



## MEMORANDUM

Date: 3/14/2024

To: Youth Suicide Prevention Continuation Applicants

From: Jennifer Voit [JW](#)  
Chief, Bureau of Health Improvement and Wellness  
Ohio Department of Health

Subject: Youth Suicide Prevention (YS25)  
Sunday, Sept. 15, 2024- Sunday, Sept. 14, 2025

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

All electronic applications and attachments are due by 4:00 p.m., Monday, April 29, 2024. Applications received after the due date will not be considered for funding. Faxed, hand-delivered or mailed applications will not be accepted.

Electronic application components must be submitted via the on-line Grants Management Information System (GMIS). For new staff requiring GMIS access, you must successfully complete GMIS training offered by ODH.

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 until receipt of grant payments.

Submission of the **continuation application** constitutes acknowledgment and acceptance of ODH Grants Administration Policies and Procedures (OGAPP) Manual rules, policy and procedure updates posted on the GMIS Bulletin Board, and any other program-specific requirements as outlined in the competitive Solicitation. Reference the competitive Solicitation for more information. The competitive Solicitation for this grant program can be found on the ODH website:

<https://odh.ohio.gov/about-us/funding-opportunities/resources/competitive-solicitation-proposals-archive-section>

If you have questions, please contact Tiffany Boykins at 614-466-1663 or e-mail at [tiffany.boykins@odh.ohio.gov](mailto:tiffany.boykins@odh.ohio.gov)

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## I. CONTINUATION FUNDING APPLICATION GUIDANCE

### 100% Deliverable Funding

**A. Policy and Procedures:** The Continuation Funding Application consists of three parts: Program Updates(if applicable), Program Budget and Budget Narrative, and Other Required Attachments.

Submission of the continuation application constitutes acknowledgment and acceptance of ODH GAPP(OGAPP) manual rules, and any other program-specific requirements as outlined in the competitive Solicitation. This Solicitation pertains to budget period: [enter beginning and ending grant dates] of the total project period, [enter beginning and ending grant dates.] Reference the competitive Solicitation for more information.

Subrecipient personnel paid using the deliverable funding must complete daily timesheets. Time and Effort reporting must be completed if staff are charged to multiple funding sources.

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

- 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 in 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. Number of Grants and Funds Available:** The federal Comprehensive Suicide Prevention Grant supports this grant. Up to six (6) grants may be awarded for a total of \$495,000. Only funded applicants in year 1 (YS24) will be eligible to apply. This funding is for year 2 of this grant project, which will run Sunday, Sept. 15, 2024- Sunday, Sept. 14, 2025. The entire project period is Friday, March 1, 2024- Saturday, Sept. 14, 2027. If the Ohio Comprehensive Suicide Prevention Grant from CDC is not funded in the federal fiscal budget, ODH may be unable to fund the 2025 youth suicide prevention subrecipients. The funding for year 2 will be \$70,000, with the option for up to two applicants to apply for Supplemental #1 to lead the state's Youth Suicide Prevention coalition for \$7,500 each, and all applicants to apply for Supplemental #2 funding to support local Suicide Fatality Review committees for up to \$10,000 each.

*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.*

**C. Formatting Requirements for Attachments [Suggested language provided, but can be updated to reflect program-specific requirements]:**

- Properly label each item of the application packet (ex. 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 and fit on 8 ½ x 11 paper when printed.
- Number all pages (print on one side only). Place agency name and GMIS number on each page.
- Use a 12-point Calibri font.
- Forms must be completed and submitted in the format provided by ODH.

**D. Qualified Applicants:**

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

1. The Applicant does not owe funds to ODH and has repaid any funds due with 45 days of the invoice date.
2. Applicant has not been certified to the Attorney General's (AG's) office.
3. Applicant has submitted an application and all required attachments by **4:00 p.m. on Monday, April 29, 2024.**

**II. PROGRAM UPDATES:**

**Program should review the Evidence of Health Equity Strategies Checklist in Appendix C when drafting the program narrative, objectives, and workplan.**

