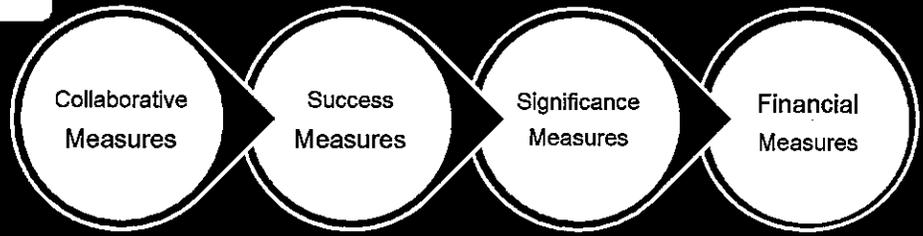




Ohio
Local Government
Innovation Fund



Round 5: Application Form

Step One: Fill out this Application Form in its entirety.

Step Two: Fill out the online submission form and submit your application materials. All supplemental application materials should be combined into one file for submission.

LGIF: Applicant Profile

Lead Agency	Licking County Health Department
Project Name	Local Health Department Collaborative Grants Management Feasibility Study
Type of Request	Grant
Request Amount	\$100,000.00
JobsOhio Region	Central
Number of Collaborative Partners <small>(including lead agency)</small>	
Project Approach	Shared Services
Project Type	Administration



**Development
 Services Agency**

Website: http://development.ohio.gov/cs/cs_localgovfund.htm

E-mail: LGIF@development.ohio.gov

Phone: 614 | 995 2292

Lead Applicant	Licking County Health Department	Round	5
Project Name	Local Health Department Collaborati	Type of Request	Grant

Instructions	
<ul style="list-style-type: none"> • Make sure to answer each question appropriately in the space provided, not exceeding the space allowed by the answer box. • Examples of completed applications are available on the LGIF website, found here: http://development.ohio.gov/cs/cs_localgovfund.htm 	

Lead Agency	
Mailing Address:	Name: Licking County Health Department
	Street Address: 675 Price Road
	City: Newark
	Zip: 43055
In what county is the lead agency located? Licking	
Ohio House District: 71	Ohio Senate District: 31

Section 1
Contacts

Project Contact		
Please provide information about the individual who should be contacted regarding this application.		
Mailing Address:	Name: Chad Brown	Title: Deputy Health Commissioner/Dir. of EH
	Street Address: 675 Price Road	
	City: Newark	
	Zip: 43055	
Email Address: cbrown@lickingcohealth.org		Phone Number: (740) 349-6487

Fiscal Agency:		
Please provide information for the entity and individual serving as the fiscal agent for the project.		
Mailing Address:	Fiscal Agency: Licking County Health Department	
	Fiscal Officer: Barbara Lanthorn	Title: Director of Administrative Services
	Street Address: 675 Price Road	
	City: Newark	
	Zip: 43055	

Population	
Does the applicant (or collaborative partner) represent a city, township, or village with a population of less than 20,000 residents?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> List Entity
Does the applicant (or collaborative partner) represent a county with a population of less than 235,000 residents?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> List Entity Licking County Health Department

Single Applicant	
Is your organization applying as a single entity?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Lead Applicant	Licking County Health Department	Round 5
Project Name	Local Health Department Collaborative	Type of Request Grant

Collaborative Partners		
Does the proposal include collaborative partners?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No

Applicants applying with collaborative partners are required to show proof of the partnership with a signed partnership agreement and a resolution of support from each of the partner's governing entities. If the collaborative partner does not have a governing entity, a letter of support from the partnering organization is sufficient. These documents must be received by the end of the cure period in order for each entity to count as a collaborative partner for the purposes of this application.

Nature of the Partnership

As agreed upon in the signed partnership agreement, please identify the nature of the partnership with an explanation of how the lead agency and collaborative partners will work together on the proposed project.

The intent of the Local Health Department Collaborative Grants Management (CGM) Feasibility Study is to examine the potential for sharing auxiliary services necessary for management of grant funds to sustain local public health departments. This project will be a positive step in helping these agencies and their respective communities to improve service delivery and control costs through cross-jurisdictional cooperation, sharing of services and possible service delivery consolidation. Moreover, this activity is in-line with the governor's newly proposed biennial budget recommendations and the recommendations of the Public Health Futures Committee regarding shared services and operational efficiencies in public health. In order to achieve these objectives, we will launch a feasibility study to determine efficiencies gained by cooperatively sharing the following processes:

- 1.) Grants Coordination & Acquisition - Confirm common areas of importance for Grants Acquisition and Coordination services with CGM working group.
- 2.) IT Services - Investigate the compatibility of existing IT infrastructure and determine what is necessary to establish a shared grants acquisition and management computer software platform with CGM working group.
- 3.) Development and Fund-raising - Verify the areas of importance for Development and Fund-raising initiatives with CGM working group.

Once the cross-jurisdictional framework is established this will open the door for possible future collaboration in other potential shared services such as: Training and Professional Development; General IT Services; Emergency Planning; Human Resources; Payroll Processing; Procurement; Fleet Management; Utilities, Conservation, & Stainability; Equipment Sharing, etc.

Section 2 Collaborative Partners

Lead Applicant	Licking County Health Department	Round	5
Project Name	Local Health Department Collabora	Type of Request	Grant

List of Partners

Please use the following space to list each collaborative partner who is participating in the project and is providing BOTH a resolution of support for the Local Government Innovation Fund application and has signed the partnership agreement.

Collaborative Partner # 1	
Mailing Address:	Name: Fairfield Department of Health
	Street Address: 1587 Granville Pike
	City: Lancaster
	Zip: 43130

Collaborative Partner # 2	
Mailing Address:	Name: Knox County Health Department
	Street Address: 11660 Upper Gilchrist Road
	City: Mount Vernon
	Zip: 43050

Collaborative Partner # 3	
Mailing Address:	Name: Perry County Health Department
	Street Address: 212 South Main Street
	City: New Lexington
	Zip: 43764

Collaborative Partner # 4	
Mailing Address:	Name: Info-Link Technologies Inc.
	Street Address: 601 Pittsburg Ave., P.O. Box 1167
	City: Mount Vernon
	Zip: 43050

Collaborative Partner # 5	
Mailing Address:	Name: Public Health Partnership of Licking County
	Street Address: 675 Price Road
	City: Newark
	Zip: 43055

Collaborative Partner # 6	
Mailing Address:	Name:
	Street Address:
	City:
	Zip:

Section 2 Collaborative Partners

Lead Applicant	Licking County Health Department	Round	5
Project Name	Local Health Department Collabora	Type of Request	Grant

Collaborative Partner # 7	
Mailing Address:	Name:
	Street Address:
	City:
	Zip:

Collaborative Partner # 8	
Mailing Address:	Name:
	Street Address:
	City:
	Zip:

Collaborative Partner # 9	
Mailing Address:	Name:
	Street Address:
	City:
	Zip:

Collaborative Partner # 10	
Mailing Address:	Name:
	Street Address:
	City:
	Zip:

Collaborative Partner # 11	
Mailing Address:	Name:
	Street Address:
	City:
	Zip:

Collaborative Partner # 12	
Mailing Address:	Name:
	Street Address:
	City:
	Zip:

Collaborative Partner # 13	
Mailing Address:	Name:
	Street Address:
	City:
	Zip:

Section 2 Collaborative Partners

Lead Applicant	Licking County Health Department	Round 5
Project Name	Local Health Department Collabora ⁺	Type of Request Grant

Project Information

Provide a general description of the project, including a description of the final work product derived from the grant study or loan implementation project. This information may be used for council briefings, program and marketing materials.

The Collaborative Grants Management (CGM) Feasibility Study is designed to identify mechanisms that will create significant efficiencies in resource development functions related to the terms of grant acquisition for local public health services by scaling the project across multiple jurisdictions. The initial focus is on the implementation of a Grants Acquisition and Management Computer Software Platform (CSP), and a public/private fiscal partnership agreement.

In many jurisdictions, local health departments remain the largest provider of immunizations, home health, communicable disease control, specialized clinical services such as STD testing and other important services. Recent recommendations from the State of Ohio, Governor's Office of Health Transformation and within the Governor's proposed 2013 budget clearly indicate the intent to consolidate and streamline many health and human services; including regionalization of state and federal grants in an effort to improve efficiency, save money, and reduce waste. These proposed changes to the state grant funding structure will have a profound effect on local health departments who are already financially challenged due to several factors (e.g. changes in public insurance systems). This situation necessitates the implementation of a cross-jurisdictional solution for increased capacity among Local Health Departments (LHDs) to collaborate with each other, as well as the private sector, to secure funding for performance and reimbursement of services. However, individual agency implementation is often a costly enterprise in terms of both hard cost and opportunity costs of implementing such a framework.

While the actual funding allocation requires a local presence, the back-office/ancillary functions of the LHD such as, grant seeking and project management, can be conducted as a regional effort given the appropriate system is in place. Under such a system, it is possible for a collaboration of LHDs to develop an efficiency of scale that would otherwise be impossible individually.

The proposal seeks to create such a system, whereby the ancillary functions are housed, regulated, and/or coordinated through a shared system while allowing LHDs to focus on service delivery thus optimizing ROI in both functional areas.

In this system, centralized grant/funding acquisition and project management will occur within a shared system that allows for specialization and efficiency. In addition, the CSP will be negotiated and purchased within the pool and implemented using a technological solution, likely a web-based service. The targeted systems are not geographically limited and allow the partnership to reach even remote areas of the state. Hence, this project may be replicated in other areas of the state, thus answering the Governor's call to regionalize grant efforts. With six initial partners, the system could easily blossom into a dozen additional departments from anywhere within the state. Participation by additional local health departments increases the ROI of the entire system and thus lowers the cost of each local health district.

Section 3
Project Information

Lead Applicant	Licking County Health Department	Round	Round 5
Project Name	Local Health Department Collabora	Type of Request	Grant

Project Information	
Has this project been submitted for consideration in previous LGIF Rounds?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
If yes, in which Round(s)?	
What was the project name?	
What entity was the lead applicant?	

Past Success	
Provide a summary of past efforts to implement a project to improve efficiency, implement shared services, coproduction, or a merger (5 points).	
<p>--All Local Health Departments have a significant history of efforts to improve efficiency. For example, the lead agency for this project, Licking County Health Department(LCHD), completed a merger between the former City of Newark Health Department and the LCHD which became effective in February of 2008. By forming a combined health district, including the cities of Newark, Health and Pataskala, as well as, the remaining county jurisdictions, (e.g., villages and townships), services were able to be consolidated saving significant public resources.</p> <p>--Another LCHD effort which has led to significant improvements in efficiency is the process toward national accreditation by the Public Health Accreditation Board (PHAB). To date LCHD has completed numerous continuous quality improvement (CQI) projects in preparation for accreditation. LCHD is one of a select few health departments across the nation to have completed the application process to PHAB and are awaiting a decision.</p> <p>--LCHD and the collaborating LHDs in this project have participated in and/or are currently participating in various cross-jurisdictional collaborative projects such as; the Breast and Cervical Cancer Program (BCCP) the Lead Program, Emergency Preparedness, Epidemiological Services and Radon Program.</p>	
Applicant demonstrates Past Success	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Scalable	
Provide a summary of how the applicant's proposal can be scaled for the inclusion of other entities (5 points).	
<p>Due to the type of proposal, the creation of an ancillary support system for grant/development activities is in-fact designed to be scalable and it is the hope that the initial six (4 LHDs and 2 private entities) applicants will not be the last to join in this effort. The attempt to establish a collaborative system is a barrier in and of itself and once overcome, has no practical limit in scope. The cost of technology to increase is marginal or completely accounted for in the "buy in" to the system (recognizing various plateaus and jumping off points for additional staff).</p>	
Applicant demonstrates a Scalable project	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Section 3
Project Information

Lead Applicant	Licking County Health Department	Round 5
Project Name	Local Health Department Collabora	Type of Request Grant

Replicable	
Provide a summary of how the applicant's proposal can be replicated by other entities. A replicable project should include a component that another entity could use as a tool to implement a similar project (5 points).	
<p>This system could easily be replicated by other organizations/departments including; mental health services, community health clinics, job and family services, etc. since it relies on the development of system that is made of components that are readily available to other entities. Other county agencies within the counties as well as any county or municipality in the State can implement a CGM program to evaluate their capability to provide shared grants acquisition and coordination services and/or as a template to implementation toward a shared grants management program.</p>	
Applicant demonstrates a Replicable project	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Section 3
Project Information

Probability of Success	
Provide a summary of the likelihood of the grant study recommendations being implemented. Applicants requesting an implementation loan should provide a summary of the probability of savings from the loan request (5 points).	
<p>The applicant agencies are all committed to the project and are simply lacking the resources to overcome basic barriers in analyzing the legal foundation for the project, the requisite negotiations with technology providers and systems, and technology analysis to make the project work. Given the current environment of the public health system, the applicants must find a solution-- this grant award will allow them to find the most cost effective system and limit the expansion of local government.</p> <p>This project has the potential to succeed in various ways including but not limited to: 1) increasing the revenue/resources available to local health departments by securing grant funding resources to pay for services that are currently paid by local tax dollars; 2) reducing administrative costs of finding and managing multiple grants and/or funding sources by sharing technical resources; and 3) improving the efficiency of local public health core services by reducing duplicative ancillary functions.</p>	
Applicant demonstrates Probability of Success	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Lead Applicant	Licking County Health Department	Round 5
Project Name	Local Health Department Collabora	Type of Request Grant

Performance Audit/Cost Benchmarking	
<p>If the project is the result of recommendations from a prior performance audit provided by the Auditor of State under Chapter 117 of the Ohio Revised Code, or is informed by a previous cost benchmarking study, please attach a copy with the supporting documents. In the section below, provide a summary of the performance audit findings or cost benchmarking study results (5 points).</p>	
<p>N/A</p>	
<p>Prior Performance Audit or Cost Benchmarking <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	

Section 3
Project Information

Economic Impact	
<p>Provide a summary of how the proposal will promote a business environment through a private sector partner (5 points) and/or provide for community attraction (3 points).</p>	
<p>This proposal seeks to establish more efficient funding and development processes through a relationship with a particular private, not-for-profit organization whose mission is completely aligned with the public health agencies involved in this project. This 501(c)(3) organization, the Public Health Partnership of Licking County (PHP), will expand the LHDs' ability to locate grant makers and/or funding sources which correlate to local public health needs. Often times, foundations, and sometimes government agencies, cannot award grants to projects without a 501(c)(3) status. Also, private citizens often prefer to give to 501(c)(3) organizations so they may deduct the gift on their tax return. Hence, this status inspires confidence in some funding sources. As such is the case, a partnership with PHP will provide a 501(c)(3), fiscal sponsorship, umbrella for the collaborating public health departments in this project.</p> <p>Similarly, other private vendors, (e.g. technology contractors) will also benefit from this collaboration. We will work closely with Info-Link Technologies, (another partner in this project), to ensure the technical feasibility of this project.</p> <p>Ultimately, the intent is to limit the expansion of local government services through a consolidation of public services augmented by collaboration with private sector partnerships. Through such an arrangement, the overall cost per unit of service delivery, and overall local government liability, is reduced.</p>	
<p>Applicant demonstrates Economic Impact <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	

Lead Applicant	Licking County Health Department	Round 5	
Project Name	Local Health Department Collabora	Type of Request	Grant

Response to Economic Demand

Provide a summary of how the project responds to substantial changes in economic demand for local or regional government services. The narrative should include a description of the current and future expected service level needs (5 points).

As funding to support local public health continues to decline, the need for reimbursement , resource development and/or the need to participate in efficiencies of scale continue to rise for local health departments in Ohio. Historically, local health districts have received significant financial support from local tax dollars to support the provision of needed services for their constituents. As both local and federal funding streams continue to decline, local health districts are economically challenged to provide their critical services. Going forward, there is expected to be an increased demand for health services provided by local health departments due to the potential expansion of Medicaid eligibility and expected health provider shortages throughout Ohio as a result of the implementation of the Affordable Care Act. Without adequate infrastructure or funding for these services, local health departments in Ohio will be forced to eliminate these programs.

Applicant demonstrates Response to Economic Demand Yes No

Section 3
Project Information

Budget Information

General Instructions

- Both the Project Budget and Program Budgets are required to be filled out in this form.
- Consolidate budget information to fit in the form. Additional budget detail may be provided in the budget narrative or in an attachment

Project Budget

- The Project Budget should detail expenses related to the grant or loan project.
- The Project Budget justification must be explained in the Project Budget Narrative section of the application. This section is also used to explain the reasoning behind any items on the budget that are not self explanatory, and provide additional detail about project expenses.
- The Project Budget should be for the period that covers the entire project. The look-back period for in-kind contributions is two years. These contributions are considered a part of the total project costs.
- For the Project Budget, indicate which entity and revenue source will be used to fund each expense. This information will be used to help determine eligible project expenses.
- Total Sources must equal Total Uses. Include staff time and other in-kind matches in the Total Uses section of the budget.

Program Budget

- Use the Program Budget to outline the costs associated with the implementation of the program in your community.
- Six (6) years of Program Budgets should be provided. The standard submission should include three years previous budgets (actual), and three years of projections including implementation of the proposed project. A second set of three years of projections (one set including implementation of this program, and one set where no shared services occurred) may be provided in lieu of three years previous if this does not apply to the proposed project.
- Please use the Program Budget Narrative section to explain changes in expenses and revenues, and to defend the budget projections. If the budget requires the combining of costs on the budget template, please explain this in the narrative.

Return on Investment:

- A Return on Investment calculation is required, and should reference cost savings, cost avoidance and/or increased revenues indicated in Program Budget sections of the application. Use the space designated for narrative to justify this calculation, using references when appropriate.

For Loan Applications only:

- Using the space provided, outline a loan repayment structure.
- Attach three years prior financial documents related to the financial health of the lead applicant (balance sheet, income statement and a statement of cash flows).

Lead Applicant:	Licking County Health Dep	Round 5
Project Name:	Local Health Department C	Type of Request: Grant

Project Budget

Use this space to outline all sources of funds and the uses of those funds. Both sections should include all funds related to the project, including in-kind match contributions. Use the project budget narrative on the next page to justify the project budget, and indicate the line items for which the grant will be used.

Sources of Funds

LGIF Request: \$100,000

Cash Match (List Sources Below):

Source:	
Source:	
Source:	
Source:	

In-Kind Match (List Sources Below):

Source:	CGM partners	\$18,000
Source:		
Source:		

Total Match: \$18,000

Total Sources: \$118,000

Uses of Funds

	Amount	Revenue Source
Consultant Fees:	\$100,000	LGIF
Legal Fees:		
Other: coordination & dev:	\$18,000	In-Kind match
Other:		

Total Uses: \$118,000

Local Match Percentage: 15%

* Please note that this match percentage will be included in your grant/loan agreement and cannot be changed after awards are made.

Local Match Percentage = (Match Amount/Project Cost) * 100 (10% match required)

- 10-39.99% (1 point)
 40-69.99% (3 points)
 70% or greater (5 points)

Section 4 Financial Information

Lead Applicant	Licking County Health Department	Round 5	
Project Name	Local Health Department C+	Type of Request	Grant

Project Budget Narrative: Use this space to justify any expenses that are not self-explanatory.

\$100,000 of grant funding is requested to complete a feasibility study to identify opportunities to work with regional partners, as well as, to research the viability of building a cross-jurisdictional framework which may be used for future collaborative efforts in-line with the governor's biannual budget recommendations for consolidation of public health services.

As mentioned in the project description, this study is to provide a better understanding of the capabilities of the collaborating LHDs in regards to acquisition and coordination of grants, as well as, to examine new types and sources of funding with the aid of our 501(c) (3) collaborator, PHP. The study will also help identify process improvements and technology innovations that may be available to the agencies to assist with improved public health service delivery.

The study will take into consideration each county's current technology environment and will identify a process that will be applicable for each agency. The effort will show the potential value of sharing technology, as well as, opportunities to create further joint efforts and sharing of work activities. The study will be performed in conjunction with Info-Link Technologies, Inc., another collaborative partner for this grant.

