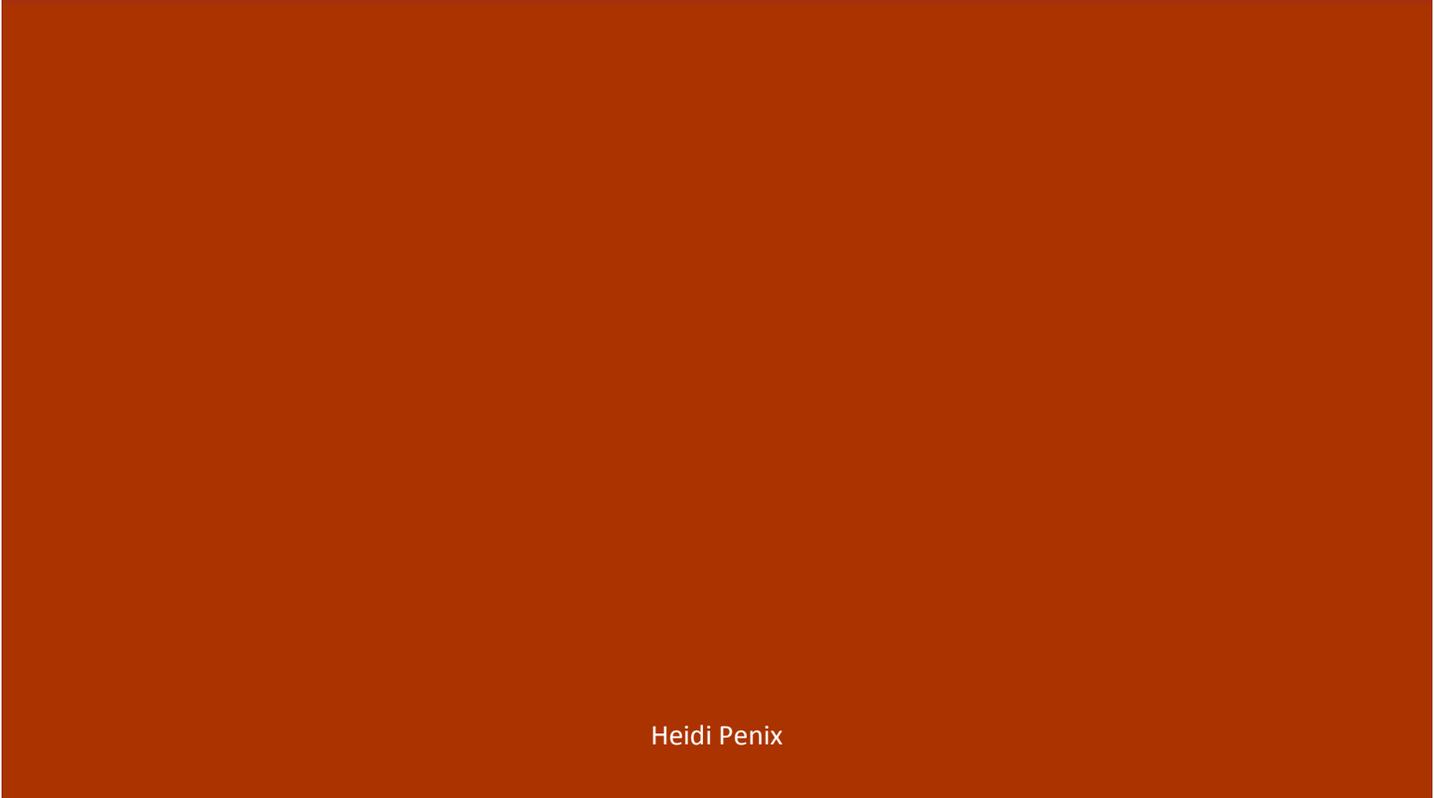




PROGRAM INSTRUCTIONS – FY2018 -  
CHILDREN’S JUSTICE ACT



Heidi Penix





**CHILDREN'S JUSTICE ACT PROGRAM · TEXAS CENTER FOR THE JUDICIARY**

1210 San Antonio, Suite 800 · Austin, Texas 78701  
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January 20, 2017

Dear Colleague,

The Texas Children's Justice Act (CJA) is pleased to announce its 2018 Grant Program. The purpose of CJA is to develop, establish and operate programs designed to improve the following:

- Assessment and investigation of suspected child abuse and neglect cases in a manner which limits additional trauma to the child victim and the child's family;
- Assessment and investigation of cases of suspected child abuse or neglect-related fatalities;
- Investigation and prosecution of cases of child abuse and neglect, including child sexual abuse and exploitation;
- Assessment and investigation of cases involving children with disabilities or serious health-related problems who are suspected victims of abuse or neglect.

One of the principle methods of achieving our mission is through our annual grant process.

CJA is now accepting applications for programs that will fill an identified gap and contribute to the knowledge base in one or more of the current CJA priority areas:

- Multidisciplinary Team Coordination and Response
- Victim Advocacy
- Child Maltreatment Victims with Disabilities or Special Healthcare Needs
- Child Maltreatment-Related Fatalities
- Medical Evaluations for suspected child victims of abuse/neglect

*CJA funds should be used for programs to reform State systems and improve the processes by which States respond to cases of child abuse and neglect, including child sexual abuse and exploitation and cases of suspected child abuse or neglect related fatalities. This will enable States to deal more effectively with both the child victim and the offender and to limit additional trauma to the child.*

*CJA funds are to be primarily focused on the front-end, intake and investigative piece of child welfare. Projects selected by the CJA Task Force shall be mindful that funds are spent to support efforts at this point in a child welfare case.*

The deadline for submitting a grant application is Monday, March 20, 2017.

