

# 18-03 HEALTH Application

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## *Office of Hawaiian Affairs*

### **1. Project Name**

Name of Project

*Character Limit: 100*

## *Review Instructions*

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Scoring:

OHA has assigned points to the bulleted criterion listed for each section (see Section 4 Proposal Evaluation) Evaluators will utilize the scale set forth below, by choosing the scale number, either 5, 4, 3, 2, 1, or 0 that is deemed appropriate for each criterion.

-Scale-

- ...5... All requirements are all well demonstrated; exemplary
- ...4... Most requirements are well demonstrated; good
- ...3... Most requirements demonstrated to some extent; fair
- ...2... Most requirements are poorly demonstrated; poor
- ...1... Most requirements are not demonstrated; not acceptable
- ...0... Not demonstrated

### *A. Basic Information (0 points)*

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No points are given to Basic Information. The intent is to give the applicant an opportunity to orient evaluators as to the service(s) being offered.

### *B. Organization & Capacity (15 points total)*

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#### *1. Required Documents (0 points)*

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No points are assigned to this section. The intent is to verify compliance with minimum eligibility to receive OHA funds pursuant to Hawai'i Revised Statutes Section 10-17.

## *2. Background & Capacity (5 points)*

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### **B.2.\***

Provides background on the organization mission, governing structure, prior funding experience, and facilities to give evaluators a sense of organizational capacity to effectively manage grant funds and implement program.

0 - 5

### **B.2. Comments:\***

*Character Limit: 1000*

## *3. Experience (10 points)*

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### **B.3.1.\***

Demonstrates meaningful and prior experience related to providing this or other relevant services.

0 - 5

### **B.3.2.\***

Demonstrates meaningful and prior experience related to providing services to the Hawaiian community.

0 - 5

### **B.3. Comments:\***

*Character Limit: 1000*

## *C. Project/Service Delivery (60 points total)*

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### *1. Needs Assessment (10 points)*

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**C.1.1.\***

Demonstrates the (a) geographic area the applicant proposes to serve contains significant numbers of the target population; (b) target population in the designated area has a need/demand for the proposed services.

0 - 5

**C.1.2.\***

Demonstrates the services already provided in the designated area are insufficient to meet the need/demand of the target population.

0 - 5

**C.1. Comments:\***

*Character Limit: 1000*

## 2. Scope of Service (10 points)

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**C.2.1.\***

Demonstrates the project design is comprehensive and complete. Information will include overall goals and specific objectives, activities, and timeline.

0 - 5

**C.2.2.\***

Demonstrates how the proposed approach and methodology is effective and efficient in addressing the needs of the Hawaiian community, and how project activities align with the focus of this Solicitation.

0 - 5

**C.2. Comments:\***

*Character Limit: 1000*

## 3. Project Plan (20 points)

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**C.3.1.\***

The project plan (*worksheet*) is complete and demonstrates the project's alignment to the Solicitation goals of service and performance measures.

0 - 5

**C.3.2.\***

The project plan (*worksheet*) demonstrates reasonableness and achievability of activities in proposed time frame.

0 - 5

**C.3.3.\***

Demonstrates the proposed staffing pattern and participant/staff ratio is reasonable to insure viability of the services. Assignment of staff is sufficient to effectively administer, manage, supervise and provide the required services. Minimum staff qualifications (including experience) for staff assigned to the program are provided.

0 - 5

**C.3.4.\***

Demonstrates that outreach strategies for participant recruitment, including collaborations with other agencies/community organizations are effective to meet project goals.

0 - 5

**C.3. Comments:\***

*Character Limit: 1000*

## **4. Evaluation (20 points)**

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**C.4.1.\***

Describes expectations for project success that are aligned with and address the needs of the Solicitation focus.

0 - 5

**C.4.2.\***

The Performance Measurement Table is complete, addresses minimum standard outputs and outcomes, and has identified realistic and achievable target measures. Any additional proposed outputs and outcomes have been explained.

0 - 5

**C.4.3.\***

Demonstrates project assessment and evaluation plans for the proposed services that effectively measure, monitor and evaluate program performance (short and long-term).

0 - 5

**C.4.4.\***

Demonstrates the applicant has identified potential problems or areas of risk that may negatively impact the delivery of services or project operations. This may include, but not

limited to, staff turnover, loss of funding, non-award of anticipated grants, program delays, etc. The applicant shall describe the following about each risk: probability of occurrence, potential impact to the project, and the contingency plan.

0 - 5

**C.4. Comments:\***

*Character Limit: 1000*

## *D. Financial (25 points total)*

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### *1. Budget (20 points)*

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**D.1.1.\***

Budget Forms are complete and accurate.

0 - 5

**D.1.2.\***

Budget Forms detail calculations for budget items that demonstrate that costs are reasonable.

0 - 5

**D.1.3.\***

Budget Forms provide adequate information to justify that costs are relevant to proposed service delivery.

0 - 5

**D.1.4.\***

Cash Match Funding Form is complete and accurate. Additional consideration given for match funding that is: 1) confirmed for the two-year grant period; and 2) more than the minimum required 20%.

0 - 5

**D.1. Comments:\***

*Character Limit: 1000*

### *2. Accounting (5 points)*

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**D.2.\***

Demonstrates the accounting system and procedures to assure proper and sound fiscal administration of funding is effective and can adequately support the proposed program.

0 - 5

**D.2. Comments:\***

*Character Limit: 1000*

## *E. Overall Comments*

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**Overall Comments**

*Character Limit: 1000*