Section 4

Financial Information

Lead Applicant	Licking County Health Department	Round 5
Project Name	Local Health Department Collabora	Type of Request Grant

Program Budget			
Actual <input checked="" type="checkbox"/> Projected <input type="checkbox"/>	FY 2013	FY 2014	FY 2015
Expenses	Total Program Expenses	Total Program Expenses	Total Program Expenses
Salary and Benefits	\$320,000	\$326,400	\$332,800
Contract Services			
Occupancy (rent, utilities, maintenance)			
Training & Professional Development			
Insurance			
Travel			
Capital & Equipment Expenses			
Supplies, Printing, Copying & Postage			
Evaluation			
Marketing			
Conferences, meetings, etc.			
Administration			
*Other - software licensing	\$72,000	\$72,000	\$72,000
*Other -			
*Other -			
TOTAL EXPENSES	\$392,000	\$398,400	\$404,800
Revenues	Revenues	Revenues	Revenues
Contributions, Gifts, Grants, & Earned Revenue			
Local Government:	\$392,000	\$398,400	\$404,800
Local Government:			
Local Government:			
State Government			
Federal Government			
*Other -			
*Other -			
*Other -			
Membership Income			
Program Service Fees			
Investment Income			
TOTAL REVENUES	\$392,000	\$398,400	\$404,800

Lead/Applicant	Licking County Health Department	Round 5
Project Name	Local Health Department Collabor	Type of Request
		Grant

Program Budget

Actual <input type="checkbox"/> Projected <input checked="" type="checkbox"/>	FY 2013	FY 2014	FY 2015
Expenses	Total Program Expenses	Total Program Expenses	Total Program Expenses
Salary and Benefits	\$79,960	\$81,559	\$83,158
Contract Services			
Occupancy (rent, utilities, maintenance)			
Training & Professional Development			
Insurance			
Travel			
Capital & Equipment Expenses			
Supplies, Printing, Copying & Postage			
Evaluation			
Marketing			
Conferences, meetings, etc.			
Administration			
*Other - software licensing	\$31,160	\$31,160	\$31,160
*Other -			
*Other -			
TOTAL EXPENSES	\$111,120	\$112,719	\$114,318
	Revenues	Revenues	Revenues
Contributions, Gifts, Grants, & Earned Revenue			
Local Government:	\$111,120	\$112,719	\$114,318
Local Government:			
Local Government:			
State Government			
Federal Government			
*Other -			
*Other -			
*Other -			
Membership Income			
Program Service Fees			
Investment Income			
TOTAL REVENUES	\$111,120	\$112,719	\$114,318

Lead/Applicant:	Licking County Health Department	Round 5
Project Name:	Local Health Department Collaborative	Type of Request: Grant

Program Budget

Use this space to justify your program budget and/or explain any assumptions used for the budget projections. These projections should be based on research, case studies, or industry standards and include a thoughtful justification.

The program budget has been determined using the alternative process since the program does not currently exist, i. e. actual expense (page 14) represents the cost of each individual partner agency, or LHD, implementing an Grants Acquisition/ Management solution on their own. The projected budget (page 15) reflects the CGM partner's shared services solution.

Actual (page 14) = Individual Implementation of CSP, installation and training
 Projected (page 15) = CGM Shared Services implementation of CSP, installation & training

Costs are extrapolated from an existing implementation. In the example, a single implementation of CSP and staffing costs approximately \$. For a shared services solution, a single implementation cost provides the base with a proportional increase for each additional agency added to the partnership. The proportional increase is typically 25% though this can vary with specific program areas. Since the majority of issues with the CSP solution revolve around software installation and updates to software, as well as associated training, and not individual issues, the 25% increase per partner appeared reasonable to accommodate the increased IT management and individual agency issues.

Revenue: The expense of the program is generally born by local revenue, though grants and clinic revenue may also contribute. These were intentionally excluded since they pay for direct clinical services and generally do not fund, or minimally fund, ancillary administrative activities.

Expenditures: IT infrastructure, software licensing, and staff time are the largest expenditures and represent the cost of each participating LHDs independently funding and implementing an CSP solution, coordinating and training staff. The CPS is acting as a proxy in this budget example for grants' CPS and financial accounting since the two tend to be inseparable. In year one, the cost includes, hardware, software purchase/licensing, IT contractor, administrative costs, and a limited amount of staff time association with implementing the program. Years 2 and 3 include costs associated with maintaining hardware, IT contractor, and software subscription services.

The Program Budget is directed by the LCHD, which is the "umbrella" agent that coordinates and assembles the Partners. Cost savings would affect each of the Partners direct service delivery costs.

In addition, since this is a request/application for a feasibility study, the 3 years worth of future Program Budgets isn't applicable. However, as a collaborative group, future budgets should be relatively stable and reflect previous levels.

Section 4: Financial Information Scoring

<input type="checkbox"/>	(5 points) Applicant provided complete and accurate budget information and narrative justification for a total of six fiscal years.
<input checked="" type="checkbox"/>	(3 points) Applicant provided complete and accurate budget information and for at least three fiscal years.
<input type="checkbox"/>	(1 point) Applicant provided complete and accurate budget information for less than three fiscal years.

Lead Applicant	Licking County Health Department	Round 5	
Project Name	Local Health Department Collaborative Grant	Type of Request	Grant

Return on Investment

Return on Investment is a performance measure used to evaluate the efficiency of an investment. To derive the expected return on investment, divide the net gains of the project by the net costs. For these calculations, please use the implementation gains and costs, NOT the project costs (the cost of the feasibility, planning, or management study)--unless the results of this study will lead to direct savings without additional implementation costs. The gains from this project should be derived from the prior and future program budgets provided, and should be justified in the return on investment narrative.

Return on Investment Formulas

Consider the following questions when determining the appropriate ROI formula for your project. Check the box of the formula that you are using to determine your ROI. These numbers should refer to savings/revenues illustrated in projected budgets.

Do you expect cost savings from efficiency from your project?
 Use this formula: $\frac{\text{Total \$ Saved}}{\text{Total Program Costs}} * 100 = \text{ROI}$

Do you expect cost avoidance from the implementation of your project/program?
 Use this formula: $\frac{\text{Total Cost Avoided}}{\text{Total Program Costs}} * 100 = \text{ROI}$

Do you expect increased revenues as a result of your project/program?
 Use this formula: $\frac{\text{Total New Revenue}}{\text{Total Program Costs}} * 100 = \text{ROI}$

Do you expect some combination of savings, cost avoidance, or increased revenue as a result of your project/program? (Total Gains combines \$ Saved, Costs Avoided, and New Revenue)
 Use this formula: $\frac{\text{Total Gains}}{\text{Total Program Costs}} * 100 = \text{ROI}$

Expected Return on Investment = $\frac{\$856,971}{\$1,195,200} * 100 = 72\%$

Expected Return on Investment is:

<input type="checkbox"/> Less than 25% (10 points)	<input type="checkbox"/> 25%-75% (20 points)	<input checked="" type="checkbox"/> Greater than 25% (30 points)
----------------------------------------------------	----------------------------------------------	------------------------------------------------------------------

Questions about how to calculate ROI? Please contact the Office of Redevelopment at 614-995-2292 or lgif@development.ohio.gov

Section 4
Financial Information

Lead Applicant	Licking County Health Department	Round 5	
Project Name	Local Health Department Collaborative Grant	Type of Request	Grant

Return on Investment Justification Narrative: In the space below, describe the nature of the expected return on investment, providing justification for the numbers presented in the ROI calculation. This calculation should be based on the savings, cost avoidance, or increased revenues shown in the program budgets on the preceding pages. Use references when appropriate to justify assumptions used for cost projections.

In general, the program partners will initially incur expenses within three budget categories (Salaries and Benefits, Contracted Services and Software Licensing). The CGM Assessment will create cost savings in all three of these categories, but for the purposes of this projection, the savings are only calculated for the Software Licensing and Staff salaries and benefits.

Using the aggregated budgets for grants management and acquisition services of the four local health departments, the project projections show a reduction of 72% to the Salaries/ benefits and software licensing expense budget lines. The reduction is a result of;

Anticipated \$856,971 savings from the implementation of shared services that will result from the CGM (salaries/benefits and software licensing expenses)

For this financial projection, the impact to the partners' contracted services was not factored into the potential cost savings. Until the evaluation of anticipated technical expertise has been completed, the overall savings in this budget category is difficult to project. In most cases, the investment in technical expertise will have a positive long-term return on investment that would not be reflected in the short-term budget exercise that was completed for this proposal.

Section 4

Financial Information

Lead Applicant	Licking County Health Department	Round 5	
Project Name	Local Health Department Collaborative Grant	Type of Request	Grant



Please outline your preferred loan repayment structure. At a minimum, please include the following: the entities responsible for repayment of the loan, all parties responsible for providing match amounts and an alternative funding source (in lieu of collateral). Applicants will have two years to complete their project upon execution of the loan agreement, and the repayment period will begin upon the final disbursement of the loan funds. A description of expected savings over the term of the loan may be used as a repayment source.

N/A

Section 4
Financial Information

Applicant demonstrates a viable repayment source to support loan award. Secondary source can be in the form of a debt reserve, bank participation, a guarantee from a local entity, or other collateral (i.e. emergency, rainy day, or contingency fund, etc).

<input type="checkbox"/> Applicant clearly demonstrates a secondary repayment source (5 points)	<input checked="" type="checkbox"/> Applicant does not have a secondary repayment source (0 points)
-------------------------------------------------------------------------------------------------	-----------------------------------------------------------------------------------------------------

Lead Applicant	Licking County Health Department	Round 5	
Project Name	Local Health Department Collaborative Grants Management F+	Type of Request	Grant

Scoring Overview

Section 1: Collaborative Measures

Collaborative Measures	Description	Max Points	Applicant Self Score
Population	Applicant's population (or the population of the area(s) served) falls within one of the listed categories as determined by the U.S. Census Bureau. Population scoring will be determined by the smallest population listed in the application. Applications from (or collaborating with) small communities are preferred.	5	5
Participating Entities	Applicant has executed partnership agreements outlining all collaborative partners and participation agreements and has resolutions of support. (Note: Sole applicants only need to provide a resolution of support from its governing entity.	5	5

Section 2: Success Measures

Past Success	Applicant has successfully implemented, or is following project guidance from a shared services model, for an efficiency, shared service, coproduction or merger project in the past.	5	5
Scalable	Applicant's proposal can be scaled for the inclusion of other entities.	5	5
Replicable	Applicant's proposal can be replicated by other local governments.	5	5
Probability of Success	Applicant provides a documented need for the project and clearly outlines the likelihood of the need being met.	5	5

Section 3: Significance Measures

Performance Audit Implementation/Cost Benchmarking	The project implements a single recommendation from a performance audit provided by the Auditor of State under Chapter 117 of the Ohio Revised Code or is informed by cost benchmarking.	5	0
Economic Impact	Applicant demonstrates the project will promote a business environment (i.e., demonstrates a business relationship resulting from the project) and will provide for community attraction (i.e., cost avoidance with respect to taxes).	5	5
Response to Economic Demand	The project responds to current substantial changes in economic demand for local or regional government services.	5	5

Section 4: Financial Measures

Financial Information	Applicant includes financial information (i.e., service related operating budgets) for the most recent three years and the three year period following the project. The financial information must be directly related to the scope of the project and will be used as the cost basis for determining any savings resulting from the project.	5	3
Local Match	Percentage of local matching funds being contributed to the project. This may include in-kind contributions.	5	1
Expected Return	Applicant demonstrates as a percentage of savings (i.e., actual savings, increased revenue, or cost avoidance) an expected return. The return must be derived from the applicant's cost basis.	30	30
Repayment Structure (Loan Only)	Applicant demonstrates a viable repayment source to support loan award. Secondary source can be in the form of a debt reserve, bank participation, a guarantee from a local entity, or other collateral (i.e., emergency fund, rainy day fund, contingency fund, etc.).	5	0

Total Points 74



March 1, 2013

R. Joseph Ebel, RS, MS, MBA
Health Commissioner
Licking County Health Department
675 Price Road
Newark, Ohio 43055

Mr. Ebel,

The purpose of this letter is to inform you that the Fairfield Department of Health plans to collaborate with you on your department's *Local Health Department Collaborative Grant Management Feasibility Study*. Our department looks forward to working with you and your partners in order to determine effective grant management strategies that will allow us to properly manage these funds in a more streamlined approach. In addition, the study will assist us with preparing for the potential regionalization of local health department grants that is currently contained in Governor Kasich's proposed budget.

Our staff looks forward to working with your department on this project, and developing an infrastructure that will allow us provide our constituents with high quality public health services through the effective management of grant funds. As the grant writing process becomes more competitive, this project will afford us with an opportunity to better position ourselves to receive additional funding for all of our communities.

If you need any additional information please do not hesitate to contact me..

Sincerely,

Larry Hanna RS,
Administrator
Fairfield Department of Health



11660 Upper Gilchrist Road
Mount Vernon, Ohio 43050

www.knoxhealth.com

Phone 740-392-2200
Fax 740-392-9613

March 1, 2013

R. Joseph Ebel, RS, MS, MBA
Health Commissioner
Licking County Health Department
675 Price Road
Newark, Ohio 43055

Dear Joe,

The purpose of this letter is to inform you that the Knox County Health Department is pleased to collaborate with you on your department's *Local Health Department Collaborative Grant Management Feasibility Study*. Our department looks forward to working with you and other local health departments in determining effective grant management strategies that may allow us to properly manage grant funds in a more streamlined approach. In addition, the study may assist us with preparing for the potential regionalization of local health department grants that is currently contained in Ohio's proposed biennial budget.

We also look forward to developing an infrastructure that may allow local health departments to provide our constituents with high quality public health services through the effective management of grant funds. I am confident that as grant writing processes become more competitive, this project will afford us with an opportunity to better position ourselves to receive additional funding for all of our communities.

If you need any additional information please do not hesitate to contact me.

Sincerely,

A handwritten signature in black ink that reads "Julie Miller". The signature is fluid and cursive.

Julie Miller

Health Commissioner



"We are dedicated to promoting and protecting the health and well-being of our residents and communities by providing quality services and educational programs to prevent the incidence of disease and unhealthy conditions."

Perry County Health Department

212 SOUTH MAIN STREET - PO BOX 230
NEWLEXINGTON, OHIO 43764
PHONE (740) 342-5179
FAX (740) 342-5540

March 1, 2013

R. Joseph Ebel, RS, MS, MBA
Health Commissioner
Licking County Health Department
675 Price Road
Newark, Ohio 43055

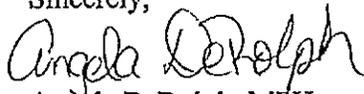
Mr. Ebel,

The purpose of this letter is to inform you that the Perry County Health Department plans to collaborate with you on your department's *Local Health Department Collaborative Grant Management Feasibility Study*. Our department looks forward to working with you and your partners in order to determine effective grant management strategies that will allow us to properly manage these funds in a more streamlined approach. In addition, the study will assist us with preparing for the potential regionalization of local health department grants that is currently contained in Governor Kasich's proposed budget.

Our staff looks forward to working with your department on this project, and developing an infrastructure that will allow us provide our constituents with high quality public health services through the effective management of grant funds. As the grant writing process becomes more competitive, this project will afford us with an opportunity to better position ourselves to receive additional funding for all of our communities.

If you need any additional information please do not hesitate to contact me.

Sincerely,



Angela DeRolph, MPH
Health Commissioner

March 1, 2013

R. Joseph Ebel, RS, MS, MBA
Health Commissioner
Licking County Health Department
675 Price Road
Newark, Ohio 43055

Mr. Ebel,

The purpose of this letter is to inform you that the Info-Link Technologies, Inc. plans to collaborate with you on your department's *Local Health Department Collaborative Grant Management Feasibility Study*. Our department looks forward to working with you and your partners in order to determine effective grant management strategies that will allow us to properly manage these funds in a more streamlined approach. In addition, the study will assist us with preparing for the potential regionalization of local health department grants that is currently contained in Governor Kasich's proposed budget.

Our staff looks forward to working with your department on this project, and developing an infrastructure that will allow us provide our constituents with high quality public health services through the effective management of grant funds. As the grant writing process becomes more competitive, this project will afford us with an opportunity to better position ourselves to receive additional funding for all of our communities.

If you need any additional information please do not hesitate to contact me.

Sincerely,

A handwritten signature in black ink, appearing to be "R. Joseph Ebel", written in a cursive style with a long horizontal stroke extending to the right.

PUBLIC HEALTH PARTNERSHIP OF LICKING COUNTY

Board of Trustees

R. Joseph Ebel

Rodney Ellis

D. Rick Lanthorn

Neisha Grubaugh

Patrick Lebold

Randy Thorp

Medha Sudliff

Nancy Hanger

Secretary/Treasurer

Barbara Lanthorn

March 4, 2013

The purpose of this letter is to inform you that the Public Health Partnership of Licking County plans to collaborate with the Licking County Health Department on your *Local Health Department Collaborative Grant Management Feasibility Study*. Our organization looks forward to working with you and your partners in order to determine effective grant management strategies that will allow us to develop a proper grants management system through a more streamlined approach. In addition, the study will assist us with preparing for the potential regionalization of local health department grants that is currently contained in Governor Kasich's proposed budget.

We look forward to working with your department on this project, and developing an infrastructure that will allow us to assist with delivering high quality public health services through the effective management of grant funds.

If you need any additional information please do not hesitate to contact me.

Sincerely



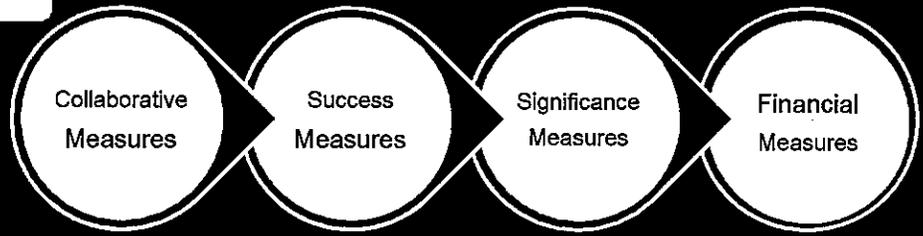
R. Joseph Ebel, RS, MS, MBA
Chairman of the Board of Trustees

675 Price Rd.
Newark, OH 43055
PH: (740) 849-6477
FAX: (740) 849-6510
www.lickingcohealth.org





Ohio
Local Government
Innovation Fund



Round 5: Application Form

Step One: Fill out this Application Form in its entirety.

Step Two: Fill out the online submission form and submit your application materials. All supplemental application materials should be combined into one file for submission.

LGIF: Applicant Profile

Lead Agency	Licking County Health Department
Project Name	Local Health Department Collaborative Grants Management Feasibility Study
Type of Request	Grant
Request Amount	\$100,000.00
JobsOhio Region	Central
Number of Collaborative Partners <small>(including lead agency)</small>	
Project Approach	Shared Services
Project Type	Administration



**Development
 Services Agency**

Website: http://development.ohio.gov/cs/cs_localgovfund.htm

E-mail: LGIF@development.ohio.gov

Phone: 614 | 995 2292

Lead Applicant	Licking County Health Department	Round	5
Project Name	Local Health Department Collaborati	Type of Request	Grant

Instructions	
<ul style="list-style-type: none"> • Make sure to answer each question appropriately in the space provided, not exceeding the space allowed by the answer box. • Examples of completed applications are available on the LGIF website, found here: http://development.ohio.gov/cs/cs_localgovfund.htm 	

Lead Agency	
Mailing Address:	Name: Licking County Health Department
	Street Address: 675 Price Road
	City: Newark
	Zip: 43055
In what county is the lead agency located? Licking	
Ohio House District: 71	Ohio Senate District: 31

Section 1
Contacts

Project Contact		
Please provide information about the individual who should be contacted regarding this application.		
Mailing Address:	Name: Chad Brown	Title: Deputy Health Commissioner/Dir. of EH
	Street Address: 675 Price Road	
	City: Newark	
	Zip: 43055	
Email Address: cbrown@lickingcohealth.org	Phone Number: (740) 349-6487	

Fiscal Agency:		
Please provide information for the entity and individual serving as the fiscal agent for the project.		
Mailing Address:	Fiscal Agency: Licking County Health Department	
	Fiscal Officer: Barbara Lanthorn	Title: Director of Administrative Services
	Street Address: 675 Price Road	
	City: Newark	
	Zip: 43055	

Population	
Does the applicant (or collaborative partner) represent a city, township, or village with a population of less than 20,000 residents?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> List Entity
Does the applicant (or collaborative partner) represent a county with a population of less than 235,000 residents?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> List Entity Licking County Health Department

Single Applicant	
Is your organization applying as a single entity?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Lead Applicant	Licking County Health Department	Round 5
Project Name	Local Health Department Collaborative	Type of Request Grant

Collaborative Partners		
Does the proposal include collaborative partners?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No

Applicants applying with collaborative partners are required to show proof of the partnership with a signed partnership agreement and a resolution of support from each of the partner's governing entities. If the collaborative partner does not have a governing entity, a letter of support from the partnering organization is sufficient. These documents must be received by the end of the cure period in order for each entity to count as a collaborative partner for the purposes of this application.

Nature of the Partnership

As agreed upon in the signed partnership agreement, please identify the nature of the partnership with an explanation of how the lead agency and collaborative partners will work together on the proposed project.

The intent of the Local Health Department Collaborative Grants Management (CGM) Feasibility Study is to examine the potential for sharing auxiliary services necessary for management of grant funds to sustain local public health departments. This project will be a positive step in helping these agencies and their respective communities to improve service delivery and control costs through cross-jurisdictional cooperation, sharing of services and possible service delivery consolidation. Moreover, this activity is in-line with the governor's newly proposed biennial budget recommendations and the recommendations of the Public Health Futures Committee regarding shared services and operational efficiencies in public health. In order to achieve these objectives, we will launch a feasibility study to determine efficiencies gained by cooperatively sharing the following processes:

- 1.) Grants Coordination & Acquisition - Confirm common areas of importance for Grants Acquisition and Coordination services with CGM working group.
- 2.) IT Services - Investigate the compatibility of existing IT infrastructure and determine what is necessary to establish a shared grants acquisition and management computer software platform with CGM working group.
- 3.) Development and Fund-raising - Verify the areas of importance for Development and Fund-raising initiatives with CGM working group.

