WILLIAMS COUNTY CHILDREN'S TRUST FUND
REQUEST FOR PROPOSALS, SFY 2015

1. **General Instructions**

Time Table   RFP Release date: January 17, 2014

Deadline for Submitting Proposals   January 31, 2014

                                                        Notification of Awards by June, 2014
                                                        Contract Development June-July, 2014
                                                        Project Implementation – July 1, 2014 –
                                                                                June 30, 2015

What is the Ohio Children's Trust Fund?

As Ohio's sole, dedicated public funding source for child abuse and neglect prevention, OCTF is in the forefront of prevention activities throughout the state. From establishing guidelines for program development – to accessing up-to-date prevention curricula – to producing educational and public awareness materials – to impacting related social policy initiatives, OCTF provides expertise and resources for legislators, the media, state agencies, and the public.

 The Ohio Legislature established the Ohio Children's Trust Fund (OCTF) in 1984 to support efforts designed to prevent child abuse and neglect within the state. The mission of the Ohio Children's Trust Fund is to prevent child abuse and neglect through investing in strong communities, healthy families and safe children. Governed by a board of 15 members, the OCTF is the State of Ohio's only publicly funded child abuse prevention agency. Together with our county partners, the Trust Fund is dedicated to the prevention of child abuse and neglect through funding, supporting, educating and promoting child abuse prevention awareness and services within communities statewide. Ohio Revised Code (ORC) section 3109.17 states that the OCTF shall allocate funds to each child abuse and child neglect prevention advisory board for the purpose of funding child abuse and child neglect prevention programs. Funds are allocated among advisory boards according to a formula based on the ratio of the number of children under age eighteen in the county or multicounty district to the number of children under age eighteen in the state, as shown in the most recent federal decennial census of population. Subject to the availability of funds and except as provided in section 3109.171 of the Revised Code, each advisory board shall receive a minimum of ten thousand dollars per fiscal year. In September of 2002, the OCTF Board voted to increase the minimum allocation to $15,000. Primary Prevention Strategies are activities and services provided to the public designed to prevent or reduce the prevalence of child abuse and neglect before signs of abuse or neglect can be observed.

Primary prevention services are voluntary, targeted to the general public, and include such activities as public awareness materials and events to inform and educate people about child

abuse, neglect and the importance of prevention, parenting classes and support groups, child development screening, information and referral services, child safety training and family strengthening activities. Primary prevention services reach the broadest audience and generally have the lowest per person cost.

Secondary Prevention Strategies are activities and services that are provided to a specific population identified as having risk factors for child abuse and neglect and are designed to intervene at the earliest warning signs of child abuse or child neglect, or whenever a child can be identified at being at risk of abuse or neglect.

Secondary prevention involves services directed to parents, children and families who have risk factors, but abuse/neglect has not yet been identified. Some types of services (such as parenting classes, parent-child family life education, or parent support groups) can be classified as both primary prevention or secondary prevention. However, because of increased risk for maltreatment, services at the secondary level are typically more comprehensive or intensive than at the primary level. Typical secondary prevention services include home visitation, case management/service coordination, respite care, crisis stabilization and mentoring programs. They target fewer people than primary prevention and are more costly.

Revenues from surcharges on birth and death certificates and divorce and dissolution decrees provide the funding for OCTF. These funds are earmarked for each county through a formula based on the number of children living in each county. In addition, OCTF has been awarded The Community Based Child Abuse Prevention federal grant which is made available for additional prevention programs and special initiatives.

Scope of Service

Research has demonstrated that the following five protective factors reduce the incidence of child abuse and neglect by providing even stressed parents with what they need to parent effectively. By incorporating these protective factors into programming, programs build relationships with families. When these relationships are established, a program can learn to recognize the signs of stress and help build families' protective factors in their time of need.

THE PROTECTIVE FACTORS

The five protective factors are:
• Parental resilience
• Social connections
• Knowledge of parenting and child development
• Concrete support in times of need
• Children's social and emotional development

Protective factors are the strengths and resources that families can draw upon when they encounter stressful situations and challenges. Taking those characteristics and building on them

is a proven way to strengthen the entire family thereby decreasing the likelihood of maltreatment. Each of the protective factors is vital, but most important is what they do together to create stability in families.

