will improve and enhance your engagement with stakeholders as determined by survey tool (Appendix H).

Objective 3: Plan, develop and implement cross program collaboration amongst all Save Our Sight Fund components.

Strategies:

3a Develop and implement a communication strategy/plan that expresses the goals and methods of the Vision Health outreach activities, including how the Vision Health Program will interface and share information amongst all Save Our Sight Fund components as well as the public.

3b Develop or maintain a dedicated website and social platform and provide at minimum four posts a month.

Vision Screener Training Component

Purpose: The purpose of the Save Our Sight Program is to ensure that children in Ohio have good vision and healthy eyes. The Save Our Sight Children's Vision Screener Training Program provides a voluntary children's vision screener training and certification programs for preschool and school age children aged children using the ODH Children's Vision Screening training vision screening certification program. Funds for the Save Our Sight Program are generated by donations. Motor vehicle owners in Ohio are asked to donate \$1 to the Save Our Sight Fund when they register their vehicles and/or renew license plates.

Goal: The goal of the Save Our Sight Children's Vision Screener Training Program is to ensure that children in Ohio have good vision and healthy eyes by implementing voluntary children's vision screener training and certification programs for preschool through school aged children. This is accomplished by providing funding to 501(c) organizations that offer vision services in all counties of the state. These organizations must have demonstrated experience in the delivery of vision services.

Objective 1: Implement the ODH Children's Vision Screening training vision screening certification program. This is a voluntary evidence-based screener training and certification program for volunteers, childcare providers, nurses, teachers, health care professionals practicing in primary care settings, and others serving preschool and school aged children.

Strategies:

1a Vision screening trainers must successfully meet the requirements and complete the ODH vision screening train the trainer program by July 14, 2022. Meeting information and times will be provided to the successful applicant following the notice of award.

1a1 Submit resumes for all individuals conducting the vision screening training.

1a2 Vision screening trainers must have demonstrated experience with conducting vision screenings on at least 100 children.

1a3 Trainers must be at least 18 years old in order to participate in the ODH vision screening train the trainer program.

1a4 Vision screener trainer must demonstrate the ability and proficiency to the ODH to provide the training.

1a5 All vision screener trainers must be trained by ODH.

1b Implement the ODH approved Vision Screening Certification program.

1b1 Recruit potential vision screeners who will be trained, certified and equipped. Recruitment must target potential screeners who serve the most economically vulnerable population (<200% Federal Poverty Level), minorities and other segments of the population that experience a disproportionate burden as the priority population. Plan is to include how successful applicant will increase diversity and competency of the health workforce and related industry workforces through recruitment, retention and training of racially, ethnically and culturally diverse individuals and through leadership action by healthcare organizations and systems.

1b2 Retain vision screeners who have been trained, certified and equipped.

1b3 Collect and report certification data as approved by ODH. Collecting of data must only be used for purposes outlined within the purpose, goals, objectives and strategies outlined within this grant component.

1b3a Certification data must include:

Name

Organization Information

Contact Information

Type of Organization

Location of vision screenings that will be conducted

Email

Phone Number

Certification I.D. number

Estimated number of children that will be screened

Collect and report other information as requested by ODH

1b4 Describe plan to monitor newly trained screeners and use of equipment after trainings.

1c Distribute vision screener equipment to certified screeners. Equipment must comply with ODH requirements and

recommendations for the screening of preschool children and school aged children (ORC 3313.69).

1c1 Describe policy for equipment distribution and return.

1c2 Submit the template to be used that serves as the formal agreement between the subgrantee agency and the individual screener. See Assurance 5.

1c3 Collect and report program data.

1c3a Report program data monthly using outcomes grid.

1c3b Report the actual number of screeners trained and certified per county.

1c3c Report the actual number of screeners receiving training and certification per county by type of employment

1c3d Report actual number of screeners receiving screening equipment; specify location (county/geographic area).

1c3e Report the actual number and type of vision screening equipment distributed.

1c3f Report other information requested by ODH.

Objective 2: Promote good vision and healthy eyes through a voluntary children's vision screener training and certification program.

Strategies:

2a Provide detailed description of how to establish and maintain formal, working relationships with critical community partners to expand children's vision screener training and certification program.

2a1 By October 10, 2022 utilize the Community Engagement Assessment Tool Survey (Appendix H) and complete with community partners to determine initial community engagement and areas of improvement.