- A. Program Progress Report:** Attach the program progress report for the current grant period. If the program progress report is not scheduled to be submitted before the application due date, then it must be submitted with the application. **This is not required due to funded applicants turning in quarterly progress reports.**
- B. Program Narrative:** Complete and submit a narrative statement, which explains any changes to program scope, personnel, partnerships with agencies or organizations, or other information the subrecipient wishes to share for continuation funding. **This will only be required if applying for any Supplemental Funding. Please see Appendix D for guidance.**
- C. Objectives and Work Plan:** Complete and submit a short summary of any changes in the Specific, Measurable, Achievable, Results-Oriented, Time-Based, Inclusive and Equitable (SMARTIE) objectives and submit an updated work plan. Reference the competitive Solicitation for information. This should be based on a review of the Progress Plans submitted to date. Provide a brief report addressing elements of each objective and activity, including current status (met, ongoing or unmet); major findings; and barriers and how barriers were addressed. **Not applicable. Agencies will update workplan at the beginning of the year as a special condition.**
- D. Documentation and Progress on Health Equity and Disparity Reduction Activities:**  
Please provide detailed updates on the goals, objectives and deliverables specified in the Competitive Solicitation relating to health equity. This information must be supported by data. Continuation Solicitations should prepare a summary of activities completed during the previous funding period, to outreach to the priority populations and / or neighborhoods specified in their plan. **Applicants are expected to follow the same activities and criteria related to health equity indicated in the year 1 solicitation and approved applications.**

**E. Program Budget:** Prior to completion of the budget section, reference the competitive Solicitation for unallowable costs and review criteria.

- 1. Budget Narrative:** Provide a budget justification narrative outlining how the deliverable will be met. (A budget justification example can be found on GMIS).

For your convenience, a budget justification narrative example is available on the GMIS bulletin board. Please let ODH know if you need assistance accessing it.

Match or Applicant Share is not required by this program. Do not include match or Applicant Share in the budget and/or the Applicant Share column of the Budget Summary. Only the narrative may be used to identify additional funding information from other resources.]

- 2. [2025] Budget via GMIS:** Complete requested budget information as follows:

- Other Direct Costs:** Submit a budget for this section and the necessary form(s) to support costs for the period Sept. 15, 2024-Sept. 14, 2025.

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

- Compliance:** Answer each question on this form. Completion of the form ensured agency's compliance with the administrative standards of ODH and federal grants.

- 3. 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 (unless allowable by the grant).
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. Please refer to the OGAPP manual for additional information.**

**F. Other Application Requirements:**

**Program Specific Attachments:** Complete and submit the following attachments.

- **Program Narrative if applying for Supplemental Funding.**

All attachments must be completed and submitted electronically. All attachments must clearly identify the authorized program name and GMIS project number.

**a. Other Required Documentation:**

- 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.

- **Audit:** Subrecipient agencies are responsible for submitting an audit report. Once an audit is completed, a copy must be sent to ODH via [audits@odh.ohio.gov](mailto:audits@odh.ohio.gov). Reference the GMIS Bulletin Board for more information.

- **Civil Rights Review Questionnaire — EEO Survey:** The Civil Rights Review Questionnaire (EEO) 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 online automatically with each application.
- **Assurances Certification:** Each subrecipient must acknowledge the Assurances (Federal and State Assurances for Sub-grantees) form in 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.
- **Federal Funding Accountability and Transparency Act (FFATA):** All new 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 register in SAM.gov and submit the information in the grant application. For information about System for Award Management (SAM) go to <https://sam.gov/>.

Information on Federal Spending Transparency can be located at [www.usaspending.gov](http://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.)**

- **For Non-Profit Organizations Only:**
  1. **Liability Coverage:** Liability coverage is required for all non-profit agencies. Non-profit organizations must submit documentation validating current liability coverage. Attach the current Certificate of Insurance Liability in GMIS.
  2. **Non-Profit Organization Status:** Non-profit organizations must submit documentation validating current status. If changed, attach in GMIS the Internal Revenue Services (IRS) letter approving non-tax-exempt status.

**G. Human Trafficking:** Human trafficking is defined by the use of force, fraud, or coercion to compel victims into performing labor or commercial sex acts. Populations at increased risk include but are not limited to lesbian-gay-bisexual-transgender-questioning individuals, individuals with disabilities, undocumented immigrants, runaway and homeless youth, temporary guest-workers, and low-income individuals.

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 that may include, but are not limited to the following:
  - 1. Populations at increased risk
  - 2. Mental health population
  - 3. Homeless population
- b. Agencies that promote the expansion of services to identify and serve those affected by human trafficking.

☒ Applicable ☐ Not Applicable to YOUTH SUICIDE PREVENTION PROGRAM

**H. Post Submission Requirements:** Continuation applicants are required to submit subrecipient program and expenditure reports.