Protective Factors[1]

Parental resilience: The ability to cope and bounce back from all types of challenges.

Social connections: Friends, family members, neighbors and other members of a community who provide emotional support and concrete assistance to parents.

Knowledge of parenting and child development: Accurate information about raising young children and appropriate expectations for their behavior.

Concrete support in times of need: Financial security to cover day-to-day expenses and unexpected costs that come up from time to time, access to formal supports like TANF and Medicaid, and informal support from social networks.

Children's social and emotional development: A child's ability to interact positively with others and communicate his or her emotions effectively.
1 *From the Center for the Study of Social Policy*

Parental Resilience
Parents who are emotionally resilient are able to bounce back during tough times and are more able to maintain a positive attitude, solve problems creatively, rise to challenges in their lives effectively and avoid situations that compromise their child's healthy development and overall welfare.

Social Connections
Parenting programs offer the important opportunity for parents to get to know other parents and make new friendships. Parents, especially parents of young children, can feel isolated and have a greater need for support from others. Friends can be an important source for relief in times of parenting stress, advice and information on parenting issues, and back-up support.

Knowledge of Child Development
Understanding child development is an important part of good parenting. Having realistic expectations of what children can and cannot do at certain ages helps a parent avoid frustration and understand their child better.

Concrete Support In Times of Need
It can be difficult at times for parents to get the help and advice they need. When parents or caregivers experience problems with housing, finances, illness, unemployment, or conflict in relationships, it can deplete their energy and take away the focus from their child. In addition, parents face challenges when trying to navigate their way around the systems they need in order to get help. Getting assistance when it's needed helps a caregiver to be a better parent by making sure they can give their child what they need. Having the ability to give their child what he or she

needs greatly reduces the stress and anxiety that can make a parent short-tempered and irritable with their child.

Social and Emotional Development in Children
As children grow, so do their emotions and ability to express themselves. And just like reading to children and playing with them can help their brains and bodies develop, there are many ways that parents can help their children learn to express and regulate their emotions. Social and emotional skills are the most important developmental skills that young children learn during their first years of life.

GENERAL INFORMATION

Please be sure to read all application information carefully.

The OCTF can fund only primary and secondary prevention programs as outlined in section 3109.13 of the Ohio Revised Code.

Primary prevention is defined as "activities and services provided to the public designed to prevent or reduce the prevalence of child abuse and child neglect before signs of abuse or neglect can be observed."

Secondary prevention is defined as "activities and services that are provided to a specific population identified as having risk factors for child abuse and child neglect and are designed to intervene at the earliest warning signs of child abuse or child neglect, or whenever a child can be identified as being at risk of abuse or neglect."

Please note that the OCTF cannot fund tertiary prevention programs or services. Applications that include tertiary prevention risk receiving a reduced allocation and/or having the application rejected entirely by the OCTF Board per ORC 3109.171. In addition, OCTF dollars cannot be used in any instance where the program participants have an open or substantiated case of abuse and/or neglect with a public children's services agency.

All proposed programs and/or services must be designed specifically to prevent or reduce child abuse and neglect and they must be implemented with a high degree of fidelity to the original program design.

Each proposed program should include strategies for preventing child abuse and neglect and each program must include at least one of the five protective factors.

Programs must collect, maintain and report outcome and evaluation data, as well as demographic data as a part of their program delivery. Utilization of the Protective Factors Survey is required in most cases.

Program outcomes and outcome accountability must be identified. A logic model presenting program's strategies, outcomes and measurement must be included with the application.

Protective Factors & Incorporation into CAN Programming

Parent Resilience

Children of resilient parents are more likely to be prepared to be better skilled at meeting and making new friends and more likely to respond appropriately to stressful situations than children of less resilient parents.

Parent Resilience and Child Abuse and Neglect Prevention
- Research demonstrates that parental psychology plays an important role in both the causes and prevention of child abuse and neglect. Parents who are emotionally resilient are able to maintain a positive attitude, creatively solve problems, and effectively deal with challenges that may arise in their lives. Having these skills greatly reduces parental stress, a known risk factor for child maltreatment.