2a2 By March 10, 2023 develop and submit your plan in partnership with stakeholders that will improve and enhance your engagement with stakeholders as determined by survey tool (Appendix H).

Objective 3: Plan, develop and implement cross program collaboration amongst all Save Our Sight Fund components.

Strategies:

3a Develop and implement a communication strategy/plan that expresses the goals and methods of the Vision Screening program's outreach activities, including how the Vision screening program will interface and share information amongst all Save Our Sight Fund components as well as the public.

3b Develop or maintain a dedicated website and social platform and provide at minimum four posts a month.

Appendix F Save Our Sight Program Plan

Directions: Applicant must address activities and method of evaluation/measures for the identified component(s) in which the applicant is applying for funds.

Activities: describes the actions that are necessary to create the conditions described in the Objective and Strategy. Describe how the activity is organized and carried out. Identify who is responsible for completing the activity as well as the projected date of completion.

Evaluation: describe a plan for demonstrating, in measurable terms, that the conditions in the Objective are actually achieved and the effectiveness/appropriateness of each activity is actually achieved.

Outcomes: describe overall progress, including results to date and comparison of actual accomplishments with proposed goals for the period, any current problems or favorable or unusual developments, and work to be performed during the succeeding period. It is not acceptable to state "in progress."

Save Our Sight Program Plan Ohio Amblyope Registry Component			
Objective 1: : Implement and evaluate the Ohio Department of Health web-based data system registry for children with amblyopia in all counties of the State.			
STRATEGIES	ACTIVITIES	METHOD OF EVALUATION/MEASURES	OUTCOMES (use this column for program reports only)
<p>1a Describe how data collected will follow Data Guide on how to utilize the ODH Amblyope Registry web-based data system.</p> <p>1a1 Ensure data entry staff are trained on how to enter data into the ODH Amblyope Registry web-based data system by July 15, 2022. Any new hires will be trained within 30 days of hire date.</p> <p>1a2 Describe and provide an evaluation plan of children utilizing Amblyope Registry services specifically highlighting social determinants of health and health equity using data collected through the ODH web-based system. Must be submitted with final expenditure report.</p> <p>1a3 Submit final report that demonstrates how the OAR case management system met the needs of participants through a customer satisfaction survey. Report must include outcomes of participants parent satisfaction surveys, any barriers to compliance and strategies to be used to address identified barriers. Report must also include success stories and other pertinent information.</p>			

**Save Our Sight Program Plan
Ohio Amblyope Registry Component**

Objective 2: Implement and evaluate a voluntary case management system for newly diagnosed children participating in the registry. Voluntary case management includes the provision of patching kits, educational and compliance materials and periodic phone call and email contact for consultation for every new registrant at time of enrollment. Patching kits, educational materials and compliance materials must be sent within 10 business days of receipt of request in ODH web-based amblyope registry database. Children should be from all counties of the State.

STRATEGIES	ACTIVITIES	METHOD OF EVALUATION/MEASURES	OUTCOMES (use this column for program reports only)
<p>2a Provide detailed description of the written protocol that outlines the information and support to be used in providing comprehensive case management on an individual basis.</p> <p>2a1 Contact families of registry children to provide information and support at 30 calendar days; at 90 calendar days; at 180 calendar days; and at closure of case management services' or as negotiated. Submit standardized script that outlines information and support provided to families for ODH review and approval</p> <p>2a2 Distribute ODH approved educational materials/tools/resources to diagnosed children to assure compliance with treatment regimens prescribed by eye care providers. Distribute patching kits and educational materials and compliance materials to each of the newly enrolled unique children in Ohio.</p>			

**Save Our Sight Program Plan
Ohio Amblyope Registry Component**

Objective 3: Increase recruitment of healthcare providers and children diagnosed with amblyopia.