**Note:** Failure to assure quality of reporting such as 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: Subrecipient program reports must be completed and submitted via GMIS** by the following dates. [Additional language is optional.] **Program reports that do not include required attachments (non-Internet submitted) will not be approved.** All program report attachments must clearly identify the authorized program name and grant number.

☒ Program Reports Required ☐ No Program Reports Required

Period	Report Due Date
Sept 15-Dec. 14, 2024	Dec. 14, 2024
Dec. 15, 2024-March 15, 2025	March 15, 2025
March 16, 2025-June 14, 2025	June 14, 2025
June 15, 2025-Sept. 14, 2025	Sept 14, 2025



- b. Subrecipient Reimbursement Expenditure Reports:** Subrecipient monthly expenditure reports **must** be completed and submitted **via GMIS** by the following dates:

Period	Report Due Date
Sept. 15 – Oct. 14, 2024	Oct. 24, 2024
Oct. 15 – Nov. 14, 2024	Nov. 24, 2024
Nov. 15 – Dec. 14, 2024	Dec. 24, 2024
Dec. 15, 2024 – Jan. 14, 2025	Jan. 24, 2025
Jan. 15 – Feb. 14, 2025	Feb. 24, 2025
Feb. 15 – March. 14, 2025	March 24, 2025
March 15 – April 14, 2025	April 24, 2025
April 15 – May 14, 2025	May 24, 2025
May 15 – June 14, 2025	June 24, 2025
June 15 – July 14, 2025	July 24, 2025
July 15 – Aug. 14, 2025	Aug. 24, 2025
Aug. 15 – Sept. 14, 2025	Sept. 24, 2025

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

Period	Report Due Date
Sept 15-Dec. 14, 2024	Dec. 24, 2024
Dec. 15, 2024-March 15, 2025	March 24, 2025
March 16, 2025-June 14, 2025	June 24, 2025
June 15, 2025-Sept. 14, 2025	Sept. 24, 2025

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

- c. 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 Sunday, Oct. 19, 2025.**

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, which serves as an invoice to return unused funds.

***Submission of ALL Subrecipient program and expenditure reports via the ODH's GMIS system indicates acceptance of OGAPP. Clicking the "Submit" or "Approve" button constitutes your authorization of the submission as an agency official and serves as your electronic acknowledgment and acceptance of OGAPP rules and regulations.***

## APPENDICES

- A. Continuation Solicitation ReimbursementType Form
- B. B1 Deliverable — Objective Descriptions (if applicable)  
B2 Deliverable — Objective Allocations (if applicable)
- C. Evidence of Health Equity Strategies Checklist [Other Program Documents (Program should list each document included)]
- D. Year 2 Guidance and Application Instructions

## Appendix A

Submission  
Required

CONTINUATION SOLICITATION  
REIMBURSEMENT TYPE FORM

See due date below

Ohio Department of Health  
Bureau of Health Improvement and  
Wellness

Youth Suicide Prevention (YS25)

**Reimbursement Type (check one)** Monthly ☐ **OR** Quarterly ☐

(Please note that no changes to the reimbursement type can be made after the project number is created in GMIS. No waivers/appeals will be accepted.)

*Please print:*

Current Project Number \_\_\_\_\_

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.*

Due to ODH by March 27, 2024

Please email completed form to Maria Kapenda ([Maria.Kapenda@odh.ohio.gov](mailto:Maria.Kapenda@odh.ohio.gov)).

## Appendix B1

**Name of Subgrant Program: Youth Suicide Prevention**

**Budget Period: Sunday, Sept. 15, 2024-Sunday, Sept. 14, 2025**

**# of Deliverables: 13**

**Use Budget Justification Scenario #:1**

X **Deliverables Only**

### **Local Community Coalition**

**Description:** Between Sept 15, 2024, and Sept. 14, 2025, the subrecipient will enhance existing local coalition/workgroup to support implementation and feedback on youth suicide prevention efforts through the development/update of a coordinated multi-sectoral plan.

- **Deliverable 1:** By Dec. 14, 2024, March 15, 2025, June 14, 2025, and Sept 14, 2025, subrecipient will submit coalition meeting minutes and attendance sheets for local coalition and submit to ODH Program Consultant via REDCap (subrecipient will submit for quarterly reimbursement).
- **Deliverable 2:** By Sept. 14, 2025, subrecipient will submit a strategic plan with year 2 progress updates that includes youth suicide prevention efforts to ODH Program Consultant via REDCap.