Once the cross-jurisdictional framework is established this will open the door for possible future collaboration in other potential shared services such as: Training and Professional Development; General IT Services; Emergency Planning; Human Resources; Payroll Processing; Procurement; Fleet Management; Utilities, Conservation, & Stainability; Equipment Sharing, etc.

Section 2 Collaborative Partners

Lead Applicant	Licking County Health Department	Round 5
Project Name	Local Health Department Collabora	Type of Request Grant

List of Partners

Please use the following space to list each collaborative partner who is participating in the project and is providing BOTH a resolution of support for the Local Government Innovation Fund application and has signed the partnership agreement.

Collaborative Partner # 1	
	Name: Fairfield Department of Health
Mailing Address:	Street Address: 1587 Granville Pike
	City: Lancaster
	Zip: 43130

Collaborative Partner # 2	
	Name: Knox County Health Department
Mailing Address:	Street Address: 11660 Upper Gilchrist Road
	City: Mount Vernon
	Zip: 43050

Collaborative Partner # 3	
	Name: Perry County Health Department
Mailing Address:	Street Address: 212 South Main Street
	City: New Lexington
	Zip: 43764

Collaborative Partner # 4	
	Name: Info-Link Technologies Inc.
Mailing Address:	Street Address: 601 Pittsburg Ave., P.O. Box 1167
	City: Mount Vernon
	Zip: 43050

Collaborative Partner # 5	
	Name: Public Health Partnership of Licking County
Mailing Address:	Street Address: 675 Price Road
	City: Newark
	Zip: 43055

Collaborative Partner # 6	
	Name:
Mailing Address:	Street Address:
	City:
	Zip:

Section 2 Collaborative Partners

Lead Applicant	Licking County Health Department	Round	5
Project Name	Local Health Department Collabora	Type of Request	Grant

Collaborative Partner # 7	
Mailing Address:	Name:
	Street Address:
	City:
	Zip:

Collaborative Partner # 8	
Mailing Address:	Name:
	Street Address:
	City:
	Zip:

Collaborative Partner # 9	
Mailing Address:	Name:
	Street Address:
	City:
	Zip:

Collaborative Partner # 10	
Mailing Address:	Name:
	Street Address:
	City:
	Zip:

Collaborative Partner # 11	
Mailing Address:	Name:
	Street Address:
	City:
	Zip:

Collaborative Partner # 12	
Mailing Address:	Name:
	Street Address:
	City:
	Zip:

Collaborative Partner # 13	
Mailing Address:	Name:
	Street Address:
	City:
	Zip:

Section 2 Collaborative Partners

Lead Applicant	Licking County Health Department	Round 5
Project Name	Local Health Department Collabora ⁺	Type of Request Grant

Project Information

Provide a general description of the project, including a description of the final work product derived from the grant study or loan implementation project. This information may be used for council briefings, program and marketing materials.

The Collaborative Grants Management (CGM) Feasibility Study is designed to identify mechanisms that will create significant efficiencies in resource development functions related to the terms of grant acquisition for local public health services by scaling the project across multiple jurisdictions. The initial focus is on the implementation of a Grants Acquisition and Management Computer Software Platform (CSP), and a public/private fiscal partnership agreement.

In many jurisdictions, local health departments remain the largest provider of immunizations, home health, communicable disease control, specialized clinical services such as STD testing and other important services. Recent recommendations from the State of Ohio, Governor's Office of Health Transformation and within the Governor's proposed 2013 budget clearly indicate the intent to consolidate and streamline many health and human services; including regionalization of state and federal grants in an effort to improve efficiency, save money, and reduce waste. These proposed changes to the state grant funding structure will have a profound effect on local health departments who are already financially challenged due to several factors (e.g. changes in public insurance systems). This situation necessitates the implementation of a cross-jurisdictional solution for increased capacity among Local Health Departments (LHDs) to collaborate with each other, as well as the private sector, to secure funding for performance and reimbursement of services. However, individual agency implementation is often a costly enterprise in terms of both hard cost and opportunity costs of implementing such a framework.

While the actual funding allocation requires a local presence, the back-office/ancillary functions of the LHD such as, grant seeking and project management, can be conducted as a regional effort given the appropriate system is in place. Under such a system, it is possible for a collaboration of LHDs to develop an efficiency of scale that would otherwise be impossible individually.

The proposal seeks to create such a system, whereby the ancillary functions are housed, regulated, and/or coordinated through a shared system while allowing LHDs to focus on service delivery thus optimizing ROI in both functional areas.

In this system, centralized grant/funding acquisition and project management will occur within a shared system that allows for specialization and efficiency. In addition, the CSP will be negotiated and purchased within the pool and implemented using a technological solution, likely a web-based service. The targeted systems are not geographically limited and allow the partnership to reach even remote areas of the state. Hence, this project may be replicated in other areas of the state, thus answering the Governor's call to regionalize grant efforts. With six initial partners, the system could easily blossom into a dozen additional departments from anywhere within the state. Participation by additional local health departments increases the ROI of the entire system and thus lowers the cost of each local health district.

Section 3
Project Information

Lead Applicant	Licking County Health Department	Round	Round 5
Project Name	Local Health Department Collabora	Type of Request	Grant

Project Information	
Has this project been submitted for consideration in previous LGIF Rounds?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
If yes, in which Round(s)?	
What was the project name?	
What entity was the lead applicant?	

Past Success	
Provide a summary of past efforts to implement a project to improve efficiency, implement shared services, coproduction, or a merger (5 points).	
<p>--All Local Health Departments have a significant history of efforts to improve efficiency. For example, the lead agency for this project, Licking County Health Department(LCHD), completed a merger between the former City of Newark Health Department and the LCHD which became effective in February of 2008. By forming a combined health district, including the cities of Newark, Health and Pataskala, as well as, the remaining county jurisdictions, (e.g., villages and townships), services were able to be consolidated saving significant public resources.</p> <p>--Another LCHD effort which has led to significant improvements in efficiency is the process toward national accreditation by the Public Health Accreditation Board (PHAB). To date LCHD has completed numerous continuous quality improvement (CQI) projects in preparation for accreditation. LCHD is one of a select few health departments across the nation to have completed the application process to PHAB and are awaiting a decision.</p> <p>--LCHD and the collaborating LHDs in this project have participated in and/or are currently participating in various cross-jurisdictional collaborative projects such as; the Breast and Cervical Cancer Program (BCCP) the Lead Program, Emergency Preparedness, Epidemiological Services and Radon Program.</p>	
Applicant demonstrates Past Success	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Scalable	
Provide a summary of how the applicant's proposal can be scaled for the inclusion of other entities (5 points).	
<p>Due to the type of proposal, the creation of an ancillary support system for grant/development activities is in-fact designed to be scalable and it is the hope that the initial six (4 LHDs and 2 private entities) applicants will not be the last to join in this effort. The attempt to establish a collaborative system is a barrier in and of itself and once overcome, has no practical limit in scope. The cost of technology to increase is marginal or completely accounted for in the "buy in" to the system (recognizing various plateaus and jumping off points for additional staff).</p>	
Applicant demonstrates a Scalable project	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Section 3
Project Information

Lead Applicant	Licking County Health Department	Round 5
Project Name	Local Health Department Collabora	Type of Request Grant

Replicable	
Provide a summary of how the applicant's proposal can be replicated by other entities. A replicable project should include a component that another entity could use as a tool to implement a similar project (5 points).	
<p>This system could easily be replicated by other organizations/departments including; mental health services, community health clinics, job and family services, etc. since it relies on the development of system that is made of components that are readily available to other entities. Other county agencies within the counties as well as any county or municipality in the State can implement a CGM program to evaluate their capability to provide shared grants acquisition and coordination services and/or as a template to implementation toward a shared grants management program.</p>	
Applicant demonstrates a Replicable project	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Section 3 Project Information

Probability of Success	
Provide a summary of the likelihood of the grant study recommendations being implemented. Applicants requesting an implementation loan should provide a summary of the probability of savings from the loan request (5 points).	
<p>The applicant agencies are all committed to the project and are simply lacking the resources to overcome basic barriers in analyzing the legal foundation for the project, the requisite negotiations with technology providers and systems, and technology analysis to make the project work. Given the current environment of the public health system, the applicants must find a solution-- this grant award will allow them to find the most cost effective system and limit the expansion of local government.</p> <p>This project has the potential to succeed in various ways including but not limited to: 1) increasing the revenue/resources available to local health departments by securing grant funding resources to pay for services that are currently paid by local tax dollars; 2) reducing administrative costs of finding and managing multiple grants and/or funding sources by sharing technical resources; and 3) improving the efficiency of local public health core services by reducing duplicative ancillary functions.</p>	
Applicant demonstrates Probability of Success	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Lead Applicant	Licking County Health Department	Round 5
Project Name	Local Health Department Collabora	Type of Request Grant

Performance Audit/Cost Benchmarking

If the project is the result of recommendations from a prior performance audit provided by the Auditor of State under Chapter 117 of the Ohio Revised Code, or is informed by a previous cost benchmarking study, please attach a copy with the supporting documents. In the section below, provide a summary of the performance audit findings or cost benchmarking study results (5 points).

N/A

Prior Performance Audit or Cost Benchmarking Yes No

Section 3
Project Information

Economic Impact

Provide a summary of how the proposal will promote a business environment through a private sector partner (5 points) and/or provide for community attraction (3 points).

This proposal seeks to establish more efficient funding and development processes through a relationship with a particular private, not-for-profit organization whose mission is completely aligned with the public health agencies involved in this project. This 501(c)(3) organization, the Public Health Partnership of Licking County (PHP), will expand the LHDs' ability to locate grant makers and/or funding sources which correlate to local public health needs. Often times, foundations, and sometimes government agencies, cannot award grants to projects without a 501(c)(3) status. Also, private citizens often prefer to give to 501(c)(3) organizations so they may deduct the gift on their tax return. Hence, this status inspires confidence in some funding sources. As such is the case, a partnership with PHP will provide a 501(c)(3), fiscal sponsorship, umbrella for the collaborating public health departments in this project.

Similarly, other private vendors, (e.g. technology contractors) will also benefit from this collaboration. We will work closely with Info-Link Technologies, (another partner in this project), to ensure the technical feasibility of this project.

Ultimately, the intent is to limit the expansion of local government services through a consolidation of public services augmented by collaboration with private sector partnerships. Through such an arrangement, the overall cost per unit of service delivery, and overall local government liability, is reduced.

Applicant demonstrates Economic Impact Yes No

Lead Applicant	Licking County Health Department	Round 5	
Project Name	Local Health Department Collabora	Type of Request	Grant

Response to Economic Demand

Provide a summary of how the project responds to substantial changes in economic demand for local or regional government services. The narrative should include a description of the current and future expected service level needs (5 points).

As funding to support local public health continues to decline, the need for reimbursement , resource development and/or the need to participate in efficiencies of scale continue to rise for local health departments in Ohio. Historically, local health districts have received significant financial support from local tax dollars to support the provision of needed services for their constituents. As both local and federal funding streams continue to decline, local health districts are economically challenged to provide their critical services. Going forward, there is expected to be an increased demand for health services provided by local health departments due to the potential expansion of Medicaid eligibility and expected health provider shortages throughout Ohio as a result of the implementation of the Affordable Care Act. Without adequate infrastructure or funding for these services, local health departments in Ohio will be forced to eliminate these programs.

Section 3
Project Information

Applicant demonstrates Response to Economic Demand Yes No

Budget Information

General Instructions

- Both the Project Budget and Program Budgets are required to be filled out in this form.
- Consolidate budget information to fit in the form. Additional budget detail may be provided in the budget narrative or in an attachment

Project Budget

- The Project Budget should detail expenses related to the grant or loan project.
- The Project Budget justification must be explained in the Project Budget Narrative section of the application. This section is also used to explain the reasoning behind any items on the budget that are not self explanatory, and provide additional detail about project expenses.
- The Project Budget should be for the period that covers the entire project. The look-back period for in-kind contributions is two years. These contributions are considered a part of the total project costs.
- For the Project Budget, indicate which entity and revenue source will be used to fund each expense. This information will be used to help determine eligible project expenses.
- Total Sources must equal Total Uses. Include staff time and other in-kind matches in the Total Uses section of the budget.

Program Budget

- Use the Program Budget to outline the costs associated with the implementation of the program in your community.
- Six (6) years of Program Budgets should be provided. The standard submission should include three years previous budgets (actual), and three years of projections including implementation of the proposed project. A second set of three years of projections (one set including implementation of this program, and one set where no shared services occurred) may be provided in lieu of three years previous if this does not apply to the proposed project.
- Please use the Program Budget Narrative section to explain changes in expenses and revenues, and to defend the budget projections. If the budget requires the combining of costs on the budget template, please explain this in the narrative.

Return on Investment:

- A Return on Investment calculation is required, and should reference cost savings, cost avoidance and/or increased revenues indicated in Program Budget sections of the application. Use the space designated for narrative to justify this calculation, using references when appropriate.

For Loan Applications only:

- Using the space provided, outline a loan repayment structure.
- Attach three years prior financial documents related to the financial health of the lead applicant (balance sheet, income statement and a statement of cash flows).

Lead Applicant:	Licking County Health Dep	Round 5
Project Name:	Local Health Department C	Type of Request: Grant

Project Budget

Use this space to outline all sources of funds and the uses of those funds. Both sections should include all funds related to the project, including in-kind match contributions. Use the project budget narrative on the next page to justify the project budget, and indicate the line items for which the grant will be used.

Sources of Funds

LGIF Request: \$100,000

Cash Match (List Sources Below):

Source:	
Source:	
Source:	
Source:	

In-Kind Match (List Sources Below):

Source:	CGM partners	\$18,000
Source:		
Source:		

Total Match: \$18,000

Total Sources: \$118,000

Uses of Funds

	Amount	Revenue Source
Consultant Fees:	\$100,000	LGIF
Legal Fees:		
Other: coordination & dev:	\$18,000	In-Kind match
Other:		

Total Uses: \$118,000

Local Match Percentage: 15%

* Please note that this match percentage will be included in your grant/loan agreement and cannot be changed after awards are made.

Local Match Percentage = (Match Amount/Project Cost) * 100 (10% match required)

10-39.99% (1 point) 40-69.99% (3 points) 70% or greater (5 points)

Section 4 Financial Information

Lead Applicant	Licking County Health Department	Round 5	
Project Name	Local Health Department C+	Type of Request	Grant

Project Budget Narrative: Use this space to justify any expenses that are not self-explanatory.

\$100,000 of grant funding is requested to complete a feasibility study to identify opportunities to work with regional partners, as well as, to research the viability of building a cross-jurisdictional framework which may be used for future collaborative efforts in-line with the governor's biannual budget recommendations for consolidation of public health services.

As mentioned in the project description, this study is to provide a better understanding of the capabilities of the collaborating LHDs in regards to acquisition and coordination of grants, as well as, to examine new types and sources of funding with the aid of our 501(c) (3) collaborator, PHP. The study will also help identify process improvements and technology innovations that may be available to the agencies to assist with improved public health service delivery.

The study will take into consideration each county's current technology environment and will identify a process that will be applicable for each agency. The effort will show the potential value of sharing technology, as well as, opportunities to create further joint efforts and sharing of work activities. The study will be performed in conjunction with Info-Link Technologies, Inc., another collaborative partner for this grant.

Section 4

Financial Information

Lead Applicant	Licking County Health Department	Round 5
Project Name	Local Health Department Collabora	Type of Request Grant

Program Budget			
Actual <input checked="" type="checkbox"/> Projected <input type="checkbox"/>	FY 2013	FY 2014	FY 2015
Expenses	Total Program Expenses	Total Program Expenses	Total Program Expenses
Salary and Benefits	\$320,000	\$326,400	\$332,800
Contract Services			
Occupancy (rent, utilities, maintenance)			
Training & Professional Development			
Insurance			
Travel			
Capital & Equipment Expenses			
Supplies, Printing, Copying & Postage			
Evaluation			
Marketing			
Conferences, meetings, etc.			
Administration			
*Other - software licensing	\$72,000	\$72,000	\$72,000
*Other -			
*Other -			
TOTAL EXPENSES	\$392,000	\$398,400	\$404,800
Revenues	Revenues	Revenues	Revenues
Contributions, Gifts, Grants, & Earned Revenue			
Local Government:	\$392,000	\$398,400	\$404,800
Local Government:			
Local Government:			
State Government			
Federal Government			
*Other -			
*Other -			
*Other -			
Membership Income			
Program Service Fees			
Investment Income			
TOTAL REVENUES	\$392,000	\$398,400	\$404,800

Lead/Applicant	Licking County Health Department	Round 5
Project Name	Local Health Department Collabor	Type of Request Grant

Program Budget

Actual <input type="checkbox"/> Projected <input checked="" type="checkbox"/>	FY 2013	FY 2014	FY 2015
Expenses	Total Program Expenses	Total Program Expenses	Total Program Expenses
Salary and Benefits	\$79,960	\$81,559	\$83,158
Contract Services			
Occupancy (rent, utilities, maintenance)			
Training & Professional Development			
Insurance			
Travel			
Capital & Equipment Expenses			
Supplies, Printing, Copying & Postage			
Evaluation			
Marketing			
Conferences, meetings, etc.			
Administration			
*Other - software licensing	\$31,160	\$31,160	\$31,160
*Other -			
*Other -			
TOTAL EXPENSES	\$111,120	\$112,719	\$114,318
	Revenues	Revenues	Revenues
Contributions, Gifts, Grants, & Earned Revenue			
Local Government:	\$111,120	\$112,719	\$114,318
Local Government:			
Local Government:			
State Government			
Federal Government			
*Other -			
*Other -			
*Other -			
Membership Income			
Program Service Fees			
Investment Income			
TOTAL REVENUES	\$111,120	\$112,719	\$114,318

Lead/Applicant:	Licking County Health Department	Round 5
Project Name:	Local Health Department Collaborative	Type of Request: Grant

Program Budget

Use this space to justify your program budget and/or explain any assumptions used for the budget projections. These projections should be based on research, case studies, or industry standards and include a thoughtful justification.

The program budget has been determined using the alternative process since the program does not currently exist, i. e. actual expense (page 14) represents the cost of each individual partner agency, or LHD, implementing an Grants Acquisition/ Management solution on their own. The projected budget (page 15) reflects the CGM partner's shared services solution.

Actual (page 14) = Individual Implementation of CSP, installation and training
 Projected (page 15) = CGM Shared Services implementation of CSP, installation & training

Costs are extrapolated from an existing implementation. In the example, a single implementation of CSP and staffing costs approximately \$. For a shared services solution, a single implementation cost provides the base with a proportional increase for each additional agency added to the partnership. The proportional increase is typically 25% though this can vary with specific program areas. Since the majority of issues with the CSP solution revolve around software installation and updates to software, as well as associated training, and not individual issues, the 25% increase per partner appeared reasonable to accommodate the increased IT management and individual agency issues.

Revenue: The expense of the program is generally born by local revenue, though grants and clinic revenue may also contribute. These were intentionally excluded since they pay for direct clinical services and generally do not fund, or minimally fund, ancillary administrative activities.

Expenditures: IT infrastructure, software licensing, and staff time are the largest expenditures and represent the cost of each participating LHDs independently funding and implementing an CSP solution, coordinating and training staff. The CPS is acting as a proxy in this budget example for grants' CPS and financial accounting since the two tend to be inseparable. In year one, the cost includes, hardware, software purchase/licensing, IT contractor, administrative costs, and a limited amount of staff time association with implementing the program. Years 2 and 3 include costs associated with maintaining hardware, IT contractor, and software subscription services.

The Program Budget is directed by the LCHD, which is the "umbrella" agent that coordinates and assembles the Partners. Cost savings would affect each of the Partners direct service delivery costs.

In addition, since this is a request/application for a feasibility study, the 3 years worth of future Program Budgets isn't applicable. However, as a collaborative group, future budgets should be relatively stable and reflect previous levels.

Section 4: Financial Information Scoring

<input type="checkbox"/>	(5 points) Applicant provided complete and accurate budget information and narrative justification for a total of six fiscal years.
<input checked="" type="checkbox"/>	(3 points) Applicant provided complete and accurate budget information and for at least three fiscal years.
<input type="checkbox"/>	(1 point) Applicant provided complete and accurate budget information for less than three fiscal years.

Lead Applicant	Licking County Health Department	Round 5	
Project Name	Local Health Department Collaborative Grant	Type of Request	Grant

Return on Investment

Return on Investment is a performance measure used to evaluate the efficiency of an investment. To derive the expected return on investment, divide the net gains of the project by the net costs. For these calculations, please use the implementation gains and costs, NOT the project costs (the cost of the feasibility, planning, or management study)--unless the results of this study will lead to direct savings without additional implementation costs. The gains from this project should be derived from the prior and future program budgets provided, and should be justified in the return on investment narrative.