STRATEGIES	ACTIVITIES	METHOD OF EVALUATION/MEASURES	OUTCOMES (use this column for program reports only)
<p>3a Provide detailed description of the recruitment plan to establish and maintain healthcare members and recruit new healthcare members. Recruitment must target potential healthcare members who serve the most economically vulnerable population (<200% Federal Poverty Level), minorities and other segments of the population that experience a disproportionate burden as the priority population.</p>			

3b Provide a detailed description of a monitoring plan of current and newly recruited healthcare professionals.			
Save Our Sight Program Plan Ohio Amblyope Registry Component			
Objective 4: Promote awareness of amblyopia in all counties of the State by expanding the use of community partners.			
STRATEGIES	ACTIVITIES	METHOD OF EVALUATION/MEASURES	OUTCOMES (use this column for program reports only)
<p>4a Provide detailed description of how to establish and maintain formal, working relationships with critical partners to expand amblyopia awareness and registry program awareness through the convening of the OAR advisory committee. The Amblyope Advisory Committee must include representation from ODH and Save Our Sight Project Directors or designee, healthcare providers and family members of diagnosed children.</p> <p>4a1 Submit the list of members and their roles within the Amblyope Advisory Committee. Submit all meeting minutes and recommendations.</p> <p>4a2 Promote awareness of amblyopia utilizing culturally and linguistically appropriate materials.</p> <p>4a3 Describe how the committee will be engaged in promoting awareness of Amblyopia and make recommendations to the OAR.</p> <p>4b Provide detailed description of how to establish and maintain formal, working relationships with critical community partners to expand Amblyope Registry awareness.</p> <p>4b1 By October 10, 2022 utilize the Community Engagement Assessment Tool Survey (Appendix H) and complete with community partners to determine initial community engagement and areas of improvement.</p> <p>4b2 By March 10, 2023 develop and submit your plan in partnership with stakeholders that will</p>			

improve and enhance your engagement with stakeholders as determined by survey tool (Appendix H).			
Save Our Sight Program Plan Ohio Amblyope Registry Component			
Objective 5: Plan, develop and implement cross program collaboration amongst all Save Our Sight Fund components.			
STRATEGIES	ACTIVITIES	METHOD OF EVALUATION/MEASURES	OUTCOMES (use this column for program reports only)
<p>5a Develop and implement a communication strategy/plan that expresses the goals and methods of the Ohio Amblyope Registry's outreach activities, including how the Ohio Amblyope Registry will interface and share information amongst all Save Our Sight Fund components as well as the public.</p> <p>5b Develop or maintain a dedicated website and social platform and provide at minimum four posts a month.</p>			

Save Our Sight Program Plan Protective Eyewear Component			
Objective 1: Purchase and distribute (ANSI- approved eye/facial protective equipment for distribution to children enrolled in community settings) protective eyewear to prevent child eye injuries in sports/activity related community-based settings.			
STRATEGIES	ACTIVITIES	METHOD OF EVALUATION/MEASURES	OUTCOMES (use this column for program reports only)
<p>1a Provide detailed description of the plan to purchase and distribute sports and activity-related protective eyewear for children in community-based settings to prevent eye injuries.</p> <p>1b Track detailed information regarding program outcomes (at a minimum, leagues contacted; coaches trained; goggles distributed; helmets distributed; children served; pre/post survey data; inquiries; pre/post tests; interest packets provided). Specify the number of eye injuries prevented in sports and activity related community-based settings.</p>			

<p>1c Serve the most economically vulnerable population (<200% Federal Poverty Level), minorities and underserved population that experience a disproportionate burden of vision health and safety concerns. Plan is to include how successful applicant will ensure access to the provision of protective eyewear for children.</p> <p>1d Collect and report program data.</p> <p>1d1 Report program data monthly using approved outcomes grid.</p> <p>1d2 Collect and maintain a data security and disaster recovery plan; protection of client confidentiality; and an audit trail for data collected.</p>			
<p align="center">Save Our Sight Program Plan Protective Eyewear Component</p>			
<p>Objective 2: Purchase and distribute(ANSI- approved eye/facial protective equipment for distribution to children enrolled in vocational training) protective eyewear to prevent child eye injuries in instruction-based programs.</p>			
STRATEGIES	ACTIVITIES	METHOD OF EVALUATION/MEASURES	OUTCOMES (use this column for program reports only)
<p>2a Provide detailed description of the plan to purchase and distribute protective eyewear for children in schools in instruction-based programs (e.g., wood crafting, auto mechanics, welding, and chemistry classes) to prevent eye injuries.</p> <p>2b Track detailed information regarding program outcomes (at a minimum, schools contacted; instructors trained; goggles distributed; children served; pre/post survey data; inquiries; interest packets provided; and research-based estimates of eye injuries prevented each year). Specify the number of eye injuries prevented in instructional based programs.</p> <p>2c Serve the most economically vulnerable population (<200% Federal Poverty Level), minorities and underserved population that experience a disproportionate burden of vision health and safety concerns.</p> <p>2d Collect and report program data.</p>			