Strengthening Families through Early Childcare and Education (www.strengtheningfamilies.net)
- By incorporating the parent resilience protective factor into programming, parents get to know and trust the staff. A parent who knows and trusts staff is more likely to reveal problems such as domestic violence or general feelings of frustration; more importantly, these parents are more likely to ask for help- thereby reducing or eliminating the risk for abuse and neglect.

Examples of How to Incorporate the Parent Resilience Protective Factor Into CAN Programming:
- Train staff on creating trusting relationships with families, and develop time within the program to provide opportunities for these relationships to flourish.
- Train staff to watch for early signs of child or family distress and respond with encouragement, support, and help in solving problems.

Social Connections

Programs for parents and caregivers offer the important opportunity for parents to get to know other parents and make new friendships. Parents, especially parents of young children, can feel isolated and have a greater need for support from others. Friends can be an important source for relief in times of parenting stress, advice and information on parenting issues, and back-up support.

Social Connections and Child Abuse and Neglect Prevention
- Helping parents build constructive friendships and other positive connections can reduce their isolation, which is a consistent risk factor in child abuse and neglect. Isolation is a particular problem for family members who are in crisis or need intensive help.
- Social connections enable parents to develop and reinforce community norms about behavior, such as violence. Norms against violence reduce the occurrence of child maltreatment.
- Through fostering social connections within your program, a parent or caregiver develops friendships that lead to mutual assistance in obtaining resources that all families need

from time to time, such as transportation, respite child care, and other tangible assistance as well as emotional support.

Examples of How to incorporate the Social Connections Protective Factor Into CAN Programming:

- Provide special networking workshops after (or built into) a parent education class.
- Help parents connect with organizations and resources outside the program.
- Provide special outreach and activities for fathers, grandparents, and other extended family members.

Knowledge of Parenting and Child Development

Understanding child development is an important part of good parenting. Having realistic expectations of what children can and cannot do at certain ages helps a parent avoid frustration and understand their child better.

Knowledge of Parenting and Child Development and Child Abuse and Neglect Prevention

- Parents who understand normal child development are less likely to grow frustrated and be abusive and are more likely to nurture their children's healthy development. Additionally, observing other children helps parents understand their own children in context.
- Parents often need timely help from someone they trust in order to address children's problem behaviors, such as biting or hitting, without resorting to harsh discipline techniques.
- When parents are educated about child development, they are more easily able to identify potential developmental delays, special needs and behavioral problems. Parents of children with developmental or behavior problems or special needs require additional support and coaching in their parenting roles to reduce their frustration and provide the help their children need.

Examples of How to incorporate Knowledge of Child Development into CAN Programming:

- Hold informal interactions between parents and program staff on issues such as tantrums, biting, etc.
- Parent education classes can use various approaches, including presenting information on developmental stages, or identifying parents with children the same age.
- Create an observation space where parents can watch their child interact and learn new techniques from observing staff.

Concrete Support

It can be difficult at times for parents to get the help and advice they need. When parents or caregivers experiencing problems with housing, finances, illness, unemployment, or conflict in

relationships, it can deplete their energy and take away the focus from their child. In addition, parents face challenges when trying to navigate their way around the systems they need in order to get help. Getting assistance when it's needed helps a caregiver to be a better parent by making sure they can give their child what they need. Having the ability to give their child what he or she needs greatly reduces the stress and anxiety that can make them short-tempered and irritable with their child.

Concrete Support and Child Abuse and Neglect Prevention

- It is a known fact that child neglect can be a consequence of family crisis, a parental condition
(such as mental health or addiction), or stresses associated with lack of resources.

Examples of How to incorporate Concrete Support in Times of Need into CAN Programming:

- Strive to serve the family as a whole, not just the individual child or parent in your program.
- When possible, give referrals to specific individuals at service agencies (not just the agencies themselves)
- Serving as an access point for health care, child care subsidies, and other services. Initiate the contact or invite conversation if staff suspects a family problem or emergency.
- Offering on-site food pantries and clothing closets is not only an easy way to assist families in need, but also identify those who may be experiencing crisis and in need of further assistance.