Return on Investment Formulas

Consider the following questions when determining the appropriate ROI formula for your project. Check the box of the formula that you are using to determine your ROI. These numbers should refer to savings/revenues illustrated in projected budgets.

Do you expect cost savings from efficiency from your project?
 Use this formula: $\frac{\text{Total \$ Saved}}{\text{Total Program Costs}} * 100 = \text{ROI}$

Do you expect cost avoidance from the implementation of your project/program?
 Use this formula: $\frac{\text{Total Cost Avoided}}{\text{Total Program Costs}} * 100 = \text{ROI}$

Do you expect increased revenues as a result of your project/program?
 Use this formula: $\frac{\text{Total New Revenue}}{\text{Total Program Costs}} * 100 = \text{ROI}$

Do you expect some combination of savings, cost avoidance, or increased revenue as a result of your project/program? (Total Gains combines \$ Saved, Costs Avoided, and New Revenue)
 Use this formula: $\frac{\text{Total Gains}}{\text{Total Program Costs}} * 100 = \text{ROI}$

Expected Return on Investment = $\frac{\$856,971}{\$1,195,200} * 100 = 72\%$

Expected Return on Investment is:

<input type="checkbox"/> Less than 25% (10 points)	<input type="checkbox"/> 25%-75% (20 points)	<input checked="" type="checkbox"/> Greater than 25% (30 points)
----------------------------------------------------	----------------------------------------------	------------------------------------------------------------------

Questions about how to calculate ROI? Please contact the Office of Redevelopment at 614-995-2292 or lgif@development.ohio.gov

Section 4
Financial Information

Lead Applicant	Licking County Health Department	Round 5	
Project Name	Local Health Department Collaborative Grant	Type of Request	Grant

Return on Investment Justification Narrative: In the space below, describe the nature of the expected return on investment, providing justification for the numbers presented in the ROI calculation. This calculation should be based on the savings, cost avoidance, or increased revenues shown in the program budgets on the preceding pages. Use references when appropriate to justify assumptions used for cost projections.

In general, the program partners will initially incur expenses within three budget categories (Salaries and Benefits, Contracted Services and Software Licensing). The CGM Assessment will create cost savings in all three of these categories, but for the purposes of this projection, the savings are only calculated for the Software Licensing and Staff salaries and benefits.

Using the aggregated budgets for grants management and acquisition services of the four local health departments, the project projections show a reduction of 72% to the Salaries/ benefits and software licensing expense budget lines. The reduction is a result of;

Anticipated \$856,971 savings from the implementation of shared services that will result from the CGM (salaries/benefits and software licensing expenses)

For this financial projection, the impact to the partners' contracted services was not factored into the potential cost savings. Until the evaluation of anticipated technical expertise has been completed, the overall savings in this budget category is difficult to project. In most cases, the investment in technical expertise will have a positive long-term return on investment that would not be reflected in the short-term budget exercise that was completed for this proposal.

Section 4

Financial Information

Lead Applicant	Licking County Health Department	Round 5	
Project Name	Local Health Department Collaborative Grant	Type of Request	Grant



Please outline your preferred loan repayment structure. At a minimum, please include the following: the entities responsible for repayment of the loan, all parties responsible for providing match amounts and an alternative funding source (in lieu of collateral). Applicants will have two years to complete their project upon execution of the loan agreement, and the repayment period will begin upon the final disbursement of the loan funds. A description of expected savings over the term of the loan may be used as a repayment source.

N/A

Section 4
Financial Information

Applicant demonstrates a viable repayment source to support loan award. Secondary source can be in the form of a debt reserve, bank participation, a guarantee from a local entity, or other collateral (i.e. emergency, rainy day, or contingency fund, etc).

<input type="checkbox"/> Applicant clearly demonstrates a secondary repayment source (5 points)	<input checked="" type="checkbox"/> Applicant does not have a secondary repayment source (0 points)
-------------------------------------------------------------------------------------------------	-----------------------------------------------------------------------------------------------------

Lead Applicant	Licking County Health Department	Round 5	
Project Name	Local Health Department Collaborative Grants Management F+	Type of Request	Grant

Scoring Overview

Section 1: Collaborative Measures

Collaborative Measures	Description	Max Points	Applicant Self Score
Population	Applicant's population (or the population of the area(s) served) falls within one of the listed categories as determined by the U.S. Census Bureau. Population scoring will be determined by the smallest population listed in the application. Applications from (or collaborating with) small communities are preferred.	5	5
Participating Entities	Applicant has executed partnership agreements outlining all collaborative partners and participation agreements and has resolutions of support. (Note: Sole applicants only need to provide a resolution of support from its governing entity.	5	5

Section 2: Success Measures

Past Success	Applicant has successfully implemented, or is following project guidance from a shared services model, for an efficiency, shared service, coproduction or merger project in the past.	5	5
Scalable	Applicant's proposal can be scaled for the inclusion of other entities.	5	5
Replicable	Applicant's proposal can be replicated by other local governments.	5	5
Probability of Success	Applicant provides a documented need for the project and clearly outlines the likelihood of the need being met.	5	5

Section 3: Significance Measures

Performance Audit Implementation/Cost Benchmarking	The project implements a single recommendation from a performance audit provided by the Auditor of State under Chapter 117 of the Ohio Revised Code or is informed by cost benchmarking.	5	0
Economic Impact	Applicant demonstrates the project will promote a business environment (i.e., demonstrates a business relationship resulting from the project) and will provide for community attraction (i.e., cost avoidance with respect to taxes).	5	5
Response to Economic Demand	The project responds to current substantial changes in economic demand for local or regional government services.	5	5

Section 4: Financial Measures

Financial Information	Applicant includes financial information (i.e., service related operating budgets) for the most recent three years and the three year period following the project. The financial information must be directly related to the scope of the project and will be used as the cost basis for determining any savings resulting from the project.	5	3
Local Match	Percentage of local matching funds being contributed to the project. This may include in-kind contributions.	5	1
Expected Return	Applicant demonstrates as a percentage of savings (i.e., actual savings, increased revenue, or cost avoidance) an expected return. The return must be derived from the applicant's cost basis.	30	30
Repayment Structure (Loan Only)	Applicant demonstrates a viable repayment source to support loan award. Secondary source can be in the form of a debt reserve, bank participation, a guarantee from a local entity, or other collateral (i.e., emergency fund, rainy day fund, contingency fund, etc.).	5	0

Total Points 74



March 1, 2013

R. Joseph Ebel, RS, MS, MBA
Health Commissioner
Licking County Health Department
675 Price Road
Newark, Ohio 43055

Mr. Ebel,

The purpose of this letter is to inform you that the Fairfield Department of Health plans to collaborate with you on your department's *Local Health Department Collaborative Grant Management Feasibility Study*. Our department looks forward to working with you and your partners in order to determine effective grant management strategies that will allow us to properly manage these funds in a more streamlined approach. In addition, the study will assist us with preparing for the potential regionalization of local health department grants that is currently contained in Governor Kasich's proposed budget.

Our staff looks forward to working with your department on this project, and developing an infrastructure that will allow us provide our constituents with high quality public health services through the effective management of grant funds. As the grant writing process becomes more competitive, this project will afford us with an opportunity to better position ourselves to receive additional funding for all of our communities.

If you need any additional information please do not hesitate to contact me.

Sincerely,

Larry Hanna RS,
Administrator
Fairfield Department of Health



11660 Upper Gilchrist Road
Mount Vernon, Ohio 43050

www.knoxhealth.com

Phone 740-392-2200
Fax 740-392-9613

March 1, 2013

R. Joseph Ebel, RS, MS, MBA
Health Commissioner
Licking County Health Department
675 Price Road
Newark, Ohio 43055

Dear Joe,

The purpose of this letter is to inform you that the Knox County Health Department is pleased to collaborate with you on your department's *Local Health Department Collaborative Grant Management Feasibility Study*. Our department looks forward to working with you and other local health departments in determining effective grant management strategies that may allow us to properly manage grant funds in a more streamlined approach. In addition, the study may assist us with preparing for the potential regionalization of local health department grants that is currently contained in Ohio's proposed biennial budget.

We also look forward to developing an infrastructure that may allow local health departments to provide our constituents with high quality public health services through the effective management of grant funds. I am confident that as grant writing processes become more competitive, this project will afford us with an opportunity to better position ourselves to receive additional funding for all of our communities.

If you need any additional information please do not hesitate to contact me.

Sincerely,

A handwritten signature in black ink that reads "Julie Miller".

Julie Miller

Health Commissioner



"We are dedicated to promoting and protecting the health and well-being of our residents and communities by providing quality services and educational programs to prevent the incidence of disease and unhealthy conditions."

Perry County Health Department

212 SOUTH MAIN STREET - PO BOX 230
NEWLEXINGTON, OHIO 43764
PHONE (740) 342-5179
FAX (740) 342-5540

March 1, 2013

R. Joseph Ebel, RS, MS, MBA
Health Commissioner
Licking County Health Department
675 Price Road
Newark, Ohio 43055

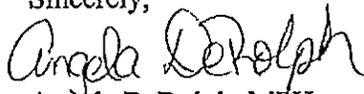
Mr. Ebel,

The purpose of this letter is to inform you that the Perry County Health Department plans to collaborate with you on your department's *Local Health Department Collaborative Grant Management Feasibility Study*. Our department looks forward to working with you and your partners in order to determine effective grant management strategies that will allow us to properly manage these funds in a more streamlined approach. In addition, the study will assist us with preparing for the potential regionalization of local health department grants that is currently contained in Governor Kasich's proposed budget.

Our staff looks forward to working with your department on this project, and developing an infrastructure that will allow us provide our constituents with high quality public health services through the effective management of grant funds. As the grant writing process becomes more competitive, this project will afford us with an opportunity to better position ourselves to receive additional funding for all of our communities.

If you need any additional information please do not hesitate to contact me.

Sincerely,



Angela DeRolph, MPH
Health Commissioner

March 1, 2013

R. Joseph Ebel, RS, MS, MBA
Health Commissioner
Licking County Health Department
675 Price Road
Newark, Ohio 43055

Mr. Ebel,

The purpose of this letter is to inform you that the Info-Link Technologies, Inc. plans to collaborate with you on your department's *Local Health Department Collaborative Grant Management Feasibility Study*. Our department looks forward to working with you and your partners in order to determine effective grant management strategies that will allow us to properly manage these funds in a more streamlined approach. In addition, the study will assist us with preparing for the potential regionalization of local health department grants that is currently contained in Governor Kasich's proposed budget.

Our staff looks forward to working with your department on this project, and developing an infrastructure that will allow us provide our constituents with high quality public health services through the effective management of grant funds. As the grant writing process becomes more competitive, this project will afford us with an opportunity to better position ourselves to receive additional funding for all of our communities.

If you need any additional information please do not hesitate to contact me.

Sincerely,

A handwritten signature in black ink, appearing to be "R. Joseph Ebel", written in a cursive style with a long horizontal stroke extending to the right.

PUBLIC HEALTH PARTNERSHIP OF LICKING COUNTY

Board of Trustees

R. Joseph Ebel

Rodney Ellis

D. Rick Lanthorn

Neisha Grubaugh

Patrick Lebold

Randy Thorp

Medha Sudliff

Nancy Hanger

Secretary/Treasurer

Barbara Lanthorn

March 4, 2013

The purpose of this letter is to inform you that the Public Health Partnership of Licking County plans to collaborate with the Licking County Health Department on your *Local Health Department Collaborative Grant Management Feasibility Study*. Our organization looks forward to working with you and your partners in order to determine effective grant management strategies that will allow us to develop a proper grants management system through a more streamlined approach. In addition, the study will assist us with preparing for the potential regionalization of local health department grants that is currently contained in Governor Kasich's proposed budget.

We look forward to working with your department on this project, and developing an infrastructure that will allow us to assist with delivering high quality public health services through the effective management of grant funds.

If you need any additional information please do not hesitate to contact me.

Sincerely



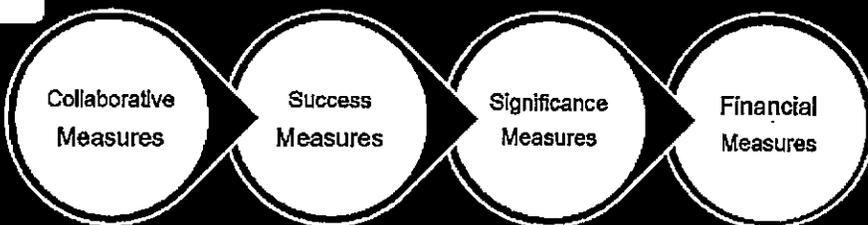
R. Joseph Ebel, RS, MS, MBA
Chairman of the Board of Trustees

675 Price Rd.
Newark, OH 43055
PH: (740) 849-6477
FAX: (740) 849-6510
www.lickingcohealth.org





Ohio
Local Government
Innovation Fund



Round 5: Application Form

Step One: Fill out this Application Form in its entirety.

Step Two: Fill out the online submission form and submit your application materials. All supplemental application materials should be combined into one file for submission.

LGIF: Applicant Profile

Lead Agency	Licking County Health Department
Project Name	Local Health Department Collaborative Grants Management Feasibility Study
Type of Request	Grant
Request Amount	\$100,000.00
JobsOhio Region	Central
Number of Collaborative Partners <small>(including lead agency)</small>	
Project Approach	Shared Services
Project Type	Administration



**Development
 Services Agency**

Website: http://development.ohio.gov/cs/cs_localgovfund.htm

E-mail: LGIF@development.ohio.gov

Phone: 614 | 995 2292

Lead Applicant:	Licking County Health Department	Round	5
Project Name:	Local Health Department Collaborati	Type of Request:	Grant

Instructions

- Make sure to answer each question appropriately in the space provided, not exceeding the space allowed by the answer box.
- Examples of completed applications are available on the LGIF website, found here:
http://development.ohio.gov/cs/cs_localgovfund.htm

Lead Agency	
Mailing Address	Name: Licking County Health Department
	Street Address: 675 Price Road
	City: Newark
	Zip: 43055
In what county is the lead agency located? Licking	
Ohio House District: 71	Ohio Senate District: 31

Section 1
Contacts

Project Contact		
Please provide information about the individual who should be contacted regarding this application.		
Mailing Address	Name: Chad Brown	Title: Deputy Health Commissioner/Dir. of EH
	Street Address: 675 Price Road	
	City: Newark	
	Zip: 43055	
Email Address: cbrown@lickingcohealth.org		Phone Number: (740) 349-6487

Fiscal Agency		
Please provide information for the entity and individual serving as the fiscal agent for the project.		
Mailing Address	Fiscal Agency: Licking County Health Department	
	Fiscal Officer: Barbara Lanthorn	Title: Director of Administrative Services
	Street Address: 675 Price Road	
	City: Newark	
	Zip: 43055	

Population	
Does the applicant (or collaborative partner) represent a city, township, or village with a population of less than 20,000 residents?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	List Entity
Does the applicant (or collaborative partner) represent a county with a population of less than 235,000 residents?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
	List Entity
	Licking County Health Department

Single Applicant	
Is your organization applying as a single entity?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Lead Applicant	Licking County Health Department	Round	5
Project Name	Local Health Department Collaborative	Type of Request	Grant

Collaborative Partners	
Does the proposal include collaborative partners?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Applicants applying with collaborative partners are required to show proof of the partnership with a signed partnership agreement and a resolution of support from each of the partner's governing entities. If the collaborative partner does not have a governing entity, a letter of support from the partnering organization is sufficient. These documents must be received by the end of the cure period in order for each entity to count as a collaborative partner for the purposes of this application.

Nature of the Partnership

As agreed upon in the signed partnership agreement, please identify the nature of the partnership with an explanation of how the lead agency and collaborative partners will work together on the proposed project.

The intent of the Local Health Department Collaborative Grants Management (CGM) Feasibility Study is to examine the potential for sharing auxiliary services necessary for management of grant funds to sustain local public health departments. This project will be a positive step in helping these agencies and their respective communities to improve service delivery and control costs through cross-jurisdictional cooperation, sharing of services and possible service delivery consolidation. Moreover, this activity is in-line with the governor's newly proposed biennial budget recommendations and the recommendations of the Public Health Futures Committee regarding shared services and operational efficiencies in public health. In order to achieve these objectives, we will launch a feasibility study to determine efficiencies gained by cooperatively sharing the following processes:

- 1.) Grants Coordination & Acquisition - Confirm common areas of importance for Grants Acquisition and Coordination services with CGM working group.
- 2.) IT Services.- Investigate the compatibility of existing IT infrastructure and determine what is necessary to establish a shared grants acquisition and management computer software platform with CGM working group.
- 3.) Development and Fund-raising - Verify the areas of importance for Development and Fund-raising initiatives with CGM working group.

Once the cross-jurisdictional framework is established this will open the door for possible future collaboration in other potential shared services such as: Training and Professional Development; General IT Services; Emergency Planning; Human Resources; Payroll Processing; Procurement; Fleet Management; Utilities, Conservation, & Stainability; Equipment Sharing, etc.

Section 2 Collaborative Partners

Lead Applicant:	Licking County Health Department	Round	5
Project Name:	Local Health Department Collaborative	Type of Request:	Grant

List of Partners

Please use the following space to list each collaborative partner who is participating in the project and is providing BOTH a resolution of support for the Local Government Innovation Fund application and has signed the partnership agreement.

Collaborative Partner # 1	
Mailing Address:	Name: Fairfield Department of Health
	Street Address: 1587 Granville Pike
	City: Lancaster
	Zip: 43130

Collaborative Partner # 2	
Mailing Address:	Name: Knox County Health Department
	Street Address: 11660 Upper Gilchrist Road
	City: Mount Vernon
	Zip: 43050

Collaborative Partner # 3	
Mailing Address:	Name: Perry County Health Department
	Street Address: 212 South Main Street
	City: New Lexington
	Zip: 43764

Collaborative Partner # 4	
Mailing Address:	Name: Info-Link Technologies Inc.
	Street Address: 601 Pittsburg Ave., P.O. Box 1167
	City: Mount Vernon
	Zip: 43050

Collaborative Partner # 5	
Mailing Address:	Name: Public Health Partnership of Licking County
	Street Address: 675 Price Road
	City: Newark
	Zip: 43055

Collaborative Partner # 6	
Mailing Address:	Name:
	Street Address:
	City:
	Zip:

Section 2 Collaborative Partners

Lead Applicant	Licking County Health Department	Round 5
Project Name	Local Health Department Collabora	Type of Request Grant

Collaborative Partner # 7	
Mailing Address:	Name:
	Street Address:
	City:
	Zip:

Collaborative Partner # 8	
Mailing Address:	Name:
	Street Address:
	City:
	Zip:

Collaborative Partner # 9	
Mailing Address:	Name:
	Street Address:
	City:
	Zip:

Collaborative Partner # 10	
Mailing Address:	Name:
	Street Address:
	City:
	Zip:

Collaborative Partner # 11	
Mailing Address:	Name:
	Street Address:
	City:
	Zip:

Collaborative Partner # 12	
Mailing Address:	Name:
	Street Address:
	City:
	Zip:

Collaborative Partner # 13	
Mailing Address:	Name:
	Street Address:
	City:
	Zip:

Section 2 Collaborative Partners

Lead Applicant	Licking County Health Department	Round 5
Project Name	Local Health Department Collabora	Type of Request Grant

Project Information

Provide a general description of the project, including a description of the final work product derived from the grant study or loan implementation project. This information may be used for council briefings, program and marketing materials.

The Collaborative Grants Management (CGM) Feasibility Study is designed to identify mechanisms that will create significant efficiencies in resource development functions related to the terms of grant acquisition for local public health services by scaling the project across multiple jurisdictions. The initial focus is on the implementation of a Grants Acquisition and Management Computer Software Platform (CSP), and a public/private fiscal partnership agreement.

In many jurisdictions, local health departments remain the largest provider of immunizations, home health, communicable disease control, specialized clinical services such as STD testing and other important services. Recent recommendations from the State of Ohio, Governor's Office of Health Transformation and within the Governor's proposed 2013 budget clearly indicate the intent to consolidate and streamline many health and human services; including regionalization of state and federal grants in an effort to improve efficiency, save money, and reduce waste. These proposed changes to the state grant funding structure will have a profound effect on local health departments who are already financially challenged due to several factors (e.g. changes in public insurance systems). This situation necessitates the implementation of a cross-jurisdictional solution for increased capacity among Local Health Departments (LHDs) to collaborate with each other, as well as the private sector, to secure funding for performance and reimbursement of services. However, individual agency implementation is often a costly enterprise in terms of both hard cost and opportunity costs of implementing such a framework.

While the actual funding allocation requires a local presence, the back-office/ancillary functions of the LHD such as, grant seeking and project management, can be conducted as a regional effort given the appropriate system is in place. Under such a system, it is possible for a collaboration of LHDs to develop an efficiency of scale that would otherwise be impossible individually.

The proposal seeks to create such a system, whereby the ancillary functions are housed, regulated, and/or coordinated through a shared system while allowing LHDs to focus on service delivery thus optimizing ROI in both functional areas.