To learn more about CJA and our grant program, please visit our website at [www.yourhonor.com/web/cja](http://www.yourhonor.com/web/cja). If you have any questions about the CJA grant process, please contact me at [heidip@yourhonor.com](mailto:heidip@yourhonor.com).

Sincerely,

A handwritten signature in black ink, appearing to read 'Heidi Penix', written in a cursive style.

Heidi Penix  
Program Director  
Children's Justice Act Program  
Texas Center for the Judiciary

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## **PART I - OVERVIEW**

### **A. Introduction**

This Program Instruction provides the information and forms necessary to prepare a proposal for Children’s Justice Act (CJA) grant funds. The terms and conditions described in these instructions supersede conflicting provisions stated in previous iterations of the CJA grantee guide or previous requests or instructions.

### **B. Contact Information**

Questions concerning these instructions, the application process, or programmatic issues should be submitted by e-mail to:

Heidi Penix  
CJA Program Director  
[heidip@yourhonor.com](mailto:heidip@yourhonor.com)

### **C. Application Due Date and Submission**

The application is due Monday, March 20, 2017. The application should be submitted via email to Heidi Penix at [heidip@yourhonor.com](mailto:heidip@yourhonor.com).

### **D. Eligibility and Use of Funds**

This program is open to Texas state agencies, local governments including courts, nonprofit organizations, and educational institutions. Submissions must address one or more of the CJA priorities and demonstrate potential for statewide, systems-level improvement. CJA funds should be used for programs to reform State systems and improve the processes by which States respond to cases of child abuse and neglect. CJA funds **may not** be used for prevention programs or treatment services. CJA funds are to be primarily focused on the intake and investigative piece of child welfare.

### **E. Source of Funds**

The Children’s Justice Act (CJA) program is supported by the Federal Crime Victim’s Fund. The Crime Victim’s Fund is administered by the United States Department of Justice, Office of Victims of Crime (OVC). CJA grants are awarded by the Administration on Children, Youth, and Families, United States Department of Health and Human Services in accordance with Section 107 (a)(1), (2), and (3) of Public Law 104-235 (Grants to States for Programs Relating to the Investigations and Prosecution of Child Abuse Cases) of the Child Abuse Prevention and Treatment Act (CAPTA). The CFDA number is 93.643. CJA is a federal grant awarded to each state to reform State systems and improve the process by which the State responds to cases of child abuse and neglect, thereby dealing more effectively with both the child victim and the offender, and limiting additional trauma to the child victim. Recipient states must be eligible for the CAPTA Basic State Grant and establish and maintain a multidisciplinary task force on

children’s justice issues. Since 2005, the Texas Center for the Judiciary (TCJ) has been designated by the Governor’s Office to administer CJA funds in Texas and provide staff support for the CJA Task Force.

## **F. Grant Period**

The grant period will begin October 1, 2017 and end September 30, 2018. In some instances, a later start date or earlier end date may be warranted.

## **G. Funding Amount**

Approximately \$1,000,000 (estimated) is available for grants. The maximum award per project is \$200,000.

## **H. Priorities**

Grant funds shall be used specifically to implement the Texas State CJA Task Force recommendations as determined through the Three Year Assessment process. Texas’ Three Year Assessment can be found on our website here:

[www.yourhonor.com/web/images/pdf/CJA/2015CJAAssessment.pdf](http://www.yourhonor.com/web/images/pdf/CJA/2015CJAAssessment.pdf)

An abbreviated description of the priorities and recommendations from the Assessment are listed below. Applicants must demonstrate how their proposed project supports one or more of these priorities.

### **1. Multidisciplinary Team Response and Coordinated Response**

No single entity is responsible for all aspects of a child abuse case. In order to ensure the safety of child victims as well as the accountability of the systems charged with child protection, entities must adequately communicate and coordinate resources and efforts. The Multidisciplinary Team (MDT) approach to child abuse investigations is one that involves the agencies and individuals charged with the investigation, prosecution, and treatment of alleged child victims to form a coordinated response. An effective coordinated approach to child victimization requires cross-system engagement with CPS, law enforcement, medicine, mental health, public health, CAC employees, victim advocates, including domestic violence service providers, and the courts. The MDT approach provides a joint response facilitating cooperation across disciplines, preventing unintentional working at cross purposes and allowing for consistency from case to case. It also improves the system’s efficiency by eliminating duplicative efforts. Multidisciplinary teams in Texas, often through Children’s Advocacy Centers (CACs), provide coordination at the beginning stages of a child abuse investigation and improve both Child Protective Services’ and Law Enforcement’s response.

While the collaborative, team approach to abuse cases is an ideal, there can be difficulties in its successful implementation. Persistent turnover among CPS investigations staff (more than 30%) can take a toll on MDT functioning, leaving overburdened caseworkers, loss of institutional knowledge, interrupted collaborative relationships, and uncompleted agendas. The response of law enforcement can be inconsistent and sometimes inadequate. Urban areas are struggling with shortages of law enforcement officers which can hamper the investigation of child abuse cases as well as the cross-

discipline collaboration. There is also inadequate access to medical and mental health services across the state. There are 22 child abuse pediatricians certified in Texas, roughly one for every 323,433 children. There are only 308 certified Sexual Assault Nurse Examiners in the state. 185 Texas counties do not have a single psychiatrist and 40 do not have a licensed social worker. Challenges like these mean that MDTs throughout the state can struggle to ensure a consistent, effective response to child abuse cases.