Social and Emotional Development

As children grow, so do their emotions and ability to express themselves. And just like reading to children and playing with them can help their brains and bodies develop, there are many ways that parents can help their children learn to express and regulate their emotions. Social and emotional skills are the most important developmental skills that young children learn during their first years of life. Staff in your prevention program can work with children to help them learn about their emotion so that they can talk about and describe what they're feeling. Staff can work with parents in a parenting program on how their response to their child's emotions influences how children learn to understand and cope with feelings of anger, happiness and sadness that are a fundamental part of the human experience.

Social and Emotional Development in Children and Child Abuse and Neglect Prevention

- It is a well known fact that children with challenging behaviors are at greater risk for abuse. Identifying and working with children early to keep their development on track helps keep them safe.
- Helping children develop socially and emotionally impacts the way parents and children interact. As children learn to verbalize their emotions rather than act them out, they are more able to tell parents how they feel, what they need, and how their parents' actions

make them feel. This allows a parent to be more responsive to their children's needs and reduces the probability to yell or hit.

Examples of How to incorporate Social and Emotional Development into CAN Programming:

- Host a parent café style dialogue for parent participants in the program
- In prevention programs for children, staff can incorporate time to teach children social skills, such as sharing and being respectful of others and emotional skills such as expressing feelings.
- Staff can be trained to notice possible signs of problems. When they are concerned about a child, they can respond quickly by asking another teacher or staff member to observe, or talk with the parent.
- Programs can offer an activity such as an art project that allow children to express themselves in ways other than words, many of which include a take-home component that involves parents.

Evidence Based, Evidence Informed, Promising Practice and Emerging Programs and Practices Definitions

The use of evidence-based or evidence-informed practices promotes the efficiency and effectiveness of funding due to the fact there is an increased chance the program will produce its desired result. Research suggests that effective programs often have long-term economic returns that far exceed the initial investment. The OCTF will fund only evidence based, evidence informed, promising practice and emerging programs and practices. ***Evidence-based programs and practices (Well Supported Programs and Practices) Programmatic Characteristics***

- *The program articulates a theory of change which specifies clearly identified outcomes and describes the activities that are related to those outcomes. This is represented through the presence of a detailed logic model or conceptual framework that depicts the assumptions for the inputs and outputs that lead to the short, intermediate and long-term outcomes.*
- *The practice has a book, manual, training or other available writings that specify components of the service and describes how to administer it.*
- *The practice is generally accepted in clinical practice as appropriate for use with children and their parents/caregivers receiving child abuse prevention or family support services.*

Research & Evaluation Characteristics

- *Multiple Site Replication in Usual Practice Settings: At least two rigorous randomized controlled trials (RCT's) or comparable methodology **in different usual care or practice***

settings *have found the practice to be superior to an appropriate comparison practice. The RCTs have been reported in published, peer-reviewed literature.*

- *There is no clinical or empirical evidence or theoretical basis indicating that the practice constitutes a substantial risk of harm to those receiving it, compared to its likely benefits.*
- *The practice has been shown to have a sustained effect at least one year beyond the end of treatment, with no evidence that the effect is lost after this time.*
- *Outcome measures must be reliable and valid, and administered consistently and accurately across all subjects.*
- *If multiple outcome studies have been conducted, the overall weight of the evidence supports the effectiveness of the practice.*
- *The program is committed and is actively working on building stronger evidence through ongoing evaluation and continuous quality improvement activities.*
- *The local program can demonstrate adherence to model fidelity in program implementation.*

If your proposed program is an evidence based program, please complete "Form 1 – Evidence Based Programs".

Evidence-informed programs and practices (Supported Programs and Practices) Programmatic Characteristics

- *The program articulates a theory of change which specifies clearly identified outcomes and describes the activities that are related to those outcomes. This is represented through the presence of a detailed logic model or conceptual framework that depicts the assumptions for the inputs and outputs that lead to the short, intermediate and long-term outcomes.*
- *The practice has a book, manual, training or other available writings that specifies the components of the practice protocol and describes how to administer it.*
- *The practice is generally accepted in clinical practice as appropriate for use with children and their parents/caregivers receiving child abuse prevention or family support services.*

Research & Evaluation Characteristics

- *There is no clinical or empirical evidence or theoretical basis indicating that the practice constitutes a substantial risk of harm to those receiving it, compared to its likely benefits.*

APPLICATION ORGANIZATION AND FORMAT

Your program narrative should not exceed 5 pages in length. Please keep your application as brief and succinct as possible while explaining your program fully.