### **Statewide Coalition & Implementation of State Plans**

**Description:** Subrecipient will actively support and participate in the state's injury, child injury, and youth specific coalitions.

- **Deliverable 3:** By Sept. 14, 2025, subrecipient will actively participate in three statewide Ohio Injury Prevention Partnership (OIPP) Coalition, two Child Injury Action Group (CIAG) coalition, and six state Youth Suicide Subcommittee virtual meetings (OIPP Conference=\$700 with the remaining meeting at \$100 each).

### **Workplan**

**Description:** Between Sept 15, 2024, and Sept. 14, 2025, subrecipients are required to monitor and track progress with workplan.

- **Deliverable 4:** By March 15 and Sept. 14, 2025, subrecipient will submit updated workplan with progress/status section completed via REDCap.

### **Tier 1 -Community Based Approach**

**Description:** Subrecipients are required to continue implementation of a youth suicide prevention community-based policy, process or practice selected in year 1. By Sept. 14, 2025, subrecipient will identify, provide technical assistance, collect data, and implement the policy, program or practice within their local communities.

- **Deliverable 5:** By Dec. 14, 2024, March 15, 2025, June 14, 2025, and Sept 14, 2025, subrecipient will submit evidence of implementation as evidenced with technical assistance efforts and an updated data tracking framework using metrics identified by ODH that shows implementation progress specific to the selected Tier 1 policy, program or practice, to ODH Program Consultant via REDCap (subrecipient will submit for quarterly reimbursement).
- **Deliverable 6:** By Sept. 14, 2025, subrecipient will submit an Impact Statement for Tier 1 and updated data tracking framework to ODH Program Consultant via REDCap. Guidance to be provided by ODH at the beginning of the grant year.

**Tier 2-Healthcare Related Approach**

**Description:** Subrecipients are required to continue implementation of a youth suicide prevention healthcare related policy, process or practice selected in year 1. By Saturday, Sept. 14, 2025, subrecipient will identify, provide technical assistance, collect data, and implement the policy, program or practice within their local communities.

- **Deliverable 7:** By Dec. 14, 2024, March 15, 2025, June 14, 2025, and Sept 14, 2025, subrecipient will submit evidence of implementation as evidenced with technical assistance efforts and an updated data tracking framework using metrics identified by ODH that shows implementation progress specific to the selected Tier 2 policy, program or practice, to ODH Program Consultant via REDCap (subrecipient will submit for quarterly reimbursement).
- **Deliverable 8:** By Sept. 14, 2025, subrecipient will submit an Impact Statement for Tier 2 and updated data tracking framework to ODH Program Consultant via REDCap. Guidance to be provided by ODH at the beginning of the grant year.

**Tier 3- Upstream Intervention Approach**

**Description:** Subrecipients are required to continue implementation of a youth suicide upstream prevention related policy, process or practice selected in year 1. By Saturday, Sept. 14, 2025, subrecipient will identify, provide technical assistance, collect data, and implement the policy, program or practice within their local communities.

- **Deliverable 9:** By Dec. 14, 2024, March 15, 2025, June 14, 2025, and Sept 14, 2025, subrecipient will submit evidence of implementation as evidenced with technical assistance efforts and an updated data tracking framework using metrics identified by ODH that shows implementation progress specific to the selected Tier 3 policy, program or practice, to ODH Program Consultant via REDCap (subrecipient will submit for quarterly reimbursement).
- **Deliverable 10:** By Sept. 14, 2025, subrecipient will submit an Impact Statement for Tier 3 and updated data tracking framework to ODH Program Consultant via REDCap. Guidance to be provided by ODH at the beginning of the grant year.

<b>SUPPLEMENTAL FUNDING #1-optional</b>
<b>Statewide Youth Suicide Subcommittee Leadership</b>

**Description:** By Sept. 14, 2025, the subrecipients awarded the Supplemental Funding #1 will coordinate with another selected subrecipient to ensure that the CIAG-Youth Suicide Subcommittee has bimonthly scheduled meetings (create agenda, plan, help recruit members, route presentation for approval prior to meeting, conduct meeting, and submit meeting minutes to ODH for approval), update strategic plan, and work with multisectoral partners to move activities forward.