2d1 Report program data monthly using approved outcomes grid.			
2d2 Collect and maintain a data security and disaster recovery plan; protection of client confidentiality; and an audit trail for data collected.			
Save Our Sight Program Plan Protective Eyewear Component			
Objective 3: Implement a research-based children’s vision safety educational program specifically for sports and activities related community-based settings and instructional-based programs to educate each target audience about children’s vision safety in all counties of Ohio. All presentations and awareness materials about the Protective Eyewear program must be submitted to the Ohio Department of Health for review and approval before distribution.			
STRATEGIES	ACTIVITIES	METHOD OF EVALUATION/MEASURES	OUTCOMES (use this column for program reports only)
<p>3a Provide a detailed plan of how educational information and materials will be distributed for children in schools in instruction-based programs (e.g., wood crafting, auto mechanics, welding, and chemistry classes) to prevent eye injuries.</p> <p>3a1 Report program data monthly using approved outcomes grid.</p> <p>3a2 Collect and maintain a data security and disaster recovery plan; protection of client confidentiality; and an audit trail for data collected.</p> <p>3a3 Report demonstrated increases in the knowledge gained as measured by the administration of pre- and post- tests. For instruction based programs, pre- and post-tests must be administered to each attendee and the results must be collected for each session. Qualitative surveys of faculty are acceptable but can only be used to supplement the pre- and post- tests.</p> <p>3a4 Submit a final report that demonstrates how the Protective Eyewear component met the needs of recipients through a customer satisfaction survey. Report must include outcomes of recipient’s parent satisfaction</p>			

<p>surveys and any barriers to providing equipment in hard-to-reach counties, success stories and other pertinent information. Include eye injuries prevented and pre/post test results.</p> <p>3b Provide a detailed plan of how educational information and materials will be distributed for children in sports/activity related community-based settings.</p> <p>3b1 Report program data monthly using approved outcomes grid.</p> <p>3b2 Collect and maintain a data security and disaster recovery plan; protection of client confidentiality; and an audit trail for data collected.</p> <p>3b3 Report demonstrated increases in the knowledge gained as measured by the administration of pre- and post- tests. For sports/activity-based sessions, pre- and post-tests must be administered to each attendee and the results must be collected for each session. Qualitative surveys of faculty are acceptable but can only be used to supplement the pre- and post-tests.</p> <p>3b4 Submit a final report that demonstrates how the Protective Eyewear component met the needs of recipients through a customer satisfaction survey. Report must include outcomes of recipient's parent satisfaction surveys and any barriers to providing equipment in hard-to-reach counties, success stories and other pertinent information. Include eye injuries prevented and pre/post test results.</p> <p>3c Serve the most economically vulnerable population (<200% Federal Poverty Level), minorities and underserved population that experience a disproportionate burden of vision health and safety concerns.</p>			
<p align="center">Save Our Sight Program Plan Protective Eyewear Component</p>			
<p>Objective 4: Promote good vision and healthy eyes through the prevention of eye injuries by expanding the use of community partners.</p>			

STRATEGIES	ACTIVITIES	METHOD OF EVALUATION/MEASURES	OUTCOMES (use this column for program reports only)
<p>4a Provide detailed description of how to establish and maintain formal, working relationships with critical community partners to expand eye injury prevention.</p> <p>4a1 By October 10, 2022 utilize the Community Engagement Assessment Tool Survey (Appendix H) and complete with community partners to determine initial community engagement and areas of improvement.</p> <p>4a2 By March 10, 2023 develop and submit your plan in partnership with stakeholders that will improve and enhance your engagement with stakeholders as determined by survey tool (Appendix H).</p>			
Save Our Sight Program Plan Protective Eyewear Component			
Objective 5: Plan, develop and implement cross program collaboration amongst all Save Our Sight Fund components.			
STRATEGIES	ACTIVITIES	METHOD OF EVALUATION/MEASURES	OUTCOMES (use this column for program reports only)
<p>5a Develop and implement a communication strategy/plan that expresses the goals and methods of the Protective Eyewear program's outreach activities, including how the Protective Eyewear program will interface and share information amongst all Save Our Sight Fund components as well as the public.</p> <p>5b Develop or maintain a dedicated website and social platform and provide at minimum four posts a month.</p>			