In this system, centralized grant/funding acquisition and project management will occur within a shared system that allows for specialization and efficiency. In addition, the CSP will be negotiated and purchased within the pool and implemented using a technological solution, likely a web-based service. The targeted systems are not geographically limited and allow the partnership to reach even remote areas of the state. Hence, this project may be replicated in other areas of the state, thus answering the Governor's call to regionalize grant efforts. With six initial partners, the system could easily blossom into a dozen additional departments from anywhere within the state. Participation by additional local health departments increases the ROI of the entire system and thus lowers the cost of each local health district.

Section 3
Project Information

Lead Applicant	Licking County Health Department	Round	5
Project Name	Local Health Department Collabora	Type of Request	Grant

Project Information	
Has this project been submitted for consideration in previous LGIF Rounds?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
If yes, in which Round(s)?	
What was the project name?	
What entity was the lead applicant?	

Past Success	
Provide a summary of past efforts to implement a project to improve efficiency, implement shared services, coproduction, or a merger (5 points).	
<p>--All Local Health Departments have a significant history of efforts to improve efficiency. For example, the lead agency for this project, Licking County Health Department(LCHD), completed a merger between the former City of Newark Health Department and the LCHD which became effective in February of 2008. By forming a combined health district, including the cities of Newark, Health and Pataskala, as well as, the remaining county jurisdictions, (e.g., villages and townships), services were able to be consolidated saving significant public resources.</p> <p>--Another LCHD effort which has led to significant improvements in efficiency is the process toward national accreditation by the Public Health Accreditation Board (PHAB). To date LCHD has completed numerous continuous quality improvement (CQI) projects in preparation for accreditation. LCHD is one of a select few health departments across the nation to have completed the application process to PHAB and are awaiting a decision.</p> <p>--LCHD and the collaborating LHDs in this project have participated in and/or are currently participating in various cross-jurisdictional collaborative projects such as; the Breast and Cervical Cancer Program (BCCP) the Lead Program, Emergency Preparedness, Epidemiological Services and Radon Program.</p>	
Applicant demonstrates Past Success	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Section 3
Project Information

Scalable	
Provide a summary of how the applicant's proposal can be scaled for the inclusion of other entities (5 points).	
<p>Due to the type of proposal, the creation of an ancillary support system for grant/development activities is in-fact designed to be scalable and it is the hope that the initial six (4 LHDs and 2 private entities) applicants will not be the last to join in this effort. The attempt to establish a collaborative system is a barrier in and of itself and once overcome, has no practical limit in scope. The cost of technology to increase is marginal or completely accounted for in the "buy in" to the system (recognizing various plateaus and jumping off points for additional staff).</p>	
Applicant demonstrates a Scalable project	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Lead Applicant	Licking County Health Department	Round	5
Project Name	Local Health Department Collabora	Type of Request	Grant

Replicable	
Provide a summary of how the applicant's proposal can be replicated by other entities. A replicable project should include a component that another entity could use as a tool to implement a similar project (5 points).	
<p>This system could easily be replicated by other organizations/departments including; mental health services, community health clinics, job and family services, etc. since it relies on the development of system that is made of components that are readily available to other entities. Other county agencies within the counties as well as any county or municipality in the State can implement a CGM program to evaluate their capability to provide shared grants acquisition and coordination services and/or as a template to implementation toward a shared grants management program.</p>	
Applicant demonstrates a Replicable project	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Section 3
Project Information

Probability of Success	
Provide a summary of the likelihood of the grant study recommendations being implemented. Applicants requesting an implementation loan should provide a summary of the probability of savings from the loan request (5 points).	
<p>The applicant agencies are all committed to the project and are simply lacking the resources to overcome basic barriers in analyzing the legal foundation for the project, the requisite negotiations with technology providers and systems, and technology analysis to make the project work. Given the current environment of the public health system, the applicants must find a solution— this grant award will allow them to find the most cost effective system and limit the expansion of local government.</p> <p>This project has the potential to succeed in various ways including but not limited to: 1) increasing the revenue/resources available to local health departments by securing grant funding resources to pay for services that are currently paid by local tax dollars; 2) reducing administrative costs of finding and managing multiple grants and/or funding sources by sharing technical resources; and 3) improving the efficiency of local public health core services by reducing duplicative ancillary functions.</p>	
Applicant demonstrates Probability of Success	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Lead Applicant	Licking County Health Department	Round	5
Project Name	Local Health Department Collabora	Type of Request	Grant

Performance Audit/Cost Benchmarking	
<p>If the project is the result of recommendations from a prior performance audit provided by the Auditor of State under Chapter 117 of the Ohio Revised Code, or is informed by a previous cost benchmarking study, please attach a copy with the supporting documents. In the section below, provide a summary of the performance audit findings or cost benchmarking study results (5 points).</p>	
<p>N/A</p>	
<p>Prior Performance Audit or Cost Benchmarking <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	

Section 3
Project Information

Economic Impact	
<p>Provide a summary of how the proposal will promote a business environment through a private sector partner (5 points) and/or provide for community attraction (3 points).</p>	
<p>This proposal seeks to establish more efficient funding and development processes through a relationship with a particular private, not-for-profit organization whose mission is completely aligned with the public health agencies involved in this project. This 501(c)(3) organization, the Public Health Partnership of Licking County (PHP), will expand the LHDs' ability to locate grant makers and/or funding sources which correlate to local public health needs. Often times, foundations, and sometimes government agencies, cannot award grants to projects without a 501(c)(3) status. Also, private citizens often prefer to give to 501(c)(3) organizations so they may deduct the gift on their tax return. Hence, this status inspires confidence in some funding sources. As such is the case, a partnership with PHP will provide a 501(c)(3), fiscal sponsorship, umbrella for the collaborating public health departments in this project.</p> <p>Similarly, other private vendors, (e.g. technology contractors) will also benefit from this collaboration. We will work closely with Info-Link Technologies, (another partner in this project), to ensure the technical feasibility of this project.</p> <p>Ultimately, the intent is to limit the expansion of local government services through a consolidation of public services augmented by collaboration with private sector partnerships. Through such an arrangement, the overall cost per unit of service delivery, and overall local government liability, is reduced.</p>	
<p>Applicant demonstrates Economic Impact <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	

Lead Applicant	Licking County Health Department	Round 5	
Project Name	Local Health Department Collaborat	Type of Request	Grant

Response to Economic Demand	
<p>Provide a summary of how the project responds to substantial changes in economic demand for local or regional government services. The narrative should include a description of the current and future expected service level needs (5 points).</p>	
<p>As funding to support local public health continues to decline, the need for reimbursement , resource development and/or the need to participate in efficiencies of scale continue to rise for local health departments in Ohio. Historically, local health districts have received significant financial support from local tax dollars to support the provision of needed services for their constituents. As both local and federal funding streams continue to decline, local health districts are economically challenged to provide their critical services. Going forward, there is expected to be an increased demand for health services provided by local health departments due to the potential expansion of Medicaid eligibility and expected health provider shortages throughout Ohio as a result of the implementation of the Affordable Care Act. Without adequate infrastructure or funding for these services, local health departments in Ohio will be forced to eliminate these programs.</p>	
Applicant demonstrates Response to Economic Demand	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Section 3
Project Information

Budget Information

General Instructions

- Both the Project Budget and Program Budgets are required to be filled out in this form.
- Consolidate budget information to fit in the form. Additional budget detail may be provided in the budget narrative or in an attachment.

Project Budget:

- The Project Budget should detail expenses related to the grant or loan project.
- The Project Budget justification must be explained in the Project Budget Narrative section of the application. This section is also used to explain the reasoning behind any items on the budget that are not self-explanatory, and provide additional detail about project expenses.
- The Project Budget should be for the period that covers the entire project. The look-back period for in-kind contributions is two years. These contributions are considered a part of the total project costs.
- For the Project Budget, indicate which entity and revenue source will be used to fund each expense. This information will be used to help determine eligible project expenses.
- Total Sources must equal Total Uses. Include staff time and other in-kind matches in the Total Uses section of the budget.

Program Budget

- Use the Program Budget to outline the costs associated with the implementation of the program in your community.
- Six (6) years of Program Budgets should be provided. The standard submission should include three years previous budgets (actual), and three years of projections including implementation of the proposed project. A second set of three years of projections (one set including implementation of this program, and one set where no shared services occurred) may be provided in lieu of three years previous if this does not apply to the proposed project.
- Please use the Program Budget Narrative section to explain changes in expenses and revenues, and to defend the budget projections. If the budget requires the combining of costs on the budget template, please explain this in the narrative.

Return on Investment:

- A Return on Investment calculation is required, and should reference cost savings, cost avoidance and/or increased revenues indicated in Program Budget sections of the application. Use the space designated for narrative to justify this calculation, using references when appropriate.

For Loan Applications only:

- Using the space provided, outline a loan repayment structure.
- Attach three years prior financial documents related to the financial health of the lead applicant (balance sheet, income statement and a statement of cash flows).

Lead Applicant:	Licking County Health Department	Round 5
Project Name:	Local Health Department Cg	Type of Request: Grant

Project Budget

Use this space to outline all sources of funds and the uses of those funds. Both sections should include all funds related to the project, including in-kind match contributions. Use the project budget narrative on the next page to justify the project budget, and indicate the line items for which the grant will be used.

Sources of Funds

LGIF Request:	\$100,000
Cash Match (List Sources Below):	
Source:	
Source:	
Source:	
Source:	
In-Kind Match (List Sources Below):	
Source: CGM partners	\$18,000
Source:	
Source:	
Total Match:	\$18,000
Total Sources:	\$118,000

Uses of Funds

	Amount	Revenue Source
Consultant Fees:	\$100,000	LGIF
Legal Fees:		
Other: coordination & dev.	\$18,000	In-Kind match
Other:		

Total Uses:	\$118,000	* Please note that this match percentage will be included in your grant/loan agreement and cannot be changed after awards are made.
Local Match Percentage:	15%	

Local Match Percentage = (Match Amount / Project Cost) * 100 (10% match required)

10-39.99% (1 point)
 40-69.99% (3 points)
 70% or greater (5 points)

Section 4 Financial Information

Lead Applicant	Licking County Health Department	Round 5
Project Name	Local Health Department Co	Type of Request Grant

Project Budget Narrative Use this space to justify any expenses that are not self-explanatory

\$100,000 of grant funding is requested to complete a feasibility study to identify opportunities to work with regional partners, as well as, to research the viability of building a cross-jurisdictional framework which may be used for future collaborative efforts in-line with the governor's biannual budget recommendations for consolidation of public health services.

As mentioned in the project description, this study is to provide a better understanding of the capabilities of the collaborating LHDs in regards to acquisition and coordination of grants, as well as, to examine new types and sources of funding with the aid of our 501(c) (3) collaborator, PHP. The study will also help identify process improvements and technology innovations that may be available to the agencies to assist with improved public health service delivery.

The study will take into consideration each county's current technology environment and will identify a process that will be applicable for each agency. The effort will show the potential value of sharing technology, as well as, opportunities to create further joint efforts and sharing of work activities. The study will be performed in conjunction with Info-Link Technologies, Inc., another collaborative partner for this grant.

Section 4
Financial Information

Lead Applicant	Licking County Health Department	Round 5
Project Name	Local Health Department Collabora	Type of Request: Grant

Program Budget

Actual <input checked="" type="checkbox"/> Projected <input type="checkbox"/>	FY 2013	FY 2014	FY 2015
Expenses	Total Program Expenses	Total Program Expenses	Total Program Expenses
Salary and Benefits	\$320,000	\$326,400	\$332,800
Contract Services			
Occupancy (rent, utilities, maintenance)			
Training & Professional Development			
Insurance			
Travel			
Capital & Equipment Expenses			
Supplies, Printing, Copying & Postage			
Evaluation			
Marketing			
Conferences, meetings, etc.			
Administration			
*Other - software licensing	\$72,000	\$72,000	\$72,000
*Other -			
*Other -			
TOTAL EXPENSES	\$392,000	\$398,400	\$404,800
Revenues	Revenues	Revenues	Revenues
Contributions, Gifts, Grants, & Earned Revenue			
Local Government:	\$392,000	\$398,400	\$404,800
Local Government:			
Local Government:			
State Government			
Federal Government			
*Other -			
*Other -			
*Other -			
Membership Income			
Program Service Fees			
Investment Income			
TOTAL REVENUES	\$392,000	\$398,400	\$404,800

Lead/Applicant	Licking County Health Department	Round 5
Project Name	Local Health Department Collabora	Grant

Program Budget			
Actual <input type="checkbox"/> Projected <input checked="" type="checkbox"/>	FY 2013	FY 2014	FY 2015
Expenses	Total Program Expenses	Total Program Expenses	Total Program Expenses
Salary and Benefits	\$79,960	\$81,559	\$83,158
Contract Services			
Occupancy (rent, utilities, maintenance)			
Training & Professional Development			
Insurance			
Travel			
Capital & Equipment Expenses			
Supplies, Printing, Copying & Postage			
Evaluation			
Marketing			
Conferences, meetings, etc.			
Administration			
*Other - software licensing	\$31,160	\$31,160	\$31,160
*Other -			
*Other -			
TOTAL EXPENSES	\$111,120	\$112,719	\$114,318
	Revenues	Revenues	Revenues
Contributions, Gifts, Grants, & Earned Revenue			
Local Government:	\$111,120	\$112,719	\$114,318
Local Government:			
Local Government:			
State Government			
Federal Government			
*Other -			
*Other -			
*Other -			
Membership Income			
Program Service Fees			
Investment Income			
TOTAL REVENUES	\$111,120	\$112,719	\$114,318

Lead/Applicant	Licking County Health Department	Round 5
Project Name	Local Health Department Collaborative	Type of Request
		Grant

Program Budget

Use this space to justify your program budget and/or explain any assumptions used for the budget projections. These projections should be based on research, case studies, or industry standards and include a thoughtful justification.

The program budget has been determined using the alternative process since the program does not currently exist, i. e. actual expense (page 14) represents the cost of each individual partner agency, or LHD, implementing an Grants Acquisition/ Management solution on their own. The projected budget (page 15) reflects the CGM partner's shared services solution.

Actual (page 14) = Individual Implementation of CSP, installation and training
 Projected (page 15) = CGM Shared Services implementation of CSP, installation & training

Costs are extrapolated from an existing implementation. In the example, a single implementation of CSP and staffing costs approximately \$. For a shared services solution, a single implementation cost provides the base with a proportional increase for each additional agency added to the partnership. The proportional increase is typically 25% though this can vary with specific program areas. Since the majority of issues with the CSP solution revolve around software installation and updates to software, as well as associated training, and not individual issues, the 25% increase per partner appeared reasonable to accommodate the increased IT management and individual agency issues.

Revenue: The expense of the program is generally born by local revenue, though grants and clinic revenue may also contribute. These were intentionally excluded since they pay for direct clinical services and generally do not fund, or minimally fund, ancillary administrative activities.

Expenditures: IT infrastructure, software licensing, and staff time are the largest expenditures and represent the cost of each participating LHDs independently funding and implementing an CSP solution, coordinating and training staff. The CPS is acting as a proxy in this budget example for grants' CPS and financial accounting since the two tend to be inseparable. In year one, the cost includes, hardware, software purchase/licensing, IT contractor, administrative costs, and a limited amount of staff time association with implementing the program. Years 2 and 3 include costs associated with maintaining hardware, IT contractor, and software subscription services.

The Program Budget is directed by the LCHD, which is the "umbrella" agent that coordinates and assembles the Partners. Cost savings would affect each of the Partners direct service delivery costs.

In addition, since this is a request/application for a feasibility study, the 3 years worth of future Program Budgets isn't applicable. However, as a collaborative group, future budgets should be relatively stable and reflect previous levels.

Section 4: Financial Information Scoring

<input type="checkbox"/>	(5 points) Applicant provided complete and accurate budget information and narrative justification for a total of six fiscal years.
<input checked="" type="checkbox"/>	(3 points) Applicant provided complete and accurate budget information and for at least three fiscal years.
<input type="checkbox"/>	(1 point) Applicant provided complete and accurate budget information for less than three fiscal years.

Lead Applicant	Licking County Health Department	Round 5	
Project Name	Local Health Department Collaborative Grant	Type of Request	Grant

Return on Investment Formula

Return on Investment is a performance measure used to evaluate the efficiency of an investment. To derive the expected return on investment, divide the net gains of the project by the net costs. For these calculations, please use the implementation gains and costs, NOT the project costs (the cost of the feasibility, planning, or management study)—unless the results of this study will lead to direct savings without additional implementation costs. The gains from this project should be derived from the prior and future program budgets provided, and should be justified in the return on investment narrative.

Return on Investment Formulas

Consider the following questions when determining the appropriate ROI formula for your project. Check the box of the formula that you are using to determine your ROI. These numbers should refer to savings/revenues illustrated in projected budgets.

Do you expect cost savings from efficiency from your project?
 Use this formula: $\frac{\text{Total \$ Saved}}{\text{Total Program Costs}} * 100 = \text{ROI}$

Do you expect cost avoidance from the implementation of your project/program?
 Use this formula: $\frac{\text{Total Cost Avoided}}{\text{Total Program Costs}} * 100 = \text{ROI}$

Do you expect increased revenues as a result of your project/program?
 Use this formula: $\frac{\text{Total New Revenue}}{\text{Total Program Costs}} * 100 = \text{ROI}$

Do you expect some combination of savings, cost avoidance, or increased revenue as a result of your project/program? (Total Gains combines \$ Saved, Costs Avoided, and New Revenue)
 Use this formula: $\frac{\text{Total Gains}}{\text{Total Program Costs}} * 100 = \text{ROI}$

Expected Return on Investment = $\frac{\$856,971}{\$1,195,200} * 100 = 72\%$

Expected Return on Investment is:

<input type="checkbox"/> Less than 25% (10 points)	<input type="checkbox"/> 25%-75% (20 points)	<input checked="" type="checkbox"/> Greater than 25% (30 points)
----------------------------------------------------	----------------------------------------------	------------------------------------------------------------------

Questions about how to calculate ROI? Please contact the Office of Redevelopment at 614-995-2292 or lgif@development.ohio.gov

Section 4
Financial Information

Lead Applicant	Licking County Health Department	Round 5	
Project Name	Local Health Department Collaborative Grant	Type of Request	Grant

Return on Investment Justification Narrative In the space below, describe the nature of the expected return on investment, providing justification for the numbers presented in the ROI calculation. This calculation should be based on the savings, cost avoidance, or increased revenues shown in the program budgets on the preceding pages. Use references when appropriate to justify assumptions used for cost projections.

In general, the program partners will initially incur expenses within three budget categories (Salaries and Benefits, Contracted Services and Software Licensing). The CGM Assessment will create cost savings in all three of these categories, but for the purposes of this projection, the savings are only calculated for the Software Licensing and Staff salaries and benefits.

Using the aggregated budgets for grants management and acquisition services of the four local health departments, the project projections show a reduction of 72% to the Salaries/ benefits and software licensing expense budget lines. The reduction is a result of;

Anticipated \$856,971 savings from the implementation of shared services that will result from the CGM (salaries/benefits and software licensing expenses)

For this financial projection, the impact to the partners' contracted services was not factored into the potential cost savings. Until the evaluation of anticipated technical expertise has been completed, the overall savings in this budget category is difficult to project. In most cases, the investment in technical expertise will have a positive long-term return on investment that would not be reflected in the short-term budget exercise that was completed for this proposal.

Section 4
Financial Information

Lead Applicant	Licking County Health Department	Round 5	
Project Name	Local Health Department Collaborative Grant	Type of Request	Grant

Please outline your preferred loan repayment structure. At a minimum, please include the following: the entities responsible for repayment of the loan, all parties responsible for providing match amounts and an alternative funding source (in lieu of collateral). Applicants will have two years to complete their project upon execution of the loan agreement, and the repayment period will begin upon the final disbursement of the loan funds. A description of expected savings over the term of the loan may be used as a repayment source.

N/A

Section 4 Financial Information

Applicant demonstrates a viable repayment source to support loan award. Secondary source can be in the form of a debt reserve, bank participation, a guarantee from a local entity, or other collateral (i.e. emergency, rainy day, or contingency fund, etc).

