

**OhioMHAS SFY 2014 Guidance for Applicants (GFA)
Strategic Prevention Framework State Incentive Grant (SPF SIG)
Sub-Recipient Reporting Requirements**

General Information

Reporting Requirements

As authorized in Ohio Revised Code Section 3793.12, the Ohio Department of Mental Health and Addiction Services (OhioMHAS) will collect information and data from grantees. All OhioMHAS SPF SIG GFA sub-recipient grantees will be required to submit quarterly and year end reports. SPF SIG grantees will also be responsible for completing any CSAP federal reporting requirements related to this project. All OhioMHAS reporting requirements will be available on the OhioMHAS website. SPF SIG Reporting requirements, such as quarterly expenditure reports and program summary reports, will be reviewed by OhioMHAS staff. Failure to comply with reporting requirements shall result in further action by OhioMHAS.

Instructions for reporting requirements are being provided to assist the grantee in completing program summary reports and expenditure reports. Progress and expenditure reports are due on a quarterly basis. As identified in the Notice of Award, please contact the OhioMHAS Regional Prevention Coordinator for programmatic questions or the Grants Coordinator for expenditure report or budget revision questions.

A completed SFY 2014 SPF SIG GFA Face Sheet is required when submitting any of the reports. Face Sheets must be signed by the ADAMHS Board Executive Director and the Coalition and/or Agency Director. When submitting face sheets with reports, check the “**Report**” box for face sheet type. All attached forms must be identified by the state grant number. Original program summary and expenditure reports must be submitted by the appropriate date to: Johanna.Pickett@mha.ohio.gov

If you are unable to send your report via email, you may mail your report to:

Ohio Department of Mental Health and Addiction Services
Community Funding Unit, Division of Fiscal Services
30 E. Broad Street, 11th Floor
Columbus, OH 43215

You will also need to send a copy of your report to your Regional Prevention Coordinators and/or other program contacts.

However, it should be noted, reports are not considered received until in the possession of the Community Funding Unit.

REQUIRED REPORTS

Quarterly Program Summary Report

- The Program Summary Report is to be based on the approved State Fiscal Year (SFY) 2014 SPF SIG Grant Application. This form along with the Face Sheet must be completed and submitted to OhioMHAS according to the following schedule:

Reporting Period

July 1, 2013 to September 30, 2013
October 31, 2013 to December 31, 2013
January 1, 2014 to March 31, 2014
April 1, 2014 to June 30, 2014

Date Due to OhioMHAS

October 31, 2013
January 31, 2014
April 30, 2014
August 31, 2014

For questions regarding the Quarterly Program Summary Report please contact the Regional Prevention Coordinator listed in the SFY 2014 Notice of Sub-Award.

OhioMHAS SFY 2014 SPF SIG Program Summary Report

ADAMHS/ADAS Board Name:

Project Name:

Grant Number:

Reporting Period:

Please list your SPF SIG Goals:

Please identify your Target and Sub-Target Population:

Please provide a narrative description of your progress during this quarter related to the phases of the SPF.

Assessment:

Capacity:

Planning:

Implementation:

Evaluation:

Please discuss how the overlying areas of Sustainability and Cultural Competence have been included in your work this quarter.

Sustainability:

Cultural Competence:

Training Needs Identified:

Expenditure Report

- The expenditure report is a management tool used to assist the grantee and OhioMHAS in monitoring the approved budget. The fiscal information must be properly tracked and recorded to appropriate agency accounting records.