Save Our Sight Program Plan Vision Health and Safety Component			
Objective 1: Implement research-based children's vision health and safety education program for children in to educate each applicant identified target age group about children's vision health and safety in all counties of the State.			
STRATEGIES	ACTIVITIES	METHOD OF	OUTCOMES (use this

		EVALUATION/MEASURES	column for program reports only)
<p>1a Provide detailed description of the research-based children’s vision health and safety education program for traditional and non traditional classroom settings. Development and funding of new children’s vision health and safety education curriculum for traditional and non traditional classroom settings will only be considered for funding if supported through formative and summative evaluations.</p> <p>1a1 Identify the specific, measurable learning goal per proposed education program.</p> <p>1a2 Identify the specific, measurable learning objective per proposed education program.</p> <p>1a3 Identify the target age group per proposed education program.</p> <p>1a4 Identify the specific assessment and evaluation plan per proposed education program.</p> <p>1a5 Identify the current State of Ohio academic standards met per proposed education program.</p> <p>1a6 Identify specific handouts and materials that will be given to teachers/organization representatives and target age group students per proposed education program. Materials must be culturally and linguistically appropriate.</p> <p>1a7 Submit a copy of the research-based resources used to demonstrate effectiveness of the traditional and non-traditional classroom education program.</p> <p>1b Describe a plan to target the most economically vulnerable population (<200% Federal Poverty Level), minorities and underserved population that experience a disproportionate burden of vision health and</p>			

<p>safety concerns. Specify attainable number, or percentage, of population to be reached.</p> <p>1c Collect and report program data.</p> <p>1c1 Report program data monthly using outcomes grid.</p> <p>1c2 Report the actual traditional settings receiving research-based children's vision health and safety education programs per county.</p> <p>1c3 Report the actual non-traditional settings receiving research-based children's vision health and safety education programs per county.</p> <p>1c4 Report the actual number of children receiving educational programming (specify method of data collection) per county.</p> <p>1c5 Report demonstrated increases in the knowledge gained as measured by the administration of pre- and post- tests. For classroom-based sessions, pre- and post-tests must be administered to each attendee and the results must be collected for each session. Qualitative surveys of faculty are acceptable but can only be used to supplement the pre- and post- tests.</p>			
<p align="center">Save Our Sight Program Plan Vision Health and Safety Component</p>			
<p>Objective 2: Promote vision health in all counties of the State by expanding the use of community partners.</p>			
STRATEGIES	ACTIVITIES	METHOD OF EVALUATION/MEASURES	OUTCOMES (use this column for program reports only)
<p>2a Provide detailed description of how to establish and maintain formal, working relationships with critical community partners to expand vision health awareness.</p> <p>2a1 By October 10 ,2022 utilize the Community Engagement Assessment Tool Survey (Appendix H) and complete with community partners to determine initial community engagement and areas of</p>			

improvement.			
2a2 By March 10, 2023 develop and submit plan in partnership with stakeholders that will improve and enhance your engagement with stakeholders as determined by survey tool.			

Save Our Sight Program Plan Vision Health and Safety Component			
Objective 3: Plan, develop and implement cross program collaboration amongst all Save Our Sight Fund components.			
STRATEGIES	ACTIVITIES	METHOD OF EVALUATION/MEASURES	OUTCOMES (use this column for program reports only)
3a Develop and implement a communication strategy/plan that expresses the goals and methods of the Vision Health outreach activities, including how the Vision Health Program will interface and share information amongst all Save Our Sight Fund components as well as the public.			
3b Develop or maintain a dedicated website and social platform and provide at minimum four posts a month.			