When answering questions, please write the question, and then your answer.

Number all pages of your grant application.

A completed and signed application must be submitted in order for the application to be considered complete.

Applicants that propose any child abuse and/or neglect prevention programs that are NOT on the SFY 2013 OCTF Program Menu must complete the application supplement.

Attachments included with the Application instructions:

(A) Application
(B) Program Participation Analysis
(C) Application Supplement Forms [Evidence Based Program (C-1), Evidence Informed Programs (C-2), Promising Practice Programs (C-3) and Emerging Programs (C-4)]
(D) Logic Model
(E) Budget Templates [Executive (E-1), Program (E-2) and Vendor Budgets (E-3)]

Application Selection and Awards Process

Applications will be reviewed based on their focus on strengthening families to prevent child abuse and neglect, the need for proposed services and complete and detailed budgets.

The OCTF will make the final funding decision, in accordance with ORC 3109.171. The Board reserves the right to reject any or all applications and to negotiate the award amount, authorized budget items and specific programmatic goals prior to releasing a county allocation.

Requirements for Funded Projects

Grantees are required to acknowledge OCTF as the funding source on printed material related to the funded program.

Grantees are required to complete and submit a Semiannual Program Report no later than January 31, 2014.

Grantees are required to complete and submit the Annual Program and Fiscal Reports to the OCTF no later than August 15, 2015. Pursuant to ORC 3109.171(C) "*If an advisory board fails to submit to the children's trust fund board an annual report not later than the fifteenth day of August following the year for which the report is written, the board, for the following fiscal year, may allocate a reduced amount of funds to the advisory board on a pro-rata daily basis.*"

- *The research supporting the efficacy of the program or practice in producing positive outcomes associated with reducing risk and increasing protective factors associated with the prevention of abuse or neglect meets at least one or more of the following criterion:*
- *At least two rigorous randomized controlled trials (RCTs) (or other comparable methodology) in highly controlled settings (e.g., university laboratory) have found the practice to be superior to an appropriate comparison practice. The RCTs have been reported in published, peer-reviewed literature.*

OR

- *At least two between-group design studies using either a matched comparison or regression discontinuity have found the practice to be equivalent to another practice that would qualify as supported or well-supported; or superior to an appropriate comparison practice.*
- *The practice has been shown to have a sustained effect at least one year beyond the end of treatment, with no evidence that the effect is lost after this time.*
- *Outcome measures must be reliable and valid, and administered consistently and accurately across all subjects.*
- *If multiple outcome studies have been conducted, the overall weight of evidence supports the efficacy of the practice.*
- *The program is committed and is actively working on building stronger evidence through ongoing evaluation and continuous quality improvement activities.*
- *The local program can demonstrate adherence to model fidelity in program implementation.*

If your proposed program is an evidence informed program, please complete "Form 2 – Evidence Informed Programs".

Promising Practices (Promising Programs and Practices) Programmatic Characteristics
- *The program can articulate a theory of change which specifies clearly identified outcomes and describes the activities that are related to those outcomes. This is represented through presence of a program logic model or conceptual framework that depicts the assumptions for the activities that will lead to the desired outcomes.*

- *The program may have a book, manual, other available writings and training materials that specifies the components of the practice protocol and describes how to administer it. The program is able to provide formal or informal support and guidance regarding program model.*
- *The practice is generally accepted in clinical practice as appropriate for use with children and their parents/caregivers receiving child abuse prevention or family support services.*