Applicant clearly demonstrates a secondary repayment source (5 points)

Applicant does not have a secondary repayment source (0 points)

Lead Applicant	Licking County Health Department	Round 5
Project Name	Local Health Department Collaborative Grants Management F	Type of Request Grant

Scoring Overview

Section 1: Collaborative Measures

Collaborative Measures	Description	Max Points	Applicant Self Score
Population	Applicant's population (or the population of the area(s) served) falls within one of the listed categories as determined by the U.S. Census Bureau. Population scoring will be determined by the smallest population listed in the application. Applications from (or collaborating with) small communities are preferred.	5	5
Participating Entities	Applicant has executed partnership agreements outlining all collaborative partners and participation agreements and has resolutions of support. (Note: Sole applicants only need to provide a resolution of support from its governing entity.	5	5

Section 2: Success Measures

Past Success	Applicant has successfully implemented, or is following project guidance from a shared services model, for an efficiency, shared service, coproduction or merger project in the past.	5	5
Scalable	Applicant's proposal can be scaled for the inclusion of other entities.	5	5
Replicable	Applicant's proposal can be replicated by other local governments.	5	5
Probability of Success	Applicant provides a documented need for the project and clearly outlines the likelihood of the need being met.	5	5

Section 3: Significance Measures

Performance Audit Implementation/Cost Benchmarking	The project implements a single recommendation from a performance audit provided by the Auditor of State under Chapter 117 of the Ohio Revised Code or is informed by cost benchmarking.	5	0
Economic Impact	Applicant demonstrates the project will promote a business environment (i.e., demonstrates a business relationship resulting from the project) and will provide for community attraction (i.e., cost avoidance with respect to taxes).	5	5
Response to Economic Demand	The project responds to current substantial changes in economic demand for local or regional government services.	5	5

Section 4: Financial Measures

Financial Information	Applicant includes financial information (i.e., service related operating budgets) for the most recent three years and the three year period following the project. The financial information must be directly related to the scope of the project and will be used as the cost basis for determining any savings resulting from the project.	5	3
Local Match	Percentage of local matching funds being contributed to the project. This may include in-kind contributions.	5	1
Expected Return	Applicant demonstrates as a percentage of savings (i.e., actual savings, increased revenue, or cost avoidance) an expected return. The return must be derived from the applicant's cost basis.	30	30
Repayment Structure (Loan Only)	Applicant demonstrates a viable repayment source to support loan award. Secondary source can be in the form of a debt reserve, bank participation, a guarantee from a local entity, or other collateral (i.e., emergency fund, rainy day fund, contingency fund, etc.).	5	0

Total Points 74



March 1, 2013

R. Joseph Ebel, RS, MS, MBA
Health Commissioner
Licking County Health Department
675 Price Road
Newark, Ohio 43055

Mr. Ebel,

The purpose of this letter is to inform you that the Fairfield Department of Health plans to collaborate with you on your department's *Local Health Department Collaborative Grant Management Feasibility Study*. Our department looks forward to working with you and your partners in order to determine effective grant management strategies that will allow us to properly manage these funds in a more streamlined approach. In addition, the study will assist us with preparing for the potential regionalization of local health department grants that is currently contained in Governor Kasich's proposed budget.

Our staff looks forward to working with your department on this project, and developing an infrastructure that will allow us provide our constituents with high quality public health services through the effective management of grant funds. As the grant writing process becomes more competitive, this project will afford us with an opportunity to better position ourselves to receive additional funding for all of our communities.

If you need any additional information please do not hesitate to contact me.

Sincerely,

A handwritten signature in cursive script, appearing to read "Larry Hanna".

Larry Hanna RS,
Administrator
Fairfield Department of Health



11660 Upper Gilchrist Road
Mount Vernon, Ohio 43050

www.knoxhealth.com

Phone 740-392-2200
Fax 740-392-9613

March 1, 2013

R. Joseph Ebel, RS, MS, MBA
Health Commissioner
Licking County Health Department
675 Price Road
Newark, Ohio 43055

Dear Joe,

The purpose of this letter is to inform you that the Knox County Health Department is pleased to collaborate with you on your department's *Local Health Department Collaborative Grant Management Feasibility Study*. Our department looks forward to working with you and other local health departments in determining effective grant management strategies that may allow us to properly manage grant funds in a more streamlined approach. In addition, the study may assist us with preparing for the potential regionalization of local health department grants that is currently contained in Ohio's proposed biennial budget.

We also look forward to developing an infrastructure that may allow local health departments to provide our constituents with high quality public health services through the effective management of grant funds. I am confident that as grant writing processes become more competitive, this project will afford us with an opportunity to better position ourselves to receive additional funding for all of our communities.

If you need any additional information please do not hesitate to contact me.

Sincerely,

A handwritten signature in black ink that reads "Julie Miller". The signature is fluid and cursive.

Julie Miller

Health Commissioner



"We are dedicated to promoting and protecting the health and well-being of our residents and communities by providing quality services and educational programs to prevent the incidence of disease and unhealthy conditions."

Perry County Health Department

212 SOUTH MAIN STREET - PO BOX 230
NEWLEXINGTON, OHIO 43764
PHONE (740) 342-5179
FAX (740) 342-5540

March 1, 2013

R. Joseph Ebel, RS, MS, MBA
Health Commissioner
Licking County Health Department
675 Price Road
Newark, Ohio 43055

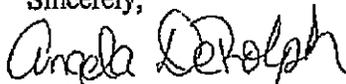
Mr. Ebel,

The purpose of this letter is to inform you that the Perry County Health Department plans to collaborate with you on your department's *Local Health Department Collaborative Grant Management Feasibility Study*. Our department looks forward to working with you and your partners in order to determine effective grant management strategies that will allow us to properly manage these funds in a more streamlined approach. In addition, the study will assist us with preparing for the potential regionalization of local health department grants that is currently contained in Governor Kasich's proposed budget.

Our staff looks forward to working with your department on this project, and developing an infrastructure that will allow us provide our constituents with high quality public health services through the effective management of grant funds. As the grant writing process becomes more competitive, this project will afford us with an opportunity to better position ourselves to receive additional funding for all of our communities.

If you need any additional information please do not hesitate to contact me.

Sincerely,



Angela DeRolph, MPH
Health Commissioner

March 1, 2013

R. Joseph Ebel, RS, MS, MBA
Health Commissioner
Licking County Health Department
675 Price Road
Newark, Ohio 43055

Mr. Ebel,

The purpose of this letter is to inform you that the Info-Link Technologies, Inc. plans to collaborate with you on your department's *Local Health Department Collaborative Grant Management Feasibility Study*. Our department looks forward to working with you and your partners in order to determine effective grant management strategies that will allow us to properly manage these funds in a more streamlined approach. In addition, the study will assist us with preparing for the potential regionalization of local health department grants that is currently contained in Governor Kasich's proposed budget.

Our staff looks forward to working with your department on this project, and developing an infrastructure that will allow us provide our constituents with high quality public health services through the effective management of grant funds. As the grant writing process becomes more competitive, this project will afford us with an opportunity to better position ourselves to receive additional funding for all of our communities.

If you need any additional information please do not hesitate to contact me.

Sincerely,

A handwritten signature in black ink, appearing to be "R. Joseph Ebel", written over a horizontal line.

PUBLIC HEALTH PARTNERSHIP OF LICKING COUNTY

Board of Trustees

R. Joseph Ebel

Rodney Ellis

D. Rick Lanthorn

Nikki Grubbaugh

Patrick Lebold

Randy Thomas

Kevin Stulfin

Nancy Hanger

Secretary/Treasurer

Barbara Lanthorn

March 4, 2013

The purpose of this letter is to inform you that the Public Health Partnership of Licking County plans to collaborate with the Licking County Health Department on your *Local Health Department Collaborative Grant Management Feasibility Study*. Our organization looks forward to working with you and your partners in order to determine effective grant management strategies that will allow us to develop a proper grants management system through a more streamlined approach. In addition, the study will assist us with preparing for the potential regionalization of local health department grants that is currently contained in Governor Kasich's proposed budget.

We look forward to working with your department on this project, and developing an infrastructure that will allow us to assist with delivering high quality public health services through the effective management of grant funds.

If you need any additional information please do not hesitate to contact me.

Sincerely



R. Joseph Ebel, RS, MS, MBA
Chairman of the Board of Trustees

675 Grace Rd.
Newark, OH 43055
PH: (740) 349-6477
FAX: (740) 349-6510
www.lickingcohealth.org





Cure Letter Response

Licking County Health Department -2013 LGIF Round 5 Application

Project Name: *Local Health Department Collaborative Grants Management Feasibility Study*

Issues for Response:

1. Format

Application is in correct format and ready for review.

2. Request

Application is for an eligible request.

3. Project Budget

The project budget requires attention. Please address the following issues: In the Project Budget Narrative, explain the coordination and development activities listed as \$18,000 in In-kind match.

The coordination and development activities listed as an In-Kind match of \$18,000.00 will be split between the "Collaborative Grants Management" (CGM) partnering health departments. Licking, Fairfield, Knox and Perry county health departments will each contribute \$4,500.00 worth of in-kind staff time toward meeting the objectives set forth within this grant proposal. All In-Kind hours will be documented/tracked and reported to the grantor. Coordination and development activities will include, but are not limited to the following: meetings/staff time for consultation and technical assistance which will occur via web, telephone, or in person and may include: planning, training, and developing a timeline and process for development of a collaborative grants management system and plan; and/or support implementation of a trail/test of a grants management system using researched IT infrastructure and/or software platforms.

4. Program Budget

The Program Budget is incomplete. Please provide six years of program budget information.

Because this grant proposal is for a feasibility study, a budget does not yet exist for the program. However, in our original proposal we attempted to provide six years' worth of budget numbers (3 years "actual" and 3 years "projected") for the program. Our initial program budget, as submitted to LGIF, included three years of what we indicated were "actual" figures reflecting what the program will cost if it is put into place by each local health department separately. The term "actual" is a misnomer here as we have no truly "actual numbers" because the program does not yet exist. However, we were attempting to differentiate between the second set of "projected numbers" provided on the program budget form.

After a discussion with Nicole Bent of the Office of Redevelopment on April 12, 2013, greater clarification as to program budget, for a proposed, non-existent program, was ascertained. As a

result, a revised program budget is provided with the required six years of projected data (2013-2018). Please see revised program budget attached.

5. Return on Investment

Please provide further documentation to explain how any cost savings, cost avoidances, and increased revenues used in the ROI were calculated. Please contact the Office of Redevelopment at 614-995-2292 or by email at lgif@development.ohio.gov if you need additional guidance on the appropriate documentation to include.

In an effort to clarify how to document the ROI, we spoke to Nicole Bent on April 12, 2013. Ms. Bent provided guidance as to how to utilize the LGIF ROI formulas on page 17 of the application form. Utilizing the second formula of the four listed; Total Cost Avoided / Total Program Cost = ROI, the following correlating data was found:

The Total Cost Avoided is \$280,880.00 (found by taking the difference between total expenses of program as listed in 2013 program budget year (cost without CGM) and subtracting the cost of total expenses of program as listed in 2014 program budget year (cost with CGM) = Total Cost Avoided.

Total Program Cost is \$111,120.00 (this is the projected Total Expense of program after implementation of shared grants management for the first year of program implementation (2014).

The ROI is 253%. $\$280,880/\$111,120 = 252.7\%$. Please see attached revised ROI as it relates to the revised program budget.

6. Resolutions of Support

The following collaborative partner is required to provide a resolution/letter of support in order to be considered a partner for the purposes of scoring this application: Licking County Health Department. Info-Link Technologies must provide a signed support letter on letterhead and including a legible name and title for the person signing the letter.

Resolutions of support are included for the lead agency, Licking County Health Department, as well as, one partner, the Public Health Partnership of Licking County. The other partners, including Info-Link (with letterhead and title), have provided letters of support. Please see attached documentation.

7. Partnership Agreements

The following collaborative partners are required to provide evidence of signatures on the partnership agreement to be considered as partners for the purposes of scoring this application: Licking County Health Department; Fairfield Department of Health; Knox County Health Department; Perry County Health Department; Info-Link Technologies, Inc.; and Public Health Partnership of Licking County.

All listed partners have submitted Memorandum's of Agreement (MOAs). Please see attached.

8. Total Number of Validated Partners

The application has a total of (0) zero collaborative partners with the appropriate documentation.

The six CGM partners; Licking County Health Department; Fairfield Department of Health; Knox County Health Department; Perry County Health Department; Info-Link Technologies, Inc.; and Public Health Partnership of Licking County have submitted all required documentation as requested.

9. Feasibility Study (Loans Only)

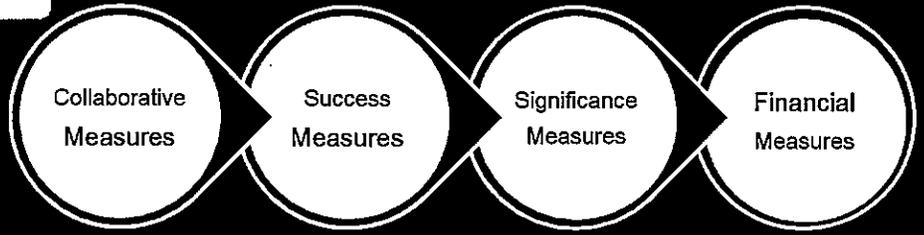
N/A

10. Other Comments

None



Ohio
Local Government
Innovation Fund



Round 5: Application Form

Step One: Fill out this Application Form in its entirety.

Step Two: Fill out the online submission form and submit your application materials. All supplemental application materials should be combined into one file for submission.

LGIF: Applicant Profile

Lead Agency	Licking County Health Department
Project Name	Local Health Department Collaborative Grants Management Feasibility Study
Type of Request	Grant
Request Amount	\$100,000.00
JobsOhio Region	Central
Number of Collaborative Partners <small>(including lead agency)</small>	6
Project Approach	Shared Services
Project Type	Administration



**Development
 Services Agency**

Website: http://development.ohio.gov/cs/cs_localgovfund.htm

E-mail: LGIF@development.ohio.gov

Phone: 614 | 995 2292

Lead Applicant	Licking County Health Department	Round 5
Project Name	Local Health Department Collaborati	Type of Request Grant

Instructions

- Make sure to answer each question appropriately in the space provided, not exceeding the space allowed by the answer box.
- Examples of completed applications are available on the LGIF website, found here:
http://development.ohio.gov/cs/cs_localgovfund.htm

Lead Agency	
Mailing Address:	Name: Licking County Health Department
	Street Address: 675 Price Road
	City: Newark
	Zip: 43055
In what county is the lead agency located? <u>Licking</u>	
Ohio House District: <u>71</u>	Ohio Senate District: <u>31</u>

Section 1
Contacts

Project Contact		
Please provide information about the individual who should be contacted regarding this application.		
Mailing Address:	Name: Chad Brown	Title: Deputy Health Commissioner/Dir. of EH
	Street Address: 675 Price Road	
	City: Newark	
	Zip: 43055	
Email Address: <u>cbrown@lickingcohealth.org</u>		Phone Number: <u>(740) 349-6487</u>

Fiscal Agency:		
Please provide information for the entity and individual serving as the fiscal agent for the project.		
Mailing Address:	Fiscal Agency: Licking County Health Department	
	Fiscal Officer: Barbara Lanthorn	Title: Director of Administrative Services
	Street Address: 675 Price Road	
	City: Newark	
	Zip: 43055	

Population	
Does the applicant (or collaborative partner) represent a city, township, or village with a population of less than 20,000 residents?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No List Entity
Does the applicant (or collaborative partner) represent a county with a population of less than 235,000 residents?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No List Entity Licking County Health Department

Single Applicant	
Is your organization applying as a single entity?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

Lead Applicant	Licking County Health Department	Round 5
Project Name	Local Health Department Collaborative	Type of Request Grant

Collaborative Partners	
Does the proposal include collaborative partners?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Applicants applying with collaborative partners are required to show proof of the partnership with a signed partnership agreement and a resolution of support from each of the partner's governing entities. If the collaborative partner does not have a governing entity, a letter of support from the partnering organization is sufficient. These documents must be received by the end of the cure period in order for each entity to count as a collaborative partner for the purposes of this application.

Nature of the Partnership

As agreed upon in the signed partnership agreement, please identify the nature of the partnership with an explanation of how the lead agency and collaborative partners will work together on the proposed project.

The intent of the Local Health Department Collaborative Grants Management (CGM) Feasibility Study is to examine the potential for sharing auxiliary services necessary for management of grant funds to sustain local public health departments. This project will be a positive step in helping these agencies and their respective communities to improve service delivery and control costs through cross-jurisdictional cooperation, sharing of services and possible service delivery consolidation. Moreover, this activity is in-line with the governor's newly proposed biennial budget recommendations and the recommendations of the Public Health Futures Committee regarding shared services and operational efficiencies in public health. In order to achieve these objectives, we will launch a feasibility study to determine efficiencies gained by cooperatively sharing the following processes:

- 1.) Grants Coordination & Acquisition - Confirm common areas of importance for Grants Acquisition and Coordination services with CGM working group.
- 2.) IT Services - Investigate the compatibility of existing IT infrastructure and determine what is necessary to establish a shared grants acquisition and management computer software platform with CGM working group.
- 3.) Development and Fund-raising - Verify the areas of importance for Development and Fund-raising initiatives with CGM working group.

Once the cross-jurisdictional framework is established this will open the door for possible future collaboration in other potential shared services such as: Training and Professional Development; General IT Services; Emergency Planning; Human Resources; Payroll Processing; Procurement; Fleet Management; Utilities, Conservation, & Stainability; Equipment Sharing, etc.

Section 2 Collaborative Partners

Lead Applicant	Licking County Health Department	Round	5
Project Name	Local Health Department Collabora	Type of Request	Grant

List of Partners

Please use the following space to list each collaborative partner who is participating in the project and is providing BOTH a resolution of support for the Local Government Innovation Fund application and has signed the partnership agreement.

Collaborative Partner # 1	
Mailing Address:	Name: Fairfield Department of Health
	Street Address: 1587 Granville Pike
	City: Lancaster
	Zip: 43130

Collaborative Partner # 2	
Mailing Address:	Name: Knox County Health Department
	Street Address: 11660 Upper Gilchrist Road
	City: Mount Vernon
	Zip: 43050

Collaborative Partner # 3	
Mailing Address:	Name: Perry County Health Department
	Street Address: 212 South Main Street
	City: New Lexington
	Zip: 43764

Collaborative Partner # 4	
Mailing Address:	Name: Info-Link Technologies Inc.
	Street Address: 601 Pittsburg Ave., P.O. Box 1167
	City: Mount Vernon
	Zip: 43050

Collaborative Partner # 5	
Mailing Address:	Name: Public Health Partnership of Licking County
	Street Address: 675 Price Road
	City: Newark
	Zip: 43055

Collaborative Partner # 6	
Mailing Address:	Name: Licking County Health Department
	Street Address: 675 Price Road
	City: Newark
	Zip: 43055

Section 2 Collaborative Partners

Lead Applicant	Licking County Health Department	Round	5
Project Name	Local Health Department Collaborative	Type of Request	Grant

Project Information

Provide a general description of the project, including a description of the final work product derived from the grant study or loan implementation project. This information may be used for council briefings, program and marketing materials.

The Collaborative Grants Management (CGM) Feasibility Study is designed to identify mechanisms that will create significant efficiencies in resource development functions related to the terms of grant acquisition for local public health services by scaling the project across multiple jurisdictions. The initial focus is on the implementation of a Grants Acquisition and Management Computer Software Platform (CSP), and a public/private fiscal partnership agreement.

In many jurisdictions, local health departments remain the largest provider of immunizations, home health, communicable disease control, specialized clinical services such as STD testing and other important services. Recent recommendations from the State of Ohio, Governor's Office of Health Transformation and within the Governor's proposed 2013 budget clearly indicate the intent to consolidate and streamline many health and human services; including regionalization of state and federal grants in an effort to improve efficiency, save money, and reduce waste. These proposed changes to the state grant funding structure will have a profound effect on local health departments who are already financially challenged due to several factors (e.g. changes in public insurance systems). This situation necessitates the implementation of a cross-jurisdictional solution for increased capacity among Local Health Departments (LHDs) to collaborate with each other, as well as the private sector, to secure funding for performance and reimbursement of services. However, individual agency implementation is often a costly enterprise in terms of both hard cost and opportunity costs of implementing such a framework.

While the actual funding allocation requires a local presence, the back-office/ancillary functions of the LHD such as, grant seeking and project management, can be conducted as a regional effort given the appropriate system is in place. Under such a system, it is possible for a collaboration of LHDs to develop an efficiency of scale that would otherwise be impossible individually.

The proposal seeks to create such a system, whereby the ancillary functions are housed, regulated, and/or coordinated through a shared system while allowing LHDs to focus on service delivery thus optimizing ROI in both functional areas.

In this system, centralized grant/funding acquisition and project management will occur within a shared system that allows for specialization and efficiency. In addition, the CSP will be negotiated and purchased within the pool and implemented using a technological solution, likely a web-based service. The targeted systems are not geographically limited and allow the partnership to reach even remote areas of the state. Hence, this project may be replicated in other areas of the state, thus answering the Governor's call to regionalize grant efforts. With six initial partners, the system could easily blossom into a dozen additional departments from anywhere within the state. Participation by additional local health departments increases the ROI of the entire system and thus lowers the cost of each local health district.

Section 3
Project Information

Lead Applicant	Licking County Health Department	Round	5
Project Name	Local Health Department Collabora	Type of Request	Grant

Project Information	
Has this project been submitted for consideration in previous LGIF Rounds?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
If yes, in which Round(s)?	
What was the project name?	
What entity was the lead applicant?	