### **Recommendations**

The CJA Task Force recommends supporting policies and programs that will promote a consistent, coordinated multidisciplinary response to serious cases of child abuse/neglect as well as improve the coordination between the criminal justice system and the civil child protection system.

Examples of strategies supported by CJA may include:

- Promote the continued use of local child advocacy centers for multi-disciplinary team coordination to improve the cooperation and collaboration between agencies involved in the investigation, assessment and disposition of serious cases of child abuse/neglect. Encourage co-location of CPS and law enforcement at local CACs whenever possible. Continue to work with Children’s Advocacy Centers of Texas to provide training, technical assistance and facilitation of MDTs statewide.
- Encourage ongoing, joint training for law enforcement and CPS to achieve a level of competency, consistency, and quality in child abuse investigations across the state. Training should focus on protocols, investigative processes, roles/responsibilities, and improving communication.
- Encourage medical assessments of children, particularly children under age two with allegations of physical abuse by supporting and enhancing interagency collaboration between child abuse pediatricians and CPS investigators.
- Training to ensure that medical professionals have the necessary knowledge and resources to accurately recognize abuse and understand proper medical evaluations for suspected abuse.
- Interdisciplinary training on child abuse investigations, assessments and prosecutions.
- Support the development of pilot projects or programs that creatively use technology to enhance education, collaboration, and resource sharing.

## **2. Victim Advocacy**

Children who have suffered abuse or neglect should not be further traumatized by the systems intended to protect them. There has been an increased awareness that systems should be child-centered and many positive changes have been occurring. The state has increased funding for mental health, continued to support trauma-informed care for children and families impacted by abuse and neglect, encouraged collaboration between domestic violence service providers and child protective services, and authorized DFPS to conduct an alternative response for certain less severe cases. Children’s Advocacy Centers

throughout the state have also worked to strengthen their family advocacy component which facilitates services and support for non-offending family members. The Task Force recognizes that this important work is still in its nascent stage and will continue to support its growth.

Research suggests that, nationwide, youth commit one-quarter of all sex offenses and more than one-third of sex offenses against juvenile victims. Children and youth with sexual behavior problems do not constitute a homogenous group and are different than adult offenders. Most youth with sexual behavior problems have a history of traumatic experiences, though not necessarily sexual abuse. Youth are more likely to respond positively to treatment, particularly immediately following their detection by the juvenile justice system, and are much less likely to reoffend over time. The ideal solution for these children and youth is community-based and family-centered with active multidisciplinary team involvement at case and systems level. Unfortunately, there are not enough of these programs throughout the state. This shortage of providers means that many youth are not getting the ideal community-based, family-centered treatment. In some cases, it may mean that both the offending youth and the victim are not getting any treatment. For youth in foster care, the response to child-on-child sexual abuse has been woefully inadequate with incidents not being properly investigated or tracked and both victims and offenders not being provided with appropriate services or treatment. CPS, law enforcement, juvenile probation, and the courts need to be educated on the importance of effective identification, investigation, and intervention in cases of children and youth with sexual behavior problems to so that these cases are consistently managed across the state to both ensure treatment for offenders and safety for victims.

### **Recommendations:**

The CJA Task Force recommends supporting programs and policies to ensure consistent, high quality resources and services to child victims and their non-offending caregivers in order to limit additional trauma.

Examples of strategies supported by CJA may include:

- Training for MDT members and other partners on resiliency, family engagement, respect for caregivers, alternatives to removal, etc.;
- Support for programs to facilitate cross-system collaboration in order to improve communication and service delivery and ultimately reduce trauma for child victims.
- Resources and training for courts, DFPS, and juvenile probation on the importance of appropriately assessing and treating children and youth with sexual behavior problems;
- Support for children’s advocacy centers to assist in handling cases involving children and youth with sexual behavior problems.

### **3. Child Maltreatment Victims with Disabilities or Special Healthcare Needs**

Studies examining patterns of child maltreatment have found that children with disabilities experience higher rates of maltreatment than children without disabilities. Studies (Jonson-Reid, Drake, Kim, Porterfield & Han, 2004; Lightfoot, Hill, & LaLiberte, 2011; Sullivan & Knutsen, 2000) have found that, while children with all types of disabilities experience abuse at a greater rate, children with emotional or behavioral disorders are particularly susceptible to abuse. Some studies have shown that children with disabilities and/or medical issues are more likely to experience neglect as well as unique forms of disability-related maltreatment such as withholding medication or not providing personal care. Prevalence studies as well as reports that are more anecdotal point to neglect as the most common type of maltreatment experienced by children with disabilities. One study (Sullivan and Knutson, 2000) found that children with disabilities were 3.76 times more likely to be victims of neglect than children without disabilities. Reviews of child fatalities in Texas as well as in other states and countries have found that children born premature, with low birth weight or with early medical issues die because of abuse, accident, co-sleeping, or SUIDs at a substantially higher rate than other children. Prematurity, a prolonged stay in the newborn intensive care unit (NICU), and the presence of residual medical complications place pre-term infants at a higher risk of abuse than their full-term counterparts.

