
BOARD USER GUIDE

GETTING STARTED WITH GRANTS AND FUNDING MANAGEMENT SYSTEM (GFMS)



USER GUIDE

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Overview

The Grants and Funding Management System (GFMS) will be utilized by the Ohio Department of Mental Health and Addiction Services (OhioMHAS), ADAMHS/ADAS/CMHS Boards and all Prevention, Treatment and Recovery Support Providers for all OhioMHAS funds (federal and state) to support proposal, submission, management, and all required (federal and state) data collection. The system provides a mean for an organization to apply for funding, report progress on identified outcomes, report expenditures, and to draw-down funds into request reimbursement for the services. This guide describes how to utilize the functionality of the Grant and Funding Management System for all the users.

Who is this document for?

This document is intended for the **Board User** which provides their view and functionality of Grant and Funding Management System (GFMS).

Regarding page permissions and access roles, a section is added called “Page Permissions and Access Roles” for each page which lists what permission each role has.

User Registration

External User Registration

Get Started as a New External User (First Time Accessing OhioMHAS Application)

This section will be applicable to the “**New**” External users only. For GFMS, External User “**Roles**” are Applicant, Applicant after awarded, Board Manager and External Reviewer. External User Registration process consists of following steps:

Step 1: Navigate to GFMS link

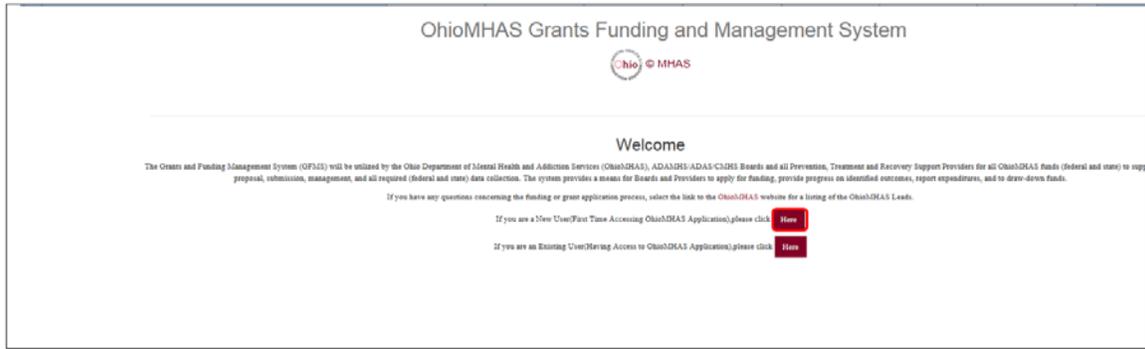
- I. Open your browser and Go to <https://apps.mha.ohio.gov/GFMSWelcome/Welcome.html> >>Welcome Page will be displayed.

Step 2: “Welcome Screen”- Link to Register

- I. This is the landing page where an external user navigates from www.mha.ohio.gov under the funding opportunities to page.
- II. When the user navigates to the “**Welcome**” screen, they will be provided two options Register (New User “Has never logged into an OhioMHAS Applications before”) or Login (Existing User “Has logged into previous OhioMHAS Applications before” –OLGA and POPS) for GFMS.

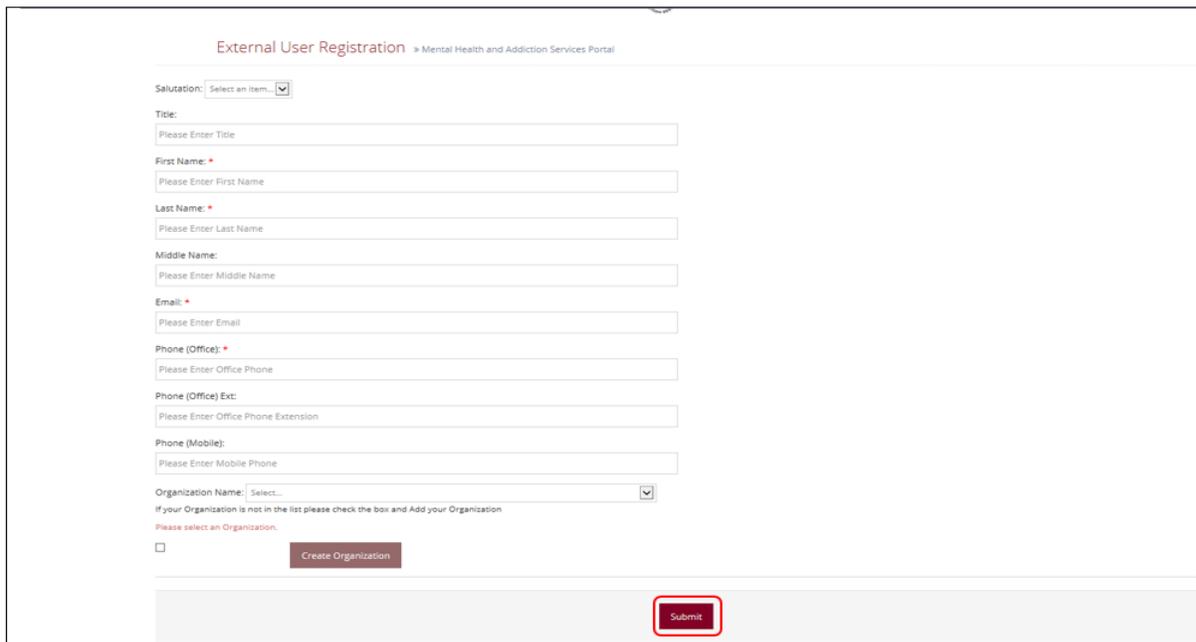
***Note: All user accounts have been brought over from other applications. No need to register for the application.**

- III. For Registration, **Click** on Here button for a “**New User**”, displayed on the “**Welcome**” Screen as highlighted below in the snapshot:



Step 3: “External User Registration”- Find New Organization

- I. **Select** and **Enter** the information as indicated per each field as displayed on the “External User Registration” screen.
- II. Fields with red asterisks * are required fields.
- III. If you find your organization under the “Organization Name” dropdown, **select** your organization and **click** on the **Submit** button as highlighted below in the snapshot (Continue to Step 5). At this point, **Create Organization** button is grayed out.



Step 3a: “External User Registration”- Create Your Organization

- I. If you don’t find your organization name under “Organization Name” dropdown, **select** the checkbox next to the **Create Organization** button.
- II. **Select** the **Create Organization** button.

MHAS IPortal
Ohio MHAS

External User Registration » Mental Health and Addiction Services Portal

Salutation:

Title:

First Name: *

Last Name: *

Middle Name:

Email: *

Phone (Office): *

Phone (Office) Ext:

Phone (Mobile):

Organization Name:

If your Organization is not in the list please check the box and Add your Organization
Please select an Organization.

Create Organization

Step 3b: Enter Organization Information on “Create New Organization” Screen:

- I. **Select** and **Enter** the information as indicated per each field displayed on the “Create New Organization” screen.
- II. Fields with red asterisks * are required fields.
- III. **Click** on Submit button.

Create new organization » Mental Health and Addiction Services Portal

Enter the following information

Name* Legal Name*

Organization Type* FTD

Is Domestic Violence Shelter? Comments

Organization Status* Organization's Fax

Organization's phone*

Enter the Address

Address Line1 Address Line2

City County

Zip Code

Define Optional Addresses

Enter the Mailing Address

Address Line1 Address Line2

City County

State Zip Code

Enter the Billing Address

Address Line1 Address Line2

City County

State Zip Code

Submit



The organization information entered on this page will be used to prepopulate the “Organization Information” Page under Application Tab in GFMS. In order to update the information on this page the GFMS Application Admin or I-Portal Admin will need to make the update via the I Portal registration screen.

Step 4: Navigated back to “External User Registration” Screen

- I. Now user can **view** added organization name under the “Organization Name” dropdown on the “External User Registration” screen.
- II. **Select** your organization name from the “Organization Name” dropdown.
- III. **Click** on Submit button

MHAS IPortal
Ohio © MHAS

External User Registration » Mental Health and Addiction Services Portal

Salutation: Mrs. [v]

Title:
Please Enter Title

First Name: *
Neelima

Last Name: *
Kathy

Middle Name:
Singh

Email: *
neelimakathy19@gmail.com

Phone (Office): *
(514) 466-8611

Phone (Office) Ext.:
Please Enter Office Phone Extension

Phone (Mobile):
Please Enter Mobile Phone

Organization Name: Access Hospital Dayton, LLC [v]

if your Organization is not in the list please check the box and Add your Organization

Create Organization

Submit

Step 5: “Successfully Registered” Screen.

- I. Clicking on the Submit button displayed on “External User Registration” screen, navigates you to “Successfully Registered” screen where you can view a message “Successfully Completed Registration” and inform you that you will be receiving a Welcome email from OhioMHAS, providing a link to create your password as highlighted below in the snapshot:

MHAS IPortal
Ohio © MHAS

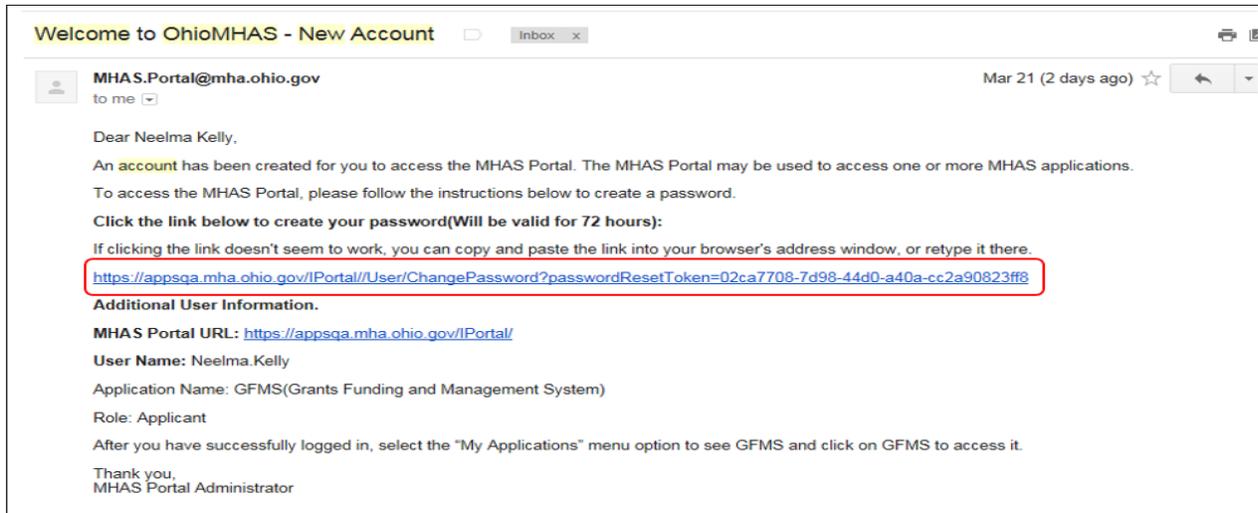
Successfully Registered » Mental Health and Addiction Services IPortal

Successfully Completed Registration

Your request is submitted. You should've receive a Welcome email from OhioMHAS with a link to set your password and additional user information. The link will be valid for 72 hours.

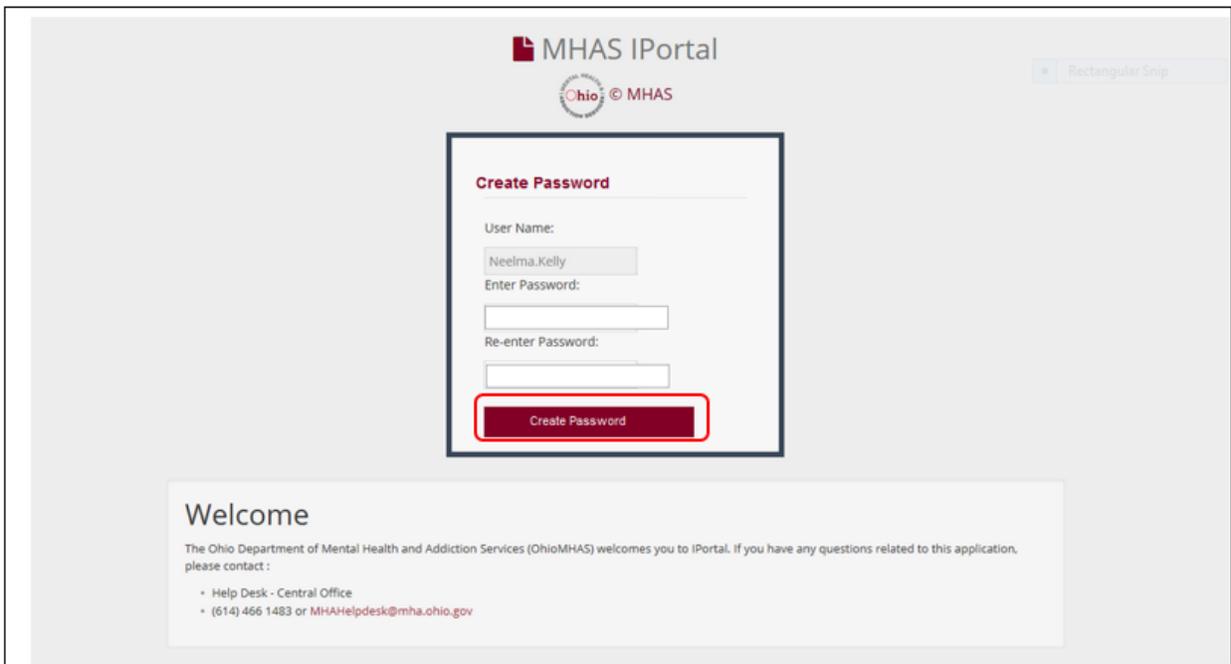
Step 6: Welcome to OhioMHAS New Account Email Notification- Navigate to Create a Password.

- I. External User will be receiving a Welcome email notification from IPortal Administrator that account has been created to access IPortal. A link will be provided in the email to create a password. There would be another link for login to IPortal.
- II. To Create a Password, **Click** on the link highlighted below in the snapshot:



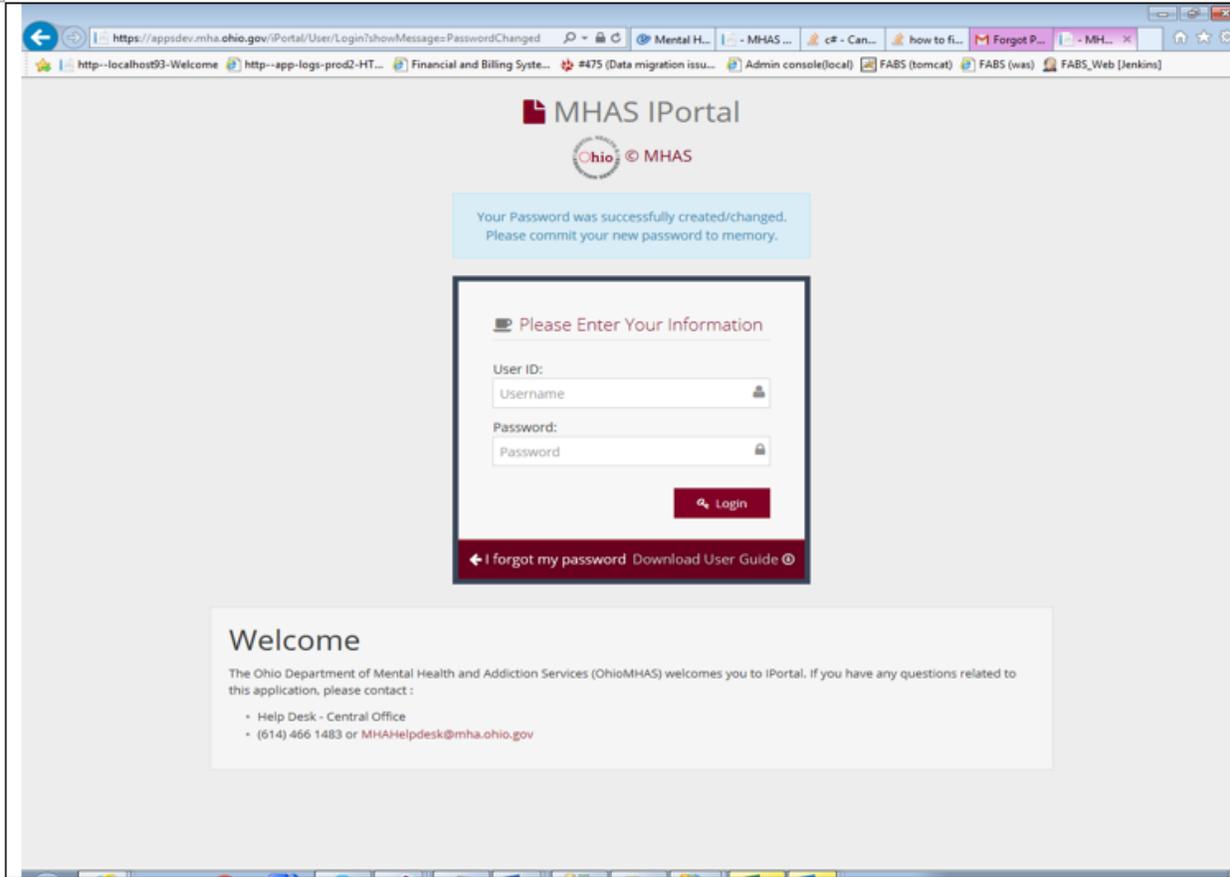
Step 7: Create Your Password

- i. **Enter** your password on the basis of following defined Standard Password Requirements:
 - Password must be 8-20 characters long.
 - Password must contain at least one character from each of the following categories:
 - English letter (Aa-Zz)
 - Digits (0-9)
 - Special symbols (!#\$%_).
- ii. **Click** on Create Password button. (Continue to Step 8)



- iii. An information message "Your password is successfully created" will be displayed and providing user an option to login to the application

IV. Enter your login credentials and click on Login button to move forward in the application.



Existing External User (Having Access to OhioMHAS Application)

This section will be applicable to the “Existing” External users only.

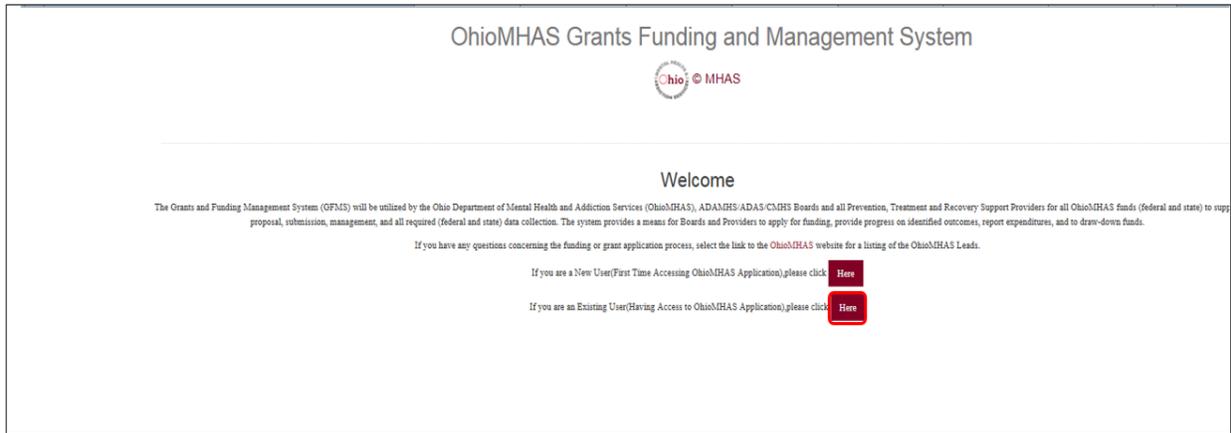
Step 1: Navigate to GFMS link

- I. Open your browser and Go to <https://apps.mha.ohio.gov/GFMSWelcome/Welcome.html> >>Welcome Page will be displayed.

Step 2: “Welcome Screen”- Link to Login

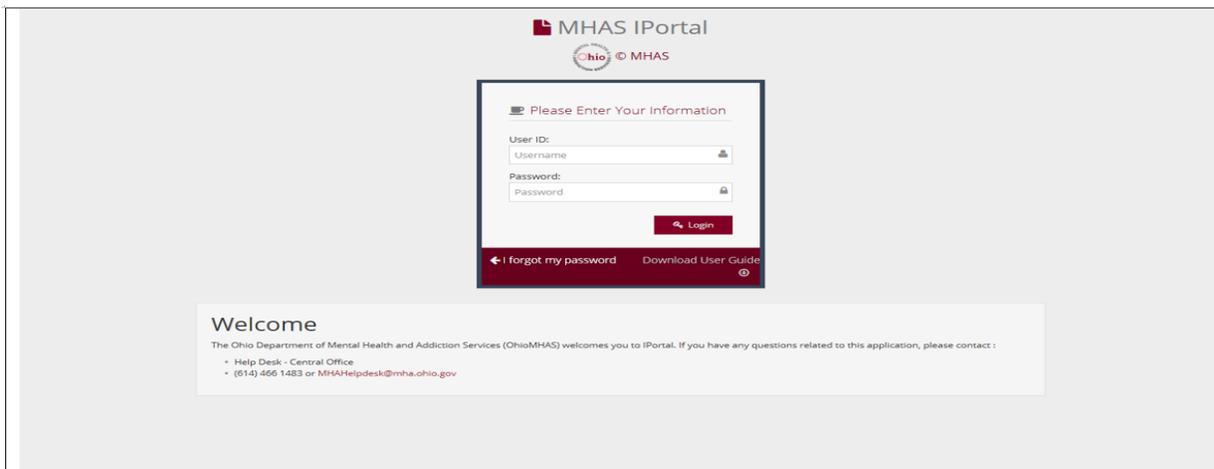
- I. This is the landing page where an external user navigates from www.mha.ohio.gov under the funding opportunities to page.
- II. When the user navigates to the “Welcome” screen, they will be provided two options Register (New User “Has never logged into an OhioMHAS Applications before”) or Login (Existing User “Has logged into previous OhioMHAS Applications before” –OLGA and POPS) for GFMS
- III. For Login, **Click on Here** button for a “Existing User” (Has logged into previous OhioMHAS Applications before-OLGA and POPS), displayed on the “Welcome” Screen as highlighted below in the snapshot:

***Note: All user accounts have been brought over from other applications. No need to register for the application.**



Step 3: IPortal Login Screen:

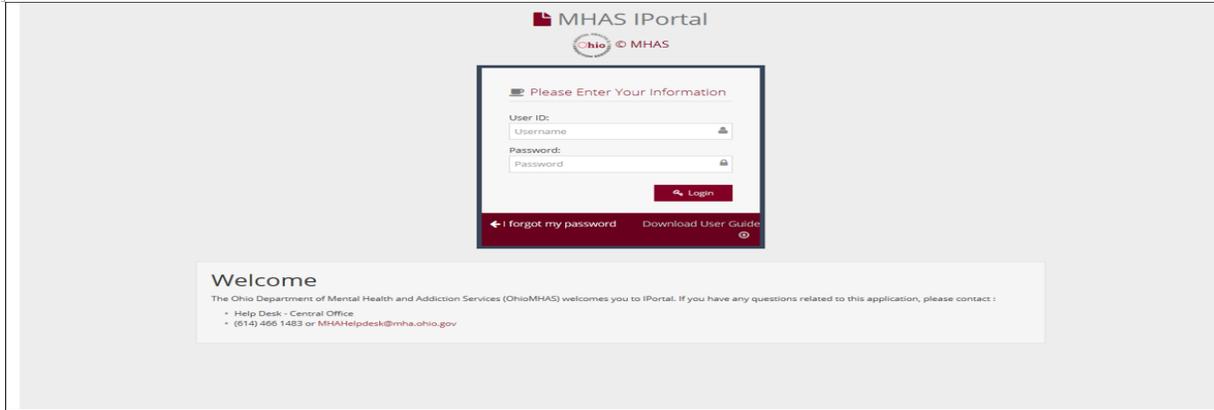
- I. Enter your login credentials and click on Login button, the user will be navigating to the I-Portal Dashboard.