Save Our Sight Program Plan Vision Screening Training Component			
Objective 1: Implement the ODH Children's Vision Screening training vision screening certification program. This is a voluntary evidence-based screener training and certification program for volunteers, child care providers, nurses, teachers, health care professionals practicing in primary care settings, and others serving preschool and school aged children.			
STRATEGIES	ACTIVITIES	METHOD OF EVALUATION/MEASURES	OUTCOMES (use this column for program reports only)
1a Vision screening trainers must successfully meet the requirements and complete the ODH vision screening train the trainer program by July 14, 2022. Meeting information and times will be provided to the successful applicant following the notice of award.			
1a1 Submit resumes for all individuals conducting the vision screening training.			
1a2 Vision screening trainers must have demonstrated experience with conducting			

<p>vision screenings on at least 100 children.</p> <p>1a3 Trainers must be at least 18 years old in order to participate in the ODH vision screening train the trainer program.</p> <p>1a4 Vision screener trainer must demonstrate the ability and proficiency to the ODH to provide the training.</p> <p>1a5 All vision screener trainers must be trained by ODH.</p> <p>1b Implement the ODH approved Vision Screening Certification program.</p> <p>1b1 Recruit potential vision screeners who will be trained, certified and equipped. Recruitment must target potential screeners who serve the most economically vulnerable population (<200% Federal Poverty Level), minorities and other segments of the population that experience a disproportionate burden as the priority population. Plan is to include how successful applicant will increase diversity and competency of the health workforce and related industry workforces through recruitment, retention and training of racially, ethnically and culturally diverse individuals and through leadership action by healthcare organizations and systems.</p> <p>1b2 Retain vision screeners who have been trained, certified and equipped.</p> <p>1b3 Collect and report certification data as approved by ODH. Collecting of data must only be used for purposes outlined within the purpose, goals, objectives and strategies outlined within this grant component.</p> <p>1b3a Certification data must include:</p> <ul style="list-style-type: none"> • Name • Organization Information • Contact Information • Type of Organization • Location of vision screenings that will be conducted • Email 			
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<ul style="list-style-type: none"> • Phone Number • Certification I.D. number • Estimated number of children that will be screened • Collect and report other info as requested by ODH. <p>1b4 Describe plan to monitor screeners, screenings and use of equipment after trainings.</p> <p>1c Distribute vision screener equipment to certified screeners. Equipment must comply with ODH requirements and recommendations for the screening of preschool children and school aged children (ORC 3313.69).</p> <p>1c1 Describe policy for equipment distribution and return.</p> <p>1c2 Submit the template to be used that serves as the formal agreement between the subgrantee agency and the individual screener. See Assurance 5.</p> <p>1c3 Collect and report program data.</p> <p>1c3a Report program data monthly using outcomes grid.</p> <p>1c3b Report the actual number of screeners trained and certified per county.</p> <p>1c3c Report the actual number of screeners receiving training and certification per county by type of employment</p> <p>1c3d Report actual number of screeners receiving screening equipment; specify location (county/geographic area).</p> <p>1c3e Report the actual number and type of vision screening equipment distributed.</p>			
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1c3f Report other information requested by ODH.			
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Save Our Sight Program Plan Vision Screening Training Component			
Objective 2: Promote good vision and healthy eyes through a voluntary children's vision screener training and certification program.			
STRATEGIES	ACTIVITIES	METHOD OF EVALUATION/MEASURES	OUTCOMES (use this column for program reports only)
<p>2a Provide detailed description of how to establish and maintain formal, working relationships with critical community partners to expand children's vision screener training and certification program.</p> <p>2a1 By October 10, 2022 utilize the Community Engagement Assessment Tool Survey (Appendix H) and complete with community partners to determine initial community engagement and areas of improvement.</p> <p>2a2 By March 10, 2023 develop and submit your plan in partnership with stakeholders that will improve and enhance your engagement with stakeholders as determined by survey tool (Appendix H).</p>			
Save Our Sight Program Plan Vision Screening Training Component			
Objective 3: Plan, develop and implement cross program collaboration amongst all Save Our Sight Fund components.			
STRATEGIES	ACTIVITIES	METHOD OF EVALUATION/MEASURES	OUTCOMES (use this column for program reports only)
3a Develop and implement a communication strategy/plan that expresses the goals and methods of the Vision Screening program's outreach activities, including how the Vision screening program will interface and share			

<p>information amongst all Save Our Sight Fund components as well as the public.</p> <p>3b Develop or maintain a dedicated website and social platform and provide at minimum four posts a month.</p>			
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Appendix G
Save Our Sight Monthly Reporting Template

Amblyope Registry Component

Reporting Month: _____

This template provides guidance in reporting activities grantee outcomes. Please provide bullet point statements of activities and outcomes for the following purpose, goals, objectives and strategies and deliverables if the activities occurred during the reporting month. Please note that not all sections may be completed depending upon activities completed during the reporting month. Responses to each goal should not exceed 1,000 words.

