

State of Illinois Uniform Notice of Funding Opportunity (NOFO)
Summary Information

Awarding Agency Name	Human Services
Agency Contact	Reshma Desai (reshma.desai2@illinois.gov)
Announcement Type	Initial
Type of Assistance Instrument	Grant
Funding Opportunity Number	27-444-80-3422-02
Funding Opportunity Title	RPSA Violence Prevention Services
CSFA Number	444-80-3422
CSFA Popular Name	RVPS
Anticipated Number of Awards	3
Estimated Total Program Funding	\$1,725,000
Award Range	Not Applicable
Source of Funding	State
Cost Sharing or Matching Requirements	No
Indirect Costs Allowed	Yes
Restrictions on Indirect Costs	Yes : A Federal or State Indirect Cost rate must be approved, or the de minimis may be used up to 15%. If the Organization has an approved indirect cost rate of less than the de minimis the Approved Federal/State rate must be used, or less
Posted Date	10/13/2026
Application Date Range	10/13/2026 - 11/13/2026 : 5:00pm
Grant Application Link	Please select the entire address below and paste it into the browser... http://www.dhs.state.il.us/page.aspx?item=180797
Technical Assistance Session	Offered : Yes Mandatory : No Date : 10/26/2026 : 10:30AM Registration link : https://uic.zoom.us/meeting/register/4VN8VBELTaWGbsfKJwxadA

FY 27 RPSA Violence Prevention Services Program (27-444-80-3422-02)

Notice of Funding Opportunity

1. Basic Information (CSFA Data Section)

i. Required Information:

- A. Awarding Agency Name
- B. Funding Opportunity Title
- C. Announcement Type
- D. Funding Opportunity Number
- E. Assistance Listing Number(s)

Items A through E are included in the CSFA Data Table below.

Description	Content
Awarding Agency Name (1-A)	Illinois Department of Human Services
Agency Division Name	Division of Family and Community Services, Office of Community & Positive Youth Development, Bureau of Violence Prevention Services
Agency Contact	Reshma Desai DHS.ViolencePreventionServices@illinois.gov 217.720.5069
Announcement Type (1-C)	Competitive Initial Announcement
Funding Opportunity Title (1-B)	RPSA Violence Prevention Services (VPS)
Funding Opportunity Number (1-D)	27-444-80-3422-02
Application Posting Date	October 13, 2026
Awarding Agency Name (1-A)	Department of Human Services
Application Closing Date	November 13, by 5:00pm (CST)
Catalog of State Financial Assistance (CSFA) Number	444-80-3422
Catalog of State Financial Assistance (CSFA) Name	<i>RPSA Violence Prevention Services</i>
Assistance Listing Number(s) (1-E)	Not Applicable
Awarding Source	State

Estimated Total Program Funding Amount	\$1,725,000
Anticipated Number of Awards	Approximately 1 in each eligible area
Award Range	\$575,000
Cost Sharing/Matching Requirement?	No
Indirect Costs Allowed?	Yes
Restrictions on Indirect Costs?	Yes (Indirect Costs must be approved) A Federal or State Indirect Cost rate must be approved, or the de minimis may be used up to 15%. If the Organization has an approved indirect cost rate of less than the de minimis the Approved Federal/State rate must be used, or less.
Technical Assistance Session Offered	Yes, Register in advance for this meeting: Technical Assistance Session Registration Link After registering, you will receive a confirmation email containing information about joining the meeting. Monday Oct 26,2026 10:30am-12:30pm

F. Funding Details

1. Total Amount of Funding
 - a. The Department expects to award approximately \$1,725,000.
 - b. The source of funding for this program is State funds.
2. Number of Grant Awards
 - a. The Department anticipates funding approximately 1 grant award to provide this program in each of the following eligible areas: South Shore (Chicago); Rockford and Danville (Greater Illinois)
3. Expected Dollar Amount of Individual Grant Awards
 - i. The Department anticipates that the dollar amount of individual awards will be \$575,000 to serve each of the following eligible areas South Shore (Chicago); Rockford and Danville (Greater Illinois)
4. Average Amount of Funding per Grant Award in previous years.
 - a. Average funding amount for this grant award program in previous years was \$575,000
5. Renewal
 - i. There will be no renewals
6. Sub-Recipient Agreements
 - a. Sub-Recipient Agreement(s) and budgets must be pre-approved by the Department and on file with the Department. Sub-Recipients are subject to all provisions of this Agreement. The successful applicant Agency shall retain sole responsibility for the

performance and monitoring of the sub-recipient. Applicants should attach Subrecipient policy as **Attachment A10** to their application.

Note: Sub-recipients will not be approved if the sub-recipient organization is a currently funded grantee or a sub-grantee under IDHS Violence Prevention NOFO #444-80-3422-01 funded to provide services in the same RPSA service area the application intends to serve.

7. Funding restrictions

a. Pre-Award Costs

- i. Pre-Award costs prior to the start date of the grant agreement are not allowable for this award.
- ii. IDHS grants are governed by 2 CFR, Part 200, Subpart E-Cost Principles, and 30 ILCS 708, both of which include information on allowable costs, audit requirements, and financial records.

b. Indirect Costs *may* be applied to this grant award.

c. Indirect Cost Rate Election:

- i. **Federally Negotiated Rate:** Organizations that receive direct federal funding may have an indirect cost rate that was negotiated with the Federal Cognizant Agency. Illinois will accept the federally negotiated rate. The organization must provide a copy of the federal NICRA with their application.
- ii. **State Negotiated Rate:** If the organization does not have a Federally Negotiated Rate, or elect to use the *de minimis* rate, it must negotiate an indirect cost rate with the State of Illinois by completing an indirect cost rate proposal in the CARS system.
- iii. **De Minimis Rate:** An organization that has never received a Federal or State Negotiated Rate may elect a de minimis rate of 15% of **modified total direct cost (MTCD)**. Once established, the de minimis rate may be used indefinitely. The State of Illinois must verify the calculation of the MTDC annually in order to accept the de minimis rate. If programs elect to use the de minimis rate, it is critical that program budgets accurately calculate the MTDC base. Please see the regulation below and note the exclusions to MTDC.

8. The release of this NOFO does not obligate the Department to make an award.

G. Key Dates

1. Application Posting Date October 13, 2026.
2. The Department must receive the Full Application package by November 13, 2026, at 5:00pm CST.
3. Anticipated Award Date: January 1, 2027
4. Anticipated Start Dates and Periods of Performance for new grant awards.
 - a. Subject to appropriation, the grant period will begin no sooner than January 1, 2027, and will continue through December 31, 2027.

H. Executive Summary:

Patterned after the Community Violence Intervention (CVI) program model, this NOFO will fund a comprehensive Violence Prevention Services (VPS) program that uses evidence-based programming and services, including street outreach, case management, and victim services, to engage individuals at the highest risk of firearm violence. See ***Section 3: Program Description*** for detailed explanation of the full model.

I. Agency Contact Information.

1. If you have questions about this NOFO, please contact Reshma Desai at DHS.ViolencePreventionServices@illinois.gov
2. A frequently asked Question and Answer page is posted on the DHS website. Questions submitted up to 7 calendar days prior to the end of the NOFO posting period, will be answered and posted on the website. NOFO content questions received after this time will not be answered.
3. If you have questions relating to this NOFO, please send them via email to: DHS.ViolencePreventionServices@illinois.gov with "VPS" in the subject line of the email.
4. Questions with their respective answers will be posted here RPSA Violence Prevention Services Q and A. Questions and answers will be updated frequently as new questions are received. Applicants are responsible for checking frequently as the responses provided may have an impact on their ability to submit a responsive application. Only written answers posted on the website will be considered valid and official.
5. The final deadline to submit any written questions regarding this Funding Notice will be November 2, 2026. The Final listing of Q&A will be posted by End of Day on November 6, 2026.

J. Indirect Costs

- a. An organization must have a negotiated indirect cost rate agreement (NICRA) with the State of Illinois, a Federal NICRA, or elect to use the 15% de minimis rate (some programs funded with federal dollars are still subject to the 10% de minimis rate) to be reimbursed for any indirect costs within a program. All State of Illinois grantees also have the option to select "no rate" and not claim any indirect costs.

Awardees must select an indirect cost election in the Grantee Portal on an annual basis. Note - The election for "no rate" and "de minimis" continue indefinitely once initially selected until a new election is made.

All State of Illinois grantees receiving awards from Illinois grant making agencies must substantiate or elect an indirect cost rate for their organization. Grantees that wish to negotiate a rate with the State of Illinois will start their election process in the Grantee Portal and the case will then be sent to the Crowe Resource Management Program (CRMP) to begin negotiation.

Please click on the [Centralized Indirect Cost Rate System](#) (ICRES) to begin the indirect cost

rate election process and obtain access to resources and points of contact to assist your organization in completing this process.

2. Eligibility

i. Eligible Applicants.

- A. The specific types of applicants that may apply for the grant award are public and private nonprofit community-based organizations subject to 26 U.S.C. 501(c)(3) or 501(c)(4) of the tax code (26 U.S.C. 501(c)(3) or 26 U.S.C. 501(c)(4)) that propose to provide services within a RPSA eligible area under this NOFO: South Shore (Chicago); Rockford and Danville (Greater Illinois)
(Applicants will be asked to provide Federal Form W9 and their IRS Determination Letter)

Eligible applicants **exclude** currently funded grantees or sub-grantees under IDHS Violence Prevention NOFO 25-444-80-3422 funded to provide services in the eligible RPSA service area for which their application is intended to serve.

- B. The applicant must meet the Registration, [Pre-qualification](#) and any other mandatory requirements listed in this funding opportunity.
1. Applicants must provide the following information via the [Illinois GATA Grantee Portal](#) annually to be registered with the State of Illinois as an awardee:
 - a. Organization name and contact information
 - b. Federal Employee Identification Number (FEIN)
 - c. Unique Identity Number (UEI)
 - d. Organization type
 2. Applicants must be prequalified; applications from entities that have not prequalified *prior to and are not prequalified on the due date of this application* will NOT be reviewed and will NOT be considered for funding. Items a) through e) below are the prequalification requirements.
 - a. Unique Entity Identifiers and SAM Registration: Each applicant (unless the applicant is an individual or State awarding agency that is exempt from those requirements under 2 CFR § 25.110(b) or (c), or has an exception approved by the Federal or State awarding agency under 2 CFR § 25.110(d)) is required to:
 - i. Be registered in [Sam.gov](#) before the application due date.
 - ii. Provide a valid unique entity identifier (UEI) in its application.
 - iii. Continue to maintain an active SAM registration with current information at all times during which it has an active award or an application or plan under consideration by the awarding agency.
 - iv. Department may not make an award until applicant has fully complied with all UEI and SAM requirements.
 - v. Department may determine that an applicant is not qualified if they have not complied with requirements.
 - b. Must be in "good standing" with the Illinois Secretary of State if the Illinois Secretary of State requires the entity's organization type to be registered.
 - c. Must not be on the Illinois Stop Payment List

- d. Must not be on the [Sam.gov](#) Exclusion List
- e. Must not be on the [Medicaid Sanctions List](#) (DHFS Provider Sanctions List)

3. Additional Mandatory Requirements for Eligibility

Applications must include as part of their application additional mandatory eligibility items a and b below to be eligible for consideration under this NOFO. Applicants must also be prepared to provide, upon specific request at a later time, **additional** supporting documentation and if requested, participate in a virtual site visit as part of the merit-based review and decision-making process for the mandatory requirements listed below.

- a. **Experience:** The applicant must have at least three years of verifiable proof of their Violence Prevention work. This must be documented through a signed attestation letter on organizational letterhead from the applicant's Board President or Board Chair, certifying that the organization has at least three (3) years of experience delivering Violence Prevention services including the three required service components outlined in **Section 3.F.2** with approximate dates of service and a brief description. Please provide verification letter from the Board that attests to the Violence Prevention Work as **Attachment E2**.
- b. **Trusted Relationships:** The applicant must have genuine and trusted relationships with community residents, stakeholders, and law enforcement entities in the proposed high-risk area. This must be documented through at least two (2) letters of support, on letterhead, attesting to the length and quality of the relationship with examples. Please provide verification of trusted relationships as **Attachment E3**. A minimum of 2 letters, as described herein, are required for the applicant to be eligible, however, additional letters are recommended as all trusted relationship letters will also be scored as part of **Section 4.i.A.3 Program Narrative: Capacity**.

Letters must come from two different categories below and not be form letters:

- i. Community-based, faith-based, or resident-led organizations operating in the service area
- ii. Local stakeholders (e.g., schools, housing authorities, hospitals, workforce partners, or similar institutions)
- iii. Law enforcement or justice system entities (e.g., district leadership, probation/parole, or equivalent)

- C. Even Successful Applicants will not receive an award if [Pre-Award Requirements](#) are not met. Qualified status is re-verified nightly. If the entity's status changes, an email notice is sent to the designated entity representative with a link to the [Illinois GATA Grantee Portal](#).
- D. See Section number I(F) for funding restrictions, if applicable.
- E. Limit on number of applications:
 - a. No violence prevention organization can serve more than 3 eligible service areas unless approved by OFVP.
 - b. No approved technical assistance and training provider shall provide evidence-based violence prevention services unless approved by OFVP.

- c. Eligible applicants **exclude** currently funded grantees or sub-grantees under IDHS Violence Prevention NOFO 25-444-80-3422 funded to provide services in the eligible RPSA service area for which their application is intended to serve.

- ii. Cost Sharing

- A. Providers are not required to participate in cost sharing or provide match.

3. Program Description

- i. Required Information

- A. The general purpose of the funding is to fund public or private not-for profit organizations based in one of the eligible areas under this NOFO, to engage and serve those at the highest risk of becoming victims or perpetrators of firearm violence and is expected to achieve improved individual outcomes for the public good.

Firearm violence harms Illinois communities through the immediate loss of life, as well as the long-term, harmful effects of trauma experienced by victims, witnesses, and community members. According to the 2024 U.S. Surgeon General's Report, *Firearm Violence: A Public Health Crisis in America*, these effects are felt disproportionately by impoverished communities. The IDHS-Office of Firearm Violence Prevention (OFVP) seeks to fund violence prevention organizations in specific community areas across Illinois to engage and serve those at the highest risk of becoming victims or perpetrators of firearm violence (primarily ages 20-39) and should utilize evidence-informed programming and services which will improve individual outcomes and decrease risk factors associated with firearm violence.

Patterned after the Community Violence Intervention (CVI) program model, this NOFO will fund a comprehensive VPS program that utilizes evidence-based programming and services to engage individuals at the highest risk of firearm violence, including street outreach, case management, and victim services. This program model includes utilizing "credible messengers" with lived experience and community ties to mediate conflicts and disrupts cycles of violence/retaliation between informal street groups/street organizations, crews, cliques, and street networks. These programs increase positive outcomes for individuals most likely to harm someone or be harmed by firearm violence, strengthen others affected by violence, and contribute to building safer communities.

Funding is being issued as part of the [Illinois Government Alliance for Safe Communities \(GASC\)](#) **FY2027 Funding Collaborative**. In FY2027, the GASC has committed to investing millions across city, county, and state government partners to sustain and scale critical CVI programming across the City of Chicago. Formed in 2021, the GASC brings together partners from the City of Chicago, Cook County Justice Advisory Council (JAC), Illinois Criminal Justice Information Authority (ICJIA), and the Department to streamline grant funding, unify data collection, and increase capacity-building support for local organizations working to reduce violence. The GASC coordinates the

deployment of public funding in the Greater Chicago region for CVI programming to ensure that critical investments in community safety are reaching the most vulnerable communities and those at highest risk for gun violence.