Past Success	
Provide a summary of past efforts to implement a project to improve efficiency, implement shared services, coproduction, or a merger (5 points).	
<p>--All Local Health Departments have a significant history of efforts to improve efficiency. For example, the lead agency for this project, Licking County Health Department(LCHD), completed a merger between the former City of Newark Health Department and the LCHD which became effective in February of 2008. By forming a combined health district, including the cities of Newark, Health and Pataskala, as well as, the remaining county jurisdictions, (e.g., villages and townships), services were able to be consolidated saving significant public resources.</p> <p>--Another LCHD effort which has led to significant improvements in efficiency is the process toward national accreditation by the Public Health Accreditation Board (PHAB). To date LCHD has completed numerous continuous quality improvement (CQI) projects in preparation for accreditation. LCHD is one of a select few health departments across the nation to have completed the application process to PHAB and are awaiting a decision.</p> <p>--LCHD and the collaborating LHDs in this project have participated in and/or are currently participating in various cross-jurisdictional collaborative projects such as; the Breast and Cervical Cancer Program (BCCP) the Lead Program, Emergency Preparedness, Epidemiological Services and Radon Program.</p>	
Applicant demonstrates Past Success	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Scalable	
Provide a summary of how the applicant's proposal can be scaled for the inclusion of other entities (5 points).	
<p>Due to the type of proposal, the creation of an ancillary support system for grant/development activities is in-fact designed to be scalable and it is the hope that the initial six (4 LHDs and 2 private entities) applicants will not be the last to join in this effort. The attempt to establish a collaborative system is a barrier in and of itself and once overcome, has no practical limit in scope. The cost of technology to increase is marginal or completely accounted for in the "buy in" to the system (recognizing various plateaus and jumping off points for additional staff).</p>	
Applicant demonstrates a Scalable project	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

Section 3
Project Information

Lead Applicant	Licking County Health Department	Round 5
Project Name	Local Health Department Collabora	Type of Request Grant

Replicable

Provide a summary of how the applicant's proposal can be replicated by other entities. A replicable project should include a component that another entity could use as a tool to implement a similar project (5 points).

This system could easily be replicated by other organizations/departments including; mental health services, community health clinics, job and family services, etc. since it relies on the development of system that is made of components that are readily available to other entities. Other county agencies within the counties as well as any county or municipality in the State can implement a CGM program to evaluate their capability to provide shared grants acquisition and coordination services and/or as a template to implementation toward a shared grants management program.

Applicant demonstrates a Replicable project Yes No

Section 3
Project Information

Probability of Success

Provide a summary of the likelihood of the grant study recommendations being implemented. Applicants requesting an implementation loan should provide a summary of the probability of savings from the loan request (5 points).

The applicant agencies are all committed to the project and are simply lacking the resources to overcome basic barriers in analyzing the legal foundation for the project, the requisite negotiations with technology providers and systems, and technology analysis to make the project work. Given the current environment of the public health system, the applicants must find a solution— this grant award will allow them to find the most cost effective system and limit the expansion of local government.

This project has the potential to succeed in various ways including but not limited to: 1) increasing the revenue/resources available to local health departments by securing grant funding resources to pay for services that are currently paid by local tax dollars; 2) reducing administrative costs of finding and managing multiple grants and/or funding sources by sharing technical resources; and 3) improving the efficiency of local public health core services by reducing duplicative ancillary functions.

Applicant demonstrates Probability of Success Yes No

Lead Applicant	Licking County Health Department	Round 5
Project Name	Local Health Department Collabora	Type of Request: Grant

Performance Audit/Cost Benchmarking	
<p>If the project is the result of recommendations from a prior performance audit provided by the Auditor of State under Chapter 117 of the Ohio Revised Code, or is informed by a previous cost benchmarking study, please attach a copy with the supporting documents. In the section below, provide a summary of the performance audit findings or cost benchmarking study results (5 points).</p>	
<p>N/A</p>	
<p>Prior Performance Audit or Cost Benchmarking <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	

Section 3
Project Information

Economic Impact	
<p>Provide a summary of how the proposal will promote a business environment through a private sector partner (5 points) and/or provide for community attraction (3 points).</p>	
<p>This proposal seeks to establish more efficient funding and development processes through a relationship with a particular private, not-for-profit organization whose mission is completely aligned with the public health agencies involved in this project. This 501(c)(3) organization, the Public Health Partnership of Licking County (PHP), will expand the LHDs' ability to locate grant makers and/or funding sources which correlate to local public health needs. Often times, foundations, and sometimes government agencies, cannot award grants to projects without a 501(c)(3) status. Also, private citizens often prefer to give to 501(c)(3) organizations so they may deduct the gift on their tax return. Hence, this status inspires confidence in some funding sources. As such is the case, a partnership with PHP will provide a 501(c)(3), fiscal sponsorship, umbrella for the collaborating public health departments in this project.</p> <p>Similarly, other private vendors, (e.g. technology contractors) will also benefit from this collaboration. We will work closely with Info-Link Technologies, (another partner in this project), to ensure the technical feasibility of this project.</p> <p>Ultimately, the intent is to limit the expansion of local government services through a consolidation of public services augmented by collaboration with private sector partnerships. Through such an arrangement, the overall cost per unit of service delivery, and overall local government liability, is reduced.</p>	
<p>Applicant demonstrates Economic Impact <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</p>	

Lead Applicant	Licking County Health Department	Round 5
Project Name	Local Health Department Collabora+	Type of Request Grant

Response to Economic Demand

Provide a summary of how the project responds to substantial changes in economic demand for local or regional government services. The narrative should include a description of the current and future expected service level needs (5 points).

As funding to support local public health continues to decline, the need for reimbursement , resource development and/or the need to participate in efficiencies of scale continue to rise for local health departments in Ohio. Historically, local health districts have received significant financial support from local tax dollars to support the provision of needed services for their constituents. As both local and federal funding streams continue to decline, local health districts are economically challenged to provide their critical services. Going forward, there is expected to be an increased demand for health services provided by local health departments due to the potential expansion of Medicaid eligibility and expected health provider shortages throughout Ohio as a result of the implementation of the Affordable Care Act. Without adequate infrastructure or funding for these services, local health departments in Ohio will be forced to eliminate these programs.

Applicant demonstrates Response to Economic Demand Yes No

Section 3
Project Information

Budget Information

General Instructions

- Both the Project Budget and Program Budgets are required to be filled out in this form.
- Consolidate budget information to fit in the form. Additional budget detail may be provided in the budget narrative or in an attachment

Project Budget:

- The Project Budget should detail expenses related to the grant or loan project.
- The Project Budget justification must be explained in the Project Budget Narrative section of the application. This section is also used to explain the reasoning behind any items on the budget that are not self explanatory, and provide additional detail about project expenses.
- The Project Budget should be for the period that covers the entire project. The look-back period for in-kind contributions is two years. These contributions are considered a part of the total project costs.
- For the Project Budget, indicate which entity and revenue source will be used to fund each expense. This information will be used to help determine eligible project expenses.
- Total Sources must equal Total Uses. Include staff time and other in-kind matches in the Total Uses section of the budget.

Program Budget

- Use the Program Budget to outline the costs associated with the implementation of the program in your community.
- Six (6) years of Program Budgets should be provided. The standard submission should include three years previous budgets (actual), and three years of projections including implementation of the proposed project. A second set of three years of projections (one set including implementation of this program, and one set where no shared services occurred) may be provided in lieu of three years previous if this does not apply to the proposed project.
- Please use the Program Budget Narrative section to explain changes in expenses and revenues, and to defend the budget projections. If the budget requires the combining of costs on the budget template, please explain this in the narrative.

Return on Investment:

- A Return on Investment calculation is required, and should reference cost savings, cost avoidance and/or increased revenues indicated in Program Budget sections of the application. Use the space designated for narrative to justify this calculation, using references when appropriate.

For Loan Applications only:

- Using the space provided, outline a loan repayment structure.
- Attach three years prior financial documents related to the financial health of the lead applicant (balance sheet, income statement and a statement of cash flows).

Lead Applicant	Licking County Health Dep	Round 5
Project Name	Local Health Department C	Type of Request Grant

Project Budget

Use this space to outline all sources of funds and the uses of those funds. Both sections should include all funds related to the project, including in-kind match contributions. Use the project budget narrative on the next page to justify the project budget, and indicate the line items for which the grant will be used.

Sources of Funds

LGIF Request: \$100,000

Cash Match (List Sources Below):

Source:	
Source:	
Source:	
Source:	

In-Kind Match (List Sources Below):

Source:	CGM partners	\$18,000
Source:		
Source:		

Total Match: \$18,000

Total Sources: \$118,000

Uses of Funds

	Amount	Revenue Source
Consultant Fees:	\$100,000	LGIF
Legal Fees:		
Other: coordination & dev:	\$18,000	In-Kind match
Other:		

Total Uses: \$118,000

Local Match Percentage: 15%

* Please note that this match percentage will be included in your grant/loan agreement and cannot be changed after awards are made.

Local Match Percentage = (Match Amount/Project Cost) * 100 (10% match required)

10-39.99% (1 point)
 40-69.99% (3 points)
 70% or greater (5 points)

Section 4

Financial Information

Lead Applicant	Licking County Health Department	Round 5
Project Name	Local Health Department Collaboration	Type of Request Grant

Project Budget Narrative: Use this space to justify any expenses that are not self-explanatory.

\$100,000 of grant funding is requested to complete a feasibility study to identify opportunities to work with regional partners, as well as, to research the viability of building a cross-jurisdictional framework which may be used for future collaborative efforts in-line with the governor's biannual budget recommendations for consolidation of public health services.

As mentioned in the project description, this study is to provide a better understanding of the capabilities of the collaborating LHDs in regards to acquisition and coordination of grants, as well as, to examine new types and sources of funding with the aid of our 501(c) (3) collaborator, PHP. The study will also help identify process improvements and technology innovations that may be available to the agencies to assist with improved public health service delivery.

The study will take into consideration each county's current technology environment and will identify a process that will be applicable for each agency. The effort will show the potential value of sharing technology, as well as, opportunities to create further joint efforts and sharing of work activities. The study will be performed in conjunction with Info-Link Technologies, Inc., another collaborative partner for this grant.

Section 4

Financial Information

Lead/Applicant	Licking County Health Department	Round 5
Project Name	Local Health Department Collaborative	Type of Request
		Grant

Program Budget

Actual <input checked="" type="checkbox"/> Projected <input type="checkbox"/>	FY 2013	FY 2014	FY 2015
Expenses	Total Program Expenses	Total Program Expenses	Total Program Expenses
Salary and Benefits	\$320,000	\$79,960	\$81,559
Contract Services			
Occupancy (rent, utilities, maintenance)			
Training & Professional Development			
Insurance			
Travel			
Capital & Equipment Expenses			
Supplies, Printing, Copying & Postage			
Evaluation			
Marketing			
Conferences, meetings, etc.			
Administration			
*Other - software licensing	\$72,000	\$31,160	\$31,160
*Other -			
*Other -			
TOTAL EXPENSES	\$392,000	\$111,120	\$112,719
Revenues	Revenues	Revenues	Revenues
Contributions, Gifts, Grants, & Eamed Revenue			
Local Government:	\$392,000	\$111,120	\$112,719
Local Government:			
Local Government:			
State Government			
Federal Government			
*Other -			
*Other -			
*Other -			
Membership Income			
Program Service Fees			
Investment Income			
TOTAL REVENUES	\$392,000	\$111,120	\$112,719

Lead Applicant	Licking County Health Department	Round 5
Project Name	Local Health Department Collabora	Type of Request Grant

Program Budget

Actual <input type="checkbox"/> Projected <input checked="" type="checkbox"/>	FY 2016	FY 2017	FY 2018
Expenses	Total Program Expenses	Total Program Expenses	Total Program Expenses
Salary and Benefits	\$84,757	\$86,356	\$87,955
Contract Services			
Occupancy (rent, utilities, maintenance)			
Training & Professional Development			
Insurance			
Travel			
Capital & Equipment Expenses			
Supplies, Printing, Copying & Postage			
Evaluation			
Marketing			
Conferences, meetings, etc.			
Administration			
*Other - software licensing	\$31,160	\$31,160	\$31,160
*Other -			
*Other -			
TOTAL EXPENSES	\$115,917	\$117,516	\$119,115
	Revenues	Revenues	Revenues
Contributions, Gifts, Grants, & Earned Revenue			
Local Government:	\$115,917	\$117,516	\$119,115
Local Government:			
Local Government:			
State Government			
Federal Government			
*Other -			
*Other -			
*Other -			
Membership Income			
Program Service Fees			
Investment Income			
TOTAL REVENUES	\$115,917	\$117,516	\$119,115

Lead Applicant	Licking County Health Department	Round 5
Project Name	Local Health Department Collaborative	Type of Request
		Grant

Program Budget

Use this space to justify your program budget and/or explain any assumptions used for the budget projections. These projections should be based on research, case studies, or industry standards and include a thoughtful justification.

Costs are extrapolated from an existing implementation. In the example, a single implementation of CSP and staffing costs approximately \$392,000 as indicated in the 2013 program budget year (page 14). If the program were to be purchased by each local health agency the cost would likely be paid with the following revenue sources:

Revenue: The expense of the program is generally supported by local revenue, though grants and clinic revenue may also contribute. These were intentionally excluded since they pay for direct clinical services and generally do not fund, or minimally fund, ancillary administrative activities.

For the proposed program the following expenditures are anticipated:

Expenditures: IT infrastructure, software licensing, and staff time are the largest expenditures and represent the cost of each participating LHDs independently funding and implementing a CSP solution, coordinating and training staff. The CPS is acting as a proxy in this budget example for grants' CPS and financial accounting since the two tend to be inseparable. In year one, the cost includes, hardware, software purchase/licensing, IT contractor, administrative costs, and a limited amount of staff time association with implementing the program if the program were to be borne by an individual agency. Beginning in 2014 the budget reflects savings due to the implementation of the proposed CGM program with an estimated program expense of \$111,120.00 as compared to \$392,000.00 without the CGM. Years 2 through 6 would include costs associated with maintaining hardware, IT contractor, and software subscription services and are dramatically reduced do to the implementation of a shared services program, in this case a shared grants management program. Associated staff time costs increase slightly in program years 2-6 due to cost of living expense.

The program budget is directed by the LCHD, which is the lead agency that coordinates and assembles the partners. Cost savings would affect each of the partners direct service delivery costs. According to a recent survey of non-profit organizations conducted by PhilanTech Inc., approximately 13% of every grant dollar is spent on grants administration. That means thirteen cents on every dollar is not being spent on service delivery. This project will greatly assist the collaborating agencies in reducing administrative costs and increasing service delivery efficiency. Furthermore, it will serve as a model for other agencies to engage in similar collaborations.

Lastly, since this is a request/application for a feasibility study, 6 years' worth of "actual" future program budget figures are not possible. The six years of program budgets denoted with in this application are estimated/projected budgets and some variation can be expected. However, it is worth noting that as a collaborative group, future agency/organizational budgets should be relatively stable and reflect previous levels.

Section 4: Financial Information Scoring

<input checked="" type="checkbox"/>	(5 points) Applicant provided complete and accurate budget information and narrative justification for a total of six fiscal years.
<input type="checkbox"/>	(3 points) Applicant provided complete and accurate budget information and for at least three fiscal years.
<input type="checkbox"/>	(1 point) Applicant provided complete and accurate budget information for less than three fiscal years.

Lead Applicant	Licking County Health Department	Round 5	
Project Name	Local Health Department Collaborative Grant	Type of Request	Grant

Return on Investment

Return on Investment is a performance measure used to evaluate the efficiency of an investment. To derive the expected return on investment, divide the net gains of the project by the net costs. For these calculations, please use the implementation gains and costs, NOT the project costs (the cost of the feasibility, planning, or management study)—unless the results of this study will lead to direct savings without additional implementation costs. The gains from this project should be derived from the prior and future program budgets provided, and should be justified in the return on investment narrative.

Return on Investment Formulas:

Consider the following questions when determining the appropriate ROI formula for your project. Check the box of the formula that you are using to determine your ROI. These numbers should refer to savings/revenues illustrated in projected budgets.

Do you expect cost savings from efficiency from your project?

Use this formula:
$$\frac{\text{Total \$ Saved}}{\text{Total Program Costs}} * 100 = \text{ROI}$$

Do you expect cost avoidance from the implementation of your project/program?

Use this formula:
$$\frac{\text{Total Cost Avoided}}{\text{Total Program Costs}} * 100 = \text{ROI}$$

Do you expect increased revenues as a result of your project/program?

Use this formula:
$$\frac{\text{Total New Revenue}}{\text{Total Program Costs}} * 100 = \text{ROI}$$

Do you expect some combination of savings, cost avoidance, or increased revenue as a result of your project/program? (Total Gains combines \$ Saved, Costs Avoided, and New Revenue)

Use this formula:
$$\frac{\text{Total Gains}}{\text{Total Program Costs}} * 100 = \text{ROI}$$

Expected Return on Investment =
$$\frac{\$280,880}{\$111,120} * 100 = 253\%$$

Expected Return on Investment is:

<input type="checkbox"/> Less than 25% (10 points)	<input type="checkbox"/> 25%-75% (20 points)	<input checked="" type="checkbox"/> Greater than 25% (30 points)
----------------------------------------------------	----------------------------------------------	------------------------------------------------------------------

Questions about how to calculate ROI? Please contact the Office of Redevelopment at 614-995-2292 or

lgif@development.ohio.gov

Section 4 Financial Information

Lead Applicant	Licking County Health Department	Round 5	
Project Name	Local Health Department Collaborative Grant	Type of Request	Grant

Return on Investment Justification Narrative: In the space below, describe the nature of the expected return on investment, providing justification for the numbers presented in the ROI calculation. This calculation should be based on the savings, cost avoidance, or increased revenues shown in the program budgets on the preceding pages. Use references when appropriate to justify assumptions used for cost projections.

In general, the program partners will initially incur expenses within three budget categories (Salaries and Benefits, Contracted Services and Software Licensing). The CGM Assessment will create cost savings in all three of these categories, but for the purposes of this projection, the savings are only calculated for the Software Licensing and Staff salaries and benefits.

The return on investment for this project is 253%. The return on investment was calculated by identifying the costs of the project if the partner agencies (LHDs) of Licking, Fairfield, Knox, and Perry counties each individually created a grants management system. The creation of four separate grants management systems would cost \$392,000.00. The cost of partnering and creating a regional, shared grants management system for the first year of the project is \$112,719.00 - a savings of \$280,880.00 and a return of investment of 253% for Year 1 of the grant funded project (year 2014 of budget program). Similar savings are anticipated for the following years for example, the cost savings in Year 2 is \$279,281.00 and has a 248% return on investment.

For this financial projection, the impact to the partners' contracted services was not factored into the potential cost savings. Until the evaluation of anticipated technical expertise has been completed, the overall savings in this budget category is difficult to project. In most cases, the investment in technical expertise will have a positive long-term return on investment that would not be reflected in the short-term budget exercise that was completed for this proposal.

Section 4
Financial Information

Lead Applicant	Licking County Health Department	Round 5	
Project Name	Local Health Department Collaborative Grant	Type of Request	Grant

Please outline your preferred loan repayment structure. At a minimum, please include the following: the entities responsible for repayment of the loan, all parties responsible for providing match amounts and an alternative funding source (in lieu of collateral). Applicants will have two years to complete their project upon execution of the loan agreement, and the repayment period will begin upon the final disbursement of the loan funds. A description of expected savings over the term of the loan may be used as a repayment source.

N/A

Section 4
Financial Information

Applicant demonstrates a viable repayment source to support loan award. Secondary source can be in the form of a debt reserve, bank participation, a guarantee from a local entity, or other collateral (i.e. emergency, rainy day, or contingency fund, etc).