- **Deliverable 11:** By Dec. 14, 2024, March 15, 2025, June 14, 2025, and Sept 14, 2025, subrecipient will facilitate bimonthly subcommittee meetings using the ODH approved templates and submit meeting agendas and minutes as evidence of facilitation, to ODH Program Consultant via REDCap (two meetings in quarter 1; one meeting in quarter 2; two meetings in quarter 3, and one meeting in quarter 4. Subrecipient will submit for quarterly reimbursement).

<b>SUPPLEMENTAL FUNDING #2-optional</b>
<b>Suicide Fatality Review (SFR) Committees</b>

**Description:** By Sept. 14, 2025, the subrecipients awarded the Supplemental Funding #2 will collaborate with existing Suicide Fatality Review Committees to support reviews, or will work toward the development of a committee, in accordance with the ORC 307.64. For specifics on activities required, please refer to Appendix D.

- **Deliverable 12:** By April 1, 2025, subrecipient will select one activity from Appendix D and submit to ODH Program Consultant through REDCap.
- **Deliverable 13:** By Sept 14, 2025, subrecipient will select one activity from Appendix D related to SFR meetings and submit required documentation to ODH Program Consultant through REDCap.



Deliverable 9 (Tier 3 Implementation)	\$21,000	\$21,000	\$21,000	\$21,000	\$21,000	\$21,000	\$126,000
Deliverable 10 (Tier 3 Impact Statement)	\$800	\$800	\$800	\$800	\$800	\$800	\$4,800
TOTAL:	\$69,400	\$69,400	\$70,000	\$70,000	\$70,000	\$70,000	\$420,000
Supplemental #1: Child Injury Action Group (CIAG)- Youth Suicide Subcommittee Leadership							
Deliverable 11 (Youth Suicide Subcommittee Leadership)	\$7,500	\$7,500					\$15,000
Supplemental Funding #1 Total	\$7,500	\$7,500					\$15,000
Supplemental #2: Suicide Fatality Review Committees							
Deliverable 12 (Annual Report of Governance Documents)	\$2,000	\$2,000	\$2,000	\$2,000	\$2,000	\$2,000	\$12,000
Deliverable 13 (SFR Meetings)	\$8,000	\$8,000	\$8,000	\$8,000	\$8,000	\$8,000	\$48,000
Supplemental Funding #2 Total	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000	\$10,000	\$60,000

Total Funding

\$86,900

\$86,900

\$80,000

\$80,000

\$80,000

\$80,000

\$80,000

\$493,800



## Appendix C

### ODH Evidence of Health Equity Strategies Checklist

This checklist should be used to support planning, implementation, and evaluation of equitable strategies to reduce disparities and overcome social determinants of health. This checklist is a guide to establish a baseline criterion that all projects funded by ODH to support alignment with established priorities to achieve optimal health for all Ohioans.

#### Health Disparities, Health Inequities, Social Determinants of Health & Health Equity

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.

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](#).

- 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 aimed at eliminating disparities and achieving health equity. They are not required, but highly encouraged to use.

- 1) Link proposed activities to health equity strategies identified in local, state, or national planning documents. These documents include, but are not limited to strategies, goals and objectives outlined in [Healthy People 2030](#), the [State Health Improvement Plan \(SHIP\)](#) and local Community Health Assessments.
  - State Health Improvement Plan - <https://odh.ohio.gov/wps/portal/gov/odh/about-us/sha-ship>
  - Healthy People 2030 - <https://health.gov/healthypeople>
- 2) Develop staffing plans where board members, leadership and program staff reflect the race, ethnicity, background, and/or culture of the population being served.
- 3) Identify up and downstream approaches to address social determinants of health and reduce disparities. Upstream factors like food, housing and income insecurity that focus on addressing social determinants of health decrease barriers and improve supports that provide opportunity for people to achieve their full health potential. Downstream approaches focus on providing equitable access to care and services to reduce the negative impact of social determinants on health outcomes.
- 4) Establish non-traditional partnerships among different sectors of the community (e.g., faith-based organizations, community organizations, businesses, universities, 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.