GASC has developed guidelines for a cost per participant of approximately \$11,500 for the three CVI services required under this NOFO, including street outreach, victim services, and case management. It is expected that applicants will utilize this cost for planning and budgeting purposes. It is anticipated that applicants under this NOFO will serve 50 individuals per year, however applicants can propose less or more with associated justification.

B. Important Changes to the RPSA Violence Prevention Services Program Application

1. This NOFO is only open to specific RPSA service areas – South Shore (Chicago); Rockford and Danville (Greater Illinois). Applications will NOT be accepted to serve any other service area.
2. VPS grantees will no longer provide victim flex funding. Chicago and Greater Illinois Conveners will manage an RPSA Emergency Victim Flex Fund. VPS Victim Service staff will work with Convener staff to ensure qualified victims receive economic supports as outlined in the Emergency Victim Flex Fund Policy (included as **Appendix A**)
3. Level One Trauma Centers/Hospitals will no longer be required to sub-grant for Street Outreach program services. Additional requirements apply.
4. Various other changes have been made throughout NOFO. It is critical that previously funded organizations make no assumptions about NOFO content and expectations. Examples of additional changes include changes to the Grant Award Term, eligible service areas, cost per participant, applicant eligibility requirements, performance measures and standards, etc.

C. Eligible Service Areas

OFVP's Firearm Violence Research Group has identified 26 Chicago community areas and 16 Greater Illinois Municipal eligible service areas with the most concentrated firearm violence (defined as the number and per capita of fatal/non-fatal firearm-shot victims, excluding self-inflicted incidents) from 2018 through 2022. A complete list of Chicago and Greater Illinois communities and a full description of the process for identifying these communities with the highest concentration of firearm violence is available here: [Announcement of eligible communities 2024.pdf](#). This NOFO only addresses the following:

1. RPSA identified Eligible Chicago Service Areas:
 - i. South Shore
2. RPSA identified Greater Illinois Service Areas:
 - i. Danville
 - ii. Rockford

RPSA Service Area Restrictions:

Source: P.A. 102-16, eff. 6-17-21; 102-679, eff. 12-10-21; 103-8, eff. 6-7-23.

1. No violence prevention organization can serve more than 3 eligible service areas unless approved by OFVP.
2. No approved technical assistance and training provider shall provide evidence-based violence prevention services in an eligible service area under this Act.
3. Eligible applicants **exclude** currently funded grantees or sub-grantees under IDHS Violence Prevention NOFO 25-444-80-3422 funded to provide services in the eligible RPSA service area for which their application is intended to serve.

See **Section 3.i.F Program Deliverables** for details.

D. The Department's funding priorities or focus areas.

1. The OFVP intends to fund approximately 1 highly experienced, qualified applicant to implement the RPSA VPS program in each eligible service area: South Shore (Chicago); Rockford and Danville (Greater Illinois)
2. OFVP is working to counteract systemic racism and inequity, and to prioritize and maximize diversity throughout its service provision process. This work involves addressing existing institutionalized inequities, aiming to create transformation, and operationalizing equity and racial justice. It also focuses on the creation of a culture of inclusivity for all regardless of race, gender, religion, sexual orientation, or ability.

E. Goals and objectives of the Program

1. The VPS program reduces firearm violence through conflict mediation and supportive services to the highest risk individuals through credible messengers known as street outreach workers.
2. The VPS program supports the highest risk individuals to change their lives and find safety through case management and victim services.
3. The VPS program supports community members in reclaiming public spaces after violence.

F. Program Deliverables

1. Target Population

The RPSA Violence Prevention Services program services are provided for highest-risk individuals. Program participants must meet at least one of the following risk factors to be eligible. *(Participant eligibility criteria must be documented in each participant's individual program file.)*

- a. Active street involvement

Current or recent, direct connection to street-based networks or high-risk activities. This may include having a recognized role as an influencer, connector, or leader within those networks. The connection should be based on credible, individual information about the person's relationships, activities, or circumstances and not solely on their neighborhood, group's identity, or family history. The term recognizes that many people facing these risks live in communities affected by historic marginalization, disinvestment and barriers to employment and social services. Justice-system involvement
Recently released from jail, prison, or/other detention facility (includes currently under community supervision, e.g. probation or parole), or

Prior arrest(s), charge(s), or conviction(s) for violent felonies (e.g., homicide, aggravated battery, armed robbery, weapons charges)

- b. Previous victimization and trauma associated with community firearm violence.
 - a. Recent victim of firearm violence, or
 - b. Witness of recent firearm violence, or
 - c. Family or friend of a recent firearm victim
2. **Program Design-** Applicants are required to design programming, services and activities following three mandatory service areas: Street Outreach, Case Management, and Victim Services. These mandatory services must be provided either directly or through subaward. An applicant can subaward no more than two of the three mandatory services.
- i. **Street Outreach:** Street outreach workers will be employed to mediate conflicts and prevent retaliatory violence between those who are at risk to commit or to become the victims of firearm violence. This includes utilizing "credible messengers" with lived experience and community ties to mediate conflicts and disrupt cycles of violence/retaliation between informal street groups/street organizations, crews, cliques, and street networks. Street outreach workers will engage with highest-risk individuals in a variety of settings, including parks, homes, street corners, community centers, schools, hospitals, etc. Street outreach efforts are typically conducted in the afternoons, evenings, or late at night.

Level One Trauma Centers/Hospitals will apply for hospital-based outreach and not Street Outreach. Trauma Hospitals must collaborate with violence prevention service providers and include a Memorandum of Understanding (MOU) as **Attachment A13** that outlines how the agencies will coordinate access to hospital patient and coordination of services.

Street Outreach activities include:

- a. Engagement and support of individuals and groups at highest risk of harming someone or being harmed by violence
- b. Reclaim public spaces for safe activities
- c. Respond to critical incidents, such as shootings and homicides, to de-escalate tension and reduce/address threats of violence
- d. Maintain a 24/7 crisis staffing to receive notification of shooting incidents from police departments and respond to shooting incidents 24 hours per day, seven days per week. Crisis staff must respond in person to shooting incidents. On call status is acceptable.
- e. Document notifications, including the time received, the response time, and the outcome.
- f. Confer with Convener group after a mass shooting or mass violence incident for immediate response and service coordination.
- g. Conduct proactive peace building activities such as restorative justice practices, event outings, and peace circles when applicable.
- h. Mediate and resolve conflicts between street groups or individuals harmed by violence.

- i. Refer victims and their families for additional, non-emergency services and supports for the victim and family.
 - j. Carry a case load maximum of 15 participants at any given time.
 - k. Maintain an activity log with the types and number of outreach activities conducted.
 - l. Track the number of engagements/interactions with eligible participants and the types of services provided such as resource connections, safety planning, mediation, intervention, etc.
- ii. **Case Management (CM):** Uses a case manager, or case team, to complete intake assessment, develop a case plan, and provide or connect individuals to identified resources and services. Programming and services may include, but are not limited to, effective emotional or trauma related therapies, legal aid services, housing services, employment training, job placement services, family engagement, re-entry services, and other support services. These services can be provided directly or through linkages with other providers. Programs are strongly encouraged to establish linkage agreements with workforce development programs for efficient and timely access for the program participants
- a. **IMPORTANT:** Any clinical behavioral health services must be paid through Medicaid. RPSA funds may not be used for clinical behavioral health services.
 - b. A full-time case manager will carry a case load maximum of 25 participants at any given time.
 - c. Case Management participants/recipients must have completed intake form to be eligible for CM services.
- iii. **Victim Services:** Victim services workers/advocates helps victims of violence and their families recover from physical and emotional trauma caused by violence by empowering them with skills, services, and opportunities.

Victim Services include:

- a. Responding to community violence (non-fatal shootings, fatal shootings, other acts of violence, etc.) within specific community areas. Incident notification could occur through outreach workers, police departments, community members, or other means. The response should include visits to crime scenes, a victims' home, hospitals, and other health care settings. Response should be dispatched upon shooting notification and may be an in-person interaction or phone call.
- b. Providing immediate support and advocacy for those impacted by violence at the hospital, accompanying the family at the medical examiner's office, planning for a funeral, and/or assessing level of crisis to refer to counseling services.
- c. Trauma-informed support for victims and families
- d. Assessment of victim needs and development of a case plan
- e. Notifying participants of, and navigating participants through, public agency processes for victim compensation, crisis intervention, emergency financial assistance, transportation, medical care, stable housing, and shelter, assessment and linkage to public benefits, and relocation services.

- f. Connecting/referring families to appropriate services and support in the community, including:
 - i. Mental health services
 - ii. Trauma-informed services for young children and youth
 - iii. Employment and other supports

Where possible, services should be coordinated with other victim service providers to prevent victims and families from being overwhelmed with multiple providers.

- g. Providing support to families in interactions with police.
- h. Conducting regular weekly support groups with victims and families.
- i. Providing support to families during court visits or trials.
- j. Victim Services participants/recipients must have completed intake form to be eligible for victim services.
- k. Victim services workers will carry a case load Maximum caseload of 25 participants at any given time.

iv. Additional Requirements

i. Participant Files

- a. Providers will maintain an individual confidential file on each program case management and victim service participant. These files must be stored in a locked file/location. Files will include:
 - i. Intake information / form
 - ii. Demographic data
 - iii. Documentation of eligibility
 - iv. Record of services provided
 - v. Documentation of crisis intervention, if applicable
 - vi. Any required assessment results
 - vii. Individual's case plan, goals, services, notes, outcomes, etc., if applicable.
 - viii. Record of referrals made for additional services and whether individual received services
- b. Providers will hold regular (at least monthly) case staffing meetings. The case staffing team will include, where appropriate, the street outreach worker, case manager, victim services advocate, etc.

ii. Trauma-Informed Principles

Ensure that programming is infused with trauma-informed principles that:

- a. Recognize the high prevalence of traumatic experiences in persons residing and working in eligible communities,
- b. Address the impact of trauma on staff and personnel working with individuals residing in these communities.

- c. Address the impact of trauma on brain development, physical and emotional health, and the impact on the community and individuals living in it.
 - d. Create a safe space, provide support, and build resiliency in individuals impacted by trauma.
- iii. Develop and implement or maintain a **Diversity, Equity, and Inclusion (DEI)/racial justice plan** that:
 - a. Reflects IDHS' commitment to advance equity and racial justice by enabling all to thrive, regardless of race, zip code, and disability.
 - b. Outlines how the organization ensures equity in access to its supports/services.
 - c. Includes a plan to identify and address implicit bias in all areas of the organization, including programming.
 - d. Includes an equity and racial justice training plan.
 - e. Acknowledges the root causes of firearm violence, including historically racist systemic policies and practices.
- iv. **Program Operation** - Programs are required to have a 24-hr/7 day a week staffing plan which can involve on-call status. Programs must operate based on the needs of the community, but, at a minimum, during the evenings, late nights, and early mornings, when shootings are most likely to occur. Providers are strongly encouraged to adjust staffing for summer and holiday weekends when more shootings are likely to occur.

Programs are required to maintain the level of service identified in their application or risk non-compliance with the program contract, which may result in a reduction or loss of grant funds.
- v. **Participant Enrollment** - Each RPSA VPS case management and victim service participant must complete an intake form to be considered enrolled in the program and eligible for case management and victim services. This intake form must be maintained in an individual participant file. Required program data will be collected and maintained on all individuals enrolled in the program in accordance with Department guidelines.
- vi. **Program Marketing** – In an effort to raise awareness of available services, to seek referrals and to recruit eligible participants, organizations will promote their programming in the community, including but not limited to developing partnerships with schools and law enforcement in their service area. Providers must also engage with the Reimagine Public Safety Act-funded Community Convening Body in their service area (additional information below). Referrals may also come directly from individuals, parents and caregivers, community residents and community organizations. Marketing efforts will follow the OFVP “Be the Light” public awareness campaign. For more information see [this link](#).
- vii. **Participant Transportation** - Program funds may be used to cover reasonable transportation costs for program participants. Out-of-state travel will not be allowed.

If transportation is provided, the agency must have a written transportation plan directly related to project activities and to maintain the plan on file at the agency. This plan should have the approval of the agency's governing body and be available for review by the Department upon request.

- viii. **Program Participation Fees** - Programs may NOT charge any fees associated with program participation.
- ix. **Sub-recipients** - Organizations may provide services directly or through subgrants for no more than 2 of the 3 required program components. Sub-recipients will be subject to the same GATA and grant implementation and reporting requirements as the grantee. Sub-recipients and their performance are the sole responsibility of the provider. The provider is required to conduct programmatic and fiscal monitoring of sub-recipients. The provider will report all services implementation, data, outcomes and performance of sub-recipients.
- x. **Program Staff and Volunteers**
 - a. Required Staffing:
 - i. At a minimum, one part-time staff person must be identified to coordinate program activities, serve as the main DHS contact, and must be identified in the organizational chart.
 - ii. At minimum, programs must allocate a position (or partial position) for each of the three required program components. This can be a portion of a position. This may be included in the applicant's budget or through a sub-grantee's budget.
 - iii. Sufficient staffing to cover 24/7 shooting response. On call status is acceptable.
 - b. Programs must recruit, hire, and take necessary steps to retain staff that are qualified for their positions with the Reimagine Violence Prevention Services program through education, experience and/or training. This includes people with street credibility and lived experience.
 - c. Recruit staff who are intimately familiar with and reflective of the community in which they are providing services. This includes people with street credibility and lived experience.
 - d. Implement safety protocols to ensure staff safety, including developing staff safety and self-care plans.
 - e. Provide staff with adequate training opportunities to prepare them to provide program elements effectively and safely.
 - f. Provide staff with adequate supervision to assess and improve job performance.
 - g. Provide and encourage staff with additional staff development opportunities which will build staff's employment skills, allowing for career advancement. Programs are strongly encouraged to develop a career plan with each street outreach worker.
- xi. **Background Checks:** Background checks are required for all program staff and volunteers who have the potential for contact with youth under 18. These background checks must be completed in advance of individuals working directly

with youth. Such individuals will authorize such checks in writing and submit fingerprinting. The agency shall retain the signed form authorizing the background check. All background check information, including the signed authorizing forms, shall be maintained separately in a confidential file, apart from the employee's personnel records. Funded programs will be required to have a written protocol in place detailing the requirement for background checks; evidence of their completion; the protocol for reviewing and making determinations regarding results; etc. In no case shall a Person who has been indicated as the perpetrator of any of the child abuse/neglect allegations identified in 89 Ill. Adm. Code Section 385.50(a) be deemed fit for service that allows access to children.

xii. Quality Improvement

The Applicant Agency must, over the course of this grant, demonstrate an ongoing commitment to quality improvement through implementation of an organizational/program improvement plan that is the direct result of a self-assessment conducted utilizing an approved tool. Refer to Training and Technical Assistance below for more details.

