

State Fiscal Year 2025 State General Fund Appropriation Safer Communities Program Grant Program Guidelines

Introduction

The Virginia Department of Criminal Justice Services (DCJS) is pleased to invite the Cities of Norfolk, Portsmouth, Richmond, and Roanoke to apply for the State General Funds Appropriation Grant under the Safer Communities Program (SCP) for the grant period July 1, 2024, through June 30, 2025. There is no match requirement for this award.

Authority and Purpose

In accordance with [Item 394, N.4.a](#), of the Commonwealth of Virginia's 2025-2026 biennial budget, these funds are intended to specifically support the SCP sites. Funds are to support holistic, community-based strategies that address the root causes and conditions of community violence. Such strategies shall be evidence-informed and/or community-driven and shall include:

- (i) afterschool programs and mentorships;
- (ii) connections to education and economic opportunities;
- (iii) trauma-informed mental health care;
- (iv) credible messengers and violence interrupters; and
- (v) strategies to build trust between law enforcement agencies and community stakeholders.

As directed in the appropriations language, recipient communities must use grant funds to employ a full-time position dedicated to planning, implementation, and coordination of community violence reduction strategies, including utilizing existing violence reduction grants and pursuing additional grant opportunities.

Grant Period

The State Fiscal Year (SFY) 2025 State General Fund Appropriation Safer Communities Grant Program Guidelines are developed for SCP sites to apply for funding for July 1, 2024, through June 30, 2025. An additional allocation is anticipated to be available beginning July 1, 2025.

Eligible Recipients and Amounts Available

The following cities are eligible recipients:

Norfolk:	\$3,605,462
Portsmouth:	\$2,946,182
Richmond:	\$3,563,335
Roanoke:	\$2,960,021

NOTE: Expenses directly related to the project and, if included as part of an approved budget plan, may date back to July 1, 2024.

Requirements/Limitations

Grant awards will be based upon the availability of funds appropriated for this purpose and will be distributed through a non-competitive award process.

Application Requirements

Recipient will be required to apply summarizing the intended project, identifying goals and objectives for the project, and providing a detailed spending plan (budget) of how funds are to be expended.

Budget

The spending plan (budget) shall be developed in accordance with standard instructions used for budgets of similarly funded projects, unless otherwise specified or implied in the *Code of Virginia* or State Appropriations Act. Budget requests must be **reasonable, appropriate, and justified. Funds may not be used for paid lobbyists.**

Program Requirements

Recipient will be provided all relevant grant conditions at the time of award; however, they will not differ significantly from the award conditions on other state funded grants.

Supplantation

State appropriations are typically allocated for specific purposes. Therefore, funds made available through this award should not be used to replace state or local funds that would, in the absence of this grant, be made available for the same purposes.

Payments

Payments will only be made electronically to the awarded entity. No other form of payment will be made.

The awarded entity may submit reimbursement claims for funds expended, quarterly. Or, the awarded entity may draw down funds up to one quarter in advance, based on the approved budget, if necessary. If funds are drawn down in advance, the awarded entity must also provide actual expense reports at the end of the quarter. DCJS will determine how each process is managed following awards.

Reporting

DCJS Grant Reporting

As part of the Special Conditions and requirements, recipient must submit on or before the scheduled due date the following reports:

1. Quarterly Finance/Claim Request Reports (the 15th of the month following the close of each quarter), submitted in OGMS.
2. Quarterly Status Reports (the 15th of the month following the close of each quarter), submitted in OGMS.

Submission of Application

The applications for State General Funds must be submitted through OGMS.

Application Deadline

Application must be received by **5:00 p.m. on Friday, July 26, 2024**. After such time, OGMS will no longer permit applications to be submitted.

Review Process

DCJS staff will review the submitted application. If changes or adjustments are necessary, staff will contact the recipient with clarification and provide an opportunity for corrections to the application prior to issuing the award. Upon final approval, DCJS will issue a grant award package. Fiscal and programmatic revisions may be required as a condition of funding. Funds should be available on or after July 1, 2024, or when a budget is approved, whichever is later.