## Year 2 Application Instructions and Guidance Youth Suicide Prevention (YS25) Grant

To complete the application for ODH, respond to the prompts by fully addressing the statements or questions within each section in GMIS, as required. A Word version of this Request for Proposal (RFP) and all required attachments will be available to applicants once the RFP is posted on the ODH website. Attachments should be named as outlined below and attached in GMIS 2.0 per system instructions. Appendix A-Continuation Solicitation Reimbursement Type Form Maria Kapenda [Maria.Kapenda@odh.ohio.gov](mailto:Maria.Kapenda@odh.ohio.gov) by Wednesday, March 27, 2024. Applications are due by 4:00pm on Monday, April 29, 2024.

**Please Note:** Proposed strategies should not be duplicative of activities already funded through the Ohio Department of Health or that your agency already implements with any other funding.

The following components are required for submission outside of the required sections in GMIS:

**1. Budget Narrative – no page limit – Named “Insert Agency Name\_Budget\_2025”**

This funding is deliverables-based, and the required budget narrative should follow the template provided in GMIS bulletin (follow scenario #1).

**2. Supplemental Funding**-if an agency is applying for either Supplemental Funding #1 and/or #2, the agency must also submit a **Program Narrative** for each Supplemental Funding. The program narrative must follow the below guidelines:

- a. Five-page limit for each supplemental funding.
- b. Identify staff who will lead activity.
- c. Agency experience with activities selected. For example, if applying for Supplemental #1, please describe, agency’ and individual assigned to activity, experience in leading coalitions.
- d. Describe how the agency will accomplish selected deliverables and partners involved or planned.
- e. If applying for Supplemental #2, please identify which deliverables you are applying for and why. Provide a brief history of your Suicide Fatality Review Committee. Applicants will select either “enhance capacity” or “capacity building” deliverables within the narrative. Please reach out to ODH if you have questions about which deliverables agency should apply for.

### **Supplemental Funding #1 (optional)**

**Description:** By Sept. 14, 2025, the subrecipients awarded the Supplemental Funding #1 will coordinate with another selected subrecipient to ensure that the CIAG-Youth Suicide Subcommittee has bimonthly scheduled meetings (create agenda, plan, help recruit members, route presentation for approval prior to meeting, conduct meeting, and submit meeting minutes to ODH for approval), update strategic plan, and work with multisectoral partners to move activities forward.

- **Deliverable 11:** By Dec. 14, 2024, March 14, 2025, June 14, 2025, and Sept 14, 2025, subrecipient will facilitate bimonthly subcommittee meetings using the ODH approved templates and submit meeting agendas and minutes as evidence of facilitation, to ODH Program Consultant via REDCap (two meetings in quarter 1; one meeting in quarter 2; two meetings in quarter 3, and one meeting in quarter 4. Subrecipient will submit for quarterly reimbursement).
- **Note:** If applying for this deliverable, your budget should follow the amount for deliverable #3 in the first column of Appendix B2.

### **Supplemental Funding #2 (optional):**

**Description:** By Sept. 14, 2025, the subrecipients awarded the Supplemental Funding #2 will collaborate with existing Suicide Fatality Review Committees to support reviews, or will work toward the development of a committee, in accordance with the ORC 307.64. For specifics on activities required, please refer to Appendix D.

**Enhance Capacity Deliverables:** Please select these deliverables if you have an existing SFR committee that has governance documents to lead the meeting, and the committee has been meeting regularly.

- **Deliverable 12:** By April 1, 2025, subrecipient will submit an annual report of cases reviewed to date, with demographics and a summary or recommendations resulting from the SFR, through ODH's website and following ODH guidance.
- **Deliverable 13:** By Sept. 14, 2025, will submit evidence of implementation of SFR meetings conducted by submitted meeting minutes with the number of cases reviewed or sign in sheet demonstrating the SFR was held to ODH Program Consultant via REDCap.

**Capacity Building Deliverables:** Please select these deliverables if your agency does not have a SFR committee but plan to start one in year 2; or just started one but nothing has officially been established, such as governing procedures, and only a few meetings have been held to date.

- **Deliverable 12:** By April 1, 2025, subrecipient will submit draft policies and procedures governing the SFR as evidence of implementation, to ODH Program Consultant via REDCap.
- **Deliverable 13:** By Sept. 14, 2025, subrecipient will submit meeting minutes or sign in sheet as documentation that SFR meetings and/or planning meetings have occurred with partners, to ODH Program Consultant via REDCap.

### **Health Equity:**

All health equity activities established in your approved application and workplan are expected to be sustained throughout year 2. Should an applicant need to change any of their health equity targets, an approval from ODH will be required.