The Applicant Agency must, over the course of this grant, demonstrate an ongoing commitment to develop trauma informed capacity within the organization.

xiii. Training and Technical Assistance (TTA) – Programs will receive training, consultation, and technical assistance, as identified below, from authorized representatives of the Bureau/OFVP. For Chicago providers, TTA is provided through [The Network](#). Greater Illinois providers will select one of three possible RPSA funded TTA providers. At a minimum, funded providers will:

- a. Conduct, utilizing a Bureau/OFVP approved tool, an organizational self-assessment to determine administrative, programmatic, and capacity needs.
- b. Work with an approved TTA provider to develop a plan to address identified potential issue areas.
- c. Implement plan and report progress in quarterly Programmatic Performance Reports
- d. Participate in any training mandated by the Bureau/OFVP. All providers will ensure direct service staff complete a 40-hour (minimally) CVI training. Documentation of previous training completion meets this requirement.
- e. Participate in any regional or statewide meeting/training mandated by the Bureau/OFVP. It is anticipated that this will include a minimum of three (3) regional provider meetings.
- f. In addition, programs awarded in the RPSA Chicago community areas, will be expected to participate in any GASC-identified capacity building efforts, including an established CVI street outreach Community of Practice that meets quarterly and will have access to a new centralized hub for capacity building services to improve organizational sustainability, program delivery, and long-term impact.

xiv. Reimagine Public Safety Act Convener or Community Response and Engagement Workgroup (CREW):

A Reimagine Public Safety Act Convener or CREW is an experienced organization selected to coordinate RPSA-funded services in the community and help build capacity within the community area to reduce firearm violence. The Conveners will encourage effective, collaborative working relationships across providers in such disciplines as violence prevention, mental health, and youth development.

At a minimum, violence prevention services providers will be required to:

- a. Coordinate emergency victim flex fund needs with Convener.
- b. Coordinate other services with other organizations in the service area. This includes referral and linkage processes with other organizations providing services in their area to ensure participants are connected to needed services. Referral policies and practices will be developed for programming.
- c. Participate in monthly meetings with other Reimagine Public Safety-funded providers within their community convened by the Reimagine Convening Body to share knowledge and strategies of the neighborhood violence dynamic and complete community asset mapping.
- d. Collaborate in the development and implementation of coordinated community events which reclaim public space in communities impacted by gun violence.
- e. Meet on an emergency basis with Reimagine-funded Violence Prevention providers in the service area when conflicts related to program participants that need immediate attention and resolution arise.

xv. Program Evaluation:

- a. Providers will be required to participate in evaluation efforts as directed by the Department and/or its subrecipient(s) and collect and report data accordingly. This also includes full participation in all information and data requests pursuant to the independent evaluation of the GASC being conducted by the Center for Neighborhood Engaged Research & Science (CORNERS) at Northwestern University and the broader data sharing in alignment with external partners through the Scaling Community Violence Intervention for a Safer Community (SC2). Data will be submitted in the format prescribed by the Department. Providers will be required to document program services to each client. Providers will be required to report quarterly regarding program performance measures and outcomes. Providers will be required to participate in Department-directed Performance and Standards Assessment reviews. A year-end program and performance measures and outcomes report will also be required. Additional data and information may be requested throughout the year as determined by the Department.
- b. Other data will be collected from programs including, at a minimum, the following data elements:

- i. Unduplicated number of program participants
- ii. Intake and demographic information of program participants
- iii. Participant status data (Education, Employment, Living Arrangement)
- iv. Program service activities, assessment, and outcome data
- v. Discharge information, including status data
- vi. Data specific to mandatory program models
- vii. Applicant agency administrative information; staff information; site information; subcontractor information; and other program plan information as required.

Please note that some records and other information obtained by programs concerning the individuals served under this agreement may be confidential pursuant to state and federal statutes and/or administrative rules and shall be protected from unauthorized disclosure.

G. Measures and Standards

To support consistent, high-quality implementation across all funded partners, the OFVP will provide a set of core performance measures and minimum performance standards for this program. These measures will focus on service delivery, participant engagement, data quality, and progress toward intended outcomes. Applicants should be prepared to collect and report data aligned with these measures. Following award announcements, OFVP and the FCS, Bureau of Violence Prevention Services will work with its external evaluation partner(s) to refine and finalize the performance measures and reporting requirements. This collaborative refinement process will ensure that measures are evidence informed, feasible for providers, and aligned with the overall evaluation framework. Any updates will be communicated to funded organizations prior to the start of reporting.

1. Program Performance Measures

At the end of each quarter, successful applicants will submit a periodic performance report (PPR). At the end of the year, successful applicants will submit a cumulative report. In addition to service data and activities, the PPRs will also include the following performance measures:

- a. Percent of the three required program components delivered: street outreach, case management, and victim advocacy services
- b. Percent of individuals served through street outreach that are tracked and reported on PPRs.
- c. Projected vs. Actual individuals engaged/served through street outreach.
- d. Projected vs. Actual individuals served through victim services.
- e. Projected vs. Actual individuals engaged/served through case management.
- f. Projected vs. Actual unduplicated individuals served in the RVPS – all 3 components.
- g. Percent of Police Notifications with a response.
- h. Percent of successful case management referrals.
- i. Percent of individuals with a case plan who complete 50% or more of case plan goals.

- j. Percent of individuals with an employment support case plan goal that are employed or enrolled in an education/training program upon discharge.
- k. Percent of successful victim advocacy referrals
- l. Percent of RPSA Monthly and Emergency Response meetings attended.
- m. Percent of RPSA coordinated Community events that are attended by RVP staff.
- n. Percent of mediations resulting in a positive outcome.
- o. *Percentage of unresolved complex conflicts that receive at least two follow-ups during the reporting period.*
- p. Percentage of timely and accurate periodic and final financial Reports submitted.
- q. Percentage of timely and accurate periodic and final performance reports submitted.

2. Performance Standards

- a. The three required program components are delivered throughout the grant period. Street Outreach, Case Management & Victim Advocacy. (Acceptable performance: 100% - all three components delivered)
- b. Percent of individuals engaged/served through street outreach that were tracked and reported on PFRs. (Acceptable performance: 100%)
- c. Percent of projected vs. actual individuals engaged/served through street outreach. (Acceptable performance: 80%)
- d. Percent of projected vs. actual individuals served through victim services. (Acceptable performance: 80%)
- e. Percent of projected vs. actual individuals engaged/served through case management. (Acceptable performance: 80%)
- f. Percent of projected vs. actual unduplicated individuals served in the RVPS – all 3 components. (Acceptable performance: 80%)
- g. Percent of agency assigned Police Notifications that were responded to by Street Outreach staff. (Acceptable performance: 90%)
- h. Percent of individuals referred by Outreach Workers or Victim Advocacy to case management services who have a case plan developed. (Acceptable performance: 75%)
- i. Percent of individuals with a case plan who complete 50% or more of case plan goals prior to discharge. (Acceptable performance 65%)
- j. Percent of individuals with an employment support case plan goal that are employed or enrolled in an education/training program upon discharge. (Acceptable performance: 50%)
- k. Percent of individuals referred for victim advocacy services who receive three or more victim services (Acceptable performance: 80%).
- l. Percent of RPSA Monthly and Emergency Response meetings attended (Acceptable performance: 80% of convened meetings)
- m. Percent of RPSA coordinated Community events that are attended by RVP staff (Acceptable performance: 80% of RPSA coordinated events)
- n. Percent of total mediations resulting in a resolution. (Acceptable performance: 40% of complex mediations resulting in positive outcomes).

- o. Percent of unresolved complex conflicts that receive at least two follow ups during the reporting period (Acceptable performance: 75%)
- p. Percentage of timely and accurate periodic and final financial Reports submitted. (Acceptable performance 80%)
- q. Percentage of timely and accurate periodic and final performance reports submitted. (Acceptable performance 80%)

H. Cooperative Agreement - This grant will not be a cooperative agreement.

I. Specific unallowable costs for this program include the following:

Please refer to 2 CFR 200 – Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards, PART 200 Subpart E – Cost Principles to determine the appropriateness of costs. In addition, and specific to this grant, the following costs will be unallowable without specific prior written approval from DHS:

- 1. Entertainment costs, except where specific costs that might otherwise be considered entertainment have a programmatic purpose and are authorized in the approved budget (2 CFR 200.438)
- 2. Capital expenditures for general purpose equipment, including any vehicle regardless of cost, buildings, and land (2 CFR 200.439)
- 3. Capital expenditures for improvements to land, buildings, or equipment which materially increase their value or useful life (2 CFR 200.439)
- 4. Food, and other goods or services for personal use of the grantee's employees, contractors, or consultants of the grantee unless authorized as per diem under the State of Illinois Governor's Travel Control Board (2 CFR 200.445).
- 5. Deposits for items, services, or space
- 6. Out of State travel
- 7. Clinical behavioral health services

J. Program beneficiaries or program participants must meet the following Risk Factor requirements: (Providers will be required to document, track and report on participant risk factors.)

The RPSA Violence Prevention Services program services are provided for highest-risk individuals. Since the Department only intends to fund applications targeting services to highest-risk individuals, participating program individuals must also meet at least one of the following risk factors to be considered eligible to participate in the program. (Participant eligibility criteria must be documented in each participant's individual program file.)

1. Active street involvement

Current or recent, direct connection to street-based networks or high-risk activities. This may include having a recognized role as an influencer, connector, or leader within those networks. The connection should be based on credible, individual information about the person's relationships, activities, or circumstances and not solely on their neighborhood, groups identity, or family history. The term recognizes that many people facing these risks live in communities

affected by historic marginalization, disinvestment and barriers to employment and social services.

2. Justice-system involvement

Recently released from jail, prison, or/other detention facility (e.g., Cook County Jail, Illinois Department of Corrections (IDOC), Illinois Department of Juvenile Justice (IDJJ) facilities, juvenile detention centers, includes currently under community supervision (e.g. probation or parole), or

Prior arrest(s), charge(s), or conviction(s) for violent felonies (e.g., homicide, aggravated battery, armed robbery, weapons charges)

3. Previous victimization and trauma associated with community firearm violence.

Recent victim of firearm violence, or

Witness of recent firearm violence, or

Family or friend of a recent firearm victim

- K. Authorizing statutes and regulations for the funding opportunity include the following: Reimagine Public Safety Act (RPSA) (430 ILCS 69/35) and implemented by Executive Order 2021-29.

4. Application Contents and Format

i. Content and Format Requirements

A. Content and Format of Application Submission

1. Pre-applications, letters of intent, or white papers are not required (or encouraged).

2. **Required Content of Application**

Applicants **must** demonstrate that the program eligibility requirements have been met and **must** submit an application that consists of the following **four** parts. **Applicants that do not include all the following documents will be considered substantially incomplete and will not be considered for funding.** The Department will not contact applicants for missing items listed below.

a. **(Part 1)** The Uniform Application for State Grant Assistance (available as an **Appendix**)

b. **(Part 2)** A Proposal Narrative (Described below in this section) consisting of the following sub-parts:

- i. Executive Summary
- ii. Capacity - Agency Qualifications/Organizational Capacity
- iii. Need
- iv. Quality - Description of Program Design and Services
- v. Budget Narrative
- vi. Attachments to Your Application

c. **(Part 3)** Uniform Grant Budget (Entered in the CSA system – described below.)

d. **(Part 4)** [Grantee Conflict of Interest Disclosure](#)

3. Proposal Narrative **(Part 2)** Content and Attachments

- a. Program Narrative: IMPORTANT: The program (proposal) narrative makes up the bulk of the application. If the program narrative is missing from your application packet, your application will receive a significantly reduced score and the applicant organization will not meet the criteria to receive a grant under this notice of funding opportunity.
- b. Applicants must submit an application and budget that covers the 2, 6-month project periods from 1/1/27 to 6/30/27 and 7/1/27-12/31/27. If an applicant receives an award through this NOFO the proposal will become the local program plan and budget unless revisions are required. The application/plan will be the basis for monitoring compliance by DHS.
- c. Proposal Narrative Sections: Please provide a complete response to the following sections. If the applicant believes that the subject has been adequately addressed in another part of the application narrative, then provide the cross-reference to the appropriate part of the narrative. If a cross-reference is not included in the section, the reviewer will only consider content contained within that specific section.

The total application may not exceed **20 pages**, single-spaced. **The application Uniform Application for State Grant Assistance (Part 1), executive summary, checklist, attachments, letters of intent and Uniform Budget (Part 3) are not included in the page limitation.** All applications must be typed on 8 ½ x 11-inch paper using 12-point type and at 100% magnification. With the exception of letterhead and stationery for letters of support, the entire proposal should be typed in black ink on white paper. The program narrative must be typed single-spaced, on one side of the page with 1-inch margins on all sides.

i. **Executive Summary (5 points):**

The Executive Summary will serve to document the organization's compliance with mandatory requirements to determine eligibility for consideration under this NOFO and will determine if the organization will meet the intent of this funding opportunity as described in **Section 3 Program Description**. The Executive Summary will also serve as a stand-alone document that may be shared with various state-level stakeholders and others requesting a brief overview of each funded project. Therefore, applicants should be concise and direct in their description.

Applicants must complete **Appendix B: Executive Summary** and ***include it at the beginning of the program narrative***. This Executive Summary will NOT count toward the required page limitations.

1. Each of the following items is included on **Appendix B** and must be answered/responded to on the **Appendix B** Form:
 - a. List the name, FEIN, address, (including county) and website (if any) of applicant organization
 - b. List name, phone number, and email address Authorized Representative and Program Contact Person for the organization.

- c. Applicant Eligibility: Indicate the number of years of experience the applicant organization has providing services to high-risk individuals in the RPSA eligible service area for which the applicant organization is proposing to provide services.
- d. Applicant Eligibility: Provide, as **Attachment E2**, documentation that verifies/
- e. The applicant must have at least three years of verifiable proof of their Violence Prevention work. This must be documented through a signed attestation letter on organizational letterhead from the applicant's Board President or Board Chair, certifying that the organization has at least three (3) years of experience delivering Violence Prevention services including the three required service components outlined in **Section 3.F.2** with approximate dates of service and a brief description. Please provide verification letter from the Board that attests to the Violence Prevention Work as **Attachment E2**.
- f. Applicant Eligibility: Provide, As **Attachment E3**, documentation of genuine and trusted relationships with community residents, stakeholders, and law enforcement entities in the proposed high-risk area. This must be documented through at least two (2) letters of support, on letterhead, attesting to the length and quality of the relationship with examples. Please provide verification of trusted relationships as **Attachment E3**. A minimum of 2 letters, as described herein, are required for the applicant to be eligible, however, additional letters are recommended as all trusted relationship letters will also be scored as part of **Section 4.i.A.3 Program Narrative: Capacity**.
- g. Indicate funding amount requested for FY 27 Part A portion of grant term (1/1/27-6/30/27).
- h. Indicate funding amount requested for FY 28 Part B portion of the grant term (7/1/27-12/31/27).
- i. Indicate total 12-month funding requested under this proposal (*This will be the total of Part A and B portions of the 12-month grant term*).
- j. Indicate if the budgets are entered into CSA and submitted for program review.
- k. Indicate in which eligible service area for which this application is intended to serve. Applications to serve areas not identified as eligible under this NOFO in **Section 2** will not be considered for funding. ***Applications will only be considered for a single eligible service area.***
- l. Indicate the site location(s) where violence prevention services will be performed for this community; Indicate if the location is a sub-recipient location.
- m. Provide a **brief** description of the Violence Prevention Services your organization has provided in the past or is currently providing. Include outcomes/achievements of these services.