External User- Forgot Password

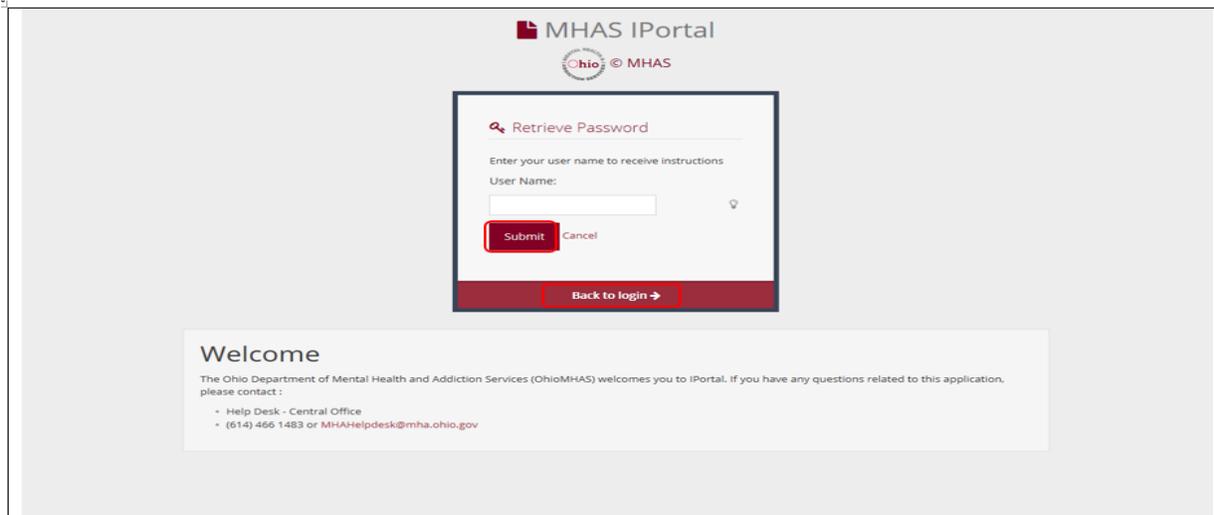
Step 1: From IPortal Login Screen- Click Forgot Password Link

- I. Click on the link "I forgot my password" as displayed on the following snapshot:

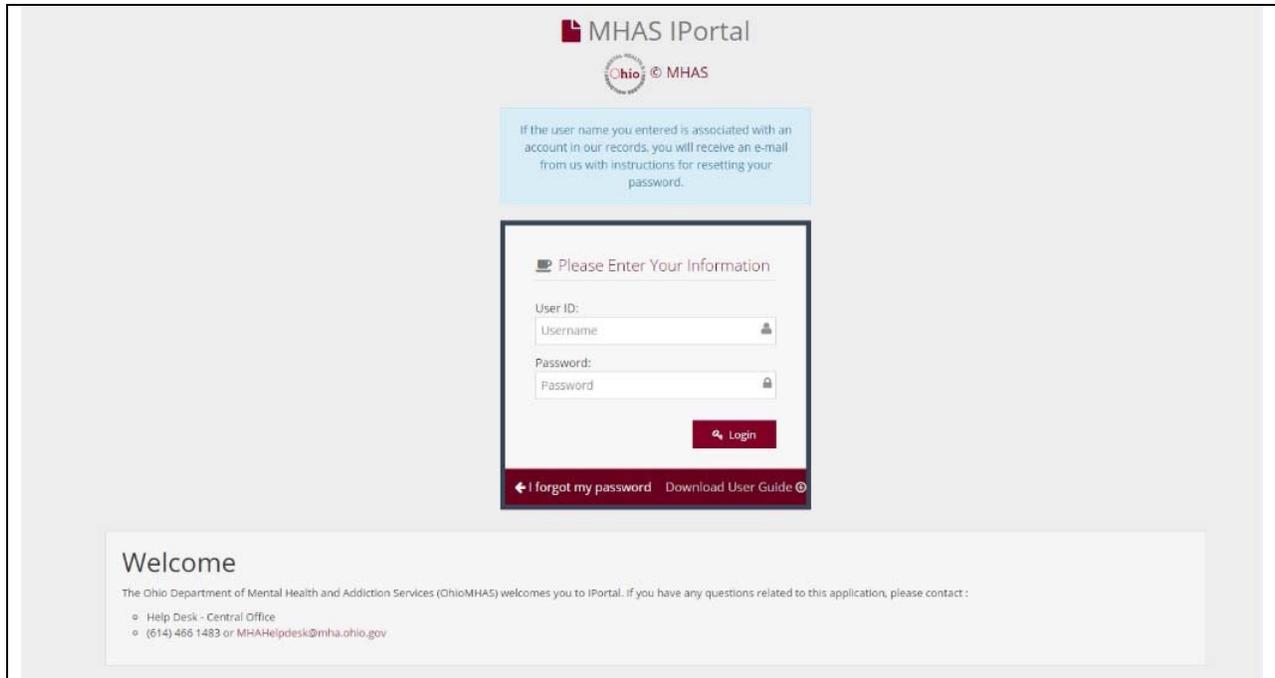


Step 2: Enter User Name on Retrieve Password Screen:

- I. **Enter** your user name and **click** on **Submit** button as highlighted below in the snapshot below
- II. If you change your mind and want to go back to I-Portal Login screen, **click** on “Back to Login” link displayed on “Retrieve Password” screen.

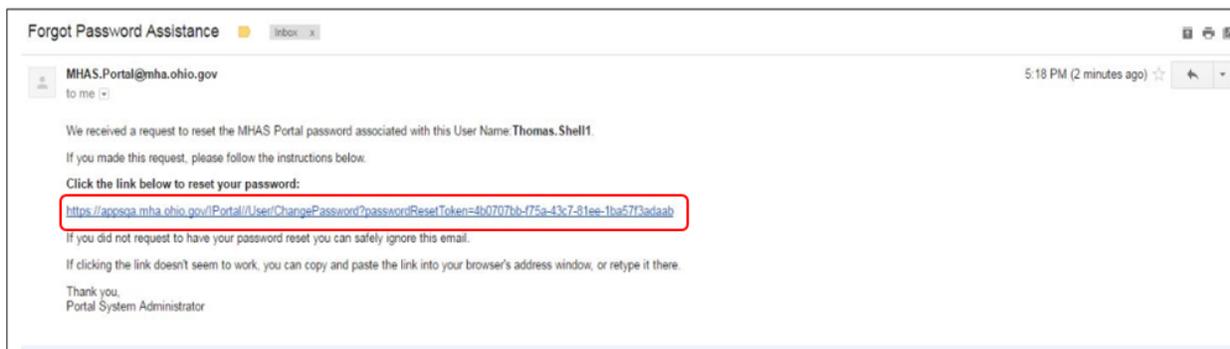


III An information message “If the user name you entered is associated with an account in our records, you will receive an email from us with instructions to resetting your password” will be displayed on the IPortal Login Screen.



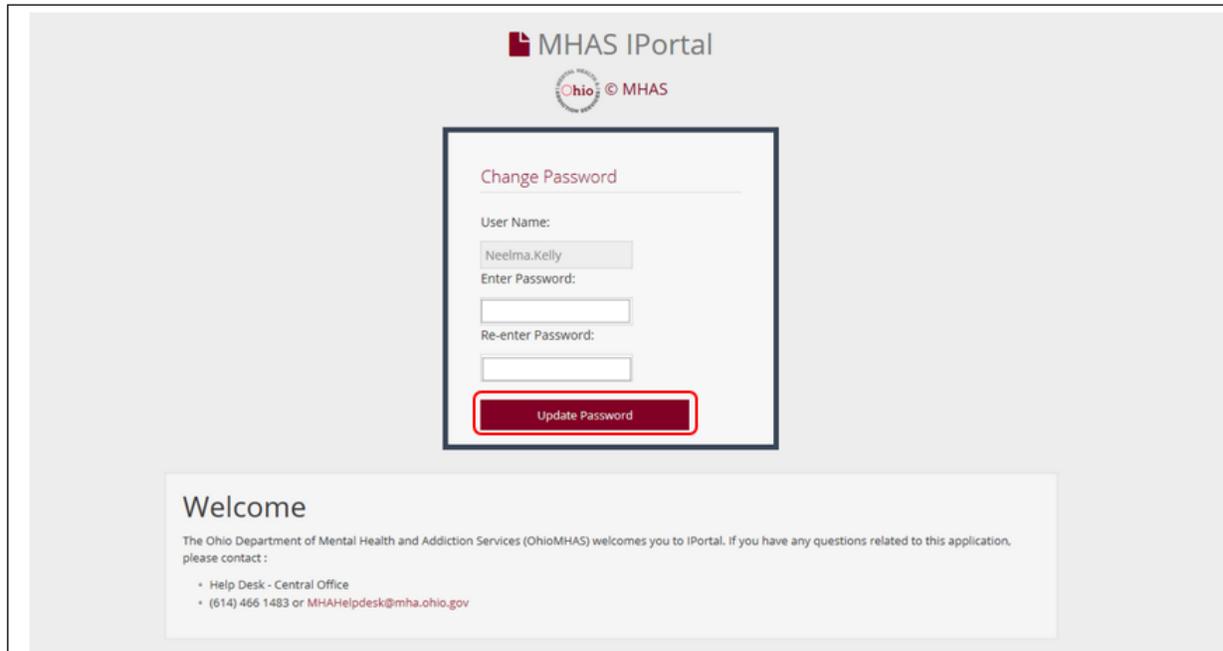
Step 3: Forgot Password Assistance Email Notification- Click on Rest Password Link

- I. You will be receiving a “Forgot Password Email Notification” from IPortal Administrator, providing a link to reset a password.
- II. **Click** on the link to reset your password as highlighted below in the snapshot:



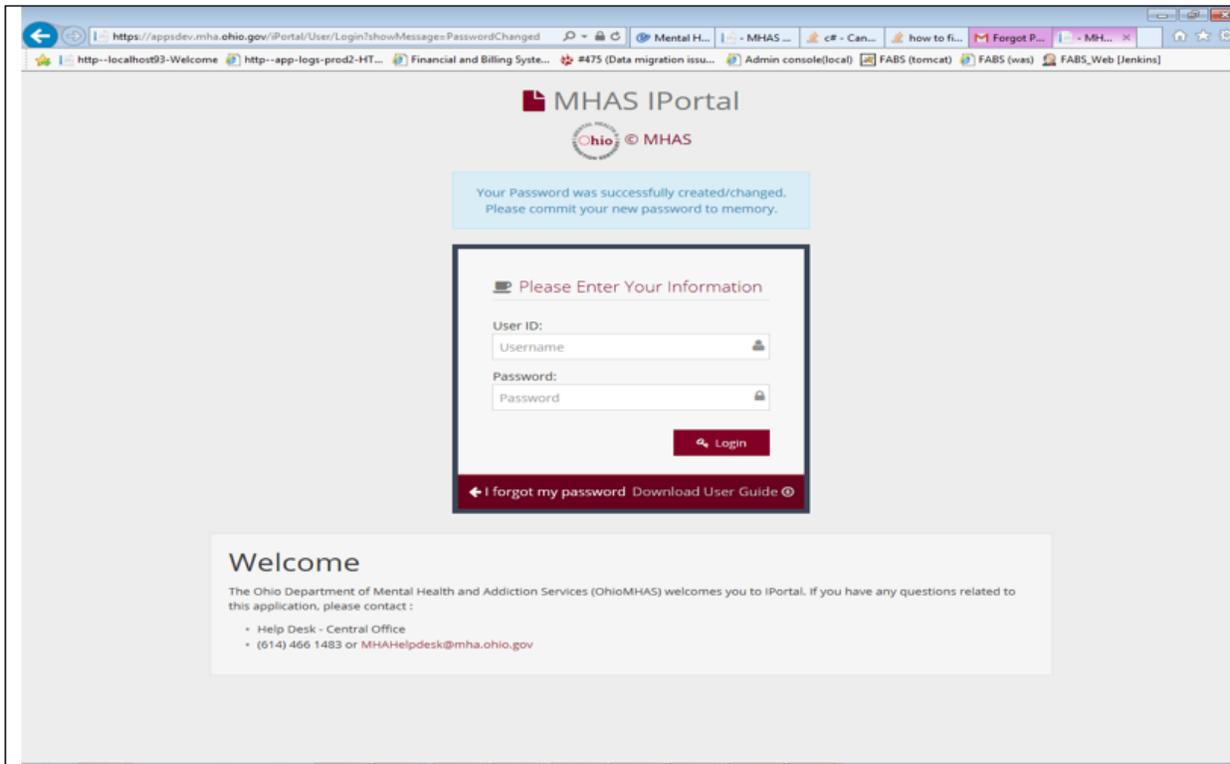
Step 4: Change Password

- iii. **Change** your password on the basis of following defined Standard Password Requirements:
 - Password must be 8-20 characters long.
 - Password must contain at least one character from each of the following categories:
 - English letter (Aa-Zz)
 - Digits (0-9)
 - Special symbols (!#\$%_).
- iv. **Click** on Update Password button. (Continue to Step 8)



Step 5: Login With Your Updated Password:

- I. An information message “Your password is successfully updated” will be displayed and providing the user an option to login.
- II. Enter your login credentials and click on Login button to move forward in the IPortal.

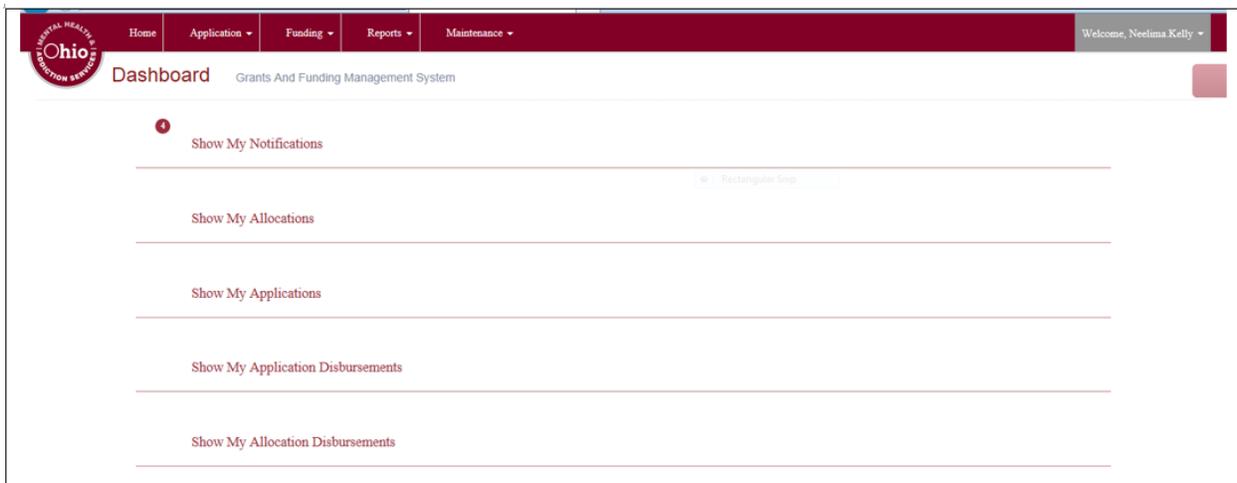


External User Navigations From GFMS Dashboard

Board Dashboard View and Navigations

The board dashboard consists of following navigation paths:

1. OhioMHAS Logo
2. Home Tab
3. Application Tab
4. Funding Tab
5. Maintenance Tab
6. Report Tab
7. Show My Notifications
8. Show My Allocations
9. Show My Applications
10. Show My Application Disbursements
11. Show My Allocation Disbursements.
12. My Account Information/ User Management/Logout
13. Gear Icon



OhioMHAS Logo

Clicking "OhioMHAS Logo" will navigate the user to the GFMS dashboard.

Home Tab

Clicking "Home" Tab will return the user to the GFMS dashboard.

Application Tab

The applications tab provide boards the ability to create a new grant application, create new allocation application and search grant applications as displayed in the snapshot below:

- **New Grant Application** – Click this link to start a new grant application.
- **New Allocation Application** – Click this link to start a new allocation application.
- **Search Grant Applications**- Click this link to search grant applications.



Funding Tab

The Funding tab provides boards the ability to manage following funding options:

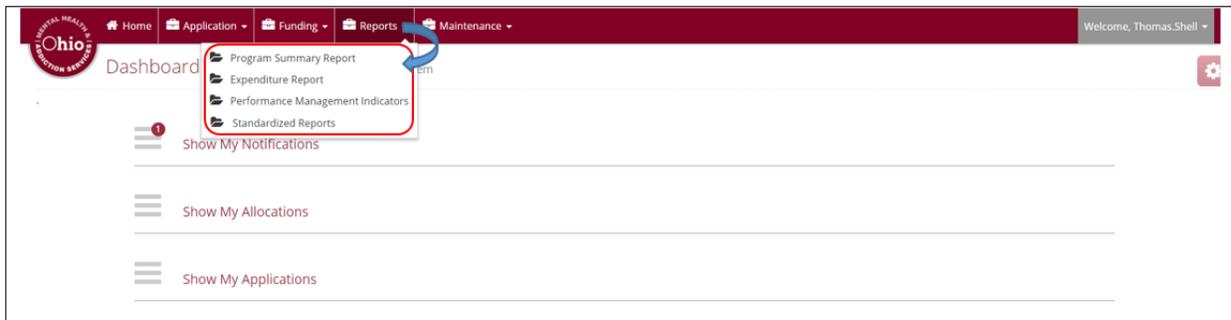
- **Board Local Funding Sources** – Click this link to manage board local funding sources.
- **Board Provider Funding** – Click this link to manage board provider funding.
- **Disbursement Request** – Click this link to manage disbursement request.



Reports Tab

The Reports tab provides users the ability to manage following reports options:

- **Program Summary Report** – Click this link to manage program summary report.
- **Expenditure Report** – Click this link to manage expenditure report
- **Performance Management Indicators** – Click this link to manage performance manage indicator.
- **Standardized Reports** – Click this link to manage standardized reports.



Maintenance Tab

The Maintenance tab provides boards the ability to manage data values and various controls that manifest on the grant application or other areas of the system.

- **Email Notifications** – Click this link to set email notification preferences.
- **Project Model** – Click this link to manage project model.



Show My Notifications

- I. **Click** on this link, the 'Show My Notifications' section will be displayed. The notification option provide user the ability to view notifications received as displayed below in the snapshot:





1. Notifications displayed on this page are **created** in the **IPortal** Application. The roles permitted to create notifications are I-Portal Admin, Application Admin, Project Lead and Fiscal Lead.

Show My Applications

- I. **Click** on this link, the 'Show My Applications' section will be displayed.
- II. **Select** dropdown fields and **click** on Load Application button. You will then see applications captured in the table. An application will be editable or viewable depending upon its status.

Details	Fiscal Year	Grant Number	Provider Name	County	Project Area	Requested Amount	Awarded Amount	Distributed Amount	Status
<input checked="" type="checkbox"/> Edit	2016	1600005	Africentric Personal Development Shop	Franklin	RTTT	1250	0		Draft

Show My Allocations

- I. **Click** on this link, the 'Show My Allocation' section will be displayed.
- II. **Select** dropdown fields and **click** on Load Allocations button. You will then see applications captured in the table. An allocation will be editable or viewable depending upon its status.

Details	Organization	Address	Allocated Amount	Status
<input checked="" type="checkbox"/> Edit	Wood County FCFC	PO Box 679	1000	Validation Draft
<input checked="" type="checkbox"/> View	Wood County FCFC	PO Box 679	500	Validation Required

Show My Application Disbursements:

- I. **Click** on this link, the 'Show My Application Disbursements' section will be displayed.
- II. **Select** dropdown fields and **click** on Load Disbursements button. You will then see disbursement captured in the table. The application will be viewable.

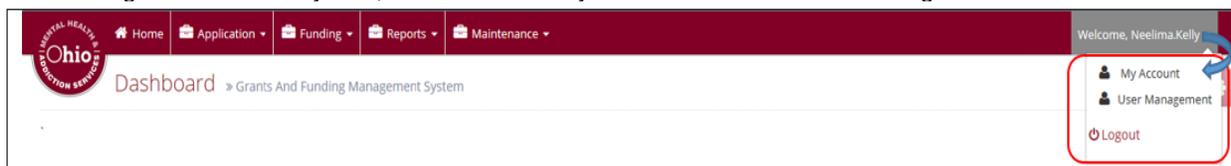
Show My Allocation Disbursements:

- I. **Click** on this link, the ‘Show My Allocation Disbursements’ section will be displayed.
- II. **Select** dropdown fields and **click** on Load Disbursements button. You will then see disbursement captured in the table. The application will be viewable.

My Account Information/Logout

Clicking “Welcome, User Name” provides following option for the user:

- My Account- Clicking this link provides user the ability to manage account information.
- User Management – Clicking this link, navigate user to the I-Portal Dashboard.
- Logout: To exit the system, select the arrow by the user name and click the 'logout' link



Gear Icon

Clicking this icon provides a window dropdown of useful links for the user. Clicking the gear icon again closes the window.

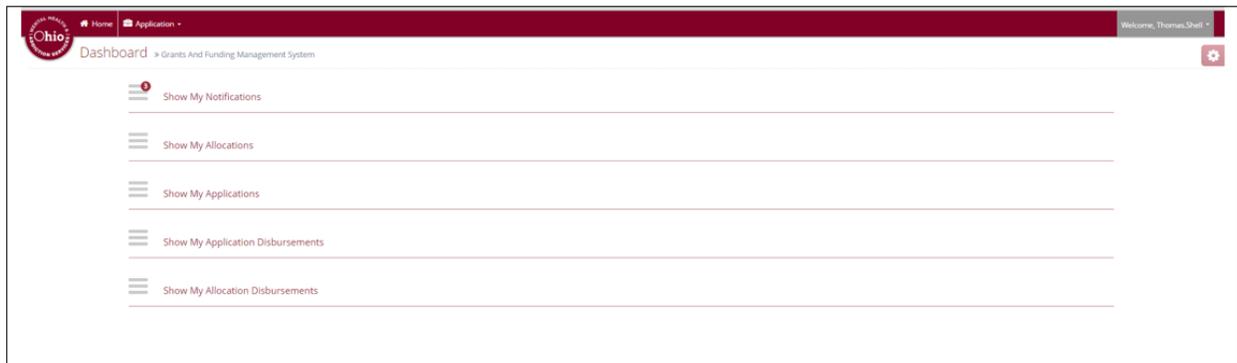
- **Ohio.gov** – Clicking on this link, navigate you to ohio.gov (Ohio government) information website.
- **Documentary Library**- Clicking on this link, navigate you to mha.ohio.gov website.
- **User Guide** – Clicking on this link, navigate you to GFMS User Guide (Not Available)
- **Contacts**- Clicking on this link, navigate you to OhioMHAS Lead (Project Lead) contact list.