Reporting Period

Mid-Year: July 1, 2013 to December 31, 2013
Final: July 1, 2013 to June 30, 2014

Date Due to OhioMHAS

January 31, 2014
August 31, 2014

- A cumulative annual report will serve as a **final** expenditure report and is due to the Department by **August 31, 2014**. This report will reflect all expenditures to date including payments for items previously encumbered for the budgeted period. ***This report is considered the official record of final expenditures for the grant.*** OhioMHAS will review the circumstances and determine the proper course of action for any unexpended funds. Do not return the funds to OhioMHAS unless instructed.
- An **approved** program budget was enclosed with the SFY 2014 Notice of Sub-Award. Expenditure reports are to be completed based on the line items in the approved budget. An electronic version of the Budget/Expenditure report form can be obtained from the OhioMHAS website www.mha.ohio.gov under "Funding," "Grants," "Grant Reporting Forms," under "SFY 2014 Grants Reporting Forms." The Excel Budget/Expenditure Form is entitled "SFY 2014 Budget/Expenditure Form." **Expenditure reports not using the SFY 2014 Budget/Expenditure Form will not be processed and therefore will not be considered for review and approval.**
- Follow the instructions below when completing expenditure reports:
 - Identify the name of the implementing agency, program title, last four digits of the state grant number, fiscal year, and appropriate reporting period for the expenditure report.
 - List the line items in the appropriate categories based on the approved budget included with the NOSA. Report actual funds expended with either OhioMHAS funds or "Other Funds" for the appropriate reporting period.
 - Indicate the person's name and telephone number who completed the report. The agency fiscal officer must sign and date the expenditure report indicating approval with the identified expenditures.
 - When equipment/furniture is purchased with OhioMHAS grant funds, programs are required to submit a list of the type of equipment/furniture, serial number, and cost for each item to OhioMHAS. Please use the **OhioMHAS Equipment/Furniture Purchase Form** to submit this list. This form is to be submitted with the final expenditure report. The OhioMHAS Equipment/Furniture Purchase Form is available on the OhioMHAS website at www.mha.ohio.gov under "Funding," "Grants," "Grant Reporting Forms," under "SFY 2014 Grants Reporting Forms."

For questions regarding expenditure reports, please contact the Grants Coordinator identified in the SFY 2014 Notice of Sub-Award.

REVISIONS

Budget Revision

- **A Budget Revision to the approved Budget is required if a program is requesting a change in the ODADAS Budget Categories I (Personnel Costs), II (Non-Personnel Costs), III (Motor Vehicle/Travel/Food/Conference), or IV (Equipment/ Furniture Costs) that is greater than 10% of the Total Category. The SFY 2014 Budget/Expenditure Form reflects the Categories and corresponding line items.** For example, your agency has been approved for \$10,000 for the Category I line items. The program decides to transfer \$2,500 to line items in Category II. Therefore, a budget revision would be required because the decrease exceeds 10% of Category I. If the program decided to transfer \$450 to the Personnel line item from the Fringe Benefits line item, no budget revision would be necessary as they are both line items in Category I.
- **Any changes or additions in ODADAS Budget Categories IV (Equipment/Furniture Costs) must be pre-approved by ODADAS with the submission of a Budget Revision. The request must include justification for the purchase of the Equipment and/or Furniture in relation to the program's goals.** A Budget Revision Approval Notice must be received from ODADAS before the purchase(s) can be made.
- **A Budget Revision Approval Notice from ODADAS with the Director's signature is the official pre-approval the Agency must receive before incurring costs for a change in the Budget Categories.**
- Changes in the program's budgeted "Other Funds", which will impact planned services, also must be reported.

Follow the instructions below to request a budget revision:

- Submit a completed SPF SIG GFA Face Sheet signed by the Agency Executive Director and Board Member. Check "Revision" box for Face Sheet type.
- Include a proposed revised budget using a SFY 2014 Budget/Expenditure Form. Check "Budget Revision" box.
- Attach a detailed Budget Narrative indicating how each line item was calculated for each section and a) the amount of the change, b) reason for the change, c) fiscal impact of the change (if any), and d) resulting impact on the program accomplishments and services to be delivered.
- The SFY 2014 Budget/Expenditure Form can be downloaded from the ODADAS web site at www.odadas.ohio.gov. Select the "Services" link, "Fiscal," "Fiscal and Grant Reporting Forms," and "SFY 2014 Grants Reporting Forms." **Budget Revision requests not using the SFY 2014 Budget/Expenditure Form will not be processed and therefore will not be considered for review and approval.**

Please email Budget revisions to Johanna.Pickett@ada.ohio.gov

If you are not able to email your revision, you may send via mail to:

Ohio Department of Alcohol and Drug Addiction Services
Budget and Subsidy Unit, Division of Fiscal Services
30 E. Broad Street, 11th Floor
Columbus, Ohio 43215

- A copy of the requested budget revision shall be submitted to the local ADAMHS/ADAS Board if the funding for the grant flows through the Board to the agency.
- The Department will respond to the budget revision request within twenty (20) calendar days. Programs must receive **prior written approval** from ODADAS before incurring costs for a change in the budget.
- Budget revisions for SFY 2014 must be received no later than **April 30, 2014**. **Requests received after this date will not be processed and therefore will not be considered for review and approval.**

For questions regarding budget revisions, please contact the Grants Coordinator listed in the SFY 2014 Notice of Award.