- n. Identify other community organizations you have collaborated with in the service area for which you are applying. Include length of the collaboration, purpose and achievements.
- o. Provide a brief overall description of the program and services your organization intends to provide under this award. Separate the description by program component (street/hospital outreach, victim services, case management) Include anticipated start dates and anticipated outcomes.
- p. Indicate the projected number of individuals to be served by program component (street outreach, victim services, case management). Indicate if service component is being provided directly or by a sub-grant. *Note: these will likely include duplicated numbers as participants may receive services under each component.*
- q. Indicate the total unduplicated number of individuals projected to be served by this program, broken down by race, ethnicity, age and gender.
- r. Provide the following statements of assurances and descriptions of the following required program components listed in **Section 3.i.F.:** Program Deliverables
 - i. The applicant must propose to begin providing services within 30 days following the contract start date. The applicant must provide a program Implementation Timeline as **Attachment A6** demonstrating when it will begin to provide services as part of this application.
 - ii. The applicant must provide a clear statement of agreement to include a position (or partial position) for each of the three required components and that the staffing will cover shooting responses 24/7. The applicant must provide a 24/7 staffing schedule as **Attachment A7.**
 - iii. The applicant must provide a clear statement of commitment to operating with a racial equity lens when providing program services; support activities and when creating or updating policies. The applicant statement of commitment must be included in the Executive Summary section of the application.
 - iv. The applicant must provide a clear statement indicating the understanding that only eligible individuals as outlined in **Section 3.i.F.1 Target Population** may be served under this grant.
 - v. Provide a statement indicating agreement to comply with organization's Training and Technical Assistance plan outlined in **Section 3.i.F.2.xiii Training and Technical Assistance.**

ii. Capacity (40 points)

The purpose of this section is for the applicant to present an accurate picture of their ability to implement this program as outlined in this NOFO. Information in this section should include, but not necessarily be limited to, the following:

Overview:

1. Provide a brief overview of your agency, outlining its primary programs and services offered. Describe how your agency's mission statement and goals align with the purpose of this funding opportunity. Include an agency organizational chart as **Attachment A3**. Include a current Board of Director's list as **Attachment A4**.
2. Describe the applicant's physical presence in the community for which they are proposing to provide services; include the address(es) of physical locations; indicate how long the applicant has been in each location; briefly describe the services currently provided at the location(s), indicate if each location is for administration or direct services or both.

Experience:

3. Describe your agency's experience providing the required services and programming listed in **Section 3.i.F Program Deliverables**. Describe your agency's experience working with the highest risk individuals as outlined in **Section 3.i.F.1 Target Population**.
4. Describe relevant major accomplishments and outcomes of those efforts.
5. Describe major accomplishments of coordinating events and service linkages with Convener and other RPSA grantees.
6. Describe your agency's experience building trust with community partners, law enforcement, residents, and other stakeholders within the intended community the agency is proposing to serve. In the description identify the stakeholder groups that the applicant agency has worked with and in what capacity. Indicate if these partnerships/relationships are current.
7. Describe which of these partnerships are most critical to your agency's success?
8. The content of the Trusted Relationships letters of support will be scored as part of this section.

Fiscal Capacity:

9. What is the amount of your organization's overall budget? *Overall budget includes all programs, administration, etc; include this grant request/amount.*
10. Describe your agency's fiscal and accounting policies. Describe how your agency tracks grant expenditure and ensure funds are used as intended. Include accounting and timekeeping software. Include position titles and employees responsible for day-to-day fiscal management. Attach Job descriptions and resumes as **Attachment A5**
11. Describe your agency's experience managing state and/or federal grants. List the number of consecutive years receiving state and/or federal grants. List the amount in total awards for each year.
12. What challenges have you faced managing grant funds and how were they resolved?
13. Subrecipients: If your agency plans to use a Subrecipient to deliver services related to this program, describe your policy(ies) around selecting, monitoring and evaluating subrecipients. If you do not have existing policies, indicate how and when the policies will be created. Refer to **Section 4.v.12 Program Narrative and**

Attachments for a list of Subrecipient attachments that must be included with this application.

Agency Readiness:

14. Provide a description of your agency's readiness for service provision commencing within 30 days of the contract start date.
15. Describe your agency's plan for staffing to carry out and execute this program. Include your agency's Organizational Chart. If subcontractors will be used, include the relationship with those organizations in the chart. Please include this as **Attachment A3**. Please include resumes and/or job descriptions of the staff responsible for implementing this program as **Attachment A5: Job Description/Resume** Indicate whether these positions will be full-time or part-time and if the staff are current employees or will be new hires.
16. Describe your agency's staff training plan to ensure their ongoing ability to successfully perform the duties of their position as outlined in **Section A.4.m. Program Staff and Volunteers**. **PLEASE NOTE: selected provider cannot include training costs in budget.**
17. Describe the anticipated training and technical assistance requests from IDHS-approved training, technical assistance, and support (TTAS) as outlined in **Section A.4.p. Training and Technical Assistance**.
18. Include an implementation timeline with milestones and deliverables as **Attachment A6: Implementation Timeline**. The timeline should cover the entire program period, beginning January 1, 2027-December 31, 2027. (12 months) The timeline should at minimum identify when each program requirement will begin, anticipated staff hiring and how often the program reviews each deliverables status.

iii. **Need (5 points)**

The purpose of this section is to provide a clear and accurate picture of the need for proposed services within the targeted community and how the applicant will address these needs. It is necessary for the applicant to demonstrate that it has a thorough knowledge and understanding of the needs of the individuals impacted by violence.

1. Provide evidence of your agency's knowledge and understanding of the needs of families impacted by firearm violence.
2. Describe how the provision of Violence Prevention Services program will help to mitigate the negative effects of firearm violence on the community. Describe how these services will assist populations and communities disproportionately impacted by firearm violence.
3. How does your agency's proposed program address the specific needs described above?

iv. Quality (Program Design 45 points)

The purpose of this section(s) is for the applicant to provide a comprehensive, clear, and accurate picture of its intended program design. At a minimum, the proposal must describe how the organization will provide the proposed services and activities consistent with **Section 3D: Program Deliverables**

1. Target Population:

- a. Indicate the anticipated number of individuals to be served by age, race & ethnicity.
- b. Describe the target populations to be served as described in this NOFO.
- c. Describe how and why this population was chosen for this programming.
- d. Describe how this population will be recruited to participate in this program and how your agency will reduce barriers to program participation.

2. Street Outreach: All applicants should refer to **3.i.F. Program Design** for details. Level One Trauma Center/Hospital applicants are not required to implement **Section 3.i.F.2.b. Reclaiming public spaces.**

- a. Describe the proposed outreach services and the specific engagement strategy.
- b. Describe the outreach staffing plan, schedule, daily activities and shooting response plan.
- c. Describe how your agency will identify outreach locations, describe any anticipated outreach locations and how they will be tracked.
- d. Describe how conflicts are identified and how mediations are conducted and tracked.
- e. Describe how outreach workers will determine a person is on their case load and how they will document participant interactions.
- f. Describe how outreach workers with lived experience and community credibility will be identified, recruited and hired.
- g. Describe how the outreach workers will be trained, supervised and supported. Will your agency develop career plans for street outreach workers and if so, how will these be monitored?
- h. Describe how outreach staff will collaborate and coordinate outreach with other street outreach organizations.
- i. Include a 7-day weekly calendar that demonstrates how the 24 hours a day, 7 days a week program requirement will be covered by staff as **Attachment A7**. On call status is allowed.

3. Case Management: See **Section 3.i.F. Program Design** for details.

- a. Describe the proposed case management services, engagement strategy and how these meet participants' needs.
- b. Describe the case management staffing plan, schedule, daily activities, training and supervision.
- c. Describe how participants' needs and goals will be developed. Include the name of assessment tool and plan used.
- d. Describe existing collaborations with other agencies to meet participant needs discussed in 3.a above.

- e. Indicate and describe the database software used to track participants and services.
- f. Describe how case management staff will collaborate and coordinate your agency's street outreach and victim services staff.

4. **Victim Services:** See **Section 3.i.F. Program Design** for details.

- a. Describe the proposed victim services and how these will meet participant needs.
- b. Describe the victim service staffing plan, schedule, daily activities, training and supervision.
- c. Describe how participants' needs and goals will be developed. Include the name of assessment tool and plan used.
- d. Describe existing collaborations with other agencies to meet participant needs discussed in 4.a above.
- e. Describe how the victim advocate position(s) will respond to shooting notifications.
- f. Indicate and describe the database software used to track participants and services.
- g. Describe how case management staff will collaborate and coordinate your agency's street outreach and victim services staff.

5. **Additional Program Requirements:**

- a. Describe how programming is infused with trauma-informed principles as outlined in **Section 3.i.F.ii. Trauma Informed Principles**.
- b. Describe how your agency will develop and implement or maintain a Diversity, Equity, and Inclusion (DEI)/racial justice plan. How will your agency develop and foster diversity, equity, and inclusion among the staff and in the communities they serve?
- c. Describe how your agency ensures services are accessible and culturally responsive.
- d. Describe whether transportation will be provided to participating individuals with program funds and under what circumstances.

6. **Program Impact:** Describe how the proposed violence prevention program will impact and address firearm violence.

- a. Describe how the program design and activities directly correlate to the needs identified in the previous section.
- b. Describe the intended impact on participants who receive:
 - i. street outreach
 - ii. case management
 - iii. victim services.

7. **Implementation Timeline:** Applicants will submit an Implementation Timeline as **Attachment A5**, which will include program milestones, hiring staff, training, start dates, etc. For each deliverable:

- a. Indicate the staff who will be responsible to ensure each deliverable is completed.

- b. Indicate the anticipated hiring dates.
- c. The estimated time per week spent on each deliverable.
- d. For each deliverable, record implementation dates, dates deliverables will be accomplished, etc.
- e. The timeline should cover the entire program period, beginning January 1, 2027, through December 31, 2027. (12 months)

8. **Subrecipients:** If the applicant plans to use a Subrecipient to deliver services related to this program,
- a. Describe the role and responsibilities of the sub-recipient.
 - b. Describe how the applicant agency will monitor and evaluate the Subrecipient.
 - c. Refer to **Section 4.v.12** for a list of Subrecipient attachments that must be included with this application.

v. Budget and Budget Narrative (5 points)

1. Applicants should budget \$575,000 to serve approximately 50 participants in one of the eligible service areas.
2. Applicants must enter a budget electronically in the CSA system (Refer to [IDHS: CSA Tracking System](#).) The Budget entered into the CSA system will include a narrative or detailed description/justification for each line in the budget and will describe why each expenditure is necessary for program implementation and how you arrived at the particular amount. Please include cost allocations as necessary. This narrative must also clearly identify indirect costs, direct program costs, direct administrative costs, and match within each line item as appropriate. The Budget (including MTDC base exclusions as appropriate) should clearly describe how the specified resources and personnel have been allocated for the tasks and activities described in your plan.
3. The Budget must be electronically signed and submitted in the CSA system. The Budget must be signed by the Provider's Chief Executive Officer and/or Chief Financial Officer. Refer to [IDHS: Process for Adding GATA Budget Signoff Authority \(state.il.us\)](#).
4. IMPORTANT: Please be sure the budget status in CSA says "GATA Budget signed and submitted to program review." This status will appear after the budget is electronically signed by the agency CEO or CFO and submitted to IDHS. See IDHS CSA Tracking System webpage for additional information on CSA at [IDHS: CSA Tracking System](#). If the Uniform Grant Budget is not entered, signed, and submitted in the CSA system by the application due date and time, points will be deducted from the Budget Narrative section of the application narrative.
5. The budget and narrative must tie fiscal activity to program objectives and deliverables and demonstrate that all proposed costs are:
6. Reasonable and necessary
7. Allocable, and
8. Allowable as defined herein and by program regulatory requirements and the Uniform Guidance (2CFR 200), as applicable.

9. A PDF copy of the 2 budgets must be included in the application. The 2 budgets include a FY27 6-month budget and a FY28 6-month budget should be included as **Attachment A8: Applicant FY27 and FY28 6-month CSA Budgets**. This budget should be printed from the CSA system. Successful applicants will NOT receive a grant agreement until after their budget has been submitted and approved through the CSA system.
10. If indirect costs are included in the budget, the applicant must submit a copy of their organization's approved NICRA as **Attachment A9: Applicant NICRA**.
11. The applicant must submit Federal [Form W-9 \(Rev. March 2024\) \(irs.gov\)](#) and a copy of the organization's IRS Determination Letter as **Attachment E1: Applicant Federal Form W-9/ IRS Determination Letter**

12. Subrecipients

Indicate amount of funds to be provided to the subrecipients; include a budget narrative describing how subrecipient will use funds. (See below for additional instructions regarding subrecipient budgets.)

- a. Subrecipient budgets must be pre-approved and therefore must be submitted with this application. Subrecipient budgets should NOT be submitted in the CSA system. Instead, Subrecipient budgets should be completed using a PDF form of the [IDHS: Uniform Grant Budget Template \(illinois.gov\)](#)
- b. If Subrecipients will be used, include the following for each subrecipient:
 - i. **Attachment S1- Program Contact Information** Form for the subrecipient (available as an **Appendix D** Remember to check the subrecipient box on the form).
 - ii. **Attachment S2-Subrecipient Agreement** (The Subrecipient Agreement is generated by the applicant agency outlining the scope of work/deliverables the subrecipient will be completing for this program.)
 - iii. **Attachment S3-Subrecipient Budget** (Use the IDHS: Uniform Grant Budget Template (illinois.gov)
 - iv. **Attachment S4-Subrecipient Agency approved NICRA** if indirect costs are included and Subrecipient Agency has a current approved Federal or State NICRA
 - v. **Attachment S5-Subrecipient Organization Federal** [Form W-9 \(Rev. March 2024\) \(irs.gov\)](#) and copy of IRS Determination Letter
 - vi. **Attachment S6 Subrecipient** [Grantee Conflict of Interest Disclosure](#)

vi. **Required Forms**

1. The [Uniform Application for State Grant Assistance](#) (Part 1) is a three-page document used to formalize organization's request to apply for funding. The document requires the signature and email address of the organization's authorized representative. This email address will be used for official communication between the Department and the applicant organization for matters regarding this application.
2. The Grantee Conflict of Interest Disclosure (Part 4) is a required for all grant award programs. The document requires agencies to identify actual or potential conflicts of interest. The form must be signed by a representative of the organization.

- a. Compliance Requirement: IDHS Grantees must immediately disclose in writing to the Program Administrator any actual or potential conflict of interest as soon as it becomes known, in accordance with 30 ILCS 708/35, 30 ILCS 708/60(a)(5), 44 Ill. Admin. Code 7000.330(f) and the grant agreement. This disclosure must be submitted for the Grantee and all sub-recipients or pass-through entities, whenever an actual or potential conflict may exist.
 - b. Continuing Obligation: IDHS Grantee has a continuing obligation to disclose IDHS financial or other interests (public, private, direct or indirect) that may be a potential conflict of interest, or which could prohibit Grantee from entering or continuing the programs for which the grant is intended.
 - c. Grantee Form Submission: This form must be completed, signed, and returned for any State or federal grant funds awarded to the Grantee by IDHS. For conflicts that exist at the time of grant application submission, submit this form with your grant application materials. If no actual or potential conflicts exists, the grantee should indicate "no conflicts." For conflicts that arise after application submission, submit this form to your designated grant program point of contact within 7 calendar days after the conflict has been identified.
3. [Form W-9 \(Rev. March 2024\)](#) and a copy of their IRS Determination Letter

vii. Required Format

1. The narrative portion must follow the page maximums where prescribed and must be organized in the format outlined or points may be deducted.
2. Embedded links must not be included in the application. If links are included, DHS will not review or consider this information as part of the application.
3. The department may determine that an applicant is not qualified if they have not complied to requirements and use that determination as a basis to award to another applicant.
4. The total application may not exceed 20 pages, single-spaced. The application Uniform Application for State Grant Assistance, executive summary, checklist, attachments, letters of intent and Uniform Budget are not included in the page limitation.
5. All applications must be typed on 8 ½ x 11-inch paper using 12-point type and at 100% magnification. With the exception of letterhead and stationery for letters of support, the entire proposal should be typed in black ink on white paper. The program narrative must be typed single-spaced, on one side of the page with 1-inch margins on all sides. Do NOT included embedded links in the application. DHS will not review or consider links embedded in application.
6. The complete application must be compiled as described below in a single PDF document and electronically submitted to DHS.ViolencePreventionServices@illinois.gov by the deadline.
7. Applications must be submitted electronically as detailed below in **Section 5 Submission Requirements and Deadlines**.
8. The entire application, including attachments, must be sequentially page numbered and compiled in the order specified below.