External Reviewer Dashboard View and Navigations

The dashboard consist of following navigation paths:

1. OhioMHAS Logo
2. Home Tab
3. Application Tab
4. Show My Notifications
5. My Account Information/ User Management/Logout
6. Gear Icon



OhioMHAS Logo

Clicking "Ohio Logo" will navigate the user to the GFMS dashboard.

Home Tab

Clicking "Home" Tab will return the user to the GFMS dashboard.

Application Tab

The applications tab provide external reviewer the ability to search a grant application. To search an application, Click on "Search Grant Applications" option under tab. as displayed in the snapshot below:



Show My Notifications

- I. **Click** on this link, the ‘Show My Notifications’ section will be displayed. The notification option provide user the ability to view notifications received as displayed below in the snapshot:

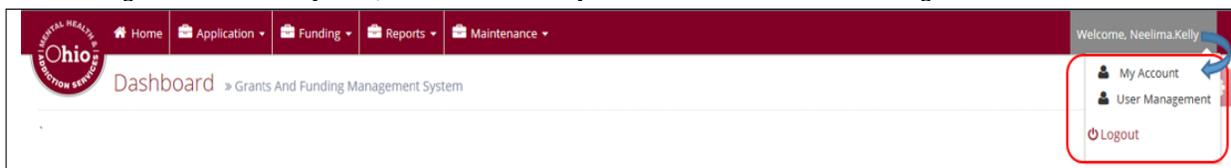


1. Notifications displayed on this page are **created** in the **IPortal** Application. The roles permitted to create notifications are I-Portal Admin, Application Admin, Project Lead and Fiscal Lead.

My Account Information/Logout

Clicking “Welcome, User Name” provides following option for the user:

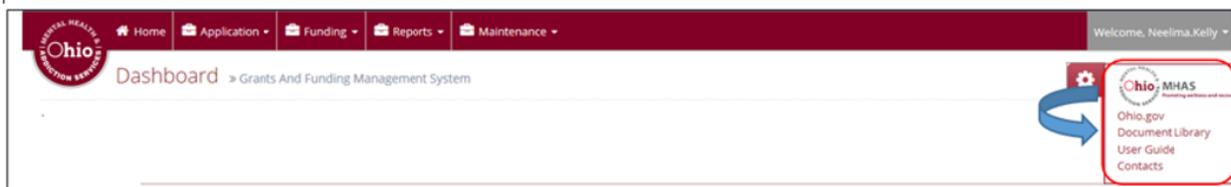
- My Account- Clicking this link provide user the ability to manage account information.
- User Management – Clicking this link, navigate user to the I-Portal Dashboard.
- Logout: To exit the system, select the arrow by the user name and click the ‘logout’ link



Gear Icon

Clicking this icon provides a window dropdown of useful links for the user. Clicking the gear icon again closes the window.

- **Ohio.gov** – Clicking on this link, navigate you to ohio.gov (Ohio government) information website.
- **Documentary Library**- Clicking on this link, navigate you to mha.ohio.gov website.
- **User Guide** – Clicking on this link, navigate you to GFMS User Guide (Not Available)
- **Contacts**- Clicking on this link, navigate you to OhioMHAS Lead (Project Lead) contact list.



Application Tab

This section covers the use of features related to New Grant Application, New Allocation Application and Search Grant Applications.

***Note:** When the Applicant creates an application, they will have the limited permission of the column titled Applicant. Once the application has been awarded, the system will automatically elevate the permissions to include those under the Applicant After awarded column. When the Applicant creates a new application they again have limited permissions until that application has been awarded. However, their previous year's application will continue to have the elevated permissions due to reporting requirements.

New Grant Application

An Applicant is provisioned to access the MHAS Grant and Funding Management System to start (create) an application for a grant. An Applicant logs into the I Portal and has the option to select GFMS to apply for a grant. Under the “Application” tab, **selects** the “New Grant Application” option as displayed in the snapshot below:



Face Sheet

You are on the first page, “Face Sheet” of the grant application. This page provides the initial information for the grant application.

The Face Sheet provides the initial information for the grant application.

1. **Enter** the information as indicated per each field.
2. Fields with red asterisks * are required fields.
3. Some fields are grayed out and the system will pull in information from other areas. These fields are read only and cannot be edited.
4. After all of the required information has been added, **select** the Next button (Data saved successfully) to be taken to the next screen.

The screenshot shows the 'Face Sheet' form in the 'Grants and Funding Management System'. The form is organized into several sections:

- Organization Information:** Organization (dropdown), Organization Address (dropdown), Who are you applying to for this grant? (dropdown), Service Type (dropdown), Project Area (dropdown).
- Application Details:** Application Number (text), State Fiscal Year (text, value: 2016), Requested Amount (text, value: \$ 0).
- Provider Information:** How many years has the service provider been in Existence? (dropdown), Program Title (text).
- Contact Information:** Primary Program Contact (First Name, Last Name, Phone Number, Email Address), Secondary Program Contact (First Name, Last Name, Phone Number, Email Address).
- Fiscal Officer Information:** Should the Secondary Program Contact receive emails about this grant? (dropdown), Fiscal Officer (First Name, Last Name, Email, Telephone Number).
- OhioMHS Lead Information:** OhioMHS Lead (First Name, Last Name, Email Address).

A 'Next' button is located at the bottom right of the form.



1. Organizations needs to be added to the applicant role in IPortal, to view under the organization dropdown on face sheet.

When an Applicant (Provider) selects Board for "Who are you applying for this grant" field. The following fields will be disappeared from the face sheet:

- *Project Area dropdown*
- *OhioMHAS Lead First Name*
- *OhioMHAS Lead Last Name*
- *OhioMHAS Lead Email Address*

OHIO MENTAL HEALTH & ADDICTION SERVICES
Home Application Funding Reports Maintenance
Welcome, Neelima Kelly

GFMS

APPLICATION

Face Sheet

Face Sheet Grants And Funding Management System

Organization: *	<input type="text" value="A Better Way Counseling and Mediation"/>
Organization Address: *	<input type="text" value="1042 Emma Avenue"/>
Who are you applying to for this grant: *	<input type="text" value="Columbiana County Mental Health"/>
Service Type: *	<input type="text" value="Treatment & Recovery"/>
Application Number:	<input type="text"/>
State Fiscal Year: *	<input type="text" value="2016"/>
Requested Amount: *	<input type="text" value="\$ 100000"/>
How many years has the service provider been in Existence? *	<input type="text" value="5-10 years"/>
Program Title: *	<input type="text" value="Mental Recovery Services"/> <small>51 characters remaining</small>
Primary Program Contact First Name: *	<input type="text" value="Neelima"/>
Primary Program Contact Last Name: *	<input type="text" value="Kelly"/>
Primary Program Contact Phone Number: *	<input type="text" value="(614) 852-7412"/>
Primary Program Contact Email Address: *	<input type="text" value="nk@gmail.com"/>
Secondary Program Contact First Name:	<input type="text"/>
Secondary Program Contact Last Name:	<input type="text"/>
Secondary Program Contact Phone Number:	<input type="text"/>
Secondary Program Contact Email Address:	<input type="text"/>
Should the Secondary Program Contact receive emails about this grant?:	<input type="text" value="Select"/>
Fiscal Officer First Name: *	<input type="text"/>
Fiscal Officer Last Name: *	<input type="text"/>
Fiscal Officer Email: *	<input type="text"/>
Fiscal Officer Telephone Number: *	<input type="text"/>

5. Once the Face Sheet has been completed and saved, the Navigation bar on the left of the screen will appear displaying the remaining pages to be completed as displayed in the snapshot below:

The screenshot shows the 'Face Sheet' form in the Ohio GFMS system. The left navigation bar contains the following items: Home, Application, Funding, Reports, Maintenance, and a user profile for 'Welcome, Nedima Arly'. The main content area is titled 'Face Sheet - Grants And Funding Management System'. The form fields are as follows:

- Organization: Premier Care of Ohio, Inc.
- Organization Address: 1300 Dublin Road, Suite 100
- Who are you applying to for this grant?: Select...
- Service Type: Prevention
- Project Area: AA Testing Project
- Application Number: 1000011
- State Fiscal Year: 2016
- Requested Amount: \$ 3500.00
- How many years has the service provider been in business?: 5 to 10 years
- Program Title: Test
- Primary Program Contact First Name: T1
- Primary Program Contact Last Name: T1
- Primary Program Contact Phone Number: (614) 702-3421
- Primary Program Contact Email Address: test123@gmail.com
- Secondary Program Contact First Name:
- Secondary Program Contact Last Name:
- Secondary Program Contact Phone Number:
- Secondary Program Contact Email Address:
- Should the Secondary Program Contact receive emails about this grant?: Select
- Fiscal Officer First Name:
- Fiscal Officer Last Name:
- Fiscal Officer Email:
- Fiscal Officer Telephone Number:
- OhioMMS Lead First Name: Nedima
- OhioMMS Lead Last Name: Duda
- OhioMMS Lead Email Address: Nedima.Duda@priosu.ohio.gov

**For Board, the user will not view assurance and signature pages on the left navigation bar.*

Organization Information

The Organization Information page is read only and provides information captured from the initial registration process of the applicant organization required to provide access to the GFMS.

Organization Information » Grants And Funding Management System

The information on this page is view only and cannot be changed. In order to update any organization information please login to **IPortal**, use the search organization screen to search, edit and update information

Implementing Organization:	<input type="text" value="A Renewed Mind"/>	Implementing Organization's Phone Number:	<input type="text" value="(216) 255-8036"/>
Implementing Organization's Mailing Address:	<input type="text" value="1822 Cherry Street"/>	City:	<input type="text" value="Toledo"/>
State:	<input type="text" value="OK"/>	Zip:	<input type="text"/>
Fiscal Officer:	<input type="text"/>	Fiscal Officer Email:	<input type="text"/>
Fiscal Officer Telephone Number:	<input type="text"/>	ADAMHS/ADAS Board:	<input type="text"/>
Certification Number:	<input type="text"/>	Certification End Date:	<input type="text"/>
Federal Tax ID:	<input type="text" value="341896193"/>	UPID:	<input type="text" value="12982,12679"/>



1. The information on this page is **view only** and cannot be changed. In order to **update** the information on this page, an Application Admin will need to make the update via the **IPortal** registration screen. Certification information must be updated through Licensure & Certification.

Federal Requirements

The Federal Requirement page gathers additional information that may be needed for federal reporting.

1. **Select** and **Enter** the information as indicated per each field on “Federal Requirement” screen.
2. Fields with red asterisks * are required fields.

Federal Requirements » Grants And Funding Management System

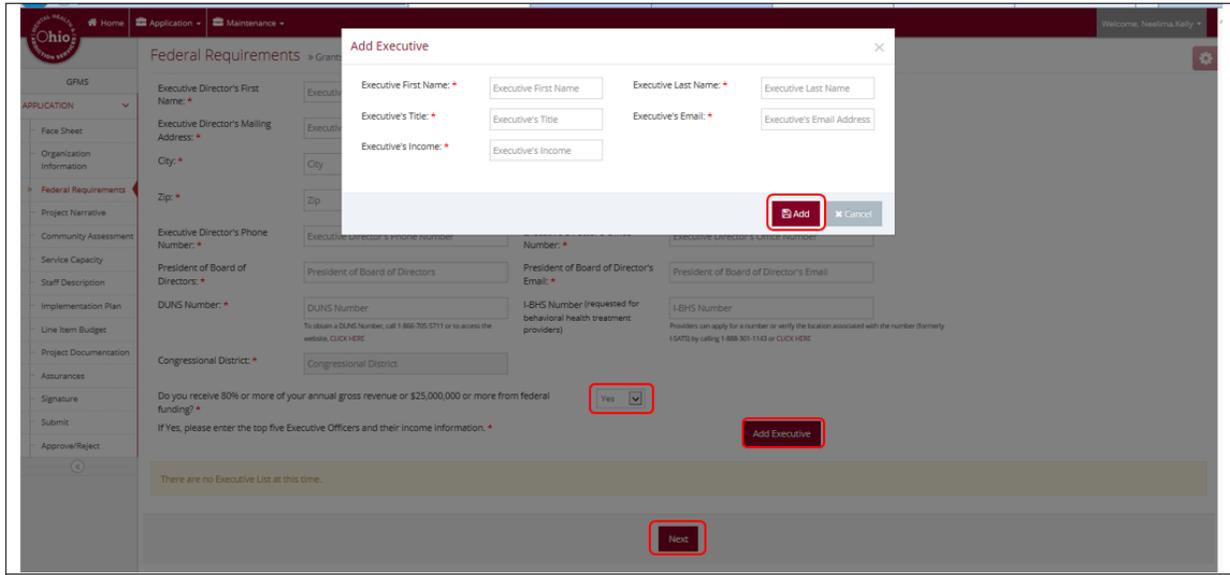
Executive Director's First Name *	<input type="text"/>	Executive Director's Last Name *	<input type="text"/>
Executive Director's Mailing Address *	<input type="text"/>	Executive Director's Email *	<input type="text"/>
City *	<input type="text"/>	State *	<input type="text"/>
Zip *	<input type="text"/>		
Executive Director's Phone Number *	<input type="text"/>	Executive Director's Office Number *	<input type="text"/>
President of Board of Directors *	<input type="text"/>	President of Board of Director's Email *	<input type="text"/>
DUNS Number *	<input type="text"/>	I-BHS Number (Requested for behavioral health treatment providers)	<input type="text"/>
<small>To obtain a DUNS Number, call 1-866-705-5711 or to access the website, CLICK HERE</small>		<small>Providers can apply for a number or verify the location associated with the number (formerly I-9478) by calling 1-888-301-1143 or CLICK HERE</small>	
Congressional District *	<input type="text"/>		

Do you receive 80% or more of your annual gross revenue or \$25,000,000 or more from federal funding? *

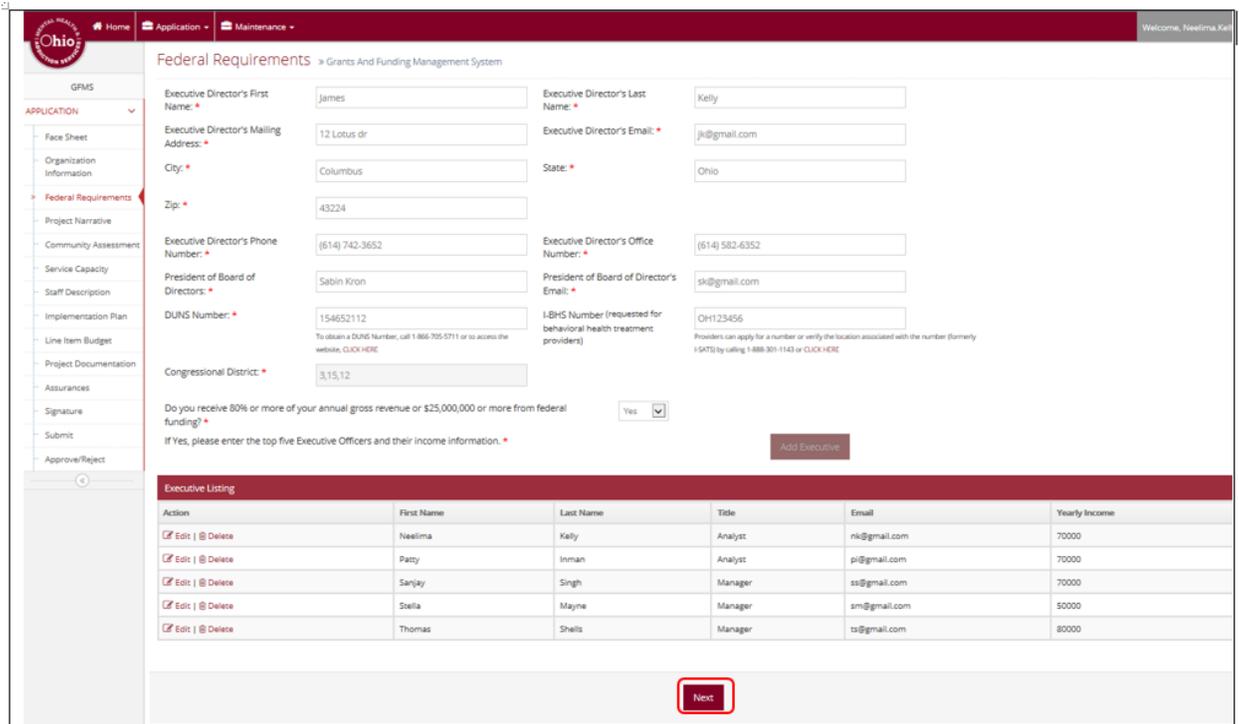
If Yes, please enter the top five Executive Officers and their income information. *

There are no Executive List at this time.

3. To add Executives Director, **select** the Add Executive button.



4. In the “Add Executive” pop-up window, **enter** the required information and **select** the Add button. Repeat steps #3 and #4 up to 5 of the Executives have been added. The maximum limit to add executives are up to 5. Executive information will be displayed under “Executive Listing” table.
5. After all of the required information has been added, **select** the Next (Data is saved) button to be taken to the next screen.



6. After all of the required information has been added , **select** the Next (Data is saved) button to be taken to the next screen.

Federal Requirements > Grants And Funding Management System

Executive Director's First Name: James
 Executive Director's Last Name: Kelly
 Executive Director's Mailing Address: 12 Lotus dr
 Executive Director's Email: jk@gmail.com
 City: Columbus
 State: Ohio
 Zip: 43224
 Executive Director's Phone Number: (614) 742-3652
 Executive Director's Office Number: (614) 582-6352
 President of Board of Directors: Sabin Kron
 President of Board of Director's Email: sk@gmail.com
 DUNS Number: 154652112
 IJHS Number (requested for behavioral health treatment providers): OH123456
 Congressional District: 3,15,12

Do you receive 80% or more of your annual gross revenue or \$25,000,000 or more from federal funding? Yes No

If Yes, please enter the top five Executive Officers and their income information.

Action	First Name	Last Name	Title	Email	Yearly Income
<input checked="" type="checkbox"/> Edit <input type="checkbox"/> Delete	Neelima	Kelly	Analyst	nk@gmail.com	70000
<input checked="" type="checkbox"/> Edit <input type="checkbox"/> Delete	Patty	Inman	Analyst	pi@gmail.com	70000
<input checked="" type="checkbox"/> Edit <input type="checkbox"/> Delete	Sanjay	Singh	Manager	ss@gmail.com	70000
<input checked="" type="checkbox"/> Edit <input type="checkbox"/> Delete	Stella	Mayne	Manager	sm@gmail.com	50000
<input checked="" type="checkbox"/> Edit <input type="checkbox"/> Delete	Thomas	Shells	Manager	ts@gmail.com	80000

Project Narrative

The Project Narrative page provides more detailed information about the project.

1. **Enter** the information as indicated assuring that you have addressed all of the requested information.
2. As the narrative is being entered into the text area, the character counter will assist in keeping track of the space available for the narrative.
3. Fields with red asterisks * are required fields.
4. After all of the required information has been added, select the Next button (Data is saved) to be taken to the next screen.

Ohio MENTAL HEALTH & ADDICTION SERVICES

Home Application Funding Reports Maintenance

GFMS

APPLICATION

- FaceSheet
- Organization Information
- Federal Requirements
- Project Narrative
- Community Assessment
- Service Capacity
- Staff Description
- Implementation Plan
- Line Item Budget
- Project Documentation
- Assurances
- Signature
- Submit

Project Narrative » Grants And Funding Management System

Include a brief project narrative, including problem statement or issue being addressed, target population, number planning to serve and costs.*

Next

Community Assessment

The Community Assessment Page captures which assessment tool(s) were used and provide a brief summary of findings from the assessment strategy.

Ohio MENTAL HEALTH & ADDICTION SERVICES

Home Application Funding Reports Maintenance

GFMS

APPLICATION

- FaceSheet
- Organization Information
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- Implementation Plan
- Line Item Budget
- Project Documentation
- Assurances
- Signature
- Submit

Community Assessment » Grants And Funding Management System

Which community assessment tool was used? [Select Community Assessment Tools](#)

Provide a brief summary of findings from the assessment strategy:

Next

1. To add the community assessment tools, select the [Select Community Assessment Tools](#) button.
2. A pop-up window will appear titled; 'Select Community Assessment Tools'.
3. **Choose** Your Community Assessment tool from the drop down.
4. Enter the information as indicated per each field and select the [Add](#) button. Repeat until all of the community assessment tools have been added.

Select Community Assessment Tools ✕

Community Assessment Tool: *
 ▼

Description: *

Assessment Readiness Date: *

Add
✕ Cancel

5. **Enter** the information as indicated per each field and **select** the Add button. Repeat until all of the community assessment tools have been added.
6. All community assessment tools that are added will appear on the 'Community Assessment' screen in the table titled Community Assessment Tools Used.
7. The entries in the "Community Assessment Tools Used" table, may be edited or deleted by clicking on the Edit or Delete link.
8. To move to the next screen select the Next button (Data is saved).

Home Application Funding Reports Maintenance
Welcome, Patty.Inm

Community Assessment > Grants And Funding Management System

Which community assessment tool was used? Select Community Assessment Tools

Provide a brief summary of findings from the assessment strategy:

Community Assessment Tools Used			
	Tool Used	Description	Date
Edit Delete	Community Forums	This is my community assessment tool for community forums.	03/24/2016
Edit Delete	SAMHSA	This is another community assessment tool.	04/21/2016

Next

Service Capacity

The Service Capacity screen addresses some demographics, elements of sustainability and behavioral health disparities.

1. **Select** and **Enter** the information as indicated per each field displayed on the “Service Capacity” screen.
2. Fields with red asterisks * are required fields.
3. As the narratives are being entered into the text areas, the character counter will assist in keeping track of the space available for the narrative.
4. To add the elements of sustainability, **select** the Select Elements of Sustainability button as highlighted below in the snapshot:

The screenshot displays the 'Service Capacity' page within the 'Grants And Funding Management System'. The page is divided into several sections:

- Behavioral Health Areas Addressed (Check all that apply):** A list of checkboxes including Advocacy, Best/Promising Practices Dissemination, Alcohol, Bullying, Employment, Gambling, Illicit Drugs, Peer Services, Reentry, SMI Symptomology, and Tobacco.
- Target Populations (Check all that apply):** A list of checkboxes including Adults, Hispanic/Latino, Males, and Females.
- Age Groups (Check all that apply):** A list of checkboxes for age ranges: 0-4 years, 5-11 years, 12-14 years, 15-17 years, 18-20 years, 21-24 years, 25-44 years, and 45-64 years, and 65+ years.
- Text Fields:** Three text areas with red asterisks: 'Explain the service provider's capacity to provide services to the target population: *', 'How are behavioral health disparities manifested in the problem? *', and 'How will proposed program interventions address those behavioral health disparities? *'.
- Sustainability Section:** A text area with a red asterisk: 'What elements of sustainability does your agency address? (Check all that apply and provide a description for each element checked):'. Below this is a button labeled 'Select Elements of Sustainability' and another text area: 'What is the program/project's comparative advantage?'.
- Navigation:** A 'Next' button at the bottom right.