1. Provide information on your efforts with below health care providers if applicable for reporting month. Please include information about any technical assistance you provided them. Discuss any barriers you are encountering with this population.
 - optometrists,
 - ophthalmologist,
 - pediatricians,
 - family practice physicians,
 - school nurses
 - other
2. Provide details of any communication with critical partners that expands and enhances amblyopia and registry program awareness.
3. Provide actual number of patching kits purchased during reporting month.
4. Provide activities of the Amblyope Advisory Committee that occurred during reporting month.
5. Provide details of cross program collaboration efforts amongst all Save Our Sight Fund components that occurred during reporting month.
6. Provide information regarding unfilled requests for OAR services if there are any that occurred during reporting month.
7. Report on how many parent satisfaction surveys have been received during the reporting month.
8. Provide links to all media coverage that highlighted your program during the reporting month. This is to include dates of social media posts.
9. Describe any barriers with families/caregivers of children that were encountered during the reporting month.

Protective Eyewear Component

Reporting Month: _____

This template provides guidance in reporting activities grantee outcomes. Please provide bullet point statements of activities and outcomes for the following purpose, goals, objectives and strategies and deliverables if the activities occurred during the reporting month. Please note that not all sections may be completed depending upon activities completed during the reporting month. Responses to each goal should not exceed 1000 words.

1. Provide information on your efforts with partners if applicable for reporting month. Please include information about any technical assistance you provided them. Discuss any barriers you are encountering with this population that occurred during reporting month.
 - ophthalmologist,
 - coaches,
 - teachers
 - optometrists,
 - OHSAA
 - vendors
 - other
2. Provide details of any communication with critical partners that expands and enhances protective eyewear program awareness that occurred during reporting month.
3. Provide details on status of the development and distribution of materials in community-based sports/activity settings and instruction-based school settings for education purposes.
4. Provide details of cross program collaboration efforts amongst all Save Our Sight Fund components that occurred during reporting month.
5. Provide information regarding unfilled requests for protective eyewear if there are any that occurred during reporting month.
6. Report on how many customer satisfaction surveys have been received during the reporting month.
7. Report how many pre- and post- tests have been received during the reporting month.
8. Provide links to all media coverage that highlighted your program during the reporting month. This is to include dates of social media posts.
9. Describe any barriers with families/caregivers of children that were encountered during the reporting month.
10. Provide any additional comments/barriers that impact ability to meet goals, strategies and outcomes.

Vision Health and Safety Component

Reporting Month: _____

This template provides guidance in reporting activities grantee outcomes. Please provide bullet point statements of activities and outcomes for the following purpose, goals, objectives and strategies and deliverables if the activities occurred during the reporting month. Please note that not all sections may be completed depending upon activities completed during the reporting month. Responses to each goal should not exceed 1000 words.

1. Provide details of any communication with critical partners that expands and enhances the Vision Health and Education Program during reporting month.
2. Report how many teacher satisfaction surveys have been received during the reporting month.
3. Provide links to all media coverage that highlighted your program during the reporting month. This is to include dates of social media posts.
4. Describe any barriers with scheduling educational programs that were encountered during the reporting month.
5. Provide information regarding unfilled requests for materials for emergency eye kits that were encountered during the reporting month.
6. Provide information regarding unfilled requests presentations during the reporting month.
7. Provide details of cross program collaboration efforts amongst all Save Our Sight Fund components.
8. Provide information on your efforts with the train the trainer program for the traditional and non- traditional children's vision health and safety education program during the reporting month.
9. Provide a percentage of the schools reached how many serve the most economically vulnerable population (<200% Federal Poverty Level), minorities and other segments of the population that experience a disproportionate burden as the priority population.

Vision Screener Certification Training Component

Reporting Month: _____

This template provides guidance in reporting activities grantee outcomes. Please provide bullet point statements of activities and outcomes for the following purpose, goals, objectives and strategies and deliverables if the activities occurred during the reporting month. Please note that not all sections may be completed depending upon activities completed during the reporting month. Responses to each goal should not exceed 1000 words.