9. The **Uniform Application for State Grant Assistance** must include the signature and email address of the organization's authorized representative, and the proposed budget must be signed and submitted to Program Review in CSA.

10. Program Narrative and Attachments:

- a. Executive Summary – available as an **Appendix B**
- b. Capacity – Agency Qualifications/Organizational Capacity
- c. Need – Description of Need
- d. Quality – Description of Program Design and Services
- e. Budget Narrative
- f. Attachments to your application:
 - ***Attachments***
 - Attachment A1 NOFO Checklist (**available as an Appendix C**)
 - Attachment A2 Program Contact Information (**available as an Appendix D**)
 - Attachment A3 Organizational Chart
 - Attachment A4 Current Board of Directors
 - Attachment A5 Job Description(s)/Resume(s)
 - Attachment A6 Implementation Timeline
 - Attachment A7 24/7 Staffing Schedule
 - Attachment A8 PDF copy of Applicant's FY27 6 month CSA Budget (January 1, 2027-June 30, 2027) and Budget Narrative
 - Attachment A8a PDF copy of Applicant's FY27 6 month CSA Budget (July 1, 2027-December 31, 2027) and Budget Narrative
 - Attachment A9 Applicant NICRA (if applicable)
 - Attachment A10 Applicant Federal [Form W-9 \(Rev. March 2024\) \(irs.gov\)](#)
 - Attachment A11 [Grantee Conflict of Interest Disclosure](#)
 - Attachment A12 Documentation that verifies/demonstrates that the applicant organization currently is a Level One Trauma Hospital, if applicable
 - Attachment A13 Hospital Applicant Memorandum of Understanding with violence prevention organization, if applicable
 - Attachment A14 Subrecipient Monitoring Policy, if applicable
 - ***Eligibility Attachments: Include the following for applicant***
 - Attachment E1 Applicant Federal [Form W-9 \(Rev. March 2024\)](#) and a copy of their IRS Determination Letter
 - Attachment E2 3 yrs minimum experience Board attestation letter
 - Attachment E3 At least 2 Trusted Relationship letters of support
 - ***Subrecipient Attachments, if applicable: include the following Attachments for each subrecipient)***
 - Attachment S1 Program Contact Information (**available as an Appendix A2;**

- Attachment S2 completed for subrecipient)
- Attachment S2 Subrecipient Agreement (This is an applicant-generated form)
- Attachment S3 Subrecipient Budget (Use the [IDHS: Uniform Grant Budget Template](#))
- Attachment S4 Subrecipient Organization approved NICRA (if applicable)
- Attachment S5 Subrecipient Organization Federal [Form W-9 \(Rev. March 2024\)](#) and IRS determination letter
- Attachment S6 Subrecipient [Grantee Conflict of Interest Disclosure](#)

11. **The Uniform Grant Budget** must be signed and submitted to Program Review in CSA.

viii Any Confidential information must be designated in advance otherwise it may be subject to potential FOIA release. Proprietary information must be identified by highlighting the information in yellow in all spaces in the application. A second redacted version of the application may also be submitted (include the term "Redacted" in the file name).

5. Submission Requirements and Deadlines

i. Address to Request Application Package.

A. Actions Needed Prior to Applying:

1. The complete application package (this Notice of Funding Opportunity, including links to required forms) is available through the [Illinois Catalog of Financial Assistance](#) and the IDHS Grants Website Page located: [IDHS: Grant Funded Programs](#)
2. Each Applicant must have access to the internet. The Department's website will contain information regarding the NOFO and materials necessary for submission. Questions and answers will also be posted on the Department's website as described in this announcement (section 1 - Alpha section I) It is the responsibility of each applicant to monitor the website and comply with any instructions or requirements related to the NOFO.

ii. Unique entity identifier and System for Award Management (SAM.gov). This subsection must state the requirements for unique entity identifiers and registration in SAM.gov. It must include the following:

A. Each applicant must:

1. Be registered in [SAM.gov](#) before submitting its application;
2. Provide a valid unique entity identifier in its application; and
3. Continue to maintain an active registration in [SAM.gov](#) with current information at all times during which it has an active award or an application or plan under consideration.

4. The Department may not make an award until applicant has fully complied to all UEI and SAM requirements
 5. The department may determine that an applicant is not qualified if they have not complied to requirements and use that determination as a basis to award to another applicant.
- B. If individuals are eligible to apply, they are exempt from this requirement under 2 CFR 25.110(b).
- C. If the agency exempts any applicants from this requirement under 2 CFR 25.110(c) or (d), a statement to that effect.

iii. **Submission Instructions.** This subsection addresses how the applicant will submit the application. It must include the following:

A. Actions needed prior to applying:

1. Applicants must be registered with the State of Illinois and Pre-qualified in the GATA portal prior to applying for Illinois awards. Instructions for creating an account and registering are located at the following link: [Illinois GATA Grantee Portal](#). Additionally, detailed instructions for registration and prequalification requirements, including the expected amount of time for completion are located here: [Grant Applicant Pre-Qualification and Pre-Award Requirements](#)

B. The methods for submitting the application:

1. Applicants must electronically submit the complete application including all required narratives and attachments in the prescribed order:
 - a. (Part 1)[Uniform-Application-for-State-Grant-Assistance.pdf](#)
 - b. (Part 2) A Proposal Narrative consisting of the following sub-parts:
 - i. Executive Summary
 - ii. Capacity - Agency Qualifications/Organizational Capacity
 - iii. Need
 - iv. Quality - Description of Program Design and Services
 - v. Budget Narrative
 - vi. Attachments to Your Application
 - c. (Part 3) Uniform Grant Budget (Entered in the CSA system as described in section (4)(a))
 - d. (Part 4) Grantee Conflict of Interest Disclosure
2. **Applications must be sent electronically to DHS.ViolencePreventionServices@illinois.gov.**
 The application will be electronically time-stamped upon receipt. The Department will ONLY accept applications submitted by electronic mail sent to DHS.ViolencePreventionServices@illinois.gov Include the following in the subject line: **27-444-80-3422-02 and your agency name**. Application submissions or delivery to any other email address or contact, including other IDHS offices or employees, will not be considered for review or funding. Applications will not be accepted if received by fax machine, hard copy, disk, thumb drive or via a link to an external source. Where possible the electronic copy must be a complete single PDF file. If a single PDF is not possible, a ZIP file must be used instead. DHS will not be responsible for piecing together your application materials and ensuring the documents are in the correct order.

3. **Applications that are submitted as a link to another external source will NOT be accepted.**
This is because the applicant may still access and edit the document in that location after the application has been submitted.
4. **Applications that are password protected will NOT be accepted.**
5. Software or electronic capabilities required are as follows Internet Access, preferably high-speed
 - a. Email Capacity
 - b. Microsoft Excel
 - c. Microsoft Word
 - d. Adobe Reader
6. Applicants will receive a receipt confirmation email within **48 hours** of receipt notifying them that their application was received and the date and time it was received. This email will be sent to the email addresses provided on the Uniform Grant Application (UGA). This receipt confirmation email is solely confirmation that the application has been received by IDHS; it is not a confirmation of the applicant's eligibility; prequalification, etc.

Applicants are required to notify the Department within 72 hours of the deadline if they did not receive an email notifying them that their application was received. If the applicant does not receive an email and does not notify the Department within 72 hours, their application will be considered a late submission and will NOT be reviewed or scored. The applicant will NOT have the right to protest the submission/receipt of their application to the Department after the 72 hours. In the event of a dispute the applicant bears the burden of proof that the application was received on time at the email location listed above (and that the budget was submitted into the CSA system on time).

Applications received after the established due date and time will not be considered for review or funding. All applicants/applications determined to be non-compliant, ineligible or otherwise determined to be disqualified from consideration will be separately notified in writing, by email, upon determination. This email will be sent to the email address provided in the Uniform Grant Application (UGA) and will identify the reason for disqualification.

- C. If you are experiencing system problems or technical difficulties due to State system failures when submitting your application, you may contact the individual below prior to the application deadline. DHS cannot guarantee we will be able to assist if the call or email for assistance is received within the hour prior to the application deadline.

1. Name: Reshma Desai
2. Phone: 217.720.5069
3. Email: DHS.ViolencePreventionServices@illinois.gov

iv. Submission Dates and Times.

- A. **Complete applications are due on November 13, 2026, at 5pm (CST).**
- B. Submitting a revised application. If it is necessary to submit a revised application, **the FULL application must be resubmitted, not just the revised portion.** This revised application **MUST** still be received prior to the application submission deadline. A note should be included in the accompanying email indicating that this is **a revised submission** and that it is intended to replace the previous version submitted – if possible, reference the previous submission date and time.

v. *Missed Deadlines:*

- A. **Applications received after the due date and time will not be considered for review or funding.** All applicants/applications determined to be non-compliant, ineligible or otherwise determined to be disqualified from consideration will be separately notified in writing, by email, upon determination. This email will be sent to the email address provided in the Uniform Grant Application (UGA) and will identify the reason for disqualification.
- B. For your records, please keep a copy of your submission with the date and time the application was submitted along with the email address to which it was sent. The deadline will be strictly enforced.
- C. **IMPORTANT:** It is strongly recommended that the applicant not wait until the last minute to submit an application in case they experience technical difficulties with the submission process. Applicants should keep copies of all documentation that that may prove their application was submitted to the correct location and that it was received by IDHS on or before the deadline. Applicants should also maintain all electronic documentation, including screen shots, email correspondence, help desk ticket numbers, etc. that would document any unforeseen difficulties the applicant may have encountered regarding the timely submission of the application. Submission of electronic documentation of unforeseen difficulties does not guarantee that the application will be reviewed. DHS will not be responsible for issues arising from the applicant organization. For example: firewalls, system outages, software issues, email issues, etc. that may have impeded the applicant from submitting a timely application.

vi. *Intergovernmental Review.*

- A. This funding opportunity is NOT subject to Executive Order 12372, "Intergovernmental Review of Federal Programs"

vii. *Application Review Information.*

i. *Eligibility Review*

- A. Applications that are received will be reviewed between October 13, 2026, and November 13, 2026, to ensure they meet the criteria for consideration. Applications that do not meet the criteria in paragraph B below will be rejected and will not enter the Merit Review process.
- B. The following are the criteria that must be met for eligibility:
 - 1. Applicant has a current registration with the State of Illinois in the [Illinois GATA Grantee Portal](#).
 - 2. Applicant has an active Sam.gov public account.

3. Applicant has an active Unique Entity Identifier (UEI) with Sam.gov
4. Applicant is in "good standing" with the Secretary of State.
5. Applicant is not on the DHS Stop Payment List Service or the Illinois Stop Payment List.
6. Applicant is not on the [Sam.gov](https://www.sam.gov) Exclusion List.
7. Applicant is not on the Illinois Medicaid Sanctions (DHFS Provider Sanctions) List.
8. **Program specific eligibility includes:**

Applicants must be prepared to provide, upon specific request, additional supporting documentation and participate in a virtual site visit as part of the merit-based review and decision-making process for the mandatory requirements listed below.

- a. Eligible Applicants are limited to those public and private nonprofit community-based organizations subject to 26 U.S.C. 501(c)(3) or 501(c)(4) of the tax code (26 U.S.C. 501(c)(3) or 26 U.S.C. 501(c)(4)) that propose to provide services in a RPSA eligible area. Eligible areas include: South Shore (Chicago); Rockford and Danville (Greater Illinois). Applicants will be asked to verify their eligibility by providing a current Federal Form W9 and a copy of their IRS Determination Letter as **Attachment E1**.

Eligible applicants **exclude** currently funded grantees or sub-grantees under IDHS Violence Prevention NOFO 25-444-80-3422 funded to provide services in the eligible RPSA service area for which their application is intended to serve.

- b. The applicant must have at least three years of verifiable proof of their Violence Prevention work. This must be documented through a signed attestation letter from the applicant's Board President or Board Chair, on organizational letterhead, certifying that the organization has at least three (3) years of experience delivering Violence Prevention services, including the three required service components outlined in **Section 3.F.2** with approximate dates of service and a brief description. including approximate dates of service. Please provide verification of Violence Prevention Work as **Attachment E2**.

- c. Have genuine and trusted relationships with community residents, stakeholders, and law enforcement entities in high-risk areas. This must be documented through at least two (2) letters of support, on letterhead, attesting to the length and quality of the relationship with examples Please provide verification of trusted relationships as **Attachment E3**. A minimum of 2 letters, as described herein, are required for the applicant to be eligible, however, additional letters are recommended as all trusted relationship letters will also be scored as part of **Section 4.i.A.3 Program**

Narrative: Capacity. Letters must come from two different categories below:

1. Community-based, faith-based, or resident-led organizations operating in the service area
2. Local stakeholders (e.g., schools, housing authorities, hospitals, workforce partners, or similar institutions)
3. Law enforcement or justice system entities (e.g., district leadership, probation/parole, or equivalent)

- C. Restrictions on eligibility for State awards are referenced in 44 Ill Admin Code 7000.70. Program specific eligibility restrictions are referenced in this Notice of Funding Opportunity.

- D. All applicants/applications determined to be non-compliant, ineligible or otherwise determined to be disqualified from consideration will be notified. This email will be sent to the email addresses provided in the application and will identify the reason for disqualification.

ii. Merit Review Process

A. Review Criteria

1. Evaluation criteria is based upon requirements set forth in 44 Ill Admin Code 7000.350 Merit Review of Applications and the IDHS Merit Review Manual. The review criteria and sub-criteria include the following categories including associated attachments:
 - a. Executive Summary
 - b. Capacity – Agency Qualifications/Organizational Capacity
 - c. Need – Description of Need
 - d. Quality – Description of Program Design and Services
 - e. Budget/Budget Narrative
2. Criteria and Weighting of each criterion
 - a. Applications will be evaluated based on applicant's response to the program narrative described in **Section 4.i.3 Program Narrative and Contents**. Each section will be weighted as described below.
 - b. Scoring for applications are based on a 100-point scale. The Application and Narrative, including associated Attachments, will be evaluated on the following criteria and weights:
 - i. Executive Summary: 5 points
 - ii. Capacity – Agency Qualifications/Organizational Capacity: 40 points
 - iii. Need – Description of Need: 5 points
 - iv. Quality – Description of Program Design and Services: 45 points
 - v. *Budget / Budget Narrative: 5 Points

* IMPORTANT: Please be sure the budget status in CSA says **"GATA Budget signed and submitted to program review."** This status will appear after the budget is electronically signed by the agency CEO or CFO and submitted to IDHS. If the Uniform Grant Budget is not in this status by the application due date and time, **points may be deducted** for the Budget Narrative section of the application.