Application Instructions

The application and required attachments must be submitted through the DCJS Online Grants Management System (OGMS). Grant contacts must be registered in OGMS to complete the application: <https://ogms.dcjs.virginia.gov/register.do>. To access the funding opportunity and start an application, go to <http://ogms.dcjs.virginia.gov>. On the left side of the menu in OGMS, click on “Funding Opportunities” and select the funding opportunity entitled “**FY25 Safer Communities Program.**” Review the funding opportunity details and when you are ready to apply click on the green button labeled “Start New Application.”

You can create a copy of your SFY 2024 application to use as a basis for your SFY 2025 application. Review the following instructions and update the application as instructed for SFY 2025. Be sure all information is updated and correct.

A. General Information

1. **Application Title:** “[Locality] **FY25 Safer Communities Program**”
2. **Primary Contact:** Select the name of the primary contact for the application.
3. **Organization:** Select your locality.
4. **Additional Applicants:** Select the names of others within your organization that will also manage this grant. Instructions for adding “additional applicants” to the grant from those that are registered users in OGMS:
 - a. The Primary user needs to open the application.
 - b. Once you open the application you will click the green “edit application” button in the upper right corner.
 - c. Double click “general information.”
 - d. Click the green “edit” button in the upper right corner, then add “additional applicants.”

B. Face Sheet

1. **Congressional District:** Select all congressional districts served by this grant program.
2. **Best Practice:** Leave blank.
3. **Jurisdiction(s) Served:** Select all jurisdictions served by this grant program.
4. **Program Title:** Enter “**FY25 Safer Communities Program (SCP) Program**”
5. **Certified Crime Prevention Community:** Not applicable
6. **Type of Application:** Select New or Continuation of Grant.

7. **Community Setting:** Check all that apply (rural, urban, suburban, or statewide).
8. **Brief Project Overview:** Provide a description of the program (maximum of 750 characters).
9. **Project Director:** Name and contact information for the person who will have day-to-day responsibility for managing the project and who will be the contact if DCJS needs project-related information.
10. **Project Administrator:** Name and contact information of the City Manager.
11. **Finance Officer:** Name and contact information for the person responsible for fiscal management of the funds associated with this grant.

Note: Appropriate internal controls necessitate that the Project Director, Project Administrator, and Finance Officer are different individuals.

C. Budget

Report the amount of funds requested by category (e.g., personnel, supplies and other) on the application budget.

D. Project Narrative *[Note: this may be uploaded as an attachment not to exceed 10 pages, as long as all of the sections are covered]:*

The project narrative educates the reviewer about the applicant's community and organization; describes the severity of violent crime or gun violence issues and their impact on the community; provides statistics that support the existence and extent of the problem; clearly justifies the need for the grant; and describes existing resources and services currently available to address the problem, including any other funding, and an explanation as to why the resources are inadequate. This narrative should include the following sections:

- *Population Served:* Describe the intended population served by the project. Be specific about the localities, neighborhoods, communities, or types of individuals that will be served by the program.
- *Community Background:* Please describe how gun violence and violent crime has impacted your community, and what efforts your organization has already made – or strategies you would like to implement – to address that problem.
- *Project Description:* Provide a description of the proposed project or practice and some of the planned implementation activities and the activities' relevance to reducing violent crime or gun related violence in your community. Provide information on how the project will incorporate a collaborative and multidisciplinary approach that includes community-based organizations.
- *Promising Practice:* Describe the components of the promising practice that will address the stated problems.
- *Capabilities:* Provide a description of the organization and the capabilities of the organization to implement the proposed project. Identify the designated coordinator/criminal justice planner who is coordinating local violent crime initiatives or specify if one will be hired. **Please note, localities receiving funding out of the Safer Communities Program must establish or retain a position dedicated to planning, implementation, and coordination of community violence reduction strategies, including utilization of existing violence reduction grants. This position**

shall facilitate data collection and performance assessment efforts to be guided by DCJS.