The lack of empirical knowledge about the prevalence of children with disabilities or special health care needs involved the child welfare system is a significant barrier to addressing risk. It’s vital that CPS workers accurately gauge child safety and risk. They are unable to do this unless they are also prepared to recognize disabilities/medical needs, appropriately assess for safety based on individual needs associated with disability and provide families with relevant, necessary services. Failure to fully appreciate the importance of the interplay of multiple risk factors in a family and how to best serve the family in order to keep the child safe means that the child/family will keep coming to the attention of the various systems as the untreated problems get increasingly worse. It’s also important that healthcare providers have an increased awareness of the escalated risk factors for abuse for this cohort of children.

### **Recommendations:**

The CJA Task Force recommends supporting policies and programs to improve awareness of the increased risk of abuse for children with disabilities, medically fragile children, and children with special healthcare needs as well as promote interagency collaboration to improve system response to these cases.

Examples of strategies supported by CJA may include:

- Encourage improved data collection on the prevalence of children with disabilities and primary medical needs with child abuse allegations in Texas;
- Training on the necessity of in-depth investigations in cases involving children with primary medical needs, particularly infants. Particular care should be taken in cases where a child has primary medical needs and a healthcare professional has reported medical neglect.

- Training/resources for healthcare professionals to improve awareness of the increased risk of abuse for children with primary medical needs, children with neonatal abstinence syndrome and children with disabilities;
- Training/resources for WIC program staff on risk of abuse and neglect for children with disabilities or primary medical needs;
- Training/resources to improve communication and collaboration between CPS caseworkers, disability services providers and medical professionals to ensure better support for at-risk families.

#### 4. Child Maltreatment-Related Fatalities

Texas DFPS investigates roughly 27% of the child fatalities in the state each year. Local Child Fatality Review Teams (CFRTs) cover 200 of Texas’ 254 counties and, according to the State Child Fatality Review Team (SCFRT) Report from 2013, they reviewed 54.2% of the child deaths in those 200 counties. To fully understand the circumstances and risks leading to a child death, identify trends, and implement effective prevention activities, 100% of child deaths need to be reviewed and recorded. Additionally, Texas needs to use multiple data sources (vital statistics, death certificates, uniform crime reports, child death review, etc.) to enhance surveillance and measurement of child abuse fatalities.

The cause of death in a child case is difficult to determine. High quality death investigations, including standardized response by first responders, death scene investigations by law enforcement and justices of the peace, standardized autopsies conducted by trained forensic pathologists with knowledge of pediatric pathology, and open communication between law enforcement, CPS, healthcare professionals, coroners, and medical examiners, are necessary in order to make the correct determination in a child death case. If any of these areas is inadequate, the system runs the risk of failing. Joint investigations are critical and consistency across every level of the process is necessary if justice is to be served.

#### **Recommendations:**

The CJA Task Force recommends supporting policies and programs to improve the quality and consistency of data collection, investigation, and certification of cases of child death in Texas.

Examples of strategies supported by CJA may include:

- Review existing CFRTs and promote increased standardization as well as data collection capacity;
- Promote standardized, cross-system coordination and data-sharing on child fatalities;
- Training to improve and standardize the quality of death scene investigations and the determination of death in suspected child abuse/neglect related fatalities;

- Training and tools for law enforcement and prosecutors including developments in the law and latest advancements in investigative and forensic techniques.

## 5. Medical Evaluations for Child Maltreatment Victims

Healthcare professionals are a critical part of the reporting, investigation, assessment and prosecution of child abuse cases. Medical personnel were the number two source of completed child abuse investigations in Texas in 2015 (17.8%). This percentage is more than double the national average of child abuse reports from medical professionals. However, in spite of continued effort, the child abuse medical expertise in Texas has not successfully been able to extend to the poorer, more rural areas of the state. Texas does not have enough primary care doctors in 126 of its 254 counties. The majority of these counties are rural. 73% of hospitals are located in urban areas and 63 counties in Texas have no hospital. There is also a potential for a difference in the diagnosis that a child will receive when seen by a child abuse pediatrician versus a pediatrician without child abuse expertise. There is a need for medical child abuse expertise for physicians, CPS and law enforcement throughout the state yet the majority of this knowledge is available only in select, urban areas.

Medical expertise is particularly critical in cases that involve a criminal component. Criminal child abuse cases are increasingly controversial. It’s challenging to distinguish between intentional and unintentional injuries. There is no single test that can prove or disprove child abuse. No single injury or symptom is synonymous with child abuse but rather it takes a combination of features to make the correct diagnosis. It’s one that is often difficult for doctors to make. Court cases are also increasingly dependent on scientific evidence and expert witnesses are playing a bigger role. These cases point to the need for additional research to develop and refine the tools and technologies to improve the diagnostic accuracy of abuse related injuries.

### Recommendations

The CJA Task Force recommends support for programs to increase the consistency and accuracy of the medical diagnosis of child abuse and neglect as well as support for programs to improve access to quality medical evaluations for suspected victims of child maltreatment, particularly in rural and underserved areas.

Examples of strategies supported by CJA may include:

- Research and data collection to improve the consistency and accuracy of the diagnosis of child abuse to strengthen the investigation and prosecution of these cases;
- Programs to improve the recognition and reporting of child abuse and neglect by professionals in the health care system and other related service systems;
- Training for medical providers and attorneys on medical evidence in child abuse cases and courtroom testimony;

- Effective dissemination of best practices in the medical diagnosis of child abuse and enhanced collaboration between child abuse pediatricians, CPS, law enforcement, and medical professionals in Texas.