B. Additional Information

1. The numerical score may not be the sole award criterion. The Department reserves the right to consider other factors such as geographical distribution, demonstrated need, service capacity, cost effectiveness, demonstrated local community presence, agency past performance as a state grantee, service area, etc., and other items identified in Funding Priorities in **Section 3.i.D**.
2. While the recommendation of the review panel will be a key factor in the funding decision the Department maintains final authority over funding decisions and considers the findings of the reviewers to be non-binding recommendations. Any internal documentation used in scoring or awarding of grants shall not be considered public information.
3. The Department reserves the right to negotiate with successful applicants to adjust award amounts, targets, deliverables, service areas etc.

4. Applicant Site Visits. Prior to making final funding decisions, the Office of Firearm Violence Prevention (OFVP) will conduct eligibility verification which may include virtual site visits with the highest-scoring applicants. The purpose of these visits is to verify compliance with the Additional Mandatory Eligibility Requirements outlined in NOFO **Section 2: Eligibility; 2.i.3** and summarized below.
5. In the event of a tie with insufficient funding for all tied applications, the Department may choose to elect one or more of the following options:
 - i. Apply one or more of the additional factors for consideration described above to prioritize the applications; or
 - ii. Partially fund each of the tied applications; or
 - iii. Not fund any of the tied applications. The Department reserves the right to negotiate with successful applicants to adjust award amounts, targets, deliverables, etc.

iii. **Review and Selection Process.**

- A. The process for evaluation of the application is as follows:
 1. The Merit Based Review will be conducted by a review team comprised of three or more internal and/or external reviewers. Internal reviewers are individuals employed by IDHS, contractual staff or individuals working as interns from an Illinois academic institution. External reviewers are those individuals not employed by IDHS who have volunteered to review applications, have subject matter expertise and/or grant reviewing experience and have been screened for any potential conflict of interest with their assigned applications.
 2. The review teams will be provided with a Merit Based Review Committee Member Orientation Session.
 3. After the orientation session, applications will be reviewed and scored individually. The Review Team scores will be compiled and averaged on a Merit Based Review Summary Score Sheet.
 4. The Bureau of Violence Prevention Services (BVPS) or designee will initiate Post-Merit Based Review Quality Assurance Process which must include the following:
 - a. Initial review of the summary score sheet to identify scoring discrepancies
 - b. Address and resolve scoring discrepancies during the Post-Merit Based Review Evaluation Committee Meeting (see **Item v** below.)
 - c. Determine whether reviewers properly applied Merit Based Review steps as instructed
 - d. Identify any obvious infractions of committee members' independence in the review process.
 - e. Assess whether reviewers properly completed all section of the MBR Scoring Sheet. Reviewer score sheets may be returned to the reviewer to improve legibility and completeness of comments
 - f. Determine whether all facets of the review and scoring process were adhered to and consistently applied by reviewers.
 - i. If these steps reveal that there was the possibility of impropriety on the part of any reviewer, upon written request and with the approval of the Associate Director, the Department reserves the right to remove from consideration the reviewer scores

- and comments from consideration. This action must be documented in writing and must include the reason for removal
- ii. If the removal of a reviewer scores and comments results in fewer than 3 reviewers scoring the application, the Department will assign an alternate reviewer to the application. This reviewer will be afforded all the same guidance, instruction and time to complete the review task. Once completed, the process will resume as required.
5. A post-merit-based review committee meeting is required for all competitive merit-based reviews and will be facilitated by a designee of BVPS. The following apply:
 - a. Each review team assigned application will be discussed by team members, including application highlights, concerns, application mandates/requirements etc.
 - b. Scoring disparities will be addressed and resolved. For each application, if a significant disparity exists between reviewer scores (based on a set formula), review team members will collectively review the application and discuss comments to ensure team members have not missed items within the application that other team members may have identified. Application highlights and concerns will also be discussed.
 - c. Individual scores must be revised if a reviewer acknowledges missed information in the application.
 - d. Scoring revisions resulting from discussions must be documented on the respective scoring sheet with written commentary to support the revision.
 6. The BVPS designee will prepare funding recommendations for the Associate Director for the Office of Community & Positive Youth Development (OCPYD). The Associate Director, in consultation with the Assistant Secretary of OFVP may include consideration of other factors such as geographical distribution, demonstrated need, demonstrated community presence, agency past performance as a state grantee, service area, etc., and other items identified under Funding Priorities in **Section 3: Program Description; 3.i.D.**
 7. The funding recommendations document will be drafted inclusive of any other factors that may have been considered as described in 6. Above.
 8. Eligibility Verification Site Visits. Prior to making final funding decisions, OFVP will conduct eligibility verification which may include virtual site visits with the highest-scoring applicants recommended for funding. The purpose of these visits is to verify compliance with the Additional Mandatory Eligibility Requirements outlined in NOFO **Section 2: Eligibility; 2.i.B.**

These visits are limited to eligibility verification and do not involve rescoring or reevaluation of program merit.

- a. Step 1: Identification of Applicants for Eligibility Verification
 - i. Upon completion of the merit-based review process, Top-scoring applicants recommended for funding will be identified for eligibility verification. Virtual Site visits will be conducted sequentially, beginning with the highest-scoring recommended applicant and continuing until OFVP funding objectives are met or available funding is exhausted.
- b. Step 2: Review Team Composition and Preparation

- i. All reviewers will receive guidance on eligibility standards, documentation requirements, and equity-informed review principles to promote consistency and reduce implicit bias across applicants.
 - ii. Each eligibility verification visit will be conducted by a three-person review team consisting of:
 - 1. One (1) designated OFVP staff member serving as Team Lead; and
 - 2. Two additional reviewers drawn from OFVP and/or the Bureau of Violence Prevention Services (BVPS).
- c. Step 3: Notification, Scheduling, and Pre-Visit Guidance
 - i. Identified applicants will receive a written notification via email from dhs.violencepreventionservices@illinois.gov requesting the scheduling of an eligibility verification virtual site visit.
 - ii. The email will be sent to the Agency Authorized Representative listed in the Uniform Grant Application (UGA).
 - iii. Applicants will be asked to submit documentation at least one business day (24 hours) in advance of the scheduled visit to support an efficient and focused review.
 - iv. Applicants must respond to the initial scheduling request within three (3) business days (72 hours). Failure to respond within this timeframe may result in removal from funding consideration.
- d. Step 4: Advance Documentation Review
 - i. This step is intended to reduce burden on applicants and promote procedural efficiency. Prior to the virtual site visit, the review team will examine all materials submitted in advance to:
 - 1. Confirm preliminary alignment with mandatory requirements;
 - 2. Identify areas requiring clarification; and
 - 3. Ensure the virtual site visit is focused on verification rather than document discovery.
- e. Step 5: Eligibility Verification Virtual Site Visit
 - i. During the site visit the review team will:
 - ii. Review each of the four Additional Mandatory Requirements with applicant leadership and relevant staff;
 - iii. Assess whether sufficient, credible evidence exists to verify eligibility in each area; and
 - iv. Allow applicants to provide additional documentation or clarification when questions arise during the visit. Additional documentation will only be considered if provided during the site visit.
- f. Step 6: Eligibility Determination
 - i. An applicant will be determined ineligible for funding if:
 - 1. The review team concludes there is insufficient evidence to verify compliance with one or more Additional Mandatory Requirements after any applicable cure period; or

2. The review team determines that a material misrepresentation regarding eligibility has occurred.
 3. Unintentional errors will result in ineligibility only if the misrepresentation is material and outcome-determinative.
 - g. Step 7: Documentation and Notification
 - i. Each review team member will document findings in writing. If an applicant is determined ineligible:
 1. The Team Lead will conduct an internal consistency check to ensure eligibility determinations are applied uniformly across applicants.
 2. Written notice will be provided to the applicant; and
 3. The notice will include a clear, specific explanation of the basis for the determination.
 4. All records will be retained in the NOFO file in accordance with applicable requirements.
 9. The funding recommendations will be adjusted as necessary to incorporate the results of the Eligibility Verification virtual site visit results.
 10. The recommendations will be presented by the OCPYD Associate Director to the Director of the Division of Family and Community Services, or designee for approval.
 11. Upon approval from the Director, Final recommendations will be presented to the Assistant Secretary for the Office of Firearm Violence Prevention for consideration and final award determination. In making a final funding determination, the Assistant Secretary may include consideration of additional factors such as geographical distribution, demonstrated need, demonstrated community presence, agency past performance as a state grantee, etc.
- B. Anticipated Announcement and State Award Dates:
1. Anticipated Announcement: January 2027.
 2. State Award Dates: January 1, 2027-December 31, 2027
- C. Merit Based Review Appeal Process
1. Competitive grant appeals are limited to the evaluation process. Evaluation scores may not be protested. Only the evaluation process is subject to appeal and shall be reviewed by IDHS' Appeal Review Officer (ARO).
 - a. Submission of Appeal
 - i. Appeals submission IDHS contact information:
 1. Contact Name: Reshma Desai
 2. Email address: dhs.violencepreventionservices@illinois.gov
 3. Email Subject Line: NOFO #3781 Appeal
 - ii. An appeal must be submitted in writing to appeals submission IDHS contact listed above, who will send to the IDHS Appeal Review Officer (ARO) for consideration.
 - iii. An appeal must be received within 14 calendar days after the date that the grant award notice has been published.

- iv. The written appeal shall include at a minimum the following:
 - 1. Name and address of the appealing party
 - 2. Identification of the grant; and
 - 3. Statement of the reasons for the appeal
 - 4. Supporting documentation, if applicable
- b. Response to appeal
 - i. IDHS will acknowledge receipt of an appeal within 14 calendar days from the date the appeal was received.
 - ii. IDHS will respond to the appeal within 60 days or supply a written explanation to the appealing party as to why additional time is required.
 - iii. The appealing party must supply any additional information requested by IDHS within the time period set in the request
- c. Resolution
 - i. The ARO will make a recommendation to the Agency Head or designee as expeditiously as possible after receiving all relevant, requested information.
 - ii. In determining the appropriate recommendation, the ARO shall consider the integrity of the competitive grant process and the impact of the recommendation on the State Agency.
 - iii. The Agency will resolve the appeal by means of written determination.
 - iv. The determination shall include, but not be limited to:
 - 1. Review of the appeal;
 - 2. Appeal determination; and
 - 3. Rationale for the determination.

iv. Risk Review

A. Requirements:

- 1. IDHS conducts risk assessments for all awardees, prior to the award being issued.
 - a. An agency wide Internal Control Questionnaire (ICQ) to be completed by the awardee within the [Illinois GATA Grantee Portal](#). The ICQ evaluates fiscal, administrative, and programmatic risk in the following categories:
 - i. Quality of Management Systems
 - ii. Financial and Programmatic Reporting
 - iii. Ability to Effectively Implement Award Requirements
 - iv. Awardee Audits
 - b. A program specific Programmatic Risk Assessment conducted by the awarding agency to evaluate the following categories:
 - i. Programmatic financial stability
 - ii. Management systems and standards that would affect the program.
 - iii. Programmatic audit and monitoring findings
 - iv. Ability to effectively implement program requirements.
 - v. External partnerships

- vi. Programmatic reporting
- c. Risk assessments are not intended to be punitive in nature, rather they are conducted in order to evaluate the support, technical assistance, and training that may be needed for the awardee and the level of monitoring that is needed for the award.
- d. Risk assessments may result in Specific Conditions being placed on the award to include more frequent monitoring or the implementation of a corrective action plan.
- 2. Simplified Acquisition Threshold - Federal and State awards
 - a. It is anticipated that grants under this award may be over the Simplified Acquisition Threshold defined in 48 CFR part2, subpart 2.1.
 - b. Potential grantees under this funding announcement may receive an award in excess of the simplified acquisition threshold. Therefore, the grantee is subject to the simplified acquisition threshold and related requirements.
 - i. Prior to making an award with a total amount greater than the simplified acquisition threshold, IDHS is required to review and consider any information about the applicant that is in the designated integrity and performance system accessible through SAM. (Currently FAPIIS) (See 41 U.S.C. 2313)
 - ii. That an applicant, at its option, may review information in the designated integrity and performance systems accessible through SAM and comment on any information about itself that a State or Federal awarding agency previously entered and is currently in the designated integrity and performance system accessible through Sam.
 - iii. IDHS will consider any comments by the applicant, in addition to the other information in the designated integrity and performance system, in making a judgment about the applicants' integrity, business ethics, and record of performance under State and Federal awards when completing the review of risk posed by applicants as described in 2 CFR 200.206

7. Award Notices

- i. This section addresses what a successful applicant can expect to receive following selection.
 - A. State Award Notices
 - 1. Applicants recommended for funding under this NOFO following the review and selection process will receive a Notice of State Award (NOSA). The NOSA shall include:
 - a. Grant award amount
 - b. The terms and conditions of the award
 - c. Specific conditions, if any, assigned to the applicant based on the fiscal and administrative risk assessment (ICQ), programmatic risk assessments (PRA), and the Merit Review.
 - 2. The applicant shall receive the NOSA through the [Illinois GATA Grantee Portal](#). The NOSA must be signed by the grants officer (or equivalent). This signature effectively accepts the state award amount and all conditions set forth within the notice. The signed NOSA is the document authorizing the department to proceed with issuing an agreement. The Agency signed NOSA must be remitted to the Department as instructed in the notice.

3. The notice is not an authorization to begin performance (to the extent that it allows charging to State awards of pre-award costs; pre-award costs are incurred at the non-State entities own risk unless they have received written prior approval to begin performance).
4. The authorizing document to begin performance is the fully executed Uniform Grant Agreement (UGA) signed by the grants officer, or equivalent. This is the official document that obligates funds. The UGA is sent to the non-State entity via the CSA system. The non-State entity will print and sign the signature page of the UGA and return signature page to DHS.OCA.SignaturePages@illinois.gov. A final signed copy of the UGA will be provided to the non-State entity via an upload into the CSA Tracking system. Note: The Department cannot issue an Agreement until the successful applicant has an approved budget entered into the CSA system.
5. Applicants who are not eligible due to registration or pre-qualification issues, or late applications, are determined ineligible, other eligibility criteria, will receive a Notice of Ineligibility prior to the completion of the Merit-Based Review.
6. Applicants who are not selected to receive an award following the Merit Review process will receive a Notice of Denial/Non-Selection.