The left sidebar contains a menu with 'Service Capacity' highlighted in a red box. The top navigation bar includes 'Home', 'Application', 'Funding', 'Reports', and 'Maintenance'.

5. A pop-up window will appear titled; ‘Select Elements of Sustainability’.
6. **Choose** the elements of sustainability and complete the description.
7. **Enter** the information as indicated per each field and select the Add button. Repeat until all of the sustainability elements have been added.

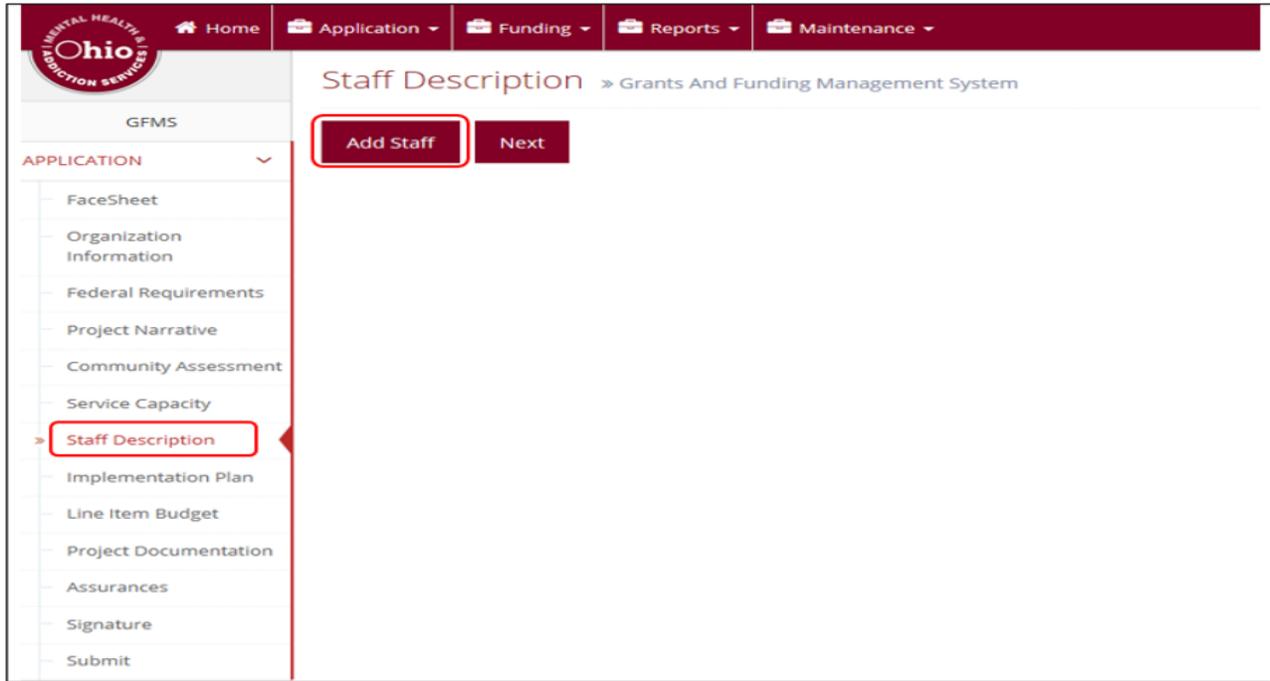
8. All sustainability elements that are added will appear on the “Service Capacity” screen in the table titled “Elements of Sustainability Addressed”.
9. The entries in the “Elements of Sustainability Addressed” table, may be edited or deleted by clicking on the [Edit](#) or [Delete](#) link.
10. To move to the next screen **select** the [Next](#) button (Data is saved).

Element	Description
Expertise	This is a sustainability element for Expertise.
Administrative Policies and Procedures	This is another sustainability element for the Administrative Policies and Procedures.

Staff Description

The Staff Description screen will display a listing of the staff and their qualifications.

1. To add staff, **select** the [Add Staff](#) button as highlighted below in the snapshot.



2. An 'Add' Staff' pop-up window will appear.
3. Fields with red asterisks * are required fields.
4. **Enter** the information as indicated per each field and **select** the Save button. Repeat until all of the staff and credentials have been added. If you change your mind, select the Cancel button, navigated back to staff description screen.

Add Staff ✕

First Name: *

Last Name: *

Title:

Email:

Staff Qualification:

<input type="checkbox"/> Other <input type="text"/>	<input type="checkbox"/> Aide
<input type="checkbox"/> Assistant	<input type="checkbox"/> Art Therapist
<input type="checkbox"/> Certified Nurse Practitioners	<input type="checkbox"/> Certified Health Education Specialist
<input type="checkbox"/> Clinical nurse specialist	<input type="checkbox"/> Certified Therapeutic Recreation Specialist
<input type="checkbox"/> Doctor of osteopathic medicine	<input type="checkbox"/> D.A.R.E. Officer
<input type="checkbox"/> Licensed occupational therapist	<input type="checkbox"/> Licensed Independent social worker
<input type="checkbox"/> Licensed school psychologist	<input type="checkbox"/> Licensed occupational therapy assistant
<input type="checkbox"/> Ohio Certified Prevention Specialist	<input type="checkbox"/> Master Certified Health Education Specialist
<input type="checkbox"/> Ohio Certified Prevention Specialist Assistant	<input type="checkbox"/> Ohio Certified Prevention Specialist II
<input type="checkbox"/> Physician assistant	<input type="checkbox"/> Pharmacist
<input type="checkbox"/> Professional clinical counselor	<input type="checkbox"/> Prevention Specialist Registered Applicant or Registered Applicant
<input type="checkbox"/> Provisional professional clinical counselor	<input type="checkbox"/> Professional counselor
<input type="checkbox"/> Psychologist	<input type="checkbox"/> Provisional professional Counselor
<input type="checkbox"/> Psychology assistant	<input type="checkbox"/> Psychology aide
<input type="checkbox"/> Psychology intern	<input type="checkbox"/> Psychology fellow
<input type="checkbox"/> Psychology resident	<input type="checkbox"/> Psychology postdoctoral trainee
<input type="checkbox"/> Registered nurse	<input type="checkbox"/> Psychology trainee
<input type="checkbox"/> School Resource Officer	<input type="checkbox"/> School psychology assistant



The Staff Qualifications that are listed in the 'Add Staff' pop-up window are **dependent** on the Service Type of the application. For example; Prevention may not see the same qualifications that are shown for Community Support.

Only Staff working on the **particular grant** will be **included** in the "List of Staff" not the entire staff list for the agency.

If user **selects** "Other" displayed under Staff Qualifications list, the text box field becomes the **required** field and user needs to **enter** the value in it.

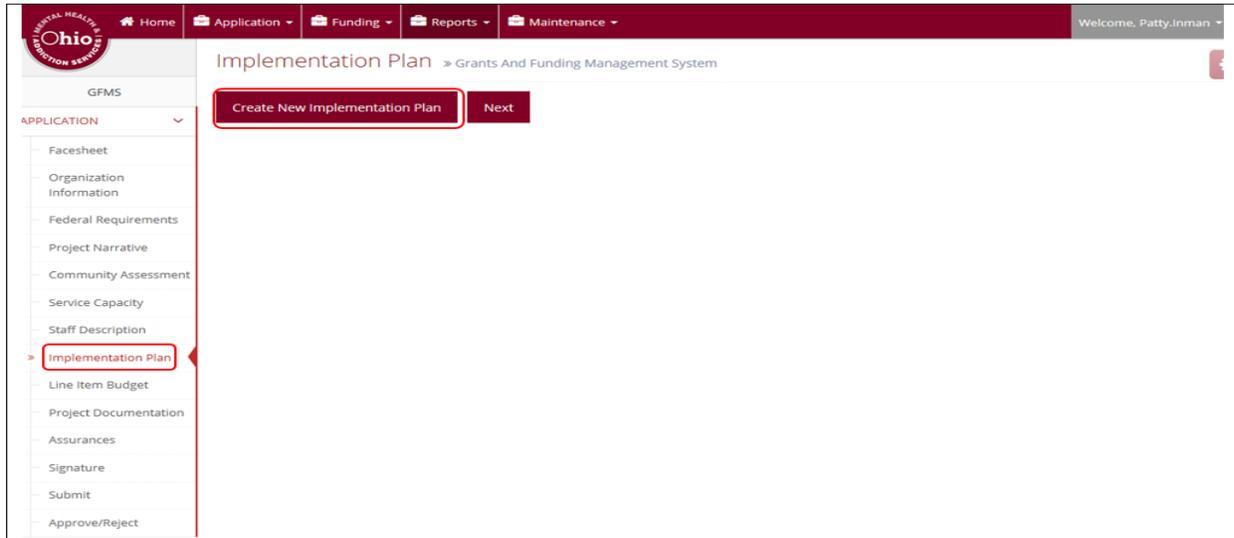
5. All staff that are added will appear on the "Staff Description" screen in the table titled "List of Staff".
6. The entries in the "List of Staff" table, may be edited or deleted by clicking on the Edit or Delete link.
7. To move to the next screen **select** the Next button (Data is saved).

		First Name	Last Name	Title	Email	Staff Qualification
Edit	Delete	Mary	Smith	Phd	Mary@aol.com	Professional clinical counselor , Professional counselor , Psychologist
Edit	Delete	Sam	Jones	Consultant	Sam@aol.com	Licensed occupational therapy assistant, Ohio Certified Prevention Specialist Assistant , Professional counselor

Implementation Plan

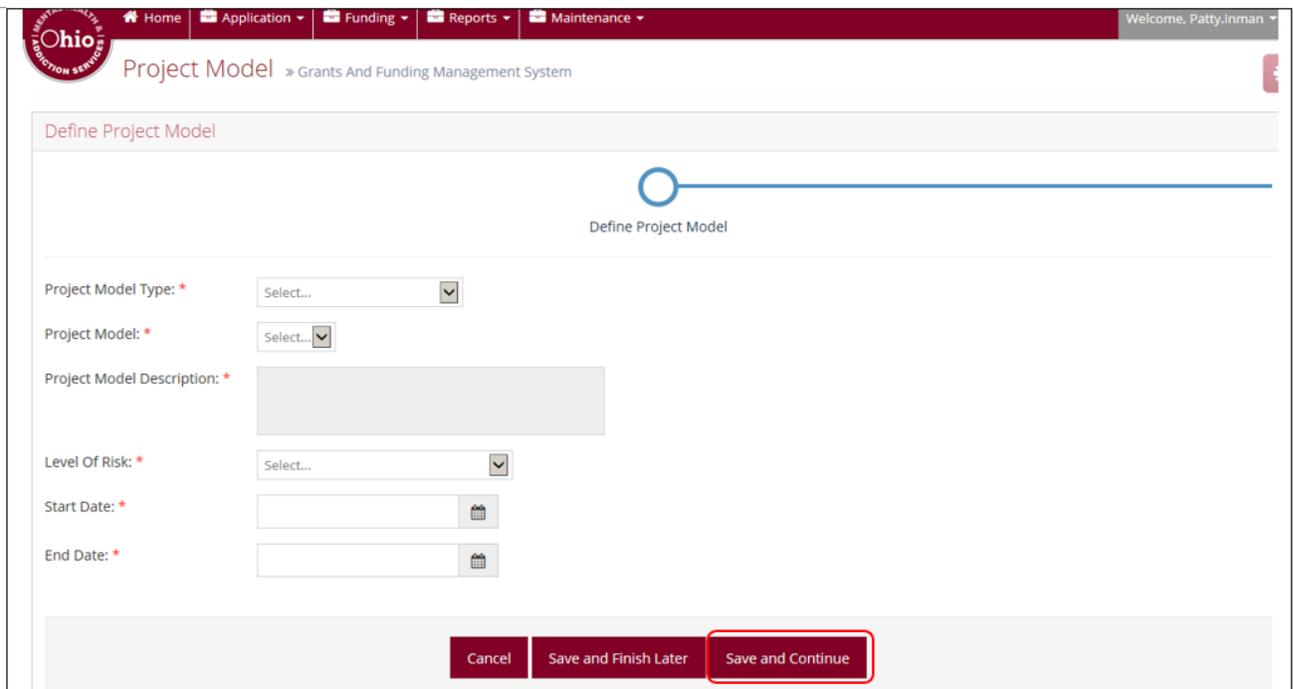
The Implementation Plan is made up of several screens. The plan is where the Applicant will describe how they intend to implement and manage the project outlined in this application.

1. To create the Implementation Plan, select the Create New Implementation Plan button as displayed in the snapshot below:



Define Project Model

1. The 'Define Project Model' screen will appear.
2. Fields with red asterisks * are required fields.
3. **Select** and **Enter** the information as indicated per each field. Depending on what is selected in the "Project Model" dropdown, the description will be automatically populate into the 'Project Model Description' field.
4. **Select** the Save and Continue button. Repeat until all of the staff and credentials have been added.





1. The Project Model Type, Project Model and Project Model Description must have been **created** by the OhioMHAS Lead in the **Project Model section** of the **Maintenance Tab**.
2. If user **selects** Adaptive **Evidence Based Programs or Locally Developed Programs** under Project Model Type, the project model description **needs** to be entered.

Define NOMs

1. All of the NOMs associated with the selected Project Model will automatically show on the screen.
2. **Select** at least one NOM and then **select** the Choose Objectives button as highlighted below in the snapshot:

The screenshot displays the 'Define NOMs' interface. At the top, there is a navigation bar with the Ohio logo and menu items: Home, Application, Funding, Reports, and Maintenance. Below the navigation bar, the breadcrumb path is 'NOM > Grants And Funding Management System'. The main content area is titled 'Define NOMs' and features a progress bar with two steps: 'Define NOMs' (the current step, indicated by a blue circle) and 'Define Project Model' (indicated by a grey circle). Below the progress bar, there is a section titled 'Choose desired NOM(s) for this Project Model (at least 1): *'. Under this section, there is a checkbox labeled 'Gainfully Employed' which is checked. At the bottom of the screen, there are four buttons: 'Previous Page', 'Cancel', 'Save and Finish Later', and 'Choose Objectives'. The 'Choose Objectives' button is highlighted with a red box.

Define Objectives

1. All of the Objectives associated with the selected NOMs will automatically show on the “Define Objectives” screen.
2. **Select** at least one Objective and then select the Next Section button. Data is saved.

Objective Selection » Grants And Funding Management System

Define Objectives

Define NOMs | Define Objectives

Your current NOM is **Gainfully Employed**. Choose your objectives for this NOM below:

Clients will participate in job preparation/education programming

Previous Section | **Next Section**

3. A second “Define Objectives” screen will appear.
4. **Select** and **Enter** the information as indicated per each field and select the Next Section button.

Objective Summary » Grants And Funding Management System

Define Objectives

Define Objectives

Your current objective is **Clients will participate in job preparation/education programming**. The NOM for the current objective is **Gainfully Employed**

Fill in the information below for the objective below:

In this grant fiscal year, of the people served by this intervention, will achieve this objective.

Choose your level of change:

Previous Section | **Next Section**

1. Depending on the **Service Type** of the application, the user will view screens for **Strategy/Services**, **Service/Activities**, or will have completed the Implementation Plan section of the application.



2. If Service Type is **“Prevention”** or **“Community Support”**, the **“Strategy/Services”** screen will be **displayed**.

3. If Service Type is **“Treatment and Recovery”**, **“Services/ Activities”** screen will be **displayed**.

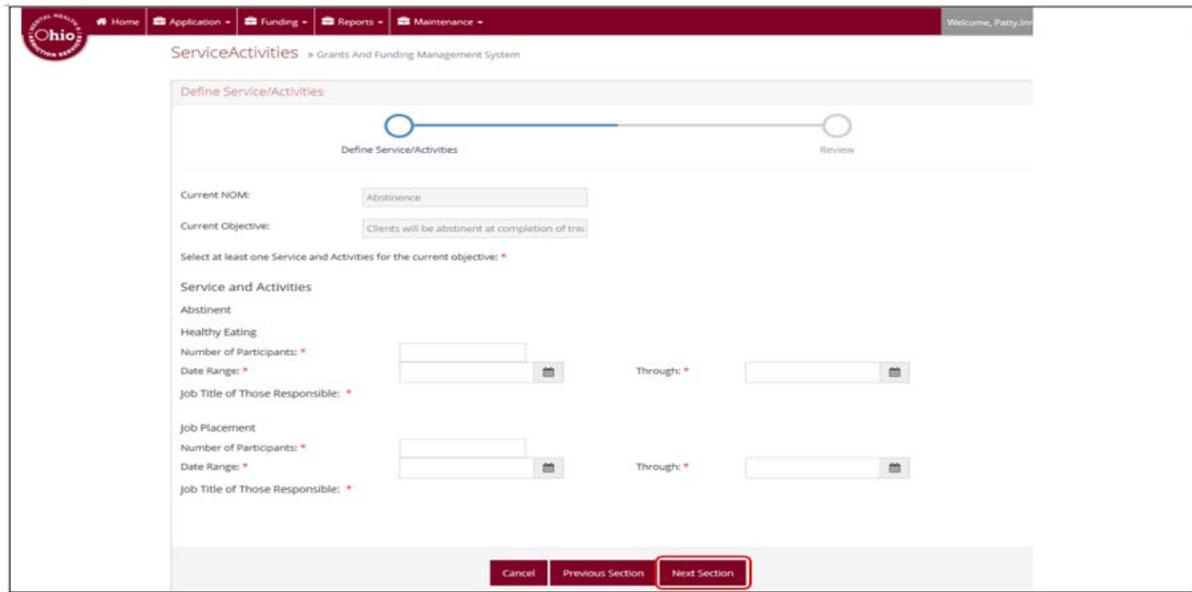
4. If Service Type is **“Research and Evaluation”**, Services/ Activities or Strategy/Services screen **will not** be displayed and user will be **directly** navigated to **“Review Implementation Plan”** screen.

Strategy/Services

1. All of the Strategy/Services associated with the selected NOMs and Objectives will automatically show on the screen.
2. Select the appropriate Strategy & Services for the Strategy and enter an amount in 'Enter Est. Served' field to be served.
3. Select the Next Section button. (Data is saved)

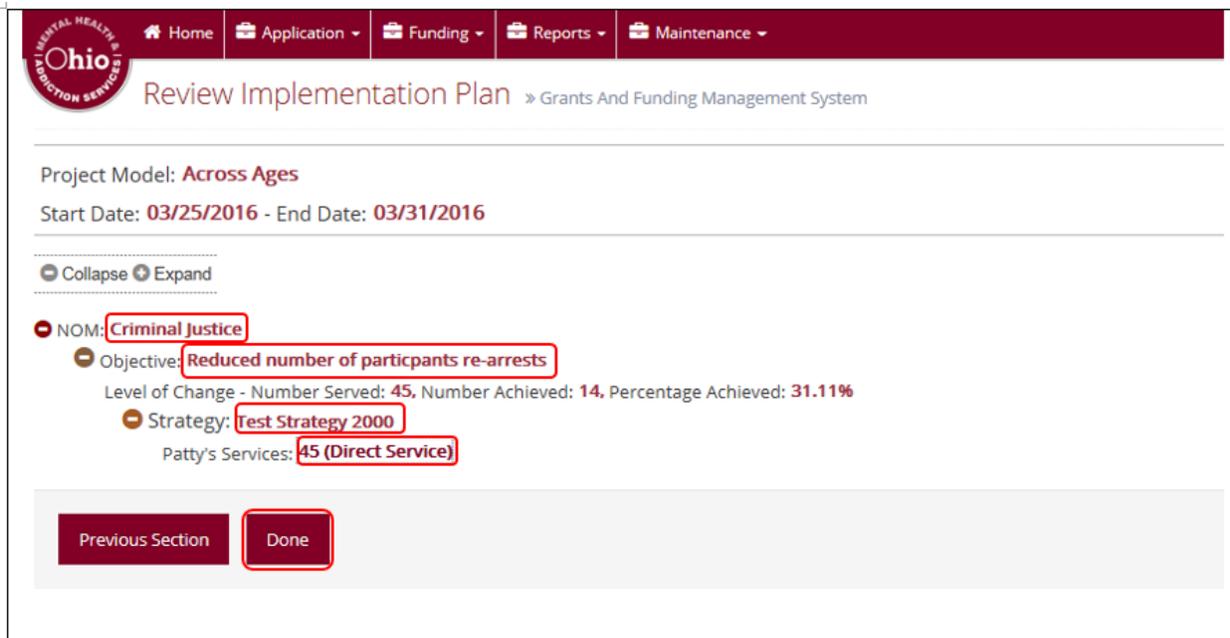
Service/Activities

1. All of the Service/Activities associated with the selected NOMs and Objectives will automatically show on the screen.
2. For each Service/Activities complete the required information and **select** the Next Section button. Data is saved.



Review Implementation Plan

1. The Review screen allows the user to review the implementation plan and make any changes. To make changes in a section, **select** the link in red text to be taken back to that specific screen as highlighted below in the snapshot:
2. **Select** the Done button to be taken back to the Implementation Plan screen. When user **clicks** on Done button, the data will be saved successfully.



3. All Implementation Plans that are created will be listed in the 'List of Implementation Plans' table.
4. The entries in the 'List of Implementation Plans' table, may be edited or reviewed by clicking on the Edit or Review link, displayed in the snapshot below:

Implementation Plan » Grants And Funding Management System

Create New Implementation Plan Next

Action	Project Model	Type	Modified By	Last Modified
Review Edit	All Stars	Coalition	1/25/2016 1:16:12 PM	Patty.Inman
Review Edit	Across Ages	Evidence Based Practice	3/23/2016 3:10:28 PM	Patty.Inman

5. Select the Next button (Data is saved) to move to the next section of the application.

Line Item Budget:

The Line Item Budget screen allows the user to enter how the funds will be budgeted for the project.

1. There are two sections to the Line Item Budget; 'Direct Costs' and 'Indirect Costs'.
2. Input the budget amounts into the appropriate line item.
3. A Narrative must be provided for each line item that shows an amount.
4. When an amount is entered into the column titled 'Budget Revision' for a line item, the calculation for the columns titled 'Difference between Original & Revision' and 'Percentage Difference' will be automatically calculated.