1. Provide details of any communication with critical partners that expands and enhances the Vision Screener Certification Training Program during reporting month.
2. Report how many teacher satisfaction surveys have been received during the reporting month.
3. Provide links to all media coverage that highlighted your program during the reporting month. This is to include dates of social media posts.
4. Describe any barriers with scheduling trainings that were encountered during the reporting month.
5. Provide information regarding unfilled requests for equipment that were encountered during the reporting month.
6. Provide details of cross program collaboration efforts amongst all Save Our Sight Fund components.
7. Provide a percentage of the individuals trained that serve the most economically vulnerable population (<200% Federal Poverty Level), minorities and other segments of the population that experience a disproportionate burden as the priority population.

Appendix H

Community Engagement Assessment Tool Survey

Community Engagement Assessment Tool Simplified Form



WISCONSIN DEPARTMENT
of HEALTH SERVICES

Community Engagement Assessment Tool Survey

- Thank you for agreeing to complete the "Community Engagement Assessment Tool" survey for our program!
- The survey tells us how we are doing when it comes to "engagement" (how well we involve community members). Your opinion is VERY important to us.

How well is our program doing when it comes to...

	Have Not Seen	Not at All Well	Fairly Well	Well Enough	Very Well	Extremely Well
1. Building respectful, trusting relationships between staff and participants (the people they serve). For example:						
- You felt listened to, respected, and supported by program staff.	0	1	2	3	4	5
- You developed a trusting relationship with program staff.						
2. Working with participants in a cooperative way and have shared goals. For example:						
- The program met your unique needs.	0	1	2	3	4	5
- Program staff involved you in decisions about the services you received.						
3. Building community connections. For example:						
- The program linked you to resources in your community.	0	1	2	3	4	5
- Program staff are members of your community.						
4. Working towards "health equity" – which means everyone has a just and fair opportunity to be healthy. For example:						
- Program staff understand the things that affect health like racism, childhood trauma, poverty, employment, housing, and social issues.	0	1	2	3	4	5
- Program staff helped you overcome barriers so you had a chance to be healthy.						
5. Meeting the needs of all cultures and languages. For example:						
- Program materials reflect your culture and background.	0	1	2	3	4	5
- You received services in your preferred language.						
6. Communicating openly and regularly. For example:						
- Program staff communicated with you in different ways.	0	1	2	3	4	5
- Communication with staff was easy and met your needs.						
- You knew that your private information was kept private.						
7. Creating a welcoming and inviting setting. For example:						
- The program's physical space (office) was clean, welcoming, and easy to access.	0	1	2	3	4	5
- The program's online space (website, social media) was welcoming and easy to access.						

How well is our program doing when it comes to...

	Have Not Seen	Not at All Well	Fairly Well	Well Enough	Very Well	Extremely Well
8. Caring about participant “engagement” which means feeling connected to and involved with the program. For example:						
- The program did or said things to show they care about engagement.	0	1	2	3	4	5
- When you shared your opinions or ideas, the program took them seriously.						
9. Working to “engage” (connect and involve) the people they serve. For example:						
- You’ve been asked to share your opinions and ideas about the program.	0	1	2	3	4	5
- Staff offered to pay you for sharing your opinions and ideas.						
10. Bringing people together to make decisions. For example:						
- You’ve been asked to be part of a group that makes decisions about the program.	0	1	2	3	4	5
- The program is open and honest with you about the needs and concerns.						
11. Helping participants develop new skills. For example:						
- Staff made an effort to coach, train, or teach you new skills.	0	1	2	3	4	5
- Staff shared opportunities to improve your skills (like workshops and events).						
12. Making sure staff are well-trained. For example:						
- Staff understand your health issue and your needs.	0	1	2	3	4	5
- Staff care about equity and diversity (everyone is treated fairly and with respect).						
13. Creating leadership opportunities. For example:						
- You’ve been offered the chance to become an advocate or leader for the program/health issue at hand.	0	1	2	3	4	5
- You’ve been told when there is an open position in the program (so you could tell others, apply yourself, or help choose a new staff member).						
14. Using information about participants to make decisions about the program. For example:						
- You are aware that the program collects information about program participants to see if the program is meeting the needs of participants.	0	1	2	3	4	5
- You’ve had the chance to see this information and share your opinion about it.						

Do you have suggestions about how we can improve family, youth, and community engagement?