8. Post-Award Requirements and Administration

i. Administrative and National Policy Requirements

- A. The agency awarded funds shall provide services as set forth in the IDHS grant agreement and shall act in accordance with all State and Federal statutes and administrative rules applicable to the provision of the services.
- B. Link to view a Sample of an [IDHS Uniform Grant Agreement.pdf](#)
- C. Payment Terms:
 1. It is the policy of the Illinois Department of Human Services (IDHS) that this policy complies with 2 CFR 200.302, 2 CFR 200.305, 31 CFR 205 (Procedures implementing the Cash Management Improvement Act and Treasury State Agreement (TSA)) and 44 Ill. Admin. Code 7000.120 GOMB Adoption of Supplemental Rules for Grant Payment Methods. Three different award payment methods exist, namely Advance Payment, Reimbursement, and Working Capital Advance.

ii. Post Award Requirements of Applicant

- A. Applicants agree to provide **program services** as described throughout this Funding Notice and in accordance with applicable Statutes, Rules.
- B. The provider must be in a position to begin providing full services 30 days after contract start date.
- C. **Technology:** Agencies awarded funds through this funding notice must have a computer that meets the following minimum specifications for the purpose of utilizing any required DHS web-based reporting system and the receipt/submission of electronic program and fiscal information:
 1. Internet access, preferably high-speed
 2. Email capability
 3. Microsoft Excel
 4. Microsoft Word

5. Adobe Reader

- D. **Collaboration with local Family and Community Resource Centers (FCRCs):** Providers will maintain a collaborative working relationship with the local IDHS FCRCs. This will include outreach to FCRCs to develop awareness of this program, recruit potential participants, and participating in local FCRCs' service provider meetings as requested.
- E. **Program Evaluation Reporting Requirements:** Providers will be required to participate in evaluation efforts as directed by the Department and/or its subrecipient(s) and collect and report data accordingly. This also includes full participation in all information and data requests pursuant to the independent evaluation of the GASC being conducted by the Center for Neighborhood Engaged Research & Science (CORNERS) at Northwestern University and the broader data sharing in alignment with external partners through the Scaling Community Violence Intervention for a Safer Community (SC2). Data will be submitted in the format prescribed by the Department. Providers will be required to document program services to each client. Providers will be required to report quarterly regarding program performance measures and outcomes. Providers will be required to participate in Department-directed Performance and Standards Assessment reviews. A year-end program and performance measures and outcomes report will also be required. Additional data and information may be requested throughout the year as determined by the Department.
- F. **Training and Technical Assistance:** Programs must agree to receive consultation and technical assistance from authorized representatives of the Department. The program and collaborating partners will be required to be in attendance at site visits. Programs will be required to attend regular meetings and training as provided by the Department or a subcontractor of the Department. Programs should budget accordingly (at least quarterly).
- G. **Site Visits:** The Applicant agrees to participate in site visits as requested by the Department and agrees that program and collaborating partners will attend such site visits if requested.
- H. **Presentations:** The Applicant will be available as requested by the Department to present information regarding service deliverables, provide data updates, or to answer questions arising from the Applicant's work.
- I. **COVID Policies and Procedures:** Provider organizations shall have written COVID policies and procedures that align with current guidelines put forth by the local Health Department, the Illinois Department of Public Health and/or the Center for Disease Control.
- J. **Sectarian Issue:** Provider organizations may not expend federal or state funds for sectarian instruction, worship, prayer or to proselytize. If the Provider organization is a faith-based or a religious organization that offers such activities, these activities shall be voluntary for the individuals receiving services and offered separately from the program.
- K. **Background Checks:** Background checks are required for **all program staff and volunteers** who have the potential for contact with youth under 18. These background checks must be completed in advance of individuals working directly with youth. Such individuals will authorize such checks in writing and submit to fingerprinting when required. The agency shall retain the signed form authorizing the background check. All background check information, including the signed authorizing forms shall be maintained separately in a confidential file, apart from the employee's personnel

records. Funded programs will be required to have a written protocol in place detailing the requirement for background checks; evidence of their completion; the protocol for reviewing and making determinations regarding results; etc. In no case shall a Person who has been indicated as the perpetrator of any of the child abuse/neglect allegations identified in 89 Ill. Adm. Code Section 385.50(a) be deemed fit for service that allows access to children.

- L. **Child Abuse/Neglect Reporting Mandate:** Per the Abused and Neglected Child Reporting Act (ANCRA, 325 ILCS 5/4), mandated reporters are professionals who may work with children in the course of their professional duties. Mandated reporters are required to report suspected child maltreatment immediately when they have “reasonable cause to believe that a child known to them in their professional or official capacity may be an abused or neglected child” (ANCRA Sec.4). This is done by calling the Illinois Department of Children and Family Services (DCFS) Hotline at 1-800-252-2873 or 1-800-25ABUSE. Programs funded through this grant opportunity must review ANCRA and, where appropriate, have a written protocol for identifying and reporting suspected child maltreatment.
- M. **Hiring and Employment Policy:** It is the policy of the Department to encourage cultural diversity in the work environment and to promote employment opportunities through its programs. The Department philosophy is that the program workforce should appropriately reflect the populations to be served, with special attention given to hiring individuals indigenous to those communities. Consistent with Department policy, whenever a position becomes available, funded programs are encouraged to consider TANF clients for employment, contingent upon their qualifications in the areas of education and work experience.
- N. **State and Federal Laws and Regulations:** The agency awarded funds through this NOFO must agree to comply with all applicable provisions of state and federal laws and regulations pertaining to nondiscrimination, sexual harassment and equal employment opportunity including, but not limited to: The Illinois Human Rights Act (775 ILCS 5/1-101 et seq.), The Public Works Employment Discrimination Act (775 ILCS 10/1 et seq.), The United States Civil Rights Act of 1964 (as amended) (42 USC 2000a-and 2000H-6), Section 504 of the Rehabilitation Act of 1973 (29 USC 794), The Americans with Disabilities Act of 1990 (42 USC 12101 et seq.), and The Age Discrimination Act (42 USC 6101 et seq.).
- O. **Publication of Studies, Reports, or other Program Products:** The applicant agrees that products produced for the Department under this award, including, but not limited to research reports, data, analyses, and policy recommendations are the property of the Department and will not be published or distributed except as prescribed by the Department.
- P. The applicant agrees not to publish, release, or otherwise disseminate data in any form without the prior written permission of the Department. If such permission is granted, the applicant agrees to submit to the Department six copies of all reports and proposed publications resulting from this Agreement a minimum of 30 calendar days prior to public release. Any publications (written, visual or sound), excluding press releases, newsletters and issue analyses, shall contain the following statement: "This project [is being] [was] supported, under grant(s) from the State of Illinois, Department of Human Services. Points of view or opinions in the document are those of the author and do not necessarily represent the official position or policies of the Illinois Department of Human Services.

- A. Reporting upon execution of the grant agreement shall be in accordance with the requirements set forth in the UGA and related exhibits which include but is not limited to the following:
1. Periodic Financial Reports
 - a. The monthly expenditure reports must be submitted by email no later than the 15th of each month for the preceding month.
 - b. The quarterly Periodic Financial Report must be submitted by email no later than the 15th of the month following the end of the quarter: Quarter 1 (Jan 1 – March 30) is due April 15th; Quarter 2 (April 1 – June 30) is due July 15th; Quarter 3 (July 1 – Sept 31) is due Oct 15th and Quarter 4 October 1 – December 31) is due July 15th.
 2. Periodic Programmatic Reports
 - a. The Quarterly Periodic Performance Reports must be submitted by email no later than the 15th of the month following the end of the quarter; Quarter 1 (Jan 1 – March 30) is due April 15th; Quarter 2 (April 1 – June 30) is due July 15th; Quarter 3 (July 1 – Sept 31) is due Oct 15th and Quarter 4 October 1 – December 31) is due July 15th.
 3. Close-out Performance Reports and Financial Reports as instructed in the UGA
 4. Other Unique Programmatic Reporting Requirements:
 - a. Program Evaluation Reporting Requirements: Providers will be required to participate in evaluation efforts as directed by the Department and/or its subcontractor(s) and collect and report data accordingly.
 - b. Providers will be required to participate in Program Compliance and Performance Assessment reviews. Additional data and information may be requested throughout the year as determined by the Department.
 - c. Additional annual performance data may be collected as directed by the Department and in the format prescribed by the Department.
 5. If the State share of any State award may include more than \$500,000 over the period of performance applicants are also subject to the reporting requirements reflected in Appendix XII to 2 CFR 200. Noncompliance with any of the identified reports may lead to being placed on the Illinois Stop-Payment List.
 - a. Annual Audit in conformance with Audit Requirements set forth in the grant agreement.
 - b. Non-compliance with any of the above reporting requirements, including timeliness of reports may lead to being placed on the Illinois Stop Payment List.

9. - Other Information- Optional

i. **Additional Information**

- A. Mandatory Forms and Submission
1. Uniform Application for State Grant Assistance
 2. Proposal Narrative
 3. [Uniform Grant Budget in CSA](#)
 4. [Grantee Conflict of Interest Disclosure](#)

RPSA Emergency Victims Flex Fund Policy (Revised)

Purpose:

The RPSA Emergency Victims Flex Fund is created to provide immediate, flexible, and equitable financial support to victims of gun violence and their families, prioritizing underserved and disenfranchised RPSA communities. By addressing urgent, unmet needs and filling critical service gaps, this fund enhances the collective impact of statewide victim assistance efforts, ensuring comprehensive and equitable support for victims and families affected by gun violence. The fund goal is to complement and augment existing victim services and supports provided by other state and local agencies.

Objective:

This policy aims to enhance current emergency assistance frameworks to:

1. Prioritize Financial Equity by addressing systemic barriers faced by underserved RPSA communities disproportionately impacted by gun violence.
2. Streamline Access to emergency financial assistance while maintaining compliance with Illinois state and federal regulations.
3. Ensure Accountability through transparent and equitable fund distribution aligned with best practices in fiscal management.
4. Create coordination between victim service funds to ensure maximum supports to victims and non-duplicated resources across systems.

Policy Enhancements

1. **Equity-Focused Assistance:** The Emergency Victims Flex Fund will prioritize victims and immediate family members facing economic disenfranchisement. Assistance will target individuals with limited access to traditional financial resources in RPSA communities heavily impacted by gun violence.
2. **Centralized Management:** The Emergency Victims Flex Fund will be managed by a lead Convener flex fund manager for designated RPSA service areas. The fund allows RPSA Violence Prevention Service (VPS) providers to assist the victim in applying for emergency assistance. These funds are for victims who are enrolled and actively engaged in services. Flex Fund managers may use the sample application template provided. If Flex Fund manager wishes to use a different application form, it must be submitted to the Bureau of Violence Prevention, FCS for approval.
3. **Rapid Decision Making:** Convener flex fund managers are expected to make decisions within 72 hours of receipt of complete application and provide assistance as soon as possible thereafter.
4. **Eligibility Verification:** Emergency Victim Client Assistance is available to victims of gun violence and their immediate family members (as defined below) whose basic needs were directly impacted by the victimization. All individuals must be enrolled and actively engaged with RPSA Violence Prevention Services grant program to be eligible.

Violence Prevention Services grantees will, where possible, provide case management services to ensure participants are enrolled in eligible health insurance, other supports and referrals for services, such as legal services, if not provided within the agency.

a. Eligibility Verification Criteria

To ensure the Emergency Victims Flex Fund is allocated appropriately and responsibly, eligibility must be established through documentation that confirms the individual is a direct victim or immediate family member (as defined below) of a victim of gun violence by a violence prevention services provider victim's advocate. Acceptable forms of verification include:

Required Official Documentation

- i. Confirmation victim is enrolled in VPS services.
- ii. At least one of the following:
 - a. Police report clearly identifying the individual as a victim of a firearm-related incident.
 - b. A hospital discharge summary or emergency room record indicating treatment for a gunshot wound or firearm-related injury.
 - c. Written confirmation from a government agency (e.g., victim assistance office, state's attorney's office) verifying the individual's status as a gun violence victim.

b. Flex Fund Process.

The Flex Fund Manager and Violence Prevention Services grantees work in collaboration to support the victim(s). Below is an outline of how the process should be implemented.

- i. Incident
- ii. VPS grantee helps victims collect documentation and submit completed flex fund application with necessary supporting documentation to Flex Fund Manager. This includes a release of information from victim allowing VPS grantee to share victim's information with Flex Fund Manager
- iii. Flex Fund Manager Approves, Denies, or requests additional documentation.
- iv. Flex Fund Manager communicates with the VPS grantee and victim(s) to provide funds.
- v. Flex Fund Manager collects and maintains back up documentation and provides report to Convener for that area.

5. Scope of Assistance

The Emergency Victims Flex Fund is intended to provide short-term, needs-based financial assistance that directly supports the immediate health, safety, and stabilization of individuals and families impacted by firearm violence. All expenditures must be documented, reasonable, and necessary for recovery. The following categories of support are allowable:

a. Housing Stability Assistance

- i. **Emergency Shelter:** hotel/motel stays.

- ii. **Emergency Relocation:** Covers reasonable costs associated with urgent relocation due to safety threats stemming from the firearm incident (e.g., moving expenses, short-term rental costs).
 - iii. **Rental Assistance:** Provides rental payments for victims facing housing insecurity directly linked to their victimization.
- b. Medical and Behavioral Health Support**
- i. **Medical Care:** Covers out-of-pocket expenses for urgent, uninsured medical care directly resulting from the firearm injury (e.g., wound care, follow-up appointments), and co-pays for insured healthcare.
 - ii. **Behavioral Health Services:** Includes short-term uninsured counseling or mental health services necessary for the victim or their immediate family's recovery. Services must be provided by licensed professionals.
- c. Essential Needs Support**
- i. **Basic Necessities:** May include food, medication, hygiene supplies, transportation (e.g., bus passes, ride-share credits), and childcare expenses.
 - ii. **Community Investment:** Whenever possible, purchases should be made through local vendors and small businesses to support economic recovery in impacted neighborhoods.
- d. Prohibited or Restricted Uses**
- i. **Gift Cards:** Gift cards are not recommended due to accountability concerns. If used, agencies must have documented internal controls, including:
 - Gift cards may only be used for basic needs (e.g., food, hygiene) and must follow strict internal controls:
 - A written policy and procedure governing gift card issuance, tracking, and reconciliation
 - A signed distribution log including client name, date, purpose, and gift card number
 - Documentation (e.g., receipts or signed attestation) showing how the funds were used
 - Two levels of staff review and approval before distribution
- All assistance must be provided in accordance with the agency's policies and state and federal regulations governing the use of public funds. Agencies are responsible for ensuring fiscal oversight, equity in distribution, and maintaining documentation for audit purposes.

6. Funding Limits (Category Maximums)

To support consistent, equitable, and trauma-informed allocation of emergency victim support, the total assistance available per individual or eligible household is capped at \$5,000.

Funds may be used across the following maximum category limits, with the understanding that not all categories will apply to every individual, and some may require exceptions based on compelling safety or stabilization needs.

a. Housing and Relocation Support

- i. Emergency hotel shelter (short-term): up to \$3000
- ii. Rental assistance (e.g., first month's rent, arrears): up to \$5,000
- iii. Relocation/moving expenses up to \$5,000

b. Medical and Behavioral Health Care

- i. Medical care or hospital costs, not covered by insurance, related to firearm injury: up to \$2000
- ii. Mental health counseling not covered by insurance (licensed providers only): up to \$2000

c. Essential Needs and Daily Living

- i. Groceries and basic hygiene items: up to \$2000
- ii. Emergency transportation or vehicle repair (incident-related): up to \$2500
- iii. Childcare: up to \$2000

d. Document Replacement and Other Emergency Supports

- i. Government-issued ID, death certificates, birth certificates, filing fees, etc.: up to \$1000
- ii. Clothing and personal items lost or damaged due to the incident: up to \$1500

Gift Cards (if used): included in applicable category caps.

7. Request for waiver

Managers may request from Bureau of Violence Prevention, FCS a waiver of category-specific caps (within the \$5,000 total) where the victim's safety, housing, or recovery necessitates more intensive support in one area. All such requests must be:

Documented in the case file

Approved by a program supervisor

Justified with a written explanation tied directly to the impact of the firearm violence incident.

- 8. Compliance with Federal and State Laws – Unallowable Costs:** Please refer to [2 CFR 200 – Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards, PART 200 Subpart E – Cost Principles](#) to determine the appropriateness of costs. In addition, and specific to this grant, the following costs will be unallowable **without specific prior written approval from IDHS:**

- a. Entertainment costs,
- b. Capital expenditures for general purpose equipment, including any vehicle regardless of cost, buildings, and land (2 CFR 200.439)

- c. Capital expenditures for improvements to land, buildings, or equipment which materially increase their value or useful life (2 CFR 200.439)
- d. Food, and other goods or services for personal use of the grantee's employees, contractors, or consultants (2 CFR 200.445)
- e. Deposits for items, services, or space
- f. Out of State Travel

In addition, Legal Fees are not allowed.