Line Item Budget > Grants And Funding Management System

Line Item Budget						
Client Costs	MHS	Narrative	Other	Narrative	Total	
Personal						
Personal						\$
Fringe Benefits						
Fringe Benefits						\$
Travel						
Mileage						\$
Airfare						\$
Lodging						\$
Meal Per Diem						\$
Equipment						
Computer/Equipment						\$
Furniture						\$
Supplies						
Printing/Copying						\$
Subscription/Publication						\$
Contract/Procurement						\$
Construction						\$
Other						
Conference/Training						\$
Registration						\$
Food						\$
Total Client Costs	0					
Indirect Costs						
Contractual	MHS	Narrative	Other	Narrative	Total	
Personal/Service Contracts						\$
Rent/Lease						\$
Fuel						\$
Maintenance/Repair						\$
Insurance						\$
Phone/Bill/Utilities						\$
Total Indirect Costs	0					
Grand Total	0					

Next

OHIO DEPARTMENT OF MENTAL HEALTH & ADDICTION SERVICES

Home Application Funding Reports Maintenance Welcome, PattyInman

Line Item Budget > Grants And Funding Management System

GFMS

APPLICATION

- Face Sheet
- Organization Information
- Federal Requirements
- Project Narrative
- Community Assessment
- Service Capacity
- Staff Description
- Implementation Plan
- Line Item Budget**
- Project Documentation
- Assurances
- Signature
- Submit
- Approve/Reject

Line Item Budget					
Direct Costs	MHAS	Narrative	Other	Narrative	Total
Personnel					
Personnel	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	0
Fringe Benefits					
Fringe Benefits	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	0
Travel					
Mileage	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	0
Airfare	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	0
Lodging	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	0
Meal Per Diem	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	0
Equipment					
Computer/Equipment	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	0
Furniture	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	0

1. For the **initial grant application**, the following columns **should not be shown**; MHAS Budget Revision, Narrative, Difference between Original & Budget Revisions, and Percentage Difference.

2. Once the application is in the **Awarded status**, the MHAS Funding and Narrative columns are **grayed out** and **cannot be edited**.



3. If application status is **Revision**, the MHAS Funding, Narrative, Other Funding, Narrative, and Total columns will be **grayed out** and **cannot be edited**.

4. If application status is **Renewed**, the initial grant application rules will be applied to the renewed application.



1. Grand Total is the **total** of the costs listed in **Total Direct Costs** and **Total Indirect Costs**. The Grand Total of the MHAS Funding column must **match** what is in the 'Amount Requested' field on the Face Sheet.

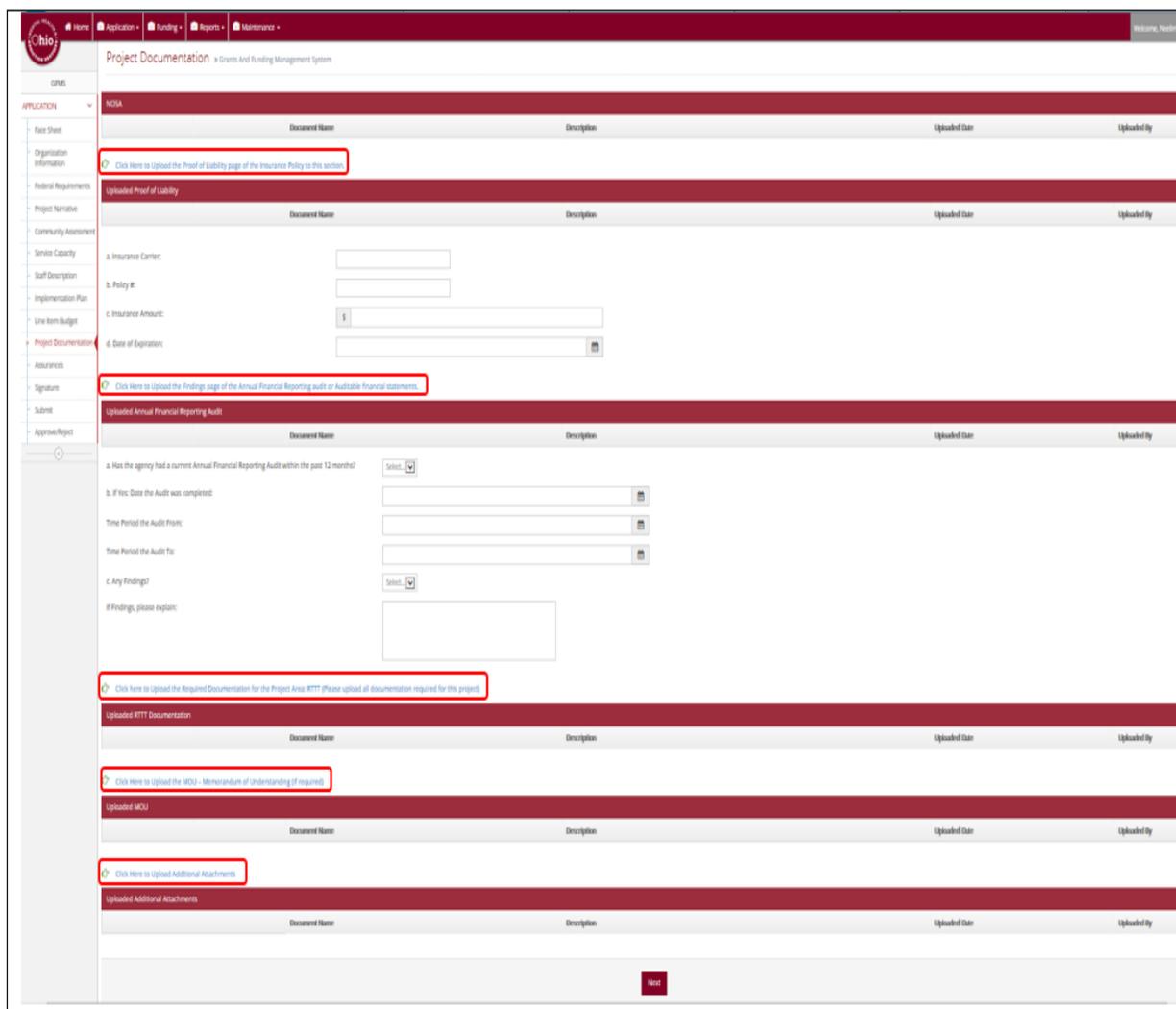
**For Board, the column name "MHAS" will be changed to "Board" as displayed in the snapshot below:*

Project Documentation:

The Project Documentation screen is where the Insurance Policy, Annual Financial Reporting Audit, MOU, Project Documentation, and any additional documents will be attached (upload) as highlighted in the snapshot below:

Page Permissions and Access Roles

Access Roles	Application Admin	Project Lead	Fiscal	Applicant	Applicant After Awarded	Board Manager	External Reviewer/Scorer
Permissions							
Application- Project Documentation							
Upload or attach project documentation	X	X		X	X	X	
Edit project documentation	X	X		X	X	X	
Delete uploaded or attached documents (before submission)	X	X		X	X	X	
Only view project documentation			X				X



**For Board, NOSA Section will not be displayed, Proof and Annual Financial Reporting Audit sections are not the required sections to fill in.*

How to Attach Documents

1. All documents on the “Project Documentation” screen will be attached in the same manner.
2. To attach the “Proof of Liability” page, **click** on the Click Here to upload link, which is designated by the pointing hand icon.



[Click Here to Upload the f](#)

3. A pop-up window will appear to allow for the uploading of the document.
4. Fields with red asterisks * are required fields.
5. To attach a document, **select** the Browse button.
6. **Select** the file from your computer that is to be attached and then **select** the Upload Attachment button as displayed in the snapshot below:

Please be aware of the restrictions on the document attachments.



▲ Project Documents may be added with the following restrictions:

- File size is limited to 2 MB.
- File types are limited to:
 - Word (.doc, .docx)
 - Excel (.xls, .xlsx)
 - Adobe Acrobat (.pdf)
 - PowerPoint (.ppt, .pptx)
 - images (.jpg)
 - Text (.txt)
 - Rich Text Format (.rtf)

Items that do not meet these restrictions cannot be attached.

Uploaded Proof of Liability

1. **Enter** the information as indicated for each field.
2. See the section titled; 'How to Attach Documents' for instructions on how to attach the required documents.
3. Once the document has been uploaded, it will appear in the table titled, "Uploaded Proof of Liability" as highlighted in the snapshot below:

Uploaded Proof of Liability					
	Document Name	Description	Uploaded Date	Uploaded By	
View	Delete	Liability Document	Standard Template	4/8/2016	Neelima.Kelly

a. Insurance Carrier:

b. Policy #:

c. Insurance Amount: \$

d. Date of Expiration:

4. If this is the only section in the 'Project Documentation' screen that needs completed, select the Next button.
5. If there are other sections in the 'Project Documentation' screen that needs to be completed, then proceed to the next section on the screen.

Uploaded Annual Financial Reporting Audit

1. **Enter** the information as indicated for each field.
2. If you **select** the answer Yes to question a, then you will be **required** to provide a 'Date the Audit was Completed'.
3. If you **select** the answer Yes to question c, then you will be **required** to provide an explanation.
4. See the section titled; 'How to Attach Documents' for instructions on how to attach the required documents.
5. Once the document has been uploaded, it will appear in the table titled, "Uploaded Annual Financial Reporting Audit" as highlighted in the snapshot below:

Uploaded Annual Financial Reporting Audit					
	Document Name	Description	Uploaded Date	Uploaded By	
View	Delete	Annual Financial Report	standard template for the report	4/8/2016	Neelima.Kelly

a. Has the agency had a current Annual Financial Reporting Audit within the past 12 months?

b. If Yes: Date the Audit was completed:

Time Period the Audit From:

Time Period the Audit To:

c. Any Findings?

If Findings, please explain:

6. If this is the only section in the "Project Documentation" screen that needs completed, select the Next button.
7. If there are other sections in the "Project Documentation" screen that needs to be completed, then proceed to the next section on the screen.

Uploaded Project Documentation

1. The 'Project Name' will appear automatically as the table header depending on the Project that was selected on the Face Sheet.
2. See the section titled; 'How to Attach Documents' for instructions on how to attach the required documents.

- Once the document has been uploaded, it will appear in the table titled, 'Uploaded *project name* Documentation'.

[Click here to Upload the Required Documentation for the Project Area: RTTT \(Please upload all documentation required for this project\)](#)

Uploaded RTTT Documentation					
		Document Name	Description	Uploaded Date	Uploaded By
		RTT Doc	RTT Doc	4/8/2016	Neelima.Kelly

- If this is the only section in the 'Project Documentation' screen that needs completed, select the Next button.
- If there are other sections in the 'Project Documentation' screen that needs to be completed, then proceed to the next section on the screen.

Uploaded MOU

- See the section titled; 'How to Attach Documents' for instructions on how to attach the required documents.
- Once the document has been uploaded, it will appear in the table titled, 'Uploaded MOU'.

[Click Here to Upload the MOU - Memorandum of Understanding \(if required\)](#)

Uploaded MOU					
		Document Name	Description	Uploaded Date	Uploaded By
		Memorandum	Standard Template	4/8/2016	Neelma.Kelly

- If this is the only section in the 'Project Documentation' screen that needs completed, **select the Next** button.
- If there are other sections in the 'Project Documentation' screen that needs to be completed, then proceed to the next section on the screen.

Uploaded Additional Attachments

- This section is to be used for any other additional attachments that may be needed to submit the application.
- See the section titled; 'How to Attach Documents' for instructions on how to attach the required documents.
- Once the document has been uploaded, it will appear in the table titled, 'Uploaded Additional Attachments'.

[Click Here to Upload Additional Attachments](#)

Uploaded Additional Attachments					
		Document Name	Description	Uploaded Date	Uploaded By
		Secondary Insurance Doc	Secondary Insurance Doc	4/8/2016	Neelima.Kelly

- If this is the only section in the 'Project Documentation' screen that needs completed, select the Next button.
- If there are other sections in the 'Project Documentation' screen that needs to be completed, then proceed to the next section on the screen.



- When Grant Application Status is tagged as an **“Awarded”** then only, the NOSA section will be **populated** on the Project Documentation screen.

Assurances

The Assurances screen is where the user will read and digitally sign the Assurances document.

1. **Select** the View link in the “Assurance” table to read the assurance document.
2. **Click** in the ‘I Agree’ box to digitally sign that the assurance has been reviewed and agreed to.
3. **Click** on Next button (Data is saved) to be taken to the next screen.

Assurances > Grants And Funding Management System

Please read the Assurances carefully by clicking on its title. Then select the checkbox next to the Assurances to indicate that you agree.

Checking the box below is the equivalent of a digital signature. By checking these box, you indicate that you agree in full to the specified Assurances as it is presented and that you are the CEO of the agency applying for the funds specified on this grant application or a delegate acting on their behalf.

Action	Assurances	Fiscal Year	Signatory	Date of Signature	I Agree
View	Grant Assurance	2016			<input checked="" type="checkbox"/>

[Next](#)

4. A Signatory Name and Date of Signature will be displayed in the Assurance table as highlighted below in the snapshot:

Assurances > Grants And Funding Management System

Please read the Assurances carefully by clicking on its title. Then select the checkbox next to the Assurances to indicate that you agree.

Checking the box below is the equivalent of a digital signature. By checking these box, you indicate that you agree in full to the specified Assurances as it is presented and that you are the CEO of the agency applying for the funds specified on this grant application or a delegate acting on their behalf.

Action	Assurances	Fiscal Year	Signatory	Date of Signature	I Agree
View	Grant Assurance	2016	Neelima.Kelly	3/28/2016 6:04:03 PM	<input checked="" type="checkbox"/>

[Next](#)

**For Board Applicant, this page will be removed.*

Signature

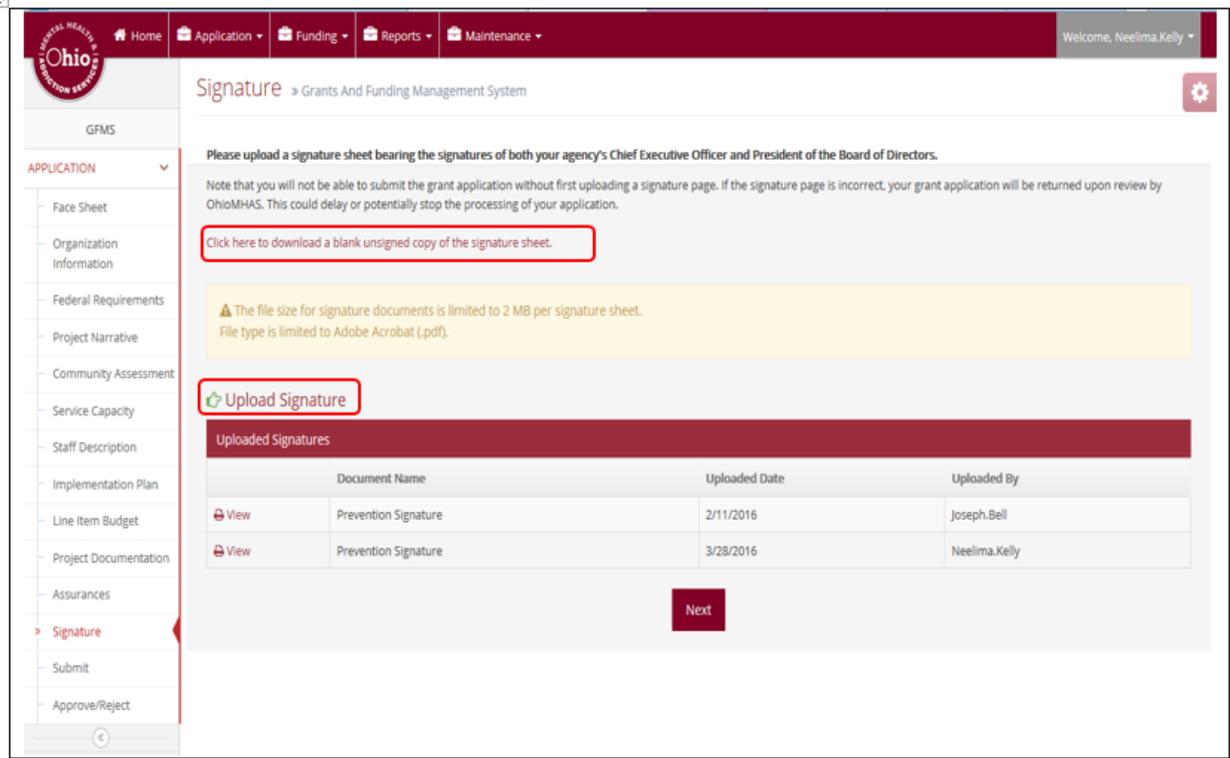
The Signature screen is where the unsigned copy of the signature sheet can be downloaded, signed, and the uploaded back into the application.

1. **Select** the Click Here link to download the signature sheet.

[Click here to download a blank unsigned copy of the signature sheet.](#)

- The signature sheet will be opened in a PDF format. **Print** the document, get it signed by the appropriate people, then **scan** and **save** the document to your computer.
- To attach the signed Signature sheet to the application, **select** the Upload Signature link.

 Upload Signature



Signature > Grants And Funding Management System

Please upload a signature sheet bearing the signatures of both your agency's Chief Executive Officer and President of the Board of Directors.

Note that you will not be able to submit the grant application without first uploading a signature page. If the signature page is incorrect, your grant application will be returned upon review by OhioMHAS. This could delay or potentially stop the processing of your application.

[Click here to download a blank unsigned copy of the signature sheet.](#)

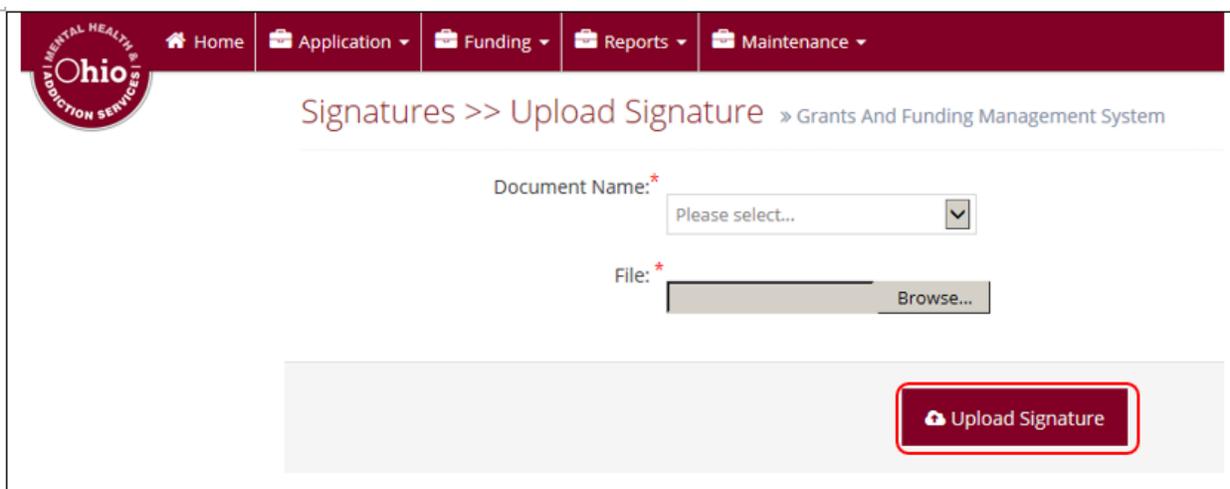
**The file size for signature documents is limited to 2 MB per signature sheet.
File type is limited to Adobe Acrobat (.pdf).**

 Upload Signature

Uploaded Signatures			
	Document Name	Uploaded Date	Uploaded By
	Prevention Signature	2/11/2016	Joseph.Bell
	Prevention Signature	3/28/2016	Neelima.Kelly

Next

- The Upload Signature pop-up window will appear.
- Input** the Document Name and Upload the signature document. **Click** on Upload Signature button. See the section in the user guide titled: 'How to Attach Documents' for detailed instructions.



Signatures >> Upload Signature > Grants And Funding Management System

Document Name: *
Please select...

File: *
Browse...

 Upload Signature

- The Signature Document will be listed in the "Uploaded Signatures" table as highlighted below in the snapshot:

OhioMHAS
Grants And Funding Management System

Welcome, Neelima.Kelly

Signature > Grants And Funding Management System

Please upload a signature sheet bearing the signatures of both your agency's Chief Executive Officer and President of the Board of Directors.

Note that you will not be able to submit the grant application without first uploading a signature page. If the signature page is incorrect, your grant application will be returned upon review by OhioMHAS. This could delay or potentially stop the processing of your application.

Click here to download a blank unsigned copy of the signature sheet.

The file size for signature documents is limited to 2 MB per signature sheet.
File type is limited to Adobe Acrobat (.pdf).

Upload Signature

Uploaded Signatures			
	Document Name	Uploaded Date	Uploaded By
	Prevention Signature	2/11/2016	Joseph.Bell
	Prevention Signature	3/28/2016	Neelima.Kelly
	Prevention Signature	3/28/2016	Neelima.Kelly

Next

Please note the restrictions for uploading this signature document.



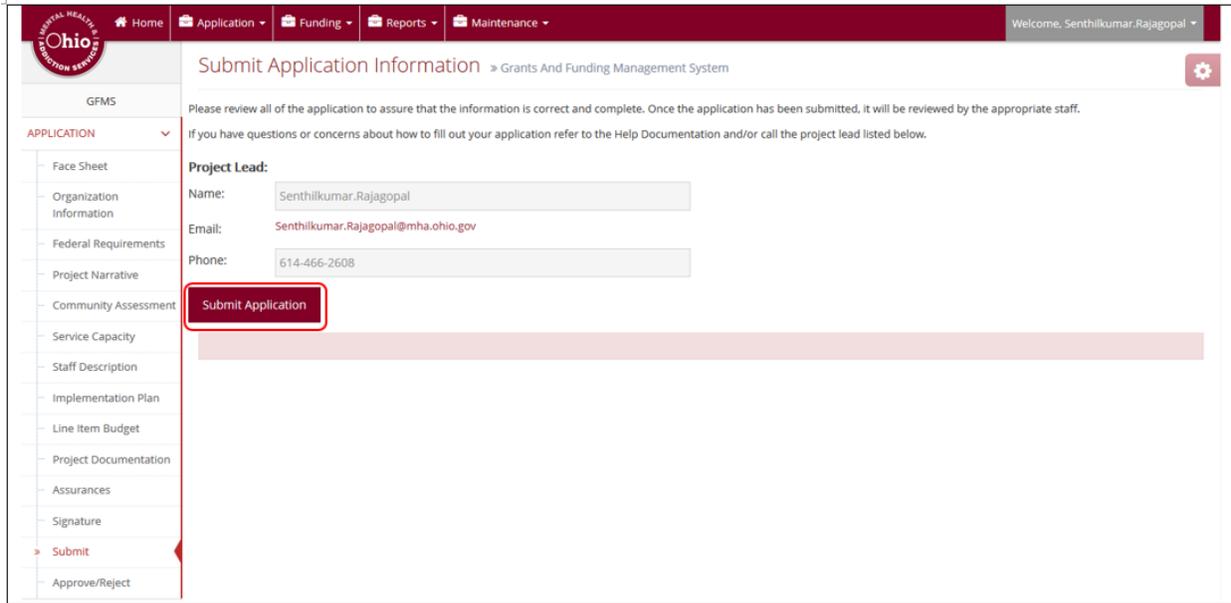
The file size for signature documents is limited to 2 MB per signature sheet.
File type is limited to Adobe Acrobat (.pdf).