## **PART II – APPLICATION SUBMISSION REQUIREMENTS**

### **A. Preparing an Application**

Please provide the following application components in the order listed below:

1. Application Coversheet
2. Contact Information
3. Project Narrative
4. Budget Narrative
5. Budget Workbook
6. Pre Award Questionnaire
7. Additional Attachments as listed below

### **Commonly Used Terms**

Here are terms that occur frequently in the process:

- Goal – A broad statement that answers the question, “What does your organization hope to accomplish?”
- Objective – Answers the question, “What steps do you intend to take to accomplish your goal?”
- Outcome – Transformative change in behavior, conditions and/or understanding.
- Output – Tangible product, service, and/or knowledge resulting from a grant’s activities
- Activities – Actions and processes employed to produce outputs and/or outcomes

### **B. Application Coversheet**

The Application Coversheet form is provided as an attachment to this request and is also available on the CJA website. Fully complete the information as indicated on the form. The authorized official must read and initial certifications. Include the coversheet with the application submission.

### **C. Contact Information**

The Contact Information form is provided as an attachment to this request. Complete the information as indicated on the form and include as part of application submission.

### **D. Project Narrative (80 Points)**

The project narrative is the main body of information describing the problem to be addressed, the plan to address the identified problem through appropriate and achievable objectives and activities, and the ability of the applicant to implement the plan. Applicant should refer to pages 2-10 for more information on specific project requirements. The project narrative should include the headings and information listed under ‘Evaluation Criteria’ in Part III below. The project narrative should not exceed eight (8) pages, the length of each section should be based on its relative scoring weight. Pages should be single spaced. Please use 12-point font with 1-inch margins.

## E. Project Budget (10 Points)

The purpose of the project budget is to demonstrate how the applicant will implement the plan with the funds available through this program. Project costs must be directly related to the objectives and activities of the project. The project budget includes a budget narrative and a budget workbook. \*Please note that the indirect cost rate is limited to a maximum of 18%.

### 1. Budget Narrative

The budget narrative clearly explains all costs necessary to implement the proposed project, as well as other contributing funding sources. The narrative should expand on the budget line item, describing how you arrived at the projected dollar amounts. Additional consideration with this section will help the proposal avoid unnecessary red flags. The narrative should coincide with the specific budget categories described on Tab 2 of the Budget Workbook and support project activities. The narrative should include a description of anticipated program income, if applicable. For expenses shared between CJA and other funding sources, applicant should include the total expense, the percentage budgeted to CJA, and a description of the methodology used to allocate each shared expense.

### 2. Budget Workbook

An Excel Budget Workbook has been provided as part of this request. Enter the applicant information on the Getting Started tab of the Workbook (tab 1). The point of contact should be the person responsible for preparing the project budget and answering budget-related questions. Budget Category definitions are also included on Tab 2 of the Budget Workbook. Tab 3 contains a worksheet for each specific budget category. The left column on each budget category worksheet requires line item detail including the calculation and justification for each expense. Enter the amount of each line item in the right column. Charges should be rounded up to the nearest whole dollar. You may insert additional rows if necessary. The budget summary on Tab 1 is pre-formatted to automatically pull totals from the subsequent budget category worksheet. These cells will be locked. The total of all budget categories will calculate on this page. The budget total should match the amount of funds requested on the Application Coversheet.

## F. Qualifications (5 Points)

Describe the training or qualifications of your organization relevant to the ability to complete the proposed project, including experience and expertise in the field of child abuse and neglect; ability to access or collaborate with the various professional disciplines in the development/implementation/evaluation of the project; and experience and expertise in the development of similar programs. If you feel it will strengthen your proposal, you may include as attachments relevant documentation, such as bios of key personnel and job descriptions for vacant key personnel, information on partnering organizations relevant to their ability to fulfill identified roles and functions, and organizational charts.

**This section should be no more than 1 page. There is no page limit to attachments, should you choose to include them.**

**G. Pre Award Questionnaire (High Risk = -5 points; Medium Risk = 0 points; Low Risk = +5 points)**

The Pre Award Questionnaire form is **required** and provided as an attachment to this request. Complete the information as indicated on the form and include the form as part of the application submission. The Pre Award Questionnaire will be used to conduct a grantee risk assessment. The results of the risk assessment will result in the addition/subtraction of points to the application score. CJA staff will also use an applicant’s past performance as a CJA grantee (if relevant) to evaluate potential risk.

**H. Additional Attachments**

Please label and submit the following materials electronically with completed application:

1. Key staff list
2. List of current funders for this project and amount of support
3. List of pending requests for support for this project and amounts requested, if applicable
4. Organizational budget for current fiscal year
5. Most recent audited financial statement (if available)
6. Annual report (if available)
7. IRS determination letter, if applicable

**PART III – POLICIES AND PROCEDURES****A. Review and Selection****a. Initial Screening**

CJA staff will conduct an initial screening to determine whether:

- i. The application is complete
- ii. The applicant is an eligible entity
- iii. The application demonstrates the potential for statewide, systems-level improvement and does not request funding for prevention, treatment or direct services to child abuse victims and their families.
- iv. The application is responsive to one or more of the Task Force priority areas

**b. Application Scoring**

Applications will be reviewed by the CJA Program Director and Grant Administrator to ensure that they meet the initial program criteria. All applications meeting the initial program criteria will be passed on to the Grants Committee for consideration. The Grants Committee will consider each application and either approve, revise, or reject the proposal. The final recommendations of the Grants Committee, along with summaries of the relevant applications, will be presented to the full Task Force for approval.