9. **Data Collection & Reporting:** Lead Convener flex fund managers will maintain detailed records of fund usage such as receipts and bank statements. Expenditures will be submitted monthly and quarterly through RPSA fiscal reporting to the Division of Family & Community Services, Bureau of Violence Prevention Services. Quarterly reports will track metrics such as number of clients, demographics, types of assistance provided with amount expended. An annual equity audit will assess the fund's impact on service provision disparities.
10. **Flex Fund Processing Fee and Check Issuance Policy:** To streamline administration, Flex Fund Managers may charge a flat \$100 processing fee for each check issued. This fee should be included within the total assistance amount but must not reduce the actual funds the client is approved to receive.
 - a. Flex Fund Managers must seek prior approval from Bureau of Violence Prevention Services, FCS if a single event requires the issuance of three (3) or more checks. For the purposes of this policy, one event is defined as a single incident or crisis – such as a shooting, violent encounter, or related emergency – that results in the need to support individuals or households connected to that incident.
 - b. Flex Fund Managers are encouraged to project processing no more than 100 checks per grant period. Should the need arise to process more than 100 checks, Managers must submit a written request to Bureau of Violence Prevention, FCS for approval and may reallocate funds as needed with Bureau consent.
11. **Definition of Immediate Family Members:**
 - a. **Spouse:** A person, legally married to the victim
 - b. **Domestic partner:** A person, in a legal domestic partnership with the victim.
 - c. **Children:** Biological, adopted, or stepchildren under the age of 18, or adult children who are financially dependent on the victim.
 - d. **Parents:** Biological, adoptive, or stepparents of the victim.
 - e. **Siblings:** Biological, adopted, or stepsiblings of the victim who reside in the same household.
 - f. **Siblings:** Biological, adopted, or stepsiblings of the victim who reside elsewhere who is economically dependent on victim's legal financial support
 - g. **Other Dependents:** Any individual for whom the victim is the primary caregiver and who resides in the same household.

Waiver Provision: Section 4(a.1) – RPSA VPS grantee Waiver

4(a.1) Waiver of RPSA Violence Prevention Services (VPS) grantee/RPSA Victim Advocate Requirement

In designated RPSA areas where there is **no RPSA-funded Violence Prevention Services (VPS) grantee and no RPSA Victim Advocate**, the Bureau of Violence Prevention Services may grant a **VPS Grantee Waiver**. This waiver permits non-RPSA community-based organizations (CBOs) or government agencies to serve as *provisional victim services verifiers* to assist eligible victims in documenting and submitting applications for Emergency Victims Flex Fund assistance.

Waiver Process Requirements:

1. Submission of Request:

- The Flex Fund Manager must submit a written request to the Bureau of Violence Prevention Services that includes:
 - The RPSA area without VPS grantees
 - The proposed alternate verifier agency (e.g., domestic violence agency, trauma recovery center, hospital-based program), and
 - Evidence that the proposed verifier has experience supporting victims of violence or trauma.

2. Bureau Review and Decision:

- The Bureau will review and respond within ten (10) business days.
- The Bureau may approve or reject the waiver on a number of issues including but not limited to qualifications, conflict of interest, or service readiness. The waiver can be granted for up to 12- **months**, not to exceed the current project period.
- The Flex Fund Manager may request to renew the waiver. The details of that renewal request should include, but is not limited to, a summary of the services provided.

3. Verifier Requirements:

- Use the existing Flex Fund application form.
- Verify victim status using accepted documentation (e.g., police report, hospital record, official government confirmation (i.e. State's Attorney)).
- Sign a **Data Use & Confidentiality Agreement** with the Flex Fund Manager.
- Provide trauma-informed referrals and resource navigation as appropriate.

A Flex Fund Manager serving areas without RPSA-funded VPS grantees should assess local capacity and submit a waiver request to:

IDHS Bureau of Violence Prevention Services

ATTN: _____

[Insert email address]

Subject: Geographic Services Waiver Request – [Region Name]

Created 1.15.24 This policy will undergo annual review for compliance with updated regulations and emerging legislation. Revised 4/25/2025 Revised 5/5/2025 Revised 6/4/2025. Revised 7/30/25.

Appendix B

RPSA Violence Prevention Services

Executive Summary

Organization Name	
FEIN	
Address (include RPSA Chicago or Greater Illinois Community Area, if applicable)	
Website	
Authorized Rep Name	
Authorized Rep Phone	
Authorized Rep Email	
Contact Person Name	
Contact Person Phone	
Contact Person Email	

Applicant Eligibility

Indicate the number of years of experience the applicant organization has providing services to high-risk individuals in the RPSA eligible service area for which this application is intended to serve.	
Did you provide, as Attachment E2 , documentation that verifies at least three years of verifiable proof of their Violence Prevention work. This must be documented through a signed attestation letter on organizational letterhead from the applicant's Board President or Board Chair, certifying that the organization has at least three (3) years of experience delivering Violence Prevention services including the three required service components outlined in Section 3.F.2 with approximate dates of service and a brief description. Please provide verification letter from the Board that attests to the Violence Prevention Work as Attachment E2 .	
Did you provide, As Attachment E3, documentation of genuine and trusted relationships with community residents, stakeholders, and law enforcement entities in the proposed high-risk area. This must be documented through at least two (2) letters of support, on letterhead, attesting to the length and quality of the relationship with examples. Please provide verification of trusted relationships as Attachment E3 . A minimum of 2 letters, as described herein, are required for the applicant to be eligible, however, additional letters are recommended as all trusted relationship letters will also be scored as part of Section 4.i.A.3 Program Narrative: Capacity.	

Funding Amount

Indicate the funding amount requested for FY 27 portion of grant term (1/1/27 – 6/30/27)	
Indicate the funding amount requested for FY 27 portion of the grant term (7/1/27 – 12/31/27).	
Indicate the total 12-month funding requested under this proposal (This will be the total of the FY27 and FY28 portions of the 12-month grant term).	
Are the applicant's budgets entered into CSA in the appropriate FY and submitted for program review? <i>(2 separate budgets must be entered)</i>	

Service Area

Indicate in which eligible service area for which this application is intended to serve. Applications to serve areas not identified as eligible under this NOFO in Section 2 will not be considered for funding. <i>Applications will only be considered for a single eligible service area.</i>	
Indicate the site location(s) where violence prevention services will be performed for this community; Indicate if the location is a sub-recipient location.	

Experience

Provide a brief description of the Violence Prevention Services your organization <i>has provided in the past or is currently providing</i> . Include outcomes/achievements of these services.

Identify other community organizations you have collaborated with in the service area for which you are applying. Include length of the collaboration, purpose and achievements

Program Description

Provide a brief overall description of the program and services your organization intends to provide under this award. Separate the description by program component (street/hospital outreach, victim services, case management) Include anticipated start dates and anticipated outcomes.

Program Categories (May be duplicated numbers)

Required Program Categories	Projected Number of Individuals to be served (These will likely include duplicated numbers as participants may receive services under each component.)	Will services be provided directly or through sub-grant?
Street/Hospital Outreach		
Case Management		
Victim Services		

Target Population (Unduplicated Numbers)

Indicate the total unduplicated number of individuals projected to be served by this program. (Use the tables below to break down the unduplicated number of individuals served by race, ethnicity and gender.)	
--	--

Race Category	Non-Hispanic / Latin-x	Hispanic / Latin-x	Total
Asian			
Black/African American			
White			
American Indian/Alaska Native			
Native Hawaiian/Other Pacific Islander			
Multi-Racial			
Totals			

Gender	Age 14-17	Age 18-24	Age 25-35	Age 36+	Total
Male					
Female					
Non-Binary					
Totals					

Assurances

Provide a clear statement that services will begin in year one within 30 days of contract start date.
Provide a program Implementation Timeline as **Attachment A6**.

Provide clear statement indicating agreement to include a position (or partial position) for each of the three required components and that the staffing will cover shooting responses 24/7. The applicant must provide a 24/7 staffing schedule as **Attachment A7**.

Provide a clear statement of commitment to operating with a racial equity lens when providing program services; support activities and when creating or updating policies.

The applicant must provide a clear statement indicating the understanding that only eligible individuals as outlined in **Section 3.i.F.1 Target Population** may be served under this grant.

Provide a statement indicating agreement to comply with organization's Training and Technical Assistance plan outlined in **Section 3.i.F.2.xiii Training and Technical Assistance**.

RPSA Violence Prevention Services
Appendix C
NOFO Checklist

I [] FY27 Uniform Application for State Grant Assistance

II Program Narrative

- ☐ Executive Summary (**available as an appendix**)
- ☐ Capacity - Agency Qualifications/Organizational Capacity
- ☐ Need - Description of Need
- ☐ Equity and Racial Justice
- ☐ Quality - Description of Program Design and Services
- ☐ Budget Narrative

III Attachments to Your Application

Administrative Attachments

- ☐ Attachment A1 NOFO Checklist
- ☐ Attachment A2 Program Contact Information (**available as an appendix**)
- ☐ Attachment A3 Organizational Chart
- ☐ Attachment A4 Current Board of Director's List
- ☐ Attachment A5 Job Description(s)/Resume(s)
- ☐ Attachment A6 Implementation Timeline
- ☐ Attachment A7 24/7 Schedule
- ☐ Attachment A8 Applicant FY27 6-month Uniform Grant Budget (**printed from CSA**)
- ☐ Attachment A8a Applicant FY28 6-month Uniform Grant Budget (**printed from CSA**)
- ☐ Attachment A9 Applicant NICRA (if applicable)
- ☐ Attachment A10 Applicant Federal [Form W-9 \(Rev. March 2024\) \(irs.gov\)](#)
- ☐ Attachment A11 [Grantee Conflict of Interest Disclosure](#)
- ☐ Attachment A12 Documentation that verifies/demonstrates that the applicant organization currently is a Level One Trauma Hospital, if applicable
- ☐ Attachment A13 Hospital Applicant Memorandum of Understanding with violence prevention organization, if applicable
- ☐ Attachment A14 Subrecipient Monitoring Policy, if applicable

Eligibility Attachments

- ☐ Attachment E1 IRS Determination Letter
- ☐ Attachment E2 3 yrs minimum experience Board attestation letter
- ☐ Attachment E3 At least 2 Trusted Relationship letters of support

If subrecipients will be used, include the following Attachments for each subrecipient)

- ☐ Attachment S1 Program Contact Information (**available as an appendix**)
- ☐ Attachment S2 Subrecipient Agreement (**This is an applicant-generated form**)
- ☐ Attachment S3 **Subrecipient 12-month Budget (Use the [IDHS: Uniform Grant Budget Template](#); do not enter subrecipient budget into CSA)**
- ☐ Attachment S4 Subrecipient Organization approved NICRA (if applicable)
- ☐ Attachment S5 Subrecipient Organization Federal [Form W-9 \(Rev. March 2024\) \(irs.gov\)](#)
- ☐ Attachment S6 Subrecipient [Grantee Conflict of Interest Disclosure](#)

IV Uniform Grant Budgets (Budget must be entered, signed, and submitted in CSA and is required for the application to be considered complete.)

☐ The FY27 6-month Budget is entered, signed and submitted in CSA

☐ The FY28 6-month Budget is entered, signed and submitted in CSA

V ☐ Prior to award, the FY 27 ICQ must be completed in the [Illinois GATA Grantee Portal](#)

Appendix D

Program Contact Information Form

Complete one copy for Applicant organization.

Organization Name	
FEIN	
Street Address	
City	
State	
Chicago Community Area/ GI Municipal Area	

Executive Director	
Street Address	
City	
State	
Phone	
Email	

Program Director	
Street Address	
City	
State	
Phone	
Email	

Fiscal Contact	
Street Address	
City	
State	
Phone	
Email	



UNIFORM APPLICATION FOR STATE GRANT ASSISTANCE

Agency Completed Section

1. Type of Submission: Pre-application ☐ Application ☒ Change/Corrected Application ☐
2. Type of Application: New ☒ Continuation (i.e. multiple year grant) ☐ Revision (modification to initial application) ☐
3. Completed by State Agency upon Receipt of Application

Date Received by State: _____ Time Received by State: _____

4. Name of the Awarding State Agency: Illinois Department of Human Services
5. Catalog of State Financial Assistance (CSFA) Number: 444-80-3422
6. CSFA Title: RPSA Violence Prevention Services Program

Catalog of Federal Domestic Assistance (CFDA)

☒ Not Applicable

7. CFDA Number: _____
8. CFDA Title: _____
9. CFDA Number: _____
10. CFDA Title: _____

Funding Opportunity Information

11. Funding Opportunity Number: 27-444-80-3422-02
12. Funding Opportunity Title: RPSA Violence Prevention Services Program
13. Funding Opportunity Program Field: _____

Funding Opportunity Information

☐ Not Applicable

14. Competition Identification Number: _____
15. Competition Identification Title: _____



UNIFORM APPLICATION FOR STATE GRANT ASSISTANCE

Applicant Completed Section

Applicant Information

16. Legal Name (Name used for SAM.gov account/Unique Entity Identifier (UEI) and grantee pre-qualification): _____

17. Common Name (Doing Business As-DBA): _____

18. Employer/Taxpayer Identification Number (EIN, TIN): _____

19. Organizational Unique Entity Identifier (assigned by SAM.gov): _____

20. Federal System for Award Management Commercial And Government Entity Code (SAM Cage Code): _____

21. Business Address:

Street: _____

City: _____ State: _____ County: _____ Zip+4: _____

Applicant's Organization Unit

22. Department Name: _____

23. Division Name: _____

Applicant's Name and Contact Information for Person to be Contacted for *Program* Matters involving this Application

24. First Name: _____ 25. Last Name: _____ 26. Suffix: _____

27. Title: _____

28. Organizational Affiliation: _____

29. Telephone Number: _____ 30. Fax Number: _____

31. E-mail Address: _____

Applicant's Name and Contact Information for Person to be Contacted for *Business/Administrative Office* Matters involving this Application

32. First Name: _____ 33. Last Name: _____ 34. Suffix: _____

35. Title: _____

36. Organizational Affiliation: _____

37. Telephone Number: _____ 38. Fax Number: _____

39. E-mail Address: _____

Areas Affected

40. Areas Affected by the Project (cities, counties, state-wide): _____

41. Legislative and Congressional Districts of Applicant: _____

42. Legislative and Congressional Districts of Program/Project: _____



UNIFORM APPLICATION FOR STATE GRANT ASSISTANCE

Applicant's Project

43. Description Title of Applicant's Project (Text only for the Title of the Applicant's Project):

44. Proposed Project Term:

Start Date: _____

End Date: _____

45. Estimated Funding (include all that apply):

☐ Amount Requested from the State:

☐ Applicant Contribution (e.g., in kind, matching):

☐ Local Contribution:

☐ Other Source of Contribution:

☐ Program Income:

Applicant Certification:

By signing this application, I certify (1) to the statements contained in the list of certifications* and (2) that the statements herein are true, complete and accurate to the best of my knowledge. I also provide the required assurances* and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil or administrative penalties. (U.S. Code, Title 218, Section 1001)

(*) The list of certification and assurances, or an internet site where you may obtain this list is contained in the Notice of Funding Opportunity.

☐ I Agree

Authorized Representative

46. First Name: _____ 47. Last Name: _____ 48. Suffix: _____

49. Title: _____

50. Telephone Number: _____ 51. Fax Number: _____

52. E-mail Address: _____

53. Signature of Authorized Representative: _____

Date Signed: _____