**For Board Applicant, this page will be removed.*

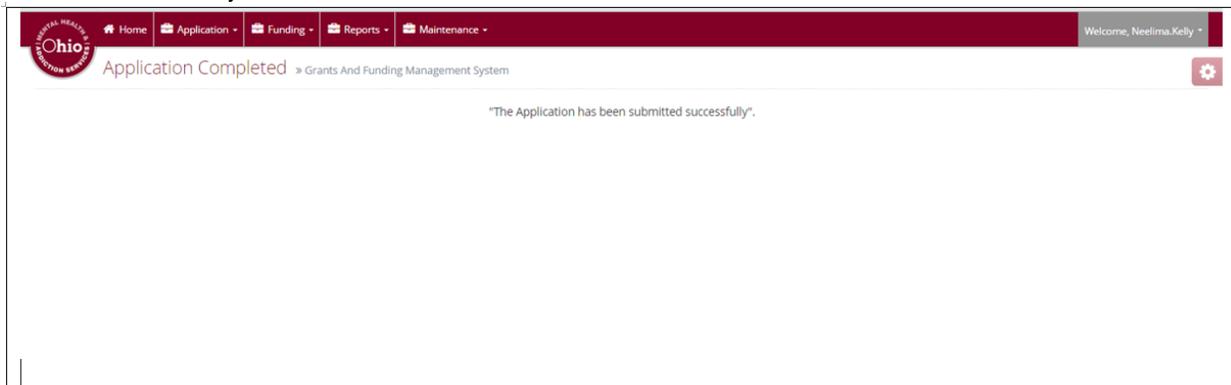
Submit

The Submit screen is where the application will be checked to assure all required fields are complete and the application will be submitted to OhioMHAS for review.

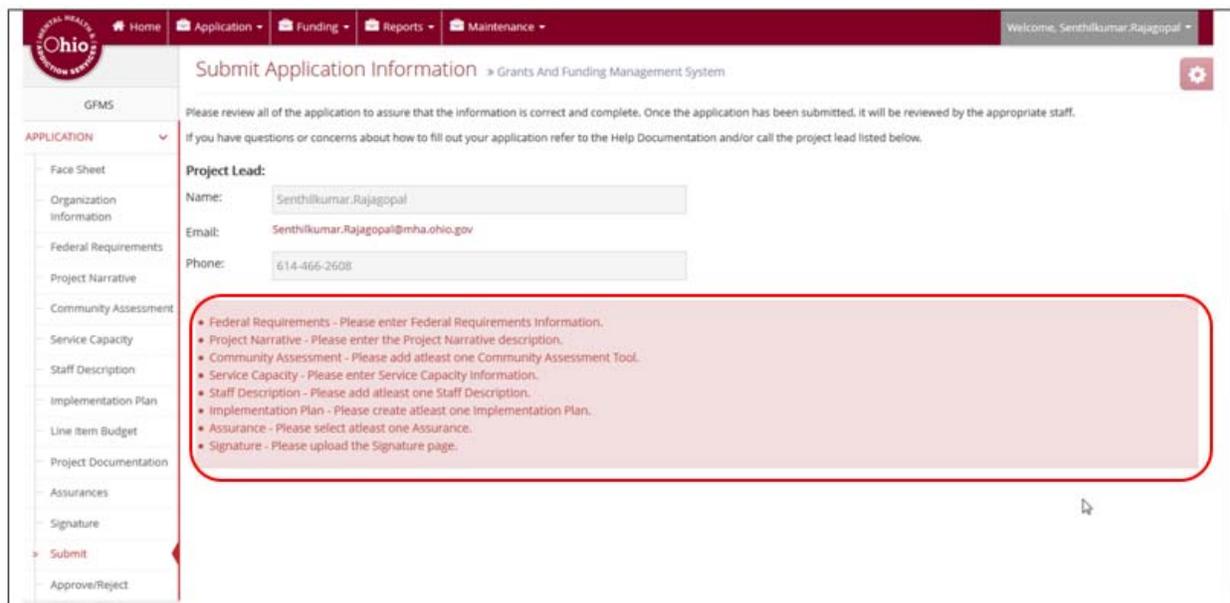
1. Select the Submit Application button.



2. The system will display “Application Completed” screen where you can view a message “The Application has been submitted successfully”



3. If the required information is not entered on the application pages and user **clicks** on Submit button, the system will ask user to enter the information, Example highlighted in the snapshot below:



For Board Applicant, the instructions will be “If you have questions or concerns about how to fill out your application, please refer to the Help Documentation and/or call the project lead listed below.”

New Allocations Application:

An Applicant is provisioned to access the MHAS Funding and Grants and Funding Management System to create an allocation application for the allocations. Here, the user logs into IPortal and has the option to select GFMS to apply for an allocation. Under the “Application” tab, selects the “New Allocation Application” option as displayed in the snapshot below:



Allocation Face Sheet

You are on the first page, “Allocation Face Sheet” of the allocation application. This page provides the initial information for the allocation application.

1. **Select** the information as indicated per each field on “Allocation Face Sheet” screen. Fields with red asterisks * are required fields.
2. **Click** on Search button. The fields will be displayed on the basis of selected input.
3. **Select and Enter** the information as indicated per each field. Fields with red asterisks * are required fields.
4. After all of the required information has been added, **click** on Next button (Data is saved) to be taken to the next screen.

Ohio Department of Public Health
Division of Public Health Services

Home Application Funding Reports Maintenance Welcome, Neelima Kelly

Allocation Face Sheet > Grants And Funding Management System

Organization: Murtis Taylor Human Services System

Location Address: 11410 Buckeye Road

State Fiscal Year: 2016

Mailing Address: 13422 Kinsman Road test

Primary Contact First Name: Percy

Primary Contact Last Name: Inman

Primary Contact Phone Number: (614) 528-9632

Primary Contact Email Address: pi@gmail.com

Secondary Contact First Name: Dianna

Secondary Contact Last Name: Hill

Secondary Contact Phone Number: (614) 852-9654

Secondary Contact Email Address: 111222@12.com

Fiscal Officer First Name: James

Fiscal Officer Last Name: Hill

Fiscal Officer Phone Number: (614) 254-8525

Fiscal Officer Email Address: jameshill@ohio.mha.gov

Next

Allocation Organization Information

The Organization Information page is read only and provides information captured from the initial registration process of the applicant organization required to provide access to the GFMS.



1. The information on this page is **view only** and cannot be changed. In order to **update** the information on this page, an Application Admin will need to make the update via the **IPortal** registration screen. Certification information must be updated through Licensure & Certification.

1. Click on the Next button to be taken to the next screen.

Ohio Department of Public Health
Division of Public Health Services

Home Application Funding Reports Maintenance Welcome, Neelima Kelly

Allocation Organization Information > Grants And Funding Management System

The information on this page is view only and cannot be changed. In order to update any organization information please login to IPortal, use the search organization screen to search, edit and update information

Implementing Organization: Murtis Taylor Human Services System

Implementing Organization's Phone Number: (216) 663-5338

Implementing Organization's Mailing Address: 13422 Kinsman Road test

City: Cleveland

State: OH

Zip: 44120

ADAMHS/ADAS Board: Murtis Taylor Human Services System

Federal Tax ID: 237158458

Next

Allocation Allocated Funding

This page captures the funding that has been allocated to the organization.



1. The Allocation Allocated Funding information is populated from the allocation funding page located in the funding tab.

1. Click on the Next button to be taken to the next screen.

The screenshot displays the 'Allocation Allocated Funding' page within the 'Grants And Funding Management System'. The page features a navigation menu on the left with options like 'Allocation Face Sheet', 'Allocation Organization Information', and 'Allocation Allocated Funding' (which is currently selected). The main content area shows a table with the following data:

Program Area	Funding Source	Amount
AB Program Area	Test 9	\$4,000.00
Community Investments	Test 8	\$(474.45)
Total Amount Allocated:		\$3,525.55

A 'Next' button is located at the bottom right of the table area, highlighted with a red box.

Allocation Federal Requirements

The Allocation Federal Requirement page gathers additional information that may be needed for federal reporting.

Page Permissions and Access Roles

1. **Select** and **Enter** the information as indicated per each field on "Allocation Federal Requirement" screen.
2. Fields with red asterisks * are required fields.

3. To add Executives Director, **select** the Add Executive button on the Allocation Federal Requirements screen, an “Add Executive” pop-up window will be displayed.

4.

pop-up window, **enter** the required information and **select** the Add button. Repeat steps #3 and #4 up to 5 of the Executives have been added. The maximum limit to add executives are up to 5. Executive information will be displayed under “Executive Listing” table.

5. After all of the required information has been added, **select** the Next (Data is saved) button to be taken to the next screen.

The screenshot displays the 'Allocation Documentation' screen in the Ohio Allocation Management System (AMS). The page includes a navigation menu on the left, a form for entering executive details, and a table of existing executives.

Executive Information Form:

- Executive Director's First Name: Stephen
- Executive Director's Last Name: Kron
- Executive Director's Mailing Address: 54 northglen rd
- Executive Director's Email: sk@gmail.com
- City: Columbus
- State: Ohio
- Zip: 43224
- Executive Director's Phone Number: (614) 787-9876
- Executive Director's Office Number: (234) 343-4324
- President of Board of Directors: Sabin Hill
- President of Board of Director's Email: sh@gmail.com
- DUNS Number: 654646459
- I-BHS Number (requested for behavioral health treatment providers):
- I-BHS Number:
- Congressional District: 9,11,14,16

Executive Listing Table:

Action	First Name	Last Name	Title	Email	Yearly Income
<input checked="" type="checkbox"/> Edit <input type="checkbox"/> Delete	Alan	Rogers	Manager	ar@gmail.com	75000
<input checked="" type="checkbox"/> Edit <input type="checkbox"/> Delete	Neelima	Kelly	Manager	nn@gmail.com	60000
<input checked="" type="checkbox"/> Edit <input type="checkbox"/> Delete	Neelima	Dutta	Manager	nd@gmail.com	60000
<input checked="" type="checkbox"/> Edit <input type="checkbox"/> Delete	Patty	Inman	Manager	pi@gmail.com	80000
<input checked="" type="checkbox"/> Edit <input type="checkbox"/> Delete	Zareen	Syed	Manager	zs@gmail.com	70000

Buttons: Add Executive, Next

Allocation Documentation

The Allocation Documentation screen is where the Insurance Policy, Annual Financial Reporting Audit, Title XX reports, program documentation, MOU and any additional documents will be attached (uploaded). There is an additional section for Title XX Reports where user can view and download the reports.

Non-Board View

In the non-board view, Allocation Documentation contains following sections as mentioned in the snapshot below:

1. Uploaded Proof of Liability
2. Uploaded Annual Financial Report Audit
3. Upload Program Documentation
4. Upload MOU
5. Upload Additional Attachments.

Allocation Documentation » Grants And Funding Management System

GFMS

ALLOCATION

Allocation Face sheet

Allocation Funding

Allocation Organization Information

Allocation Federal Requirements

Allocation Documentation

Allocation Assurance

Allocation Signature

Allocation Submit

Allocation Approval/Reject

Click Here to Upload the Proof of Liability page of the Insurance Policy to this section.

Uploaded Proof of Liability

Document Name	Description	Uploaded Date	Uploaded By
a. Insurance Carrier:	<input type="text"/>		
b. Policy #:	<input type="text"/>		
c. Insurance Amount:	\$ <input type="text"/>		
d. Date of Expiration:	<input type="text"/>		

Click Here to Upload the Findings page of the Annual Financial Reporting audit or Auditable financial statements.

Uploaded Annual Financial Reporting Audit

Document Name	Description	Uploaded Date	Uploaded By
a. Has the agency had a current Annual Financial Reporting Audit within the past 12 months?	<input type="text" value="Select"/>		
c. Any Findings?	<input type="text" value="Select"/>		

Click Here to Upload Program Documentation

Uploaded Program Documentation

Document Name	Description	Uploaded Date	Uploaded By
---------------	-------------	---------------	-------------

Click Here to Upload the MOU - Memorandum of Understanding (if required)

Uploaded MOU

Document Name	Description	Uploaded Date	Uploaded By
---------------	-------------	---------------	-------------

Click Here to Upload Additional Attachments

Uploaded Additional Attachments

Document Name	Description	Uploaded Date	Uploaded By
---------------	-------------	---------------	-------------

Next

Board View

In the board view, Allocation Documentation contains following sections as mentioned in the snapshot below:

1. Uploaded Proof of Liability
2. Uploaded Annual Financial Report Audit
3. Title XX (Social Services Block Grant) Documents
4. Uploaded Title XX (Social Services Block Grant) Documents
5. Upload Program Documentation
6. Upload MOU
7. Upload Additional Attachments.

Allocation Documentation > Grants And Funding Management System

- ALLOCATION
- Allocation Face Sheet
- Allocation Organization Information
- Allocation Allocated Funding
- Allocation Federal Requirements
- Allocation Documentation
- Allocation Assurance
- Allocation Signature
- Allocation Submit
- Allocation Approval

[Click Here to Upload the Proof of Liability page of the Insurance Policy to this section.](#)

Uploaded Proof of Liability

Document Name	Description	Uploaded Date	Uploaded By
View Allocation Compliance 1		4/13/2016	Maria.Foster
View Compliance 1		4/13/2016	Maria.Foster
View Test2		4/13/2016	Maria.Foster

a. Insurance Carrier:

b. Policy #:

c. Insurance Amount: \$

d. Date of Expiration:

[Click Here to Upload the Findings page of the Annual Financial Reporting audit or Auditable financial statements.](#)

Uploaded Annual Financial Reporting Audit

Document Name	Description	Uploaded Date	Uploaded By
View Prevention Signature		4/8/2016	Maria.Foster
View Prevention Signature		4/11/2016	Maria.Foster
View Test		4/13/2016	Maria.Foster
View Test 2		4/13/2016	Maria.Foster
View test test		4/27/2016	Maria.Foster
View Test zip test		4/27/2016	Maria.Foster
View Treatment & Recovery Signature		4/8/2016	Maria.Foster
View Treatment & Recovery Signature		4/13/2016	Zareen.Syed

a. Has the agency had a current Annual Financial Reporting Audit within the past 12 months? Yes

b. If Yes: Date the Audit was completed:

Time Period the Audit From:

Time Period the Audit To:

c. Any Findings? Yes

If Findings, please explain:

Title XX (Social Services Block Grant) Documents

Title XX Invoice	View	Download	Instructions
Title XX Services Plan	View	Download	Instructions
Title XX Annual Expenditure Report	View	Download	Instructions

- [Click Here to Upload the Title XX Invoice.](#)
- [Click Here to Upload the Title XX Services Plan.](#)
- [Click Here to Upload the Title XX Annual Expenditure Report.](#)

Uploaded Title XX (Social Services Block Grant) Documents

Document Name	Description	Uploaded Date	Uploaded By
View Quarter 1 Invoice	Testing	4/27/2016	Zareen.Syed
View Quarter 2 Invoice	one more	4/21/2016	Maria.Foster
View Quarter 3 Invoice	gghghh	4/21/2016	Maria.Foster
View Quarter 3 Invoice	An invoice for quarter 3	4/22/2016	Maria.Foster
View Quarter 4 Invoice	Quarter 4	4/21/2016	Maria.Foster
View Title XX Services Plan 1		4/21/2016	Maria.Foster
View ttf	dttf	4/27/2016	Zareen.Syed
View Title XX AER		4/20/2016	Maria.Foster
View Title XX AER 2		4/20/2016	Maria.Foster

[Click Here to Upload Program Documentation](#)

Uploaded Program Documentation				
	Document Name	Description	Uploaded Date	Uploaded By
	Annual Financial Report	Annual Financial Report	4/27/2016	Neelima.Kelly

[Click Here to Upload the MOU – Memorandum of Understanding \(if required\)](#)

Uploaded MOU				
	Document Name	Description	Uploaded Date	Uploaded By
	MOU1		4/13/2016	Maria.Foster
	MOU2		4/13/2016	Maria.Foster
	MOU3	Description	4/13/2016	Maria.Foster
	MOU4	Some description	4/13/2016	Maria.Foster
	MOU5	Description	4/13/2016	Maria.Foster

[Click Here to Upload Additional Attachments](#)

Uploaded Additional Attachments				
	Document Name	Description	Uploaded Date	Uploaded By
	Attachment1	Attachment description	4/13/2016	Maria.Foster
	Attachment2	Two	4/13/2016	Maria.Foster

Next

How to Attach Documents

1. All documents on the “Allocation Documentation” screen will be attached in the same manner.
2. To attach the “Proof of Liability” page, **click** on the Click Here to Upload link, which is designated by the pointing hand icon.



3. A pop-up window will appear to allow for the uploading of the document.
4. Fields with red asterisks * are required fields.
5. To attach a document, **select** the Browse button.
6. **Select** the file from your computer that is to be attached and then **select** the Upload Attachment button:

Ohio HEALTH CARE COORDINATION SERVICES

Home Application Funding Reports Maintenance Welcome, Neelima.Kelly

Allocation Documentation >> Upload Proof of Liability > Grants And Funding Management System

⚠ Documents may be added with the following restrictions:

- File size is limited to 2 MB.
- File types are limited to:
 - Word (.doc, .docx)
 - Excel (.xls, .xlsx)
 - Adobe Acrobat (.pdf)
 - PowerPoint (.ppt, .pptx)
 - Images (.jpg)
 - Text (.txt)
 - Rich Text Format (.rtf)

Items that do not meet these restrictions cannot be attached.

Document Name: *

Document Description:

File: *

Upload Document



Please be aware of the restriction on the documents attachments.

⚠ Documents may be added with the following restrictions:

- File size is limited to 2 MB.
- File types are limited to:
 - Word (.doc, .docx)
 - Excel (.xls, .xlsx)
 - Adobe Acrobat (.pdf)
 - PowerPoint (.ppt, .pptx)
 - Images (.jpg)
 - Text (.txt)
 - Rich Text Format (.rtf)

Items that do not meet these restrictions cannot be attached.

Uploaded Proof of Liability

1. **Enter** the information as indicated for each field.
2. See the section titled; 'How to Attach Documents' for instructions on how to attach the required documents.
3. Once the document has been uploaded, it will appear in the table titled, "Uploaded Proof of Liability" as highlighted in the snapshot below:

[Click Here to Upload the Proof of Liability page of the Insurance Policy to this section.](#)

Uploaded Proof of Liability

	Document Name	Description	Uploaded Date	Uploaded By
View	Insurance Doc	Insurance Doc	4/29/2016	Neelima.Kelly

a. Insurance Carrier:

b. Policy #:

c. Insurance Amount: \$

d. Date of Expiration: 

4. If this is the only section in the 'Allocation Documentation' screen that needs completed, select the Next button.
5. If there are other sections in the 'Allocation Documentation' screen that needs to be completed, then proceed to the next section on the screen.

Uploaded Annual Financial Reporting Audit

1. **Enter** the information as indicated for each field.
2. If you **select** the answer Yes to question a, then you will be required to provide a 'Date the Audit was Completed'.
3. If you **select** the answer Yes to question c, then you will be required to provide an explanation.
4. See the section titled; 'How to Attach Documents' for instructions on how to attach the required documents.
5. Once the document has been uploaded, it will appear in the table titled, "Uploaded Annual Financial Reporting Audit".

[Click Here to Upload the Findings page of the Annual Financial Reporting audit or Auditable financial statements.](#)

Uploaded Annual Financial Reporting Audit

	Document Name	Description	Uploaded Date	Uploaded By
View Delete	Audit Report	Audit Report	4/29/2016	Neelima.Kelly

a. Has the agency had a current Annual Financial Reporting Audit within the past 12 months?

b. If Yes: Date the Audit was completed: *

Time Period the Audit From:

Time Period the Audit To:

c. Any Findings?

If Findings, please explain: *

- If this is the only section in the "Allocation Documentation" screen that needs completed, select the Next button.
- If there are other sections in the "Allocation Documentation" screen that needs to be completed, then proceed to the next section on the screen.

Download the Uploaded Title XX Reports/Documents

- Click** on View link to read the documents.
- Click** on Download link to download the document.
- Click** on Delete link to delete the document.

**Note: This section will be appeared for boards only.*

Title XX (Social Services Block Grant) Documents			
Title XX Invoice	View	Download	Instructions
Title XX Services Plan	View	Download	Instructions
Title XX Annual Expenditure Report	View	Download	Instructions

Uploaded Title XX Reports/Documents

- See the section titled; 'How to Attach Documents' for instructions on how to attach the required documents.
- Once the document has been uploaded, it will appear in the table titled, 'Uploaded Title XX Documentation'. You can view the document.
- If this is the only section in the 'Allocation Documentation' screen that needs completed, select the Next button.
- If there are other sections in the 'Allocation Documentation' screen that needs to be completed, then proceed to the next section on the screen.

**Note: This section will be appeared for boards only and the delete option will be available until the allocation application is submitted.*

[Click Here to Upload the Title XX Invoice.](#)

[Click Here to Upload the Title XX Services Plan.](#)

[Click Here to Upload the Title XX Annual Expenditure Report.](#)

Uploaded Title XX (Social Services Block Grant) Documents

	Document Name	Description	Uploaded Date	Uploaded By
View	Quarter 1 Invoice	Testing	4/27/2016	Zareen.Syed

Uploaded Program Documentation

1. The 'Program Name' will appear automatically as the table header depending on the Project that was selected on the Face Sheet.
2. See the section titled; 'How to Attach Documents' for instructions on how to attach the required documents.
3. Once the document has been uploaded, it will appear in the table titled, 'Uploaded *program name* Documentation'.

[Click Here to Upload Program Documentation](#)

Uploaded Program Documentation					
		Document Name	Description	Uploaded Date	Uploaded By
		Program Document	Program Document	4/29/2016	Neelima.Kelly

4. If this is the only section in the 'Allocation Documentation' screen that needs completed, select the Next button.
5. If there are other sections in the 'Allocation Documentation' screen that needs to be completed, then proceed to the next section on the screen.

Uploaded MOU

1. See the section titled; 'How to Attach Documents' for instructions on how to attach the required documents.
2. Once the document has been uploaded, it will appear in the table titled, 'Uploaded MOU'.

[Click Here to Upload the MOU - Memorandum of Understanding \(if required\)](#)

Uploaded MOU					
		Document Name	Description	Uploaded Date	Uploaded By
		MOU 1	MOU 1	4/29/2016	Neelima.Kelly

3. If this is the only section in the 'Allocation Documentation' screen that needs completed, **select** the Next button.
4. If there are other sections in the 'Allocation Documentation' screen that needs to be completed, then proceed to the next section on the screen.

Uploaded Additional Attachments

1. This section is to be used for any other additional attachments that may be needed to submit the application.
2. See the section titled; 'How to Attach Documents' for instructions on how to attach the required documents.
3. Once the document has been uploaded, it will appear in the table titled, 'Uploaded Additional Attachments'.