CJA may elect not to fund applicants with management or financial problems that would indicate an inability to successfully complete the proposed project. Applications may be funded in whole or in part. Successful applicants may be funded at an amount lower than that requested. CJA reserves the right to consider a preference to fund projects aimed at serving emerging, unserved, or under-served populations, and to consider the geographic distributions of CJA funds or distinctive project elements in its funding decisions.

**c. Notification Process**

Applicants will be notified of their application status by email.

**d. Evaluation Criteria – 100 total points available****Project Narrative (80 points) – The Project Narrative should be organized as follows:**

- (a) Project Summary/Abstract – Summary of the purpose and anticipated outcomes of the project that could be shared separately from the application. **(5 points)**
- (b) Target Population & Statement of Need – Describe the target population (including demographic characteristics, risk factors, geographic location, etc.) and identify the need that the project seeks to address. The statement of need should draw on existing research data and where appropriate include specific information based on the proposer’s prior work with the target population. The proposer should identify any gaps in research, services or knowledge that will be addressed through its proposed project. **(10 points)**
- (c) Project Description - Describe the work to be undertaken and explain how the proposed project will address the identified needs of the target population. The description of work should include the specific deliverables and outcomes that will be achieved by the end of the grant period. Identify the key staff members who will be working on the project and describe their roles and responsibilities. Indicate if any subcontractors will be utilized. **(15 points)**
- (d) Alignment with Best Practices – Indicate whether their proposed project is based on best practices for meeting the identified needs within the target population. Does the proposed approach build on similar projects or other work in Texas (or nationwide, if applicable) addressing similar needs? If the project is not based on existing best practices, describe the logic used to develop the project and explain why you think it will be successful. **(10 points)**
- (e) Goals & Objectives – List measurable goals and objectives for the proposed project. Project goals identify the overall effects your program will have on the target population while project objectives identify the steps that will be taken to accomplish your goals. The goals and objectives should be specific, realistic and quantifiable. **(10 points)**
- (f) Project Activities & Implementation Timeline – Identify the activities that will be included in the proposed project and provide anticipated dates for completion. Activities should reflect a sequential approach to achieving the deliverables and outcomes identified in the Project Description. **(10 points)**
- (g) Alignment with CJA Priorities – Describe how the project supports one or more CJA priorities and explain how it will impact current practices in this field. **(10 points)**
- (h) Evaluation & Dissemination Plan – Explain how you will determine whether the project is successful and how data will be collected. Identify the performance measures that will be used to track progress toward goals and objectives. Include a plan for distributing final products, written materials and evaluation results to colleagues and the public. Describe the method, volume and timing of the distribution. **(10 points)**

**Budget (10 Points)**

(a) The budget is clearly outlined and justifies the amount requested. Each proposal must include a budget that documents and justifies the amounts requested. The budget request should be realistic for the project and reflect the goals of the project.

**Qualifications (5 points)**

(a) Applicant demonstrates relevant expertise and experience necessary to carry out the proposed activities. Applicant is positioned to access or collaborate with pertinent professional disciplines in the development, implementation, and evaluation of the project.

**Pre Award Questionnaire (High Risk = -5 points; Medium Risk = 0 points; Low Risk = +5 points)**

(a) The Pre Award Questionnaire form is provided as an attachment to this request. Complete the information as indicated on the form. Include the form as part of the application submission. The Pre Award Questionnaire will be used to conduct a grantee risk assessment. The results of the risk assessment will result in the addition/subtraction of points to the application score.

**B. Finalizing the Grant Award Agreement**

1. **Approval of the Application** - This application is subject to approval by the Texas Children’s Justice Act Task Force. All applications must first be approved by the CJA Task Force and the Grant Award Agreement must be fully executed before expenditures can be reimbursed. Expenditures incurred prior to authorization are made at the applicant’s own risk and may be disallowed. When the fully executed grant agreement is received, the applicant may begin to submit monthly requests for reimbursement (RFRs).
2. **Grant Award Conditions** – TCJ may add grant award conditions to the Grant Award Agreement prior to or after funding. If conditions are added, these will be discussed with the applicant and a copy of the conditions will be sent to the recipient.
3. **Grant Award Agreement** – An electronic copy of the executed Grant Award Agreement and pertinent attachments will be sent to the Project Director following its execution.

**C. General Grant Terms and Conditions**

The following requirements apply to projects selected for funding and are explained below for the recipients planning purposes. Failure to comply with these terms and conditions may result in the loss of Federal funds and may be considered grounds for the suspension or termination of the grant award.

**1. Program Standards**

Section 107(a),(b),(c),(d),(e), and (f) of the Child Abuse Prevention and Treatment Act (CAPTA) (42 U.S.C. 5106c et seq.) as amended by Public Law (P.L.) 111-320 enacted December 20, 2010; and the Victims of Crime Act of 1984, as amended (42 U.S.C. 10603 et seq.).

**2. Administrative Requirements:**

The regulation which apply to the administration of this grant are contained in 45 CFR Part 92, “Uniform Administrative Requirements for Grants and Cooperative Agreements to States and Local Governments.”