Research & Evaluation Characteristics
- *There is no clinical or empirical evidence or theoretical basis indicating that the practice constitutes a substantial risk of harm to those receiving it, compared to its likely benefits.*
- *At least one study utilizing some form of control or comparison group (e.g., untreated group, placebo group, matched wait list) has established the practice's efficacy over the placebo, or found it to be comparable to or better than an appropriate comparison practice, in reducing risk and increasing protective factors associated with the prevention of abuse or neglect. The evaluation utilized a quasi-experimental study design, involving the comparison of two or more groups that differ based on their receipt of the program or practice. A formal, independent report has been produced which documents the program's positive outcomes.*
- *The local program is committed to and is actively working on building stronger evidence through ongoing evaluation and continuous quality improvement activities. Programs continually examine long-term outcomes and participate in research that would help solidify the outcome findings.*
- *The local program can demonstrate adherence to model fidelity in program or practice implementation.*

If your proposed program is a promising practice program, please complete "Form 3 – Promising Practice Programs".

Emerging Programs and Practices Programmatic Characteristics
- *The program can articulate a theory of change which specifies clearly identified outcomes and describes the activities that are related to those outcomes. This may be represented through a program logic model or conceptual framework that depicts the assumptions for the activities that will lead to the desired outcomes.*
- *The program may have a book, manual, other available writings, training materials OR may be working on documents that specifies the components of the practice protocol and describes how to administer it.*
- *The practice is generally accepted in clinical practice as appropriate for use with children and their parents/caregivers receiving child abuse prevention or family support services.*

Research & Evaluation Characteristics
- *There is no clinical or empirical evidence or theoretical basis indicating that the practice constitutes a substantial risk of harm to those receiving it, compared to its likely benefits.*

- *Programs and practices may have been evaluated using less rigorous evaluation designs that have no comparison group. This includes using "pre-post" designs that examine change in individuals from before the program or practice was implemented to afterward, without comparing to an "untreated" group. OR – an evaluation may be in process with the results not yet available.*
- *The program is committed to and is actively working on building stronger evidence through ongoing evaluation and continuous quality improvement activities. For additional information on evaluation and developing logic models, visit the FRIENDS Evaluation Toolkit and Logic Model Builder at : http://www.friendsnrc.org/outcome/toolkit/index.htm* 1.

Practices are defined as skills, techniques, and strategies that can be used by a practitioner. Please note that general strategies such as a "therapy" or "parenting classes" would *not* qualify as an EBP/EIP practice alone. The practice would need to implement a specific technique or curriculum with the positive evidence. **If your proposed program is an emerging program, please complete "Form 4 – Emerging Programs".**

1 These definitions come from the FRIENDS National Resource Center for CBCAP Evidence-Based & Evidence-Informed Programs Matrix Appendix A: Characteristics of Well-Supported, Supported, Promising and Emerging/Evidence Informed Programs.

Logic Model and Protective Factors

Applicants must create a logic model outlining their strategy, protective factor, outcome and how success will be measured. This logic model should include all of your proposed programs. *A template and sample logic model is included with this application (Attachment D).

Logic Model definitions: **Long Term Outcome:** *A county focused, broad statement of well-being* **Intermediate Outcome:** *A participant focused, broad statement of well-being* **Program Strategies (include activities, training, and curricula that specifically and intentionally relate to protective factors):** *What strategies will you use to connect the protective factors and your program?* *Please note that your program **DOES NOT** need a strategy to connect to each protective factor. **Outcomes:** *What one or two changes do you believe will occur in the lives of your program's participants as a result of your services? Outcome statements are written by determining who will do what. Please be certain to quantify your outcomes.* **Measurement Tools:** *What form of measurement will you use to measure your indicators? (Will you use a scale, survey, checklist, questionnaire, or other measurement tool?)*

<center>**Budget**</center>

Applicants must submit a completed Executive Budget Summary, FCFC Program Budget (if applicable) and Vendor Program Budget(s). Please use the budget forms found in attachment E and refer to the sample Vendor Program Budget as well as the sample Executive Budget Summary. Executive Budget Summary (Attachment E-1) - this budget form must be completed

by the FCFC. The categories on this form represent the combined explanations and total amounts requested from each of the categories on your FCFC budget as well as your Vendor Program Budgets for any vendors you are contracting with to provide services and finally your program budget for any direct services that you provide. (Executive Budget Summary = Vendor Program Budgets + FCFC Program Budget) FCFC Program Budget (Attachment E-2) - if your FCFC provides any direct services (i.e. services that are not provided through a vendor), you will need to complete and submit this budget form. Vendor Program Budget (Attachment E-3) - if your FCFC contracted with any vendors to provide services, you will need to complete and submit this budget form for each vendor with whom you contracted.