[Click Here to Upload Additional Attachments](#)

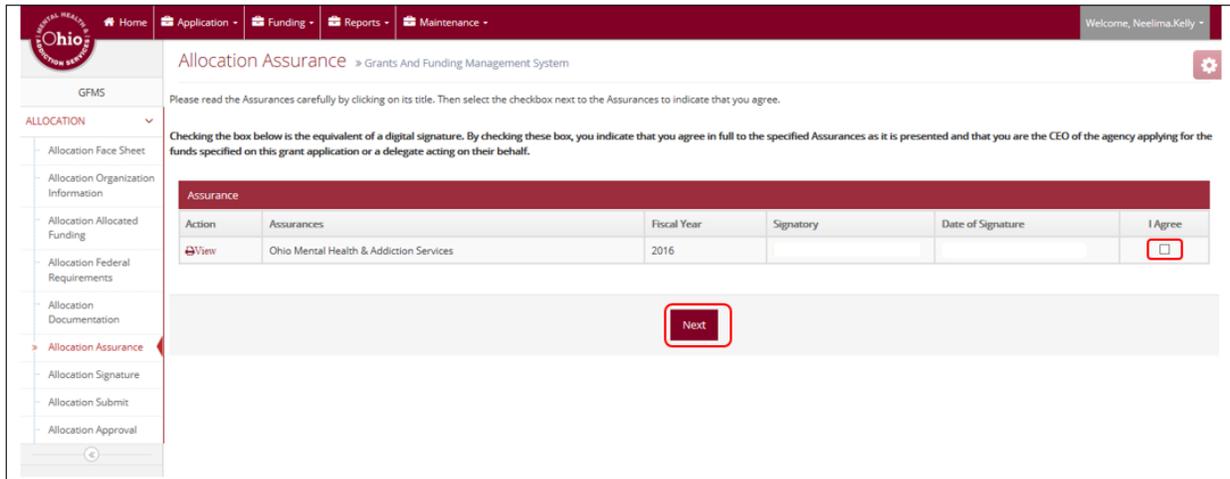
Uploaded Additional Attachments					
		Document Name	Description	Uploaded Date	Uploaded By
		Financial Document	Financial Document	4/29/2016	Neelima.Kelly

4. If this is the only section in the 'Allocation Documentation' screen that needs completed, select the Next button.
5. If there are other sections in the 'Allocation Documentation' screen that needs to be completed, then proceed to the next section on the screen.

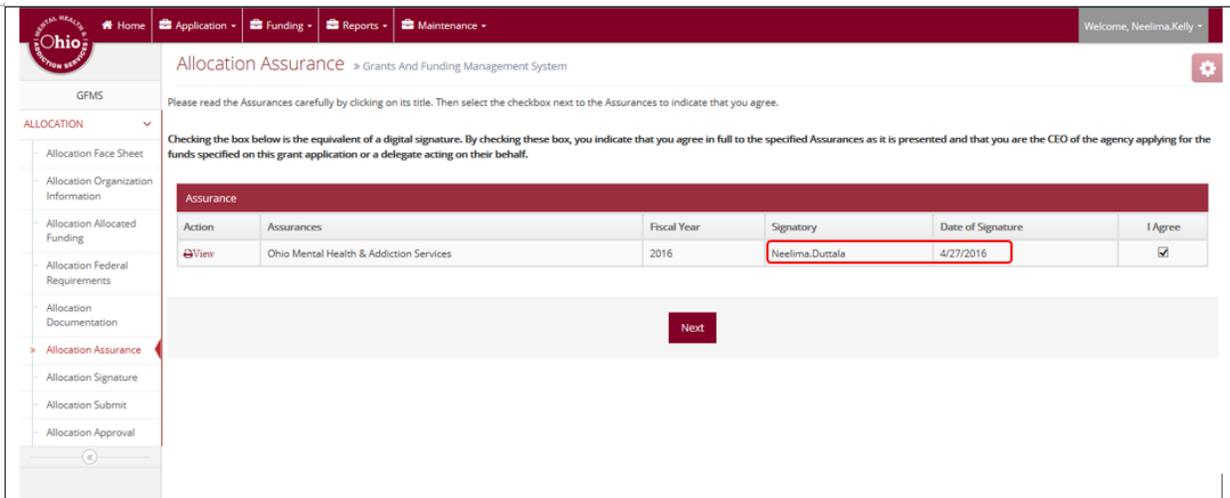
Allocation Assurance

The Allocation Assurances screen is where the user will read and digitally sign the Assurances document.

1. **Select** the View link in the “Assurance” table to read the assurance document.
2. **Mark** the checkbox for “I Agree” to digitally sign that the assurance has been reviewed and agreed to.
3. **Click** on Next button (Data is saved) to be taken to the next screen.



4. A Signatory Name and Date of Signature will be displayed in the Assurance table as highlighted below in the snapshot:

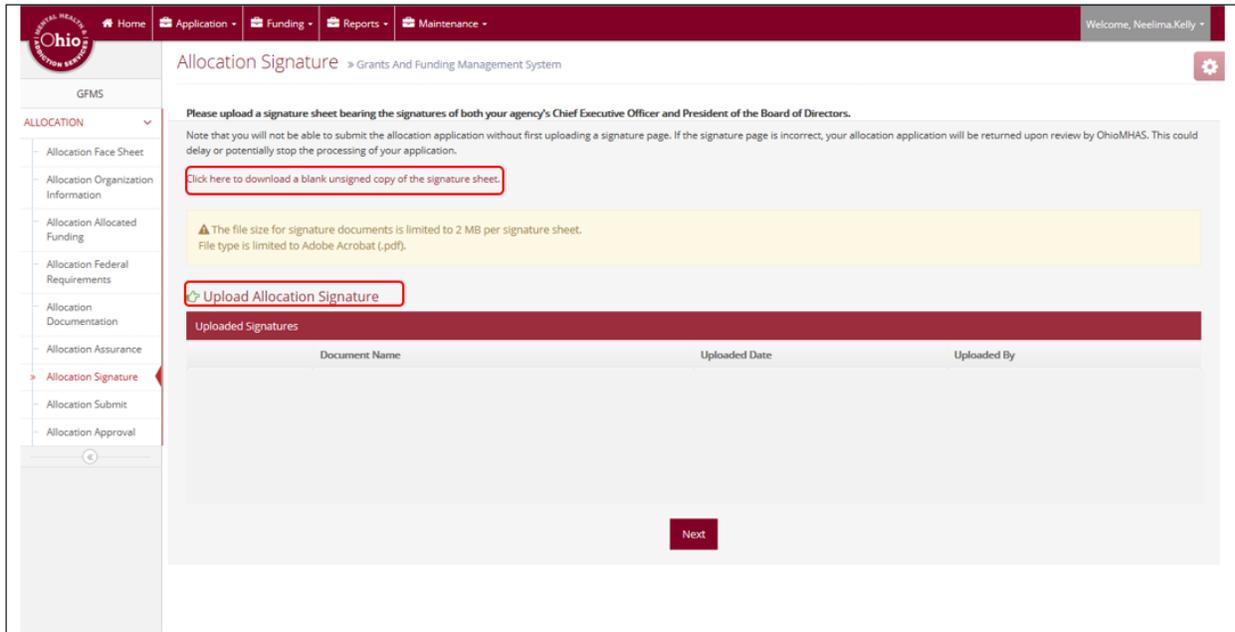


Allocation Signature

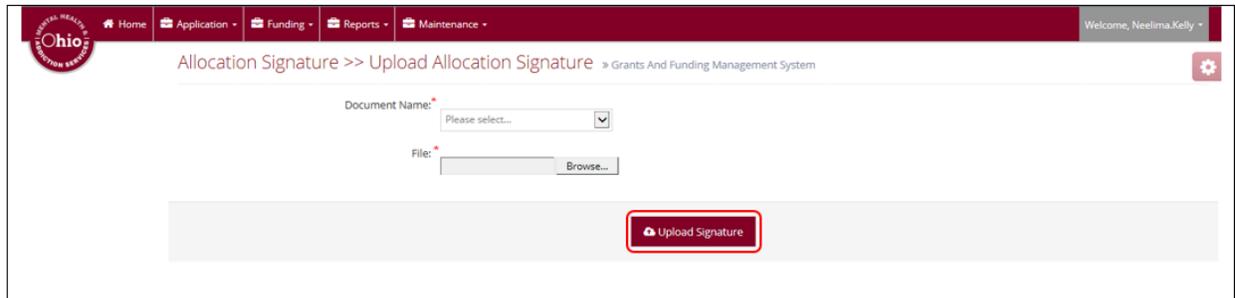
The Allocation Signature screen is where the unsigned copy of the signature sheet can be downloaded, signed, and the uploaded back into the application.

1. **Select** the Click Here link to download the signature sheet.
[Click here to download a blank unsigned copy of the signature sheet.](#)
2. The signature sheet will be opened in a PDF format. **Print** the document, get it signed by the appropriate people, then **scan** and **save** the document to your computer.
3. To attach the signed Signature sheet to the application, **select** the Upload Allocation Signature link.

[Upload Allocation Signature](#)



4. The Upload Allocation Signature pop-up window will appear.
5. **Input** the Document Name and Upload the signature document. **Click** on Upload Signature button. See the section in the user guide titled: 'How to Attach Documents' for detailed instructions.



6. The Signature Document will be listed in the "Uploaded Signatures" table as highlighted below in the snapshot:

Allocation Signature > Grants And Funding Management System

Please upload a signature sheet bearing the signatures of both your agency's Chief Executive Officer and President of the Board of Directors.

Note that you will not be able to submit the allocation application without first uploading a signature page. If the signature page is incorrect, your allocation application will be returned upon review by OhioMHAS. This could delay or potentially stop the processing of your application.

Click here to download a blank unsigned copy of the signature sheet.

⚠ The file size for signature documents is limited to 2 MB per signature sheet. File type is limited to Adobe Acrobat (.pdf).

Upload Allocation Signature

Uploaded Signatures			
	Document Name	Uploaded Date	Uploaded By
View	Prevention Signature	4/23/2016	Senthikumar.Rajagopal

Next

Please note the restrictions for uploading this signature document.



⚠ The file size for signature documents is limited to 2 MB per signature sheet. File type is limited to Adobe Acrobat (.pdf).

Allocation Submit

The Allocation Submit screen is where the application will be checked to assure all required fields are complete and the application will be submitted to OhioMHAS for review.

1. Select the Submit Application button.

OHIO CENTRAL HEALTH SERVICES

Home Application Funding Reports Maintenance Welcome, Neelima.Kelly

Submit Allocation Information » Grants And Funding Management System

GFMS

ALLOCATION

- Allocation Face sheet
- Allocation Organization Information
- Allocation Funding
- Allocation Federal Requirements
- Allocation Documentation
- Allocation Assurance
- Allocation Signature
- Allocation Submit**
- Allocation Approve/Reject

Please review all of the application information to assure that the information is correct and complete. Once the application has been submitted, it will be reviewed by the appropriate staff.
If you have questions or concerns about how to fill out your application, please refer to the Help Documentation and/or call the project lead listed below.

Project Lead:

Name: Senthilkumar.Rajagopal

Email: Senthilkumar.Rajagopal@mha.ohio.gov

Phone: 614-466-2608

Submit Allocation

2.The system will display “Application Completed” screen where you can view a message “The Application has been submitted successfully”

OHIO CENTRAL HEALTH SERVICES

Home Application Funding Reports Maintenance Welcome, Neelima.Kelly

Application Completed » Grants And Funding Management System

"The Application has been submitted successfully".

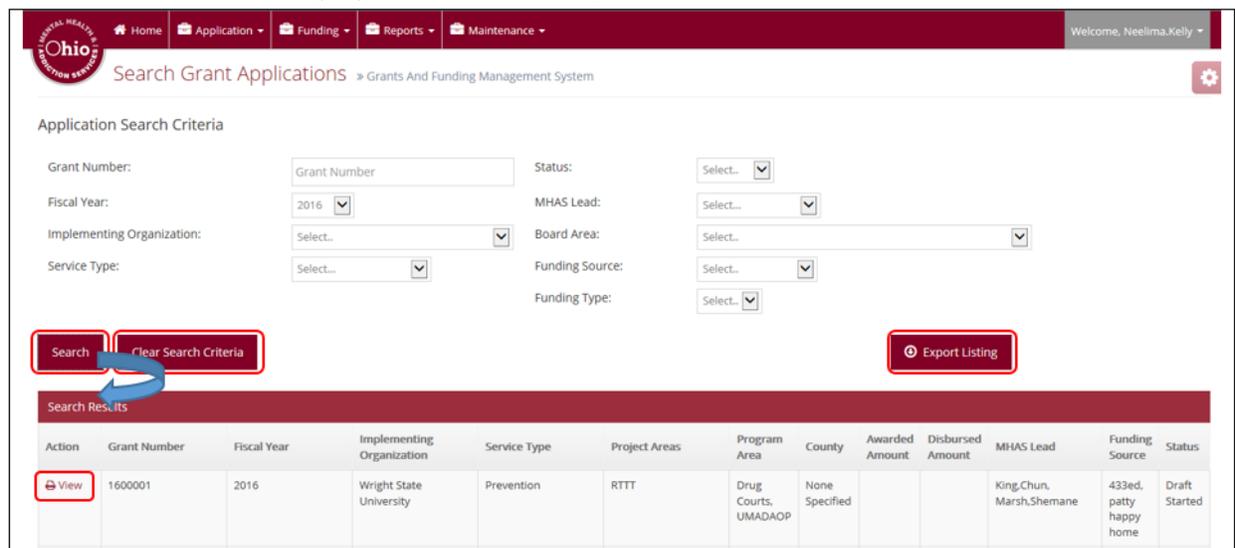
3. If the required information is not entered on the application pages and user **clicks** on Submit Allocation button, the system will ask user to enter the information, Example highlighted in the snapshot below:

Search Grant Applications:

1. Click on "Application" tab and select "Search Grant Applications" from the list.



2. The Search Grant Applications page will be displayed, consist of Search, Clear Search, Export Listing and View Functions as highlighted below in the snapshot:



3. **Select** the search criteria displayed on "Search Grant Applications" screen. All the search criteria's (filters) are optional. If you change your mind, **click** on Clear Search Criteria button to clear search criteria's.
4. **Click** on Search button displayed on the "Search Grant Applications" Screen. The search results grid will be displayed on the basis of selected search criteria's.
5. If desired, you can **click** on Export Listing button to export search results to an excel spreadsheet.
6. If you want to view an application, **click** on View link displayed under Search Results grid as highlighted in the snapshot.

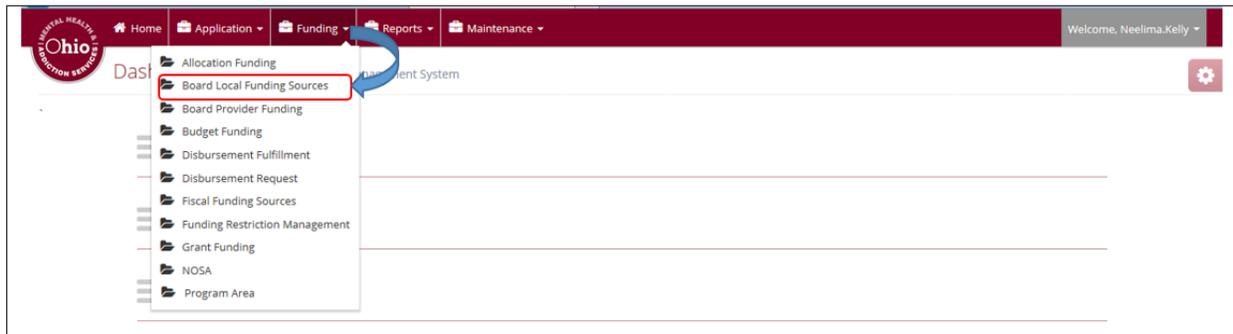
Funding Tab

Board Local Funding Sources

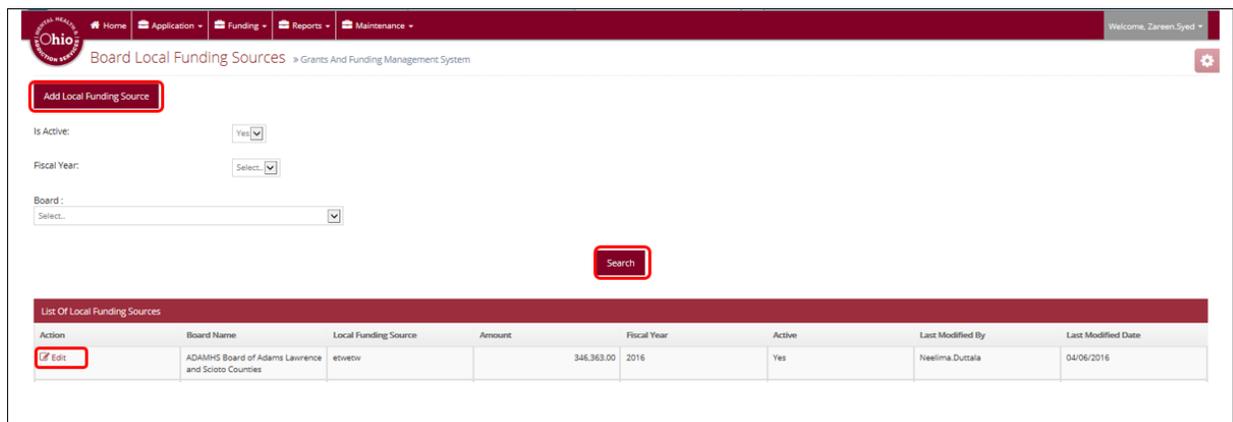
The Board Local Funding Sources screen is where Board will be able to add and edit funding sources to the application.

Add a Local Funding Source

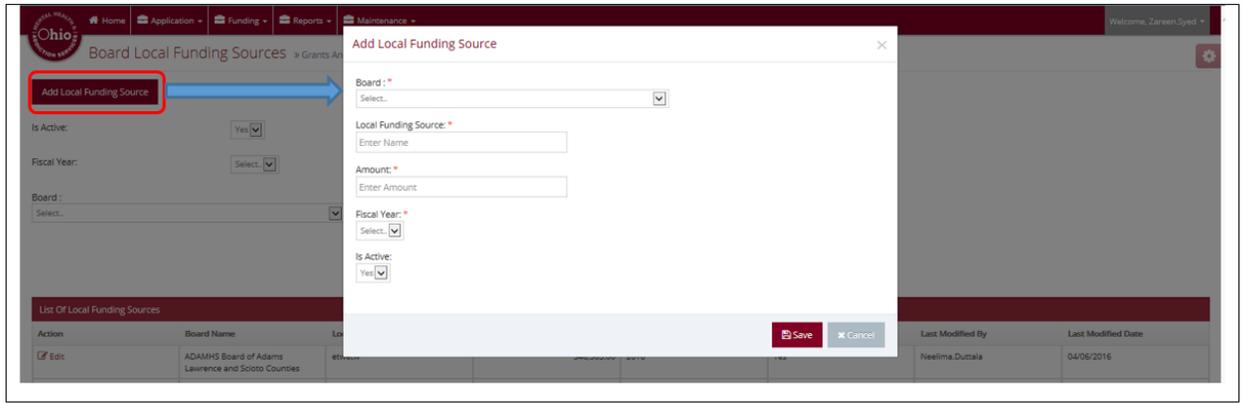
1. **Click** on Funding Tab and **select** “Board Local Funding Sources” option from the list.



2. The Board Local Funding Sources screen will be displayed, consist of Add, Edit and Search Functions.



3. **Select** the Add Local Funding Source button on the Board Local Funding sources screen, an “Add Local Funding Source” pop-up window will be displayed.
4. **Select** and **Enter** the information as indicated per each field displayed on the “Board Local Funding Source” pop-up window. Fields with red asterisks * are required fields.
5. After all of the required information has been added, **click** on Save button to be taken to the next screen (Back to Board Local Funding screen). If you change your mind, **click** on Cancel button, navigated back to the Board Local Funding screen.

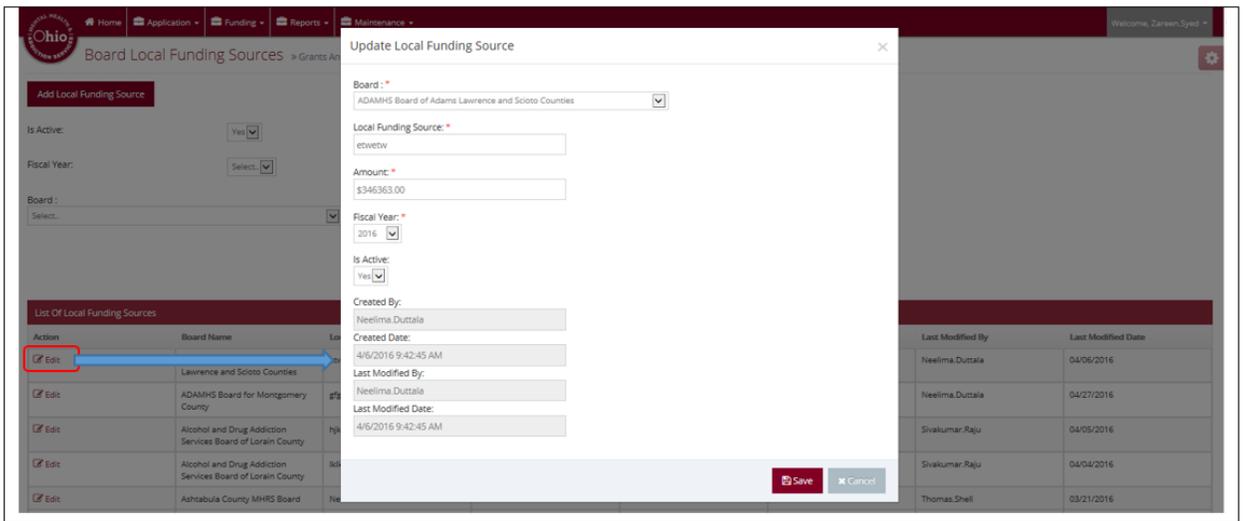


Clicking on “Search” button- Display “List of Local Funding Sources” Grid

1. **Select** the search criteria displayed on “Board Local Funding Sources” screen. All the search criteria’s (filters) are optional.
2. **Click** on Search button displayed on the “Board Local Funding Sources” Screen. The search results will be displayed under “List of Local Funding Sources” Grid, based on selected search criteria’s.

Clicking on “Edit” link- Display “Update Local Funding” Pop-up Window

1. Select the Edit link in the ‘List of Local Funding Sources’ table.
2. A pop-up window will appear titled; ‘Update Local Funding Source’.
6. Make the appropriate changes to the information and select the Save button (the updates will be saved) to be taken to the next screen (Back to Board Local Funding Sources screen). If you change your mind, **click** on Cancel button, navigated back to the Board Local Funding Sources screen.