**3. These programs are governed by the Office of Management and Budget 2 CFR 200 Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards (Uniform Guidance).****4. Public Law 103-333**

In accordance with Public Law 103-333, the “Departments of Labor, Health and Human Services, and Education, and Related Agencies Appropriations Act of 1995,” the following provisions are applicable to this grant award:

Section 507: “Purchase of American-Made Equipment and Products – It is the sense of Congress that, to the greatest extent practicable, all equipment and products purchased with funds made available in this Act should be American-made.”

Section 508: “When issuing statements, press releases, requests for proposals, bid solicitations and other documents describing projects or programs funded in whole or in part with Federal money, all States receiving Federal funds, including but not limited to State and local governments and recipients of Federal research grants, shall clearly state (1) the percentage of the total costs of the program or project which will be financed with Federal money, (2) the dollar amount of Federal funds for the project or program, and (3) percentage and dollar amount of the total costs of the project or program that will be financed by nongovernmental sources.”

**5. Drug-Free Workplace Requirements**

In accordance with provisions of Title V, Subtitle D of Public Law 100-690 (41 USC 701 et. seq.), the “Drug-Free of Workplace Act of 1988,” all grantees must maintain a drug-free workplace and must publish a statement informing employees that the unlawful manufacture, distribution, dispensing, possession, or use if a controlled substance is prohibited in the workplace and establishing the actions that will be taken against employees violating this prohibitions. The Grantee must notify ACF if an employee is convicted of violating a criminal drug statute. Failure to comply with these requirements may be cause for debarment. (See 2 CFR Part 382)

**6. Smoking Prohibitions**

In accordance with Title XII of Public Law 103-227, the “PRO-KIDS Act of 1994”, smoking may not be permitted in any portion of any indoor facility owned or regularly used for the provision of health, day care, education, or library services to children under the age of 18, if the services are funded by Federal programs whether directly or through State or local governments. Federal programs include grants, cooperative agreements, loans and loan guarantees, and contracts.

**7. Religious Activity Prohibitions**

Direct Federal grants, subawards, or contracts under this program shall not be used to support inherently religious activities such as religious instruction, worship, or proselytization. Therefore, organizations must take steps to separate, in time or location, their inherently religious activities from the services funded under this program.

**8. Prohibition Against Lobbying**

Federal grant funds provided under this award may not be used by the grantee or any subgrantee to support lobbying activities to influence proposed or pending Federal or State legislation or appropriations. This prohibition is related to the use of Federal grant funds and is not intended to affect an individual’s right or that of any organization, to petition Congress, or any other level of Government, through the use of other resources. (See 45 CFR Part 93.)

**9. Human Trafficking**

These awards are subject to the requirements of Section 106(g) of the “Trafficking Victims Protection Act of 2000” (22 USC 7104).

**10. Transparency Act Requirements**

Awards under these programs are included under the provisions of the P.L. 109-282 of the “Federal Funds Accountability and Transparency Act of 2006” (FFATA). Under this statute, the State is required to report information regarding executive compensation and all subgrants, contracts, and subcontracts in excess of \$25,000 through the Federal Subaward Reporting System (<https://www.fsrs.gov/>) and in accordance with the terms found in the Federal regulations at 2 CFR Part 170, including Appendix A.

**11. Construction Prohibitions**

Unless superseded by program-specific regulations, these awards may not be used for construction of the purchase of land.

**12. Debarment and Suspension**

No organization may participate in this project in any capacity or be a recipient of

Federal funds designated for this project if the organization has been debarred or suspended or otherwise found to be ineligible for participation in Federal assistance programs under Executive Order 12549, “Debarment and Suspension.” (See 45 CFR 92.35 and 45 CFR 74.13.)

### **13. Monitoring**

CJA staff will monitor Subgrantee’s compliance with the performance obligations and fiscal requirements of this Agreement using appropriate and necessary monitoring and inspections. If Subgrantee is designated as high-risk, Texas Center for the Judiciary (TCJ) reserves the right to impose additional monitoring requirements. TCJ has the right to examine all records, books, papers, or documents related to this Agreement.

### **14. Method of Payment**

Payment under this Agreement will be on a reimbursement basis. Subgrantee agrees to submit monthly Requests for Reimbursement within thirty (30) days after the end of the billing period supported by appropriate source documentation. Subgrantee agrees to use the Request for Reimbursement form provided by staff. To be eligible for reimbursement under this Agreement, a cost must be incurred in accordance with the approved budget, applicable Cost Principles, and within the grant period.

### **15. Source Documentation**

Subgrantee agrees to maintain all checks supported by appropriate documentation. Documentation may include copies of contracts, invoices, purchase orders, canceled checks, etc. and must be kept in accordance with generally accepted accounting principles and state and federal procurement and purchasing requirements. Staff salaries and wages must be supported by personnel activity reports, as prescribed in the applicable Cost Principles.

### **16. Performance Reporting**

Subgrantee shall submit quarterly performance reports. The first report will cover the first 3 months of funding, and is due no later than fifteen (15) days following the close of the reporting period. A final performance report covering all twelve months of funding must be submitted no later than thirty (30) days following the close of the grant period. TCJ reserves the right to require more frequent reporting. Subgrantee will use the Performance Report form provided.

### **17. Financial Reporting**

Subgrantee shall submit a final Financial Status Report, covering all twelve months of funding must be submitted no later than thirty (30) days following the close of the grant period. TCJ reserves the right to require more frequent reporting. Subgrantee will use the Financial Status Report form provided.