Allowable and Unallowable Expenditures:

All proposed expenditures must *directly* relate to the service of conducting primary and/or secondary prevention strategies within the community. For definitions of what are allowable and unallowable expenditures, please visit the OCTF website (www.jfs.ohio.gov/octf). **Protective Factors Survey** OCTF grantees using the following types of funded programs must administer the Protective Factors Survey (PFS) and submit survey results to the Trust Fund in their semiannual and annual program reports:

Programs providing a direct service to parents and/or primary caregivers are required to administer the full PFS. A copy of this survey, along with additional background and implementation information is available on the OCTF website (www.jfs.ohio.gov/octf).

All programs, except those that are school-based, are required to collect demographic information by having participants complete the first two pages of the PFS.

For additional information on the PFS (purpose, use and description), please visit the OCTF website (www.jfs.ohio.gov/octf).

General Guidelines:

1. Proposed strategy must align with county priority and measure the identified short term indicators.
2. Printed by computer or typewriter. No handwritten proposals will be accepted.
3. Budget figures are to be in whole dollars only (no cents).
4. One original plus three (3) copies of the completed proposal must be submitted along with an electronic copy emailed to: fcfc@wmsco.org or submitted on disk. No staples please.
5. The cover page of the proposal must be signed by an individual who is authorized to contractually bind the proposer's organization.
6. Completed proposals must be received no later than **4:00 p.m. on January 31, 2014 to: Williams County Family & Children First Council, One Courthouse Square, 4th Floor, Bryan, OH 43506**. Faxed proposals will not be accepted.

Limitations.

    a. This RFP does not commit the Council to award an agreement or pay any costs incurred in the preparation of a proposal.

    b. Trust Fund monies are dedicated to primary and secondary child abuse and neglect prevention.

    c. Trust Fund dollars shall not be used to supplant existing funding or for programs that target individuals or families with open cases with the public children services agency or its contracted case management providers.

    d. Funding is only committed for a one year funding cycle. Trust Fund monies awarded must be used for services provided by July 1, 2012 through June 30, 2013.

    e. Trust fund dollars distributed that are not encumbered or expended by the service provider within the period specified shall be returned to the County Treasurer who will return the funds to the Treasurer of State for deposit in the Ohio Children's Trust Fund.

    f. Proposed services shall be provided by the contracted agency and no part shall be sub-contracted to a third party.

Proposal Review.

All proposals meeting the requirements of the RFP will be evaluated and rated by the Review Committee. The Review Committee will include Council staff and Council members or their designees. The Review Committee will not include employees of proposing agencies. Each proposal will be reviewed with the scoring guidelines listed in Attachment B. County recommendations for funding will be awarded by April 30, 2014. All funding decisions of the Council will be final. Receipt of funding by the Williams County Family & Children First Council will be subject to approval of the local county allocation plan by the Ohio Children's Trust Fund.

WILLIAMS COUNTY FAMILY & CHILDREN FIRST
Ohio Children's Trust Fund Request for Proposals

PROPOSAL COVER PAGE

Applicant Organization (Funds sent here):

Address:

Agency Type: (Check One)
Government_____   For-Profit_____   Not-for-Profit [501(c)(3)]_____

Employer Identification Number (EIN):

Partnering Organization (if applicable):

Address:

Name of individual authorized to contractually bind the proposer's organization:

Telephone:
Fax:
Email:
Name of Program/Service Supervisor:

Address (if different):
Telephone:
Fax:
Email:

Amount Requested: $ **Project Number to Be Served:**

We certify to the best of our knowledge that data in this application is correct and this document has been duly authorized by the Executive Management of the Applicant. We further certify that if this application is approved, that said program/service will be carried out in accordance with the contractual requirements presented by the Williams County Family & Children First Council and the Williams County Health Department.

Signature_____   Signature_____
      Individual authorized to contractually   Program/Service Director
        Bind the organization

Date:_____   Date_____