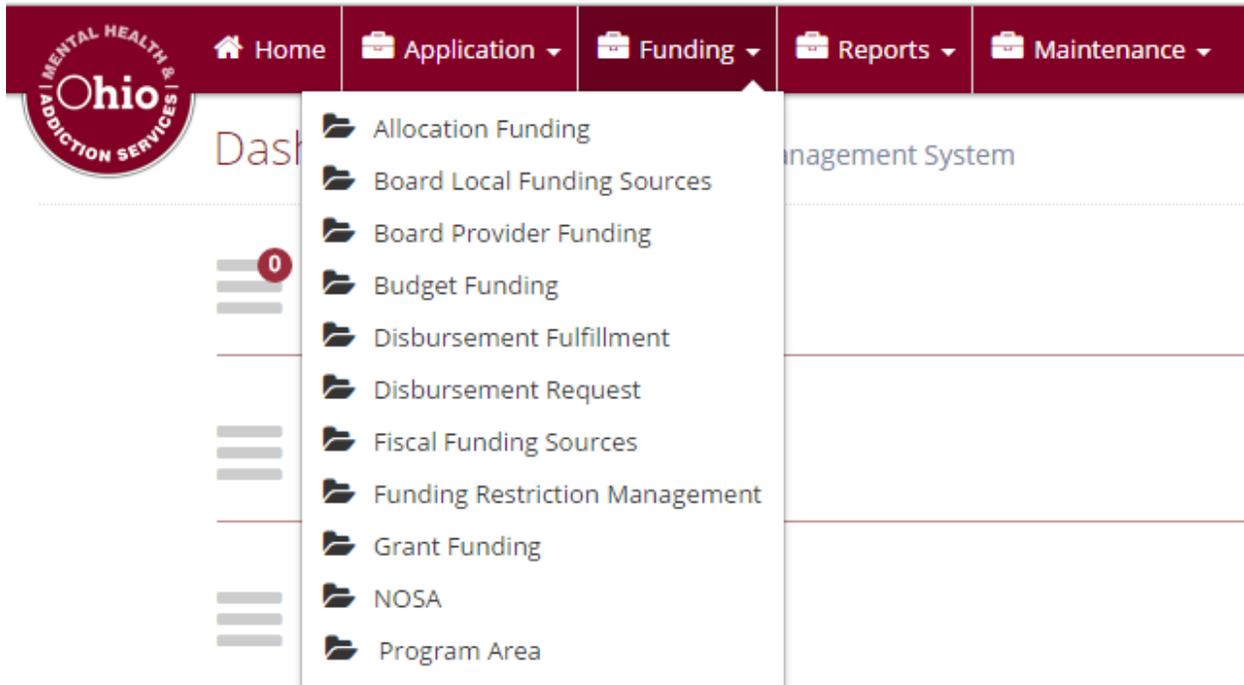


Disbursement Request

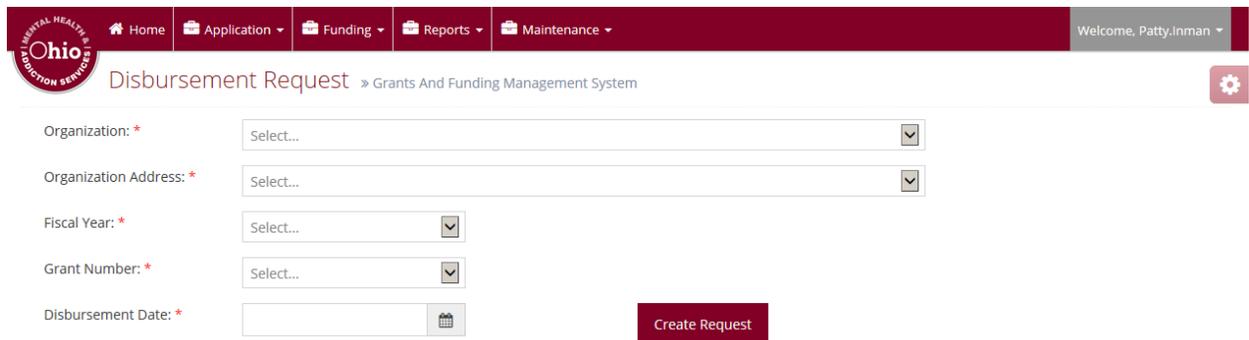
The Disbursement Request screen is where a user will request a disbursement for his grant funds.

Applicant Requesting a Disbursement

1. **Click** on Funding Tab and **select** “Disbursement Request” option from the list as highlighted below in the snapshot:



2. The Disbursement Request screen will display.



3. The Applicant will complete the information on the screen and select the Create Request button. In order to request a disbursement, a NOSA must have been awarded.
4. On the Disbursement Request screen, input the 'Requested Amount' next to the budget item.
5. Select the Submit Disbursement Request button. A message will appear on the screen indicating that the request was successfully submitted.
6. A notification will be sent to the OhioMHAS Lead who will review the request.

Ohio Disbursement Request » Grants And Funding Management System

Organization: Center for Effective Living Inc
 Organization Address: 20800 Westgate Professional Center
 Fiscal Year: 2016
 Grant Number: 1600013
 Disbursement Date: 05/17/2016

[Create Request](#)

Disbursement Summary

Total Award	Available Award	Advance Funding	Total Received to Date	Balance Available for Request	Current Period Request	Available Balance
2000.00	500.00	0.00	0.00	500.00	0.00	500.00

Line Item Budget

Direct Costs	MHAG Approved Budget	Requested Amount
Personnel	500.00	
Fringe Benefits		
Travel		
Mileage		
Airfare		
Lodging		
Meal Per Diem		
Equipment		
Computer/Equipment		
Furniture		
Supplies		
Printing/Copying		
Subscription/Publications		
Contractual		
Personal Service Contracts		
Honorarium		
Construction		
Other		
Conference/Training		
Registration		
Food		
Indirect Costs	MHAG Approved Budget	Requested Amount
Rent/Lease		
Fleet	500.00	
Maintenance/Repair		
Insurance		
Phone Bills/Utilities		

[Submit Disbursement Request](#)

Grant Report
 Under Construction

Expenditure Report
 Under Construction

Maintenance Tab

This section covers the maintenance items needed for an applicant to apply for a grant in the GFMS system. It is primarily used by **“Internal Users”** with some **“External Users”** functionality. These pages are used to define all the activities, assurances, project areas, email notifications, elements of sustainability, levels of care, levels of change, manage leads, NOMs, objectives, project areas availability, project models, renewals/revisions, service, services, strategy and target populations, so that an external user can access these values in completing their grant application.

Email Notification:

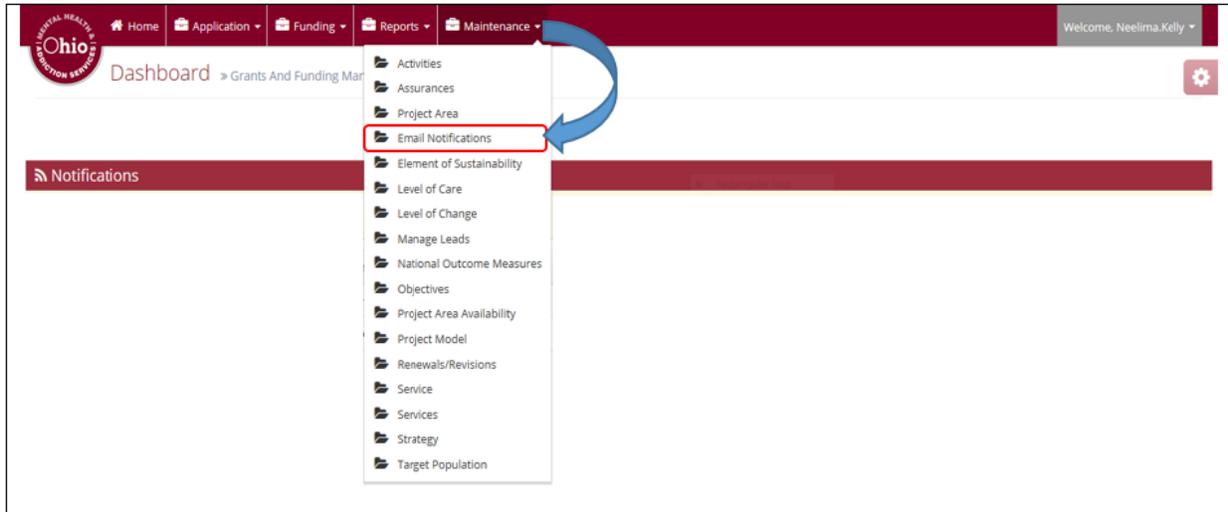
This is the section where user can select email notification in order to begin receiving emails whenever an item progresses through the workflow process.



1. The Project Area, NOM, Objectives, Strategy/Services or Service/Activities needs to be defined **before** select email notifications can be **applied**.
2. The contact listed as the OhioMHAS Lead **will always receive notification** regardless if they have been **deselected** a notification.

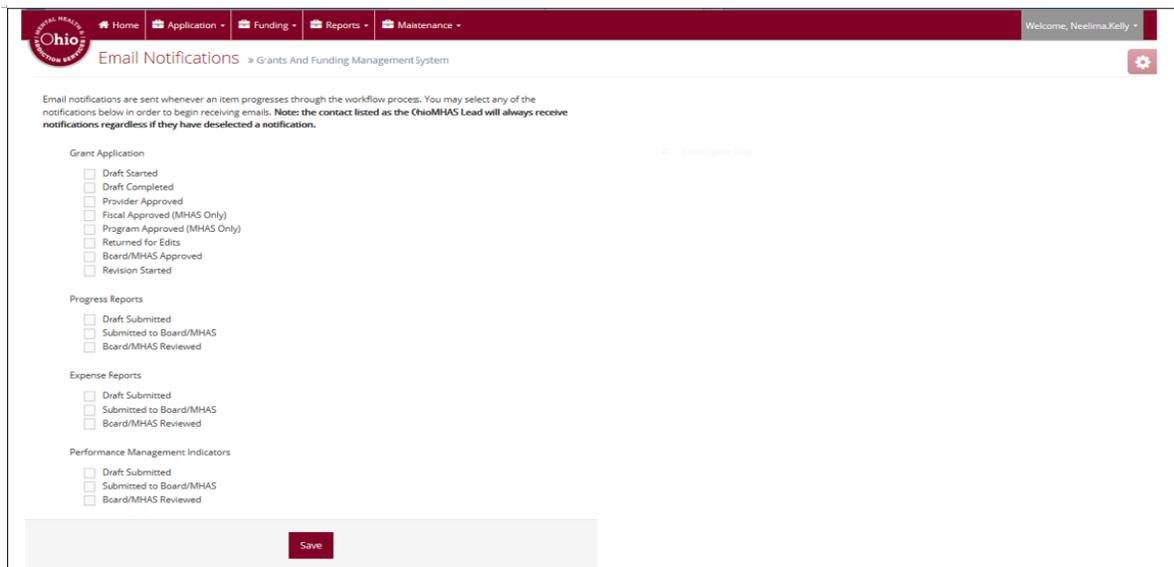
Navigate to “Email Notification” under Maintenance Tab:

1. Click on Maintenance Tab and select “Email Notification Preference” option from the list as displayed in the snapshot below:



Display “Email Notifications” Screen:

1. **Select** any of the notifications to begin receiving email notifications.
2. **Click** on Save button.



3. When user **clicks** on Save button, an information message will be displayed “Data updated successfully” as highlighted below in the snapshot:

Ohio Grants and Funding Management System

Home Application Funding Reports Maintenance Welcome, Neelima.Kelly

Email Notifications > Grants And Funding Management System

✔ Data updated successfully!

Email notifications are sent whenever an item progresses through the workflow process. You may select any of the notifications below in order to begin receiving emails. **Note: the contact listed as the OhioMHAS Lead will always receive notifications regardless if they have deselected a notification.**

Grant Application

- Draft Started
- Draft Completed
- Provider Approved
- Fiscal Approved (MHAS Only)
- Program Approved (MHAS Only)
- Returned for Edits
- Board/MHAS Approved
- Revision Started

Progress Reports

- Draft Submitted
- Submitted to Board/MHAS
- Board/MHAS Reviewed

Expense Reports

- Draft Submitted
- Submitted to Board/MHAS
- Board/MHAS Reviewed

Performance Management Indicators

- Draft Submitted
- Submitted to Board/MHAS
- Board/MHAS Reviewed

Save

Project Model

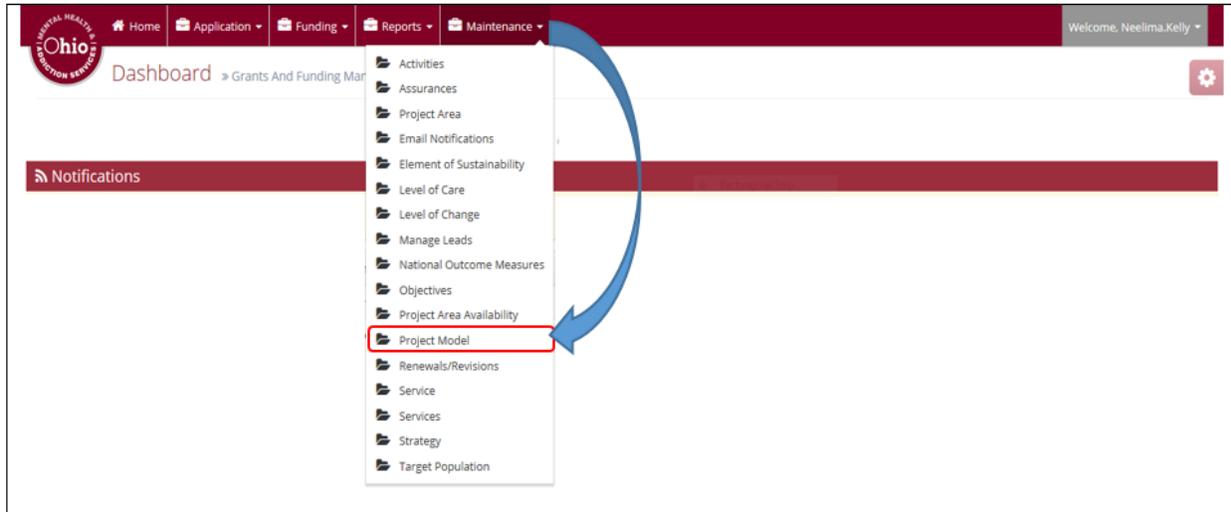
This section provides internal user the ability to add, search and edit project model to the service, so that external user will have access to these values in completing their grant application.



1. The Project Area, NOM, Objectives, Strategy/Services or Service/ Activities and Project Area Availability needs to be defined **before** the Project Model can be **created**.
2. On this Page, Project Lead **defines** the Project Model Type, Project Model and Project Model Description, will be **presented** on the Define Project Model Page under **Application-Implementation Plan** section.

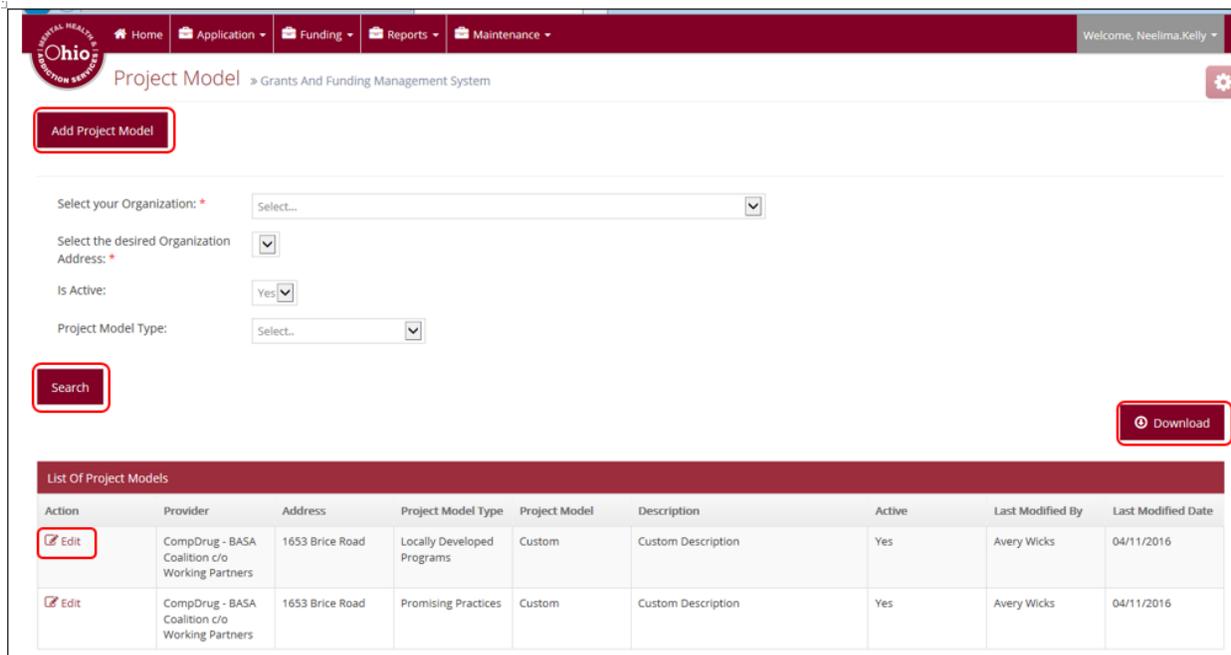
Navigate to “Project Model” under Maintenance Tab:

1. **Click** on Maintenance Tab and select “Project Model” option from the list as displayed in the snapshot below:



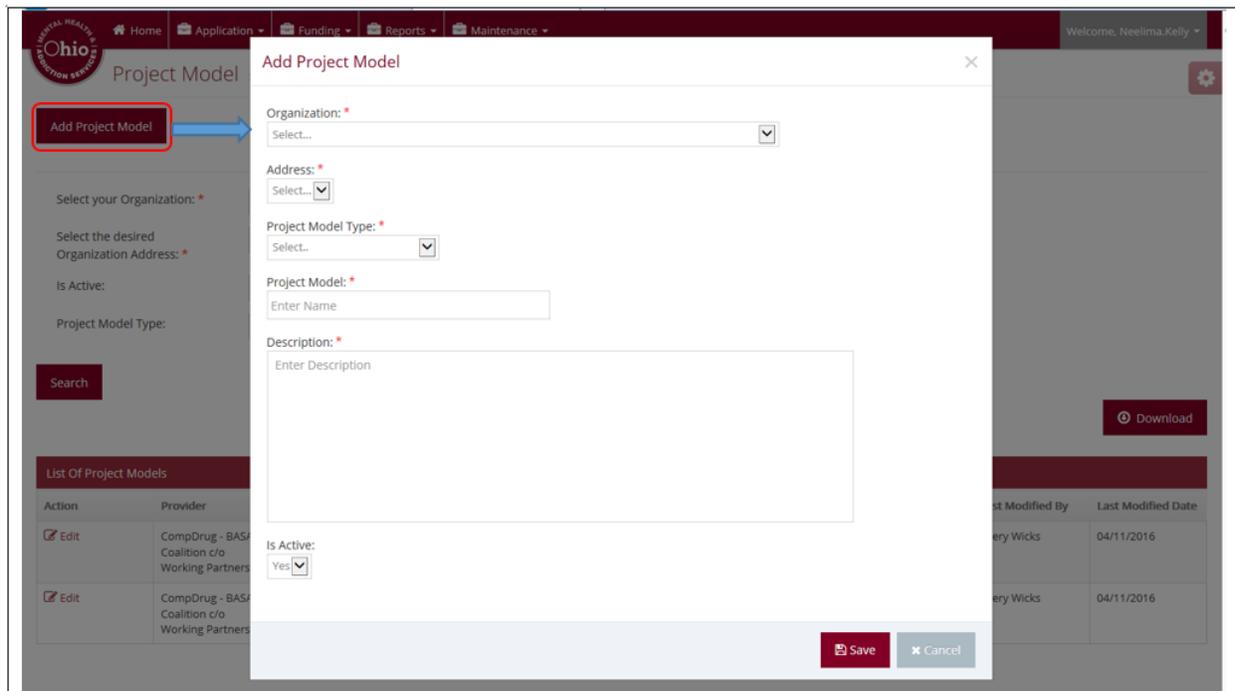
Displays “Project Model” Screen:

1. When internal user clicks on “Project Model” option, a “Project Model” screen will be displayed, consist of Add, Search, Edit and download Functions as highlighted below in the snapshot:



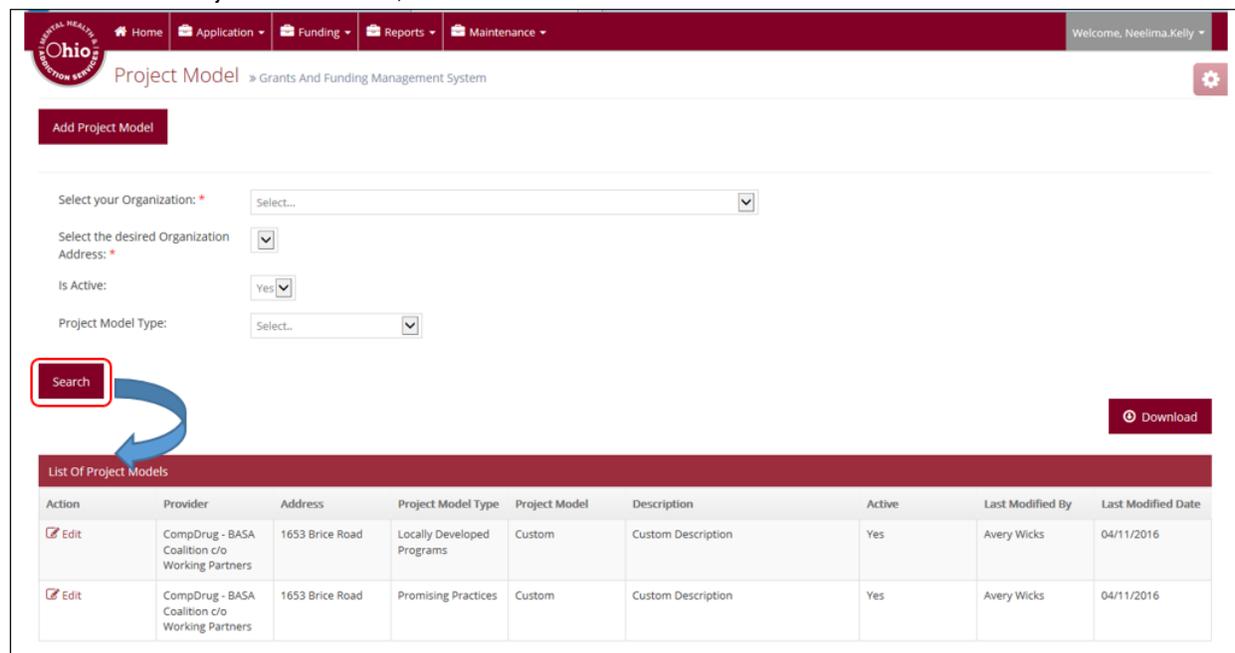
Clicking on “Add Project Model” button- Display “Add Project Model” Pop-up window:

1. **Click** on “Add Project Model” button on the Project Model Screen, an “Add Project Model” pop-up window will be displayed.
2. **Select** and **Enter** the information as indicated per each field displayed on the “Add Project Model” pop-up window. Fields with red asterisks * are required fields.
3. After all of the required information has been added, **click** on Save button to be taken to the next screen (Back to Project Model screen). If you change your mind, **click** on Cancel button, navigated back to the project model availability screen.



Clicking on “Search” button- Display “List of Project Models” Grid:

1. **Select** the search criteria's displayed on “Project Model” screen. All the search criteria's (filters) are optional.
2. **Click** on Search button displayed on the “Project Model” Screen. The search results will be displayed under “List of Project Models” Grid, based on selected search criteria's.



If desired, you can **click** on Download button to export search results to an excel spreadsheet.

Clicking on “Edit” link- Display “Update Project Model” Pop-up Window

1. **Click** on Edit link displayed under “List of Project Models” Grid.

2. **Update** the fields as you want to update it. Fields with red asterisks * are required fields
3. **Click** on Save button to be taken to the next screen (Back to Project Model screen). If you change your mind, **click** on Cancel button, navigated back to project model screen.
4. This is the screen where you can inactivate an objective. If you want to inactivate it, **Select** "Is Active" option to No. This project model will be removed from the active records.

