

Grants Administration Manual

***Healthy Communities Action Teams
Obesity Prevention Grant
2020-2023***



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Richmond, VA 23219

www.VFHY.org

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GRANT ADMINISTRATION:

- A. PROGRAM REPORTING REQUIREMENTS: Each grantee is required to submit to VFHY a Quarterly Report detailing grant project status in relationship to expected outcomes, program activities, and accomplishment of outcome performance measures. The VFHY Quarterly Report is completed online through the VFHY Grants Portal and is due on the fifteenth of each month following the close of each state fiscal quarter.
- October 15
 - January 15
 - April 15
 - July 15

The report should be submitted online as instructed by the Regional Grants Administrator (RGA). Outcome measures developed directly from the proposal for the grant will be monitored by VFHY. The grantee will be expected to submit all quarterly reports online utilizing the Grants Portal. In addition to the required Quarterly Reports, all additional materials developed under the grant and information pertinent to the public record of the project must be submitted to VFHY via attachment upload, including newspaper articles, brochures, bulletins, status reports, and evaluation results.

- B. PROJECT MONITORING: VFHY monitors grant projects through a variety of mechanisms including staff review of quarterly reporting forms, monthly invoice/reimbursement forms, site visits, and “program-in-action” visits. The Regional Grants Administrator (RGA) assigned to the grant will provide follow-up and monitoring activities with the grantee. Project Monitoring is an opportunity for grantees to inform VFHY staff of accomplishments as well as to let them know if any barriers to project completion exist. *Grantees should contact their assigned RGA when they experience any difficulties in the implementation of their grant programs and should not wait until contacted by staff for general monitoring activities.*

Grantee invoice/reimbursements will be subject to invoice verification up to three times per year. VFHY RGAs will request receipts for random months throughout the grant period. Grantees are required to maintain all receipts for expenditures but do not need to provide them with ongoing monthly invoice/reimbursement requests.

- C. BUDGET REVISIONS: If needed, grantees may request to make revisions to their grants. Revision requests must be submitted by the end of the third quarter each year, by March 31st.

For revision requests of \$250 or more, grantees must first seek authorization from their Regional Grants Administrator (RGA), and then complete the VFHY Budget Revision Request form (see Appendices) and submit it to their RGA for final approval. The appropriate changes

must be reflected on the next submitted VFHY Invoice/Reimbursement Request form. Only one revision of \$250 or more is permitted per grant year.

For budget revisions of less than \$250, grantees may make a budget change without prior approval from their RGA, but grantees must alert their RGA of the change as soon as possible. The appropriate changes must be reflected on the next submitted VFHY Invoice/Reimbursement Request form. Only one revision of this type is allowed per grant year.

- D. PROJECT EVALUATION: All grantees will participate in the VFHY statewide evaluation, when applicable. Statewide evaluation activities may include surveys and/or interviews with program coordinators, instructors, other staff and youth served.

In addition to the statewide evaluation, all grantees will conduct their own local evaluation activities as outlined in their approved proposals.

- E. PROJECT CLOSEOUT: All project final financial reports and final quarterly reports must be submitted by July 15th.
- 1) Final Financial Report - The final invoice/reimbursement must be submitted on the same Excel Workbook as the monthly invoice/reimbursement request form, and the grantee should check the box indicating it is the final financial reimbursement request.
 - 2) 4th Quarter/Final Report - The Final Quarterly Report includes additional questions about the grant program over the course of the entire year and questions pertaining to local evaluation. This report is completed online utilizing the Grants Portal.

APPENDICES



BUDGET REVISION REQUEST

Organization Name		Contract Number	
Mailing Address			
Contact Person		Phone Number	
E-Mail Address		Date of Request	

REVISION DETAILS

Line Item	Amount (-/+)	VFHY Determination	
		Approved	Declined
1			
2			
3			
4			
5			
6			
* TOTAL	\$0		

JUSTIFICATION

1	
2	
3	
4	
5	
6	

Signature

Your typed signature will serve as your electronic signature.

* Upon approval of request revision(s), please submit an updated VFHY budget form to your Regional Grants Administrator. In addition, all revised line item amount totals should be reflected on subsequent invoice/reimbursement requests.

VFHY Use Only

Regional Grants Administrator

Date

Virginia Foundation for Healthy Youth - Invoice/Reimbursement Request

HEALTHY COMMUNITIES ACTION TEAM GRANT

Check here if this is your final reimbursement request for the grant year.

Grantee Name: 0 _____

Grant Contract Number: _____ 0

Address: 0 _____

EIN: _____ 0

0 _____

Month Ending: _____ July-20

Project Title: 0 _____

Date of Report: _____

Grant Contract Period: _____ JUL 20 - JUNE 23

Type Name: _____

Title: _____

Telephone: - _____

Email Address: - _____

AMOUNT REQUESTED:

\$ _____ -

Object Code 1452

Expenditures (Please Round Off to the Nearest Dollar):

Do Not Change any cells that are Red!

Line Items	Program Contract Amount	Reimbursement Requests to Date	Expenditures for Report Period	Remaining Amount Available
Personnel	-			\$ -
Consultants	-			\$ -
Travel	-			\$ -
Rental Space	-			\$ -
Materials	-			\$ -
Other Costs	-			\$ -
Indirect Costs	-			\$ -
				\$ -
TOTAL	\$ -	\$ -	\$ -	\$ -

_____ Date

_____ VFHY Business Manager Date