### **18. Other Reporting**

Subgrantee shall promptly advise CJA staff in writing of events that will have a

significant impact upon this Agreement, including: (1) Problems, delays, or adverse conditions, including a change of project director or other changes in Subgrantee personnel, that will materially affect the ability to attain objectives and performance measures, prevent the meeting of time schedules and objectives, or preclude the attainment of project objectives or performance measures by the established time periods. This disclosure shall be accompanied by a statement of the action taken or contemplated and any TCJ or federal assistance needed to resolve the situation; and (2) Favorable developments or events that enable meeting time schedules and objectives sooner than anticipated or achieving greater performance measure output than originally projected.

**19. Logo Credit**

Logo credit must be given to the Texas Children’s Justice Act program in all promotional and educational materials distributed in association with any CJA-funded program, including brochures, pamphlets, flyers, postcards, etc.

**20. Prior Approvals**

Subgrantee will abide by the applicable federal administrative requirements and the terms and conditions of the Grant Award Agreement regarding prior approval requirements.

**21. Audit Requirements**

Subgrantees who expend \$750,000 or more in federal grant money annually shall engage an independent, licensed Certified Public Accountant to conduct an annual OMB Circular A-133 audit. Subgrantee shall submit a copy of the audit report no later than fifteen (15) days after receipt from the audit firm.

**22. Disallowance**

In the event Subgrantee claims and receives payment from TCJ for a service, reimbursement for which is later disallowed, Subgrantee shall promptly refund the disallowed amount to TCJ on request, or at its option, TCJ may offset the amount disallowed from any payment due or to become due to Subgrantee under this Agreement or any other agreement. Similarly, a disallowance under a prior agreement may be offset against this Agreement.

**23. Withholding Payment**

TCJ may withhold payment until reports required under the Grant Award Agreement are received and approved by TCJ. TCJ may also withhold payment if Subgrantee is not in compliance with this agreement.

**24. Full Cost Recovery of Investigation and Audit Costs**

Subgrantee shall reimburse TCJ for all direct and indirect expenditures incurred in conducting an audit/investigation when Subgrantee is found in violation of the terms of

the contract. Reimbursement for such costs shall be withheld from any amounts due to Subgrantee pursuant to the payment terms of the grant, or from any other amounts due to Subgrantee from TCJ.

**25. Amendments**

The Grant Award Agreement may be amended by mutual written consent of both parties.

**26. Records**

Subgrantee agrees to maintain all reports, documents, papers, accounting records, books, and other evidence pertaining to costs incurred and work performed hereunder, for three (3) years from the date of final payment under this Agreement, or until completion of all audits or pending litigation has been completely and fully resolved, whichever occurs last.

Duly authorized representatives of TCJ, and their designees shall have access to the records. This right of access is not limited to the three (3) year period but shall last as long as the records are retained.

**27. Indemnification**

To the extent permitted by law, Subgrantee, if other than a government entity, shall indemnify, hold, and save harmless TCJ and its officers and employees from all claims and liability due to the acts or omissions of Subgrantee, its agents, or employees. Subgrantee also agrees, to the extent permitted by law, to indemnify, hold, and save harmless TCJ from any and all expenses, including but not limited to attorney fees, all court costs and awards for damages incurred by TCJ in litigation or otherwise resisting such claims or liabilities as a result of any activities of Subgrantee, its agents, or employees.

Further, to the extent permitted by law, Subgrantee, if other than a government entity, agrees to protect, indemnify, and save harmless TCJ from and against all claims, demands, and causes of action of every kind and character brought by any employee of Subgrantee against TCJ due to personal injuries or death to such employee resulting from any alleged negligent act, by either commission or omission on the part of Subgrantee.

If Subgrantee is a government entity, both parties to this Agreement agree that no party is an agent, servant, or employee of the other party and each party agrees it is responsible for its individual acts and deeds, as well as the acts and deeds of its contractors, employees, representatives, and agents.

**28. Disputes and Remedies**

The Grant Award Agreement supersedes any prior oral or written agreements. Subgrantee shall be responsible for the settlement of all contractual and administrative issues arising out of procurement made by Subgrantee in support of Agreement work. Disputes concerning performance or payment shall be submitted

to TCJ for settlement, with the Executive Director or his or her designee acting as final referee.

**29. Termination**

The Grant Award Agreement shall remain in effect until Subgrantee has satisfactorily completed all services and obligations described herein and these have been accepted by TCJ, unless:

- a. This Agreement is terminated in writing with the mutual consent of both parties;
- b. There is a written thirty (30) day notice by either party; or
- c. TCJ determines that the performance of the project is not in the best interest of TCJ and informs Subgrantee that the project is terminated immediately.

Subgrantee shall neither incur nor be reimbursed for any new obligations after the effective date of termination.

**30. Inspection of Work**

TCJ or any authorized representative thereof, has the right at all reasonable times to inspect or otherwise evaluate the work performed or being performed hereunder and the premises on which it is being performed.

**31. Procurement and Property Management**

Subgrantee shall establish and administer a system to procure, control, protect, preserve, use, maintain, and dispose of any property furnished to it by TCJ or purchased pursuant to this Agreement in accordance with its own property management procedures, provided that the procedures are not in conflict with applicable Federal administrative requirements.

**32. Program Income**

Program income earned during the grant period shall be reported and retained by the Subgrantee.