Applicant clearly demonstrates a secondary repayment source (5 points)

Applicant does not have a secondary repayment source (0 points)

Lead Applicant:	Licking County Health Department	Round 5	
Project Name:	Local Health Department Collaborative Grants Management F	Type of Request	Grant

Scoring Overview

Section 1: Collaborative Measures

Collaborative Measures	Description	Max Points	Applicant Self Score
Population	Applicant's population (or the population of the area(s) served) falls within one of the listed categories as determined by the U.S. Census Bureau. Population scoring will be determined by the smallest population listed in the application. Applications from (or collaborating with) small communities are preferred.	5	5
Participating Entities	Applicant has executed partnership agreements outlining all collaborative partners and participation agreements and has resolutions of support. (Note: Sole applicants only need to provide a resolution of support from its governing entity.	5	5

Section 2: Success Measures

Past Success	Applicant has successfully implemented, or is following project guidance from a shared services model, for an efficiency, shared service, coproduction or merger project in the past.	5	5
Scalable	Applicant's proposal can be scaled for the inclusion of other entities.	5	5
Replicable	Applicant's proposal can be replicated by other local governments.	5	5
Probability of Success	Applicant provides a documented need for the project and clearly outlines the likelihood of the need being met.	5	5

Section 3: Significance Measures

Performance Audit Implementation/Cost Benchmarking	The project implements a single recommendation from a performance audit provided by the Auditor of State under Chapter 117 of the Ohio Revised Code or is informed by cost benchmarking.	5	0
Economic Impact	Applicant demonstrates the project will promote a business environment (i.e., demonstrates a business relationship resulting from the project) and will provide for community attraction (i.e., cost avoidance with respect to taxes).	5	5
Response to Economic Demand	The project responds to current substantial changes in economic demand for local or regional government services.	5	5

Section 4: Financial Measures

Financial Information	Applicant includes financial information (i.e., service related operating budgets) for the most recent three years and the three year period following the project. The financial information must be directly related to the scope of the project and will be used as the cost basis for determining any savings resulting from the project.	5	5
Local Match	Percentage of local matching funds being contributed to the project. This may include in-kind contributions.	5	1
Expected Return	Applicant demonstrates as a percentage of savings (i.e., actual savings, increased revenue, or cost avoidance) an expected return. The return must be derived from the applicant's cost basis.	30	30
Repayment Structure (Loan Only)	Applicant demonstrates a viable repayment source to support loan award. Secondary source can be in the form of a debt reserve, bank participation, a guarantee from a local entity, or other collateral (i.e., emergency fund, rainy day fund, contingency fund, etc.).	5	0

Total Points 76

R. Joseph Ebel, R.S., M.S., M.B.A.
Health Commissioner



(740)349-6535
(740)349-6474 WIC
(740)349-6475 Environmental
(740)349-6476 Nursing
(740)349-6510 FAX
www.lickingcohealth.org

Licking County Health Department

675 Price Road

Newark, OH 43055

April 16, 2013

Ohio Department of Development
Local Government Innovation Fund

Dear Sir or Madam,

On behalf of the Licking County Board of Health, I would like to offer my utmost support for the Licking County Health Department's efforts to pursue funding for the *Local Health Department Collaborative Grants Management (CGM) Feasibility Study*.

The CGM will provide our department with the ability to determine if collaborating with our partners regarding grants management, IT services, and development and fundraising will improve our ability to deliver high quality public health services to our constituents in the most efficient manner possible. We are looking forward to collaborating with a variety of entities to implement this project, and to strengthen our relationships with each of them. In addition, the project will provide us with a chance to increase our ability to improve the public health of the Licking County General Health District.

If you need any additional information about the project please do not hesitate to contact our Health Commissioner Joe Ebel at 740-349-6535.

Sincerely,

A handwritten signature in cursive script that reads "Neisha Grubaugh".

Neisha Grubaugh, President
Licking County Board of Health

R. Joseph Ebel, R.S., M.S., M.B.A.
Health Commissioner



(740)349-6535
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www.lickingcohealth.org

Licking County Health Department

675 Price Road

Newark, OH 43055

RESOLUTION 2013-3

WHEREAS the Ohio Department of Development has available funds for the Local Government Innovation Fund,

WHEREAS the Licking County Health Department has submitted an application for LGIF funding to implement the *Local Health Department Collaborative Grants Management (CGM) Feasibility Study*,

WHEREAS the Licking County Health Department will act as the lead agency for the *Local Health Department Collaborative Grants Management (CGM) Feasibility Study*,

WHEREAS the Licking County Health Department would benefit from studying the feasibility of collaborating with other entities related to Grants Management, IT Services, and Development and Fundraising Activities,

BE IT RESOLVED that the Licking County Health Board gives its support to the Licking County Health Department to pursue funding for the *Local Health Department Collaborative Grants Management (CGM) Feasibility Study* from the Ohio Department of Development's LGIF

Adopted, April 16, 2013
The Licking County Board of Health

<u>Wesley S. Debaugh</u>	<u>[Signature]</u>
<u>C. Rodney Ellis</u>	<u>James H. Glavin</u>
<u>Pat Smith</u>	<u>[Signature]</u>
<u>Carole Wachtel</u>	<u>[Signature]</u>
<u>[Signature]</u>	
<u>[Signature]</u>	
<u>[Signature]</u>	

R. Joseph Ebel, R.S., M.S., M.B.A.
Health Commissioner



(740)349-6535
(740)349-6474 WIC
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(740)349-6476 Nursing
(740)349-6510 FAX
www.lickingcohealth.org

Licking County Health Department

675 Price Road

Newark, OH 43055

April 16, 2013

RE: Memorandum of Agreement

This memo shall serve as confirmation of the Licking County Health Department's interest in and agreement to participate in the *Local Health Department Collaborative Grants Management (CGM) Feasibility Study* to determine the efficiencies to be gained by jointly sharing the following activities and/or operations:

- 1.) **Grants Coordination & Acquisition:** Confirm common areas of importance for Grants Acquisition and Coordination services with CGM working group.
- 2.) **IT Services:** Investigate the compatibility of existing IT infrastructure and determine what is necessary to establish a shared grants acquisition and management computer software platform with CGM working group.
- 3.) **Development and Fund-raising:** Verify the areas of importance for Development and Fund-raising initiatives with CGM working group.

Furthermore, the Licking County Health Department agrees to the following regarding the "*Local Health Department Collaborative Grant Management Feasibility Study*":

- Participate in project group meetings and/or project communications as needed
- Contribute up to \$4500.00 of in-kind support to the project, with documentation
- Keep grantor and collaborative partners informed of local project status
- If project deemed feasible, present project recommendations to the board of health

Please contact us if we can provide further information or assistance regarding this MOA.

Sincerely,

A handwritten signature in black ink, appearing to read 'R. Ebel', is written over a faint, larger version of the signature.

R. Joseph Ebel, RS, MS, MBA
Health Commissioner



March 1, 2013

R. Joseph Ebel, RS, MS, MBA
Health Commissioner
Licking County Health Department
675 Price Road
Newark, Ohio 43055

Mr. Ebel,

The purpose of this letter is to inform you that the Info—Link Technologies, Inc. plans to collaborate with you on your department's Local Neal/h Department Collaborative Grant Management Feasibility Study. Our department looks forward to working with you and your partners in order to determine effective grant management strategies that will allow us to properly manage these funds in a more streamlined approach. In addition, the study will assist us with preparing for the potential regionalization of local health department grants that is currently contained in Governor Kasich's proposed budget.

Our staff looks forward to working with your department on this project, and developing an infrastructure that will allow us provide our constituents with high quality public health services through the effective management of grant funds. As the grant writing process becomes more competitive, this project will afford us with an opportunity to better position ourselves to receive additional funding for all of our communities.

If you need any additional information please do not hesitate to contact me.

Sincerely,

A handwritten signature in black ink, appearing to read 'Tim Theophilus', is written over a horizontal line.

Tim Theophilus
President (740-263-1110 Cell)



Date: 3/4/2013

RE: Memorandum of Agreement

This memo shall serve as confirmation of Info -Link Technologies, Inc. interest in and agreement to participate in the *Local Health Department Collaborative Grants Management (CGM) Feasibility Study* to determine the efficiencies to be gained by jointly sharing the following activities and/or operations:

- 1.) **Grants Coordination & Acquisition:** Confirm common areas of importance for Grants Acquisition and Coordination services with CGM working group.
- 2.) **IT Services:** Investigate the compatibility of existing IT infrastructure and determine what is necessary to establish a shared grants acquisition and management computer software platform with CGM working group.
- 3.) **Development and Fund-raising:** Verify the areas of importance for Development and Fund-raising initiatives with CGM working group.

Furthermore, Info-Link Technologies agrees to the following regarding the "*Local Health Department Collaborative Grant Management Feasibility Study*":

- Participate in project group meetings and/or project communications as needed
- Keep grantor and collaborative partners informed of project status
- Provide guidance and technical expertise pertaining to IT infrastructure for said feasibility study

Please contact us if we can provide further information or assistance regarding this MOA.

Sincerely,

A handwritten signature in black ink, appearing to read 'Tim Theophilus', written over a horizontal line.

Tim Theophilus
President

PUBLIC HEALTH PARTNERSHIP OF LICKING COUNTY

March 4, 2013

The purpose of this letter is to inform you that the Public Health Partnership of Licking County plans to collaborate with the Licking County Health Department on your *Local Health Department Collaborative Grant Management Feasibility Study*. Our organization looks forward to working with you and your partners in order to determine effective grant management strategies that will allow us to develop a proper grants management system through a more streamlined approach. In addition, the study will assist us with preparing for the potential regionalization of local health department grants that is currently contained in Governor Kasich's proposed budget.

We look forward to working with your department on this project, and developing an infrastructure that will allow us to assist with delivering high quality public health services through the effective management of grant funds.

If you need any additional information please do not hesitate to contact me.

Sincerely



R. Joseph Ebel, RS, MS, MBA
Chairman of the Board of Trustees



PUBLIC HEALTH PARTNERSHIP OF LICKING COUNTY

Board of Trustees

R. Joseph Ebel
Rodney Ellis
D. Rick Lanchorn
Neisha Grubaugh
Patrick Lebold
Randy Thorp
Medha Deoras-Sudiff
Nancy Hanger

Secretary/Treasurer
Barbara Lanchorn

RESOLUTION 2013-1

WHEREAS the Ohio Department of Development has available funds for the Local Government Innovation Fund,

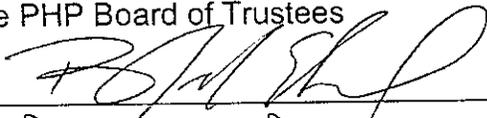
WHEREAS the Licking County Health Department has submitted an application for LGIF funding to implement the *Local Health Department Collaborative Grants Management (CGM) Feasibility Study*,

WHEREAS the Licking County Health Department will act as the lead agency for the *Local Health Department Collaborative Grants Management (CGM) Feasibility Study*,

WHEREAS the Public Health Partnership of Licking County (PHP) would benefit from studying the feasibility of collaborating with other entities related to Grants Management, IT Services, and Development and Fundraising Activities,

BE IT RESOLVED that the PHP Board of Trustees gives its support to the Licking County Health Department to pursue funding for the *Local Health Department Collaborative Grants Management (CGM) Feasibility Study* from the Ohio Department of Development's LGIF

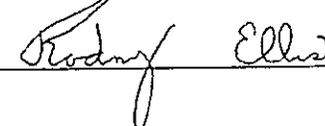
Adopted, April 16, 2013
The PHP Board of Trustees











675 Price Rd.
Newark, OH 43055
PH: (740) 349-6477
FAX: (740) 349-6510
www.lickingcohealth.org



PUBLIC HEALTH PARTNERSHIP OF LICKING COUNTY

April 16, 2013

RE: Memorandum of Agreement

This memo shall serve as confirmation of the Public Health Partnership of Licking County's (PHP) interest in and agreement to participate in the *Local Health Department Collaborative Grants Management (CGM) Feasibility Study* to determine the efficiencies to be gained by jointly sharing the following activities and/or operations:

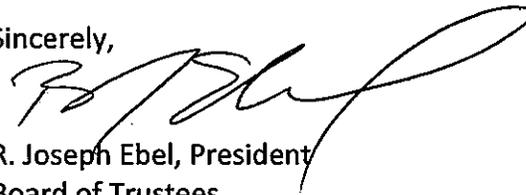
- 1.) **Grants Coordination & Acquisition:** Confirm common areas of importance for Grants Acquisition and Coordination services with CGM working group.
- 2.) **IT Services:** Investigate the compatibility of existing IT infrastructure and determine what is necessary to establish a shared grants acquisition and management computer software platform with CGM working group.
- 3.) **Development and Fund-raising:** Verify the areas of importance for Development and Fund-raising initiatives with CGM working group.

Furthermore, Info-Link Technologies agrees to the following regarding the "*Local Health Department Collaborative Grant Management Feasibility Study*":

- Participate in project group meetings and/or project communications as needed
- Keep grantor and collaborative partners informed of project status
- Provide guidance and technical expertise pertaining to non-profit fund-raising and development practices

Please contact us if we can provide further information or assistance regarding this MOA.

Sincerely,



R. Joseph Ebel, President
Board of Trustees





March 1, 2013

R. Joseph Ebel, RS, MS, MBA
Health Commissioner
Licking County Health Department
675 Price Road
Newark, Ohio 43055

Mr. Ebel,

The purpose of this letter is to inform you that the Fairfield Department of Health plans to collaborate with you on your department's *Local Health Department Collaborative Grant Management Feasibility Study*. Our department looks forward to working with you and your partners in order to determine effective grant management strategies that will allow us to properly manage these funds in a more streamlined approach. In addition, the study will assist us with preparing for the potential regionalization of local health department grants that is currently contained in Governor Kasich's proposed budget.

Our staff looks forward to working with your department on this project, and developing an infrastructure that will allow us provide our constituents with high quality public health services through the effective management of grant funds. As the grant writing process becomes more competitive, this project will afford us with an opportunity to better position ourselves to receive additional funding for all of our communities.

If you need any additional information please do not hesitate to contact me.

Sincerely,

A handwritten signature in cursive script, appearing to read "Larry Hanna".

Larry Hanna RS,
Administrator
Fairfield Department of Health



MEMO OF AGREEMENT
By and between the Fairfield Department of Health and
The Licking County Health Department

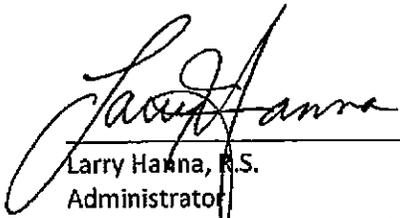
This memo of agreement shall serve as confirmation of the Fairfield Department of Health's interest in and agreement to participate in the *Local Health Department Collaborative Grants Management (CGM) Feasibility Study* to determine the efficiencies to be gained by jointly sharing the following activities and/or operations:

- 1.) **Grants Coordination & Acquisition:** Confirm common areas of importance for Grants Acquisition and Coordination services with CGM working group.
- 2.) **IT Services:** Investigate the compatibility of existing IT infrastructure and determine what is necessary to establish a shared grants acquisition and management computer software platform with CGM working group.
- 3.) **Development and Fund-raising:** Verify the areas of importance for Development and Fund-raising initiatives with CGM working group.

Furthermore, the Fairfield Department of Health agrees to the following regarding the "*Local Health Department Collaborative Grant Management Feasibility Study*":

- Participate in project group meetings and/or project communications as needed
- Contribute up to \$4500.00 of in-kind support to the project , with documentation
- Keep grantor and collaborative partners informed of local project status
- If project deemed feasible, present project recommendations to the board of health

In witness whereof, the parties, by signing below, indicate their agreement to the above.



Larry Hanna, R.S.
Administrator
Fairfield Department of Health

4/18/13

Date Signed



11660 Upper Gilchrist Road
Mount Vernon, Ohio 43050

www.knoxhealth.com

Phone 740-392-2200
Fax 740-392-9613

March 1, 2013

R. Joseph Ebel, RS, MS, MBA
Health Commissioner
Licking County Health Department
675 Price Road
Newark, Ohio 43055

Dear Joe,

The purpose of this letter is to inform you that the Knox County Health Department is pleased to collaborate with you on your department's *Local Health Department Collaborative Grant Management Feasibility Study*. Our department looks forward to working with you and other local health departments in determining effective grant management strategies that may allow us to properly manage grant funds in a more streamlined approach. In addition, the study may assist us with preparing for the potential regionalization of local health department grants that is currently contained in Ohio's proposed biennial budget.

We also look forward to developing an infrastructure that may allow local health departments to provide our constituents with high quality public health services through the effective management of grant funds. I am confident that as grant writing processes become more competitive, this project will afford us with an opportunity to better position ourselves to receive additional funding for all of our communities.

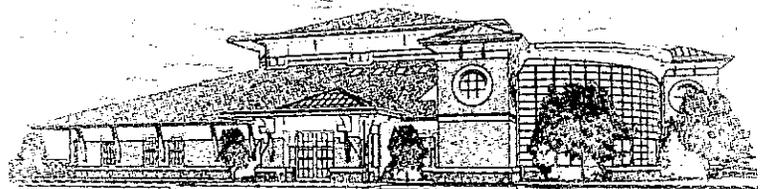
If you need any additional information please do not hesitate to contact me.

Sincerely,

A handwritten signature in black ink that reads "Julie Miller". The signature is fluid and cursive, with a long horizontal stroke at the end.

Julie Miller

Health Commissioner



"We are dedicated to promoting and protecting the health and well-being of our residents and communities by providing quality services and educational programs to prevent the incidence of disease and unhealthy conditions."



11660 Upper Gilchrist Road
Mount Vernon, Ohio 43050

www.knoxhealth.com

Phone 740-392-2200
Fax 740-392-9613

RE: Memorandum of Agreement

This memo shall serve as confirmation of the Knox County Health Department's interest in and agreement to participate in the *Local Health Department Collaborative Grants Management (CGM) Feasibility Study* to determine the efficiencies to be gained by jointly sharing the following activities and/or operations:

- 1.) **Grants Coordination & Acquisition:** Confirm common areas of importance for Grants Acquisition and Coordination services with CGM working group.
- 2.) **IT Services:** Investigate the compatibility of existing IT infrastructure and determine what is necessary to establish a shared grants acquisition and management computer software platform with CGM working group.
- 3.) **Development and Fund-raising:** Verify the areas of importance for Development and Fund-raising initiatives with CGM working group.

Furthermore, the Knox County Health Department agrees to the following regarding the "*Local Health Department Collaborative Grant Management Feasibility Study*":

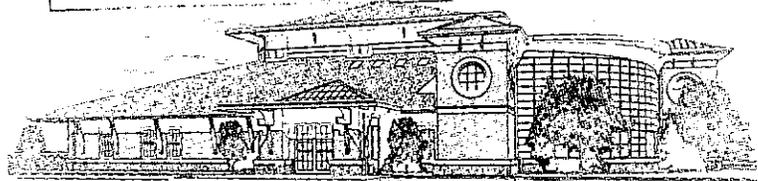
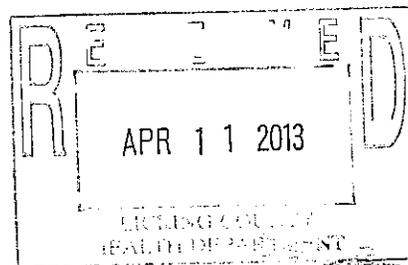
- Participate in project group meetings and/or project communications as needed
- Contribute up to \$4500.00 of in-kind support to the project , with documentation
- Keep grantor and collaborative partners informed of local project status
- If project deemed feasible, present project recommendations to the board of health

Please contact us if we can provide further information or assistance regarding this MOA.

Sincerely,

A handwritten signature in black ink that reads "Julie Miller".

Julie Miller, R.N., M.S.N.
Health Commissioner



"We are dedicated to promoting and protecting the health and well-being of our residents and communities by providing quality services and educational programs to prevent the incidence of disease and unhealthy conditions."

Perry County Health Department

212 SOUTH MAIN STREET - PO BOX 230

NEW LEXINGTON, OHIO 43764

PHONE (740) 342-5179

FAX (740) 342-5540

March 1, 2013

R. Joseph Ebel, RS, MS, MBA
Health Commissioner
Licking County Health Department
675 Price Road
Newark, Ohio 43055

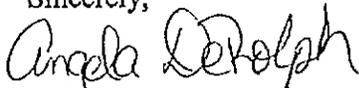
Mr. Ebel,

The purpose of this letter is to inform you that the Perry County Health Department plans to collaborate with you on your department's *Local Health Department Collaborative Grant Management Feasibility Study*. Our department looks forward to working with you and your partners in order to determine effective grant management strategies that will allow us to properly manage these funds in a more streamlined approach. In addition, the study will assist us with preparing for the potential regionalization of local health department grants that is currently contained in Governor Kasich's proposed budget.

Our staff looks forward to working with your department on this project, and developing an infrastructure that will allow us provide our constituents with high quality public health services through the effective management of grant funds. As the grant writing process becomes more competitive, this project will afford us with an opportunity to better position ourselves to receive additional funding for all of our communities.

If you need any additional information please do not hesitate to contact me.

Sincerely,



Angela DeRolph, MPH
Health Commissioner

Perry County Health Department

212 SOUTH MAIN STREET - PO BOX 230
NEW LEXINGTON, OHIO 43764
PHONE (740) 342-5179
FAX (740) 342-5540

RE: Memorandum of Agreement

This memo shall serve as confirmation of the Perry County Health Department's interest in and agreement to participate in the *Local Health Department Collaborative Grants Management (CGM) Feasibility Study* to determine the efficiencies to be gained by jointly sharing the following activities and/or operations:

- 1.) **Grants Coordination & Acquisition:** Confirm common areas of importance for Grants Acquisition and Coordination services with CGM working group.
- 2.) **IT Services:** Investigate the compatibility of existing IT infrastructure and determine what is necessary to establish a shared grants acquisition and management computer software platform with CGM working group.
- 3.) **Development and Fund-raising:** Verify the areas of importance for Development and Fund-raising initiatives with CGM working group.

Furthermore, the Perry County Health Department agrees to the following regarding the "*Local Health Department Collaborative Grant Management Feasibility Study*":

- Participate in project group meetings and/or project communications as needed
- Contribute up to \$4500.00 of in-kind support to the project, with documentation
- Keep grantor and collaborative partners informed of local project status
- If project deemed feasible, present project recommendations to the board of health

Please contact us if we can provide further information or assistance regarding this MOA.

Sincerely,



Angela DeRolph, MPH
Health Commissioner