- *Timeline*: Describe the planned implementation activities and their relevance to the stated goals and objectives.
- *Budget Narrative*: Provide a budget narrative explaining and justifying the need for each requested budget item and provides the basis for its cost all funds requested and stating the basis/calculations for the amounts requested. All items requested in the Budget Narrative must be thoroughly justified and clearly related to the proposed project. Each item or service to be purchased must be separately listed with its unit cost. The budget narrative must thoroughly explain the relevance and importance of each item to the project.

E. Goals and Objectives

All programs are required to include at least three (3) goals and objectives for the project and are encouraged to include additional goals as needed.

F. Itemized Budget

In this budget section of the application, all funds supporting this project must be included for each line item under “State.” **All amounts must be rounded to the nearest dollar.**

1. **Personnel and Employee Fringe Benefits: (if no personnel is funded by this project use \$0.00 on the budget grid.)**
 - a. Indicate if personnel costs are included in your budget – yes or no. If “yes” under “Personnel” enter the employee name, position title, if it is full time or part time, the total hours per week worked, the total hours per year, the total annual salary (regardless of funding source), and the amount requested under the grant. Indicate if this is a new position.
 - b. Under “Employee Fringe Benefits” select the employee’s name and enter the fringe benefit costs (FICA, Retirement, Group Life, Health Insurance, Workers’ Compensation, Unemployment, Disability, and other). If you are unable to enter the fringe benefits for individual employees, create an employee named “Fringe Benefit” and enter the aggregate amounts for each fringe benefit but enter zero for the salary. If you elect this process, leave the fringe amounts for each individual employee at zero.
 - c. Under the Positions and Justification, select the employee’s name and enter in the description of position (maximum of 500 characters) and justification for position (maximum of 500 characters) for each item.
2. **Consultants: (If no consultants are funded by this project use \$0.00 on the budget grid.)**
 - a. Indicate if consultants or consultant subsistence and travel costs are included in your budget – yes or no. If “yes” under “Consultant” and “Consultant Subsistence (lodging + meals) & Travel” enter the information required and the amounts under the funding source(s) as appropriate.
 - b. For individuals reimbursed for personal services on a fee basis: Enter each type of consultant or service (with numbers in each category and names of consultants when available), the proposed daily fee rate, and the amount of time to be devoted to such services. The rate of compensation for individual consultants must be reasonable and consistent with that paid for similar services in the marketplace; however, the rate

- may not exceed \$650.00 per day (\$81.25 per hour, exclusive of travel and/or subsistence), and may not exceed the consultant's usual and customary fee.
 - c. For organizations, including professional associations and educational institutions, performing professional services: Enter the type of services being performed and estimated contract prices. Requests for contracted services and consultants will be very carefully screened. Consultant and contracting fees will be approved only when it is justified that the use of outside contract agencies and consultants will significantly and permanently enhance project effectiveness.
 - d. Consultant Travel and Subsistence: This is generally not allowable unless it is necessary, reasonable, and justified. Reimbursable costs must adhere to the recipient's established travel policy.
 - e. Under the Description and Justification, select the name of the consultant and enter in the description of consultant's role (maximum of 500 characters) and justification for use of consultant (maximum of 500 characters). Include a description of each service contracted for, the number of clients benefiting from each type of service, and total budgeted amount for each service and a per client/group cost.
3. **Travel:** (If no travel is funded by this project use \$0.00 on the budget grid.)
 - a. Indicate if travel (mileage) costs are included in your budget – yes or no. If “yes” under “Local Mileage” or “Non-local mileage” enter the number of miles and the mileage rate.
 - b. Itemize total travel expenses of program personnel by local mileage and non-local mileage. Unless a local policy governs, mileage is reimbursed at the federal rate (<https://www.irs.gov/tax-professionals/standard-mileage-rates>). Local mileage is travel within the immediate service area (satellite offices, court, meetings, etc.). Non-local mileage is outside of the immediate service area (trainings, conferences, meetings, etc.).
 - c. Under the Description and Justification, select the mileage being requested and enter in the description of mileage (maximum of 500 characters) and justification for mileage (maximum of 500 characters) for each item.
4. **Subsistence and Other Travel Costs:** (If not funded by this project use \$0.00 on the budget grid.)
 - a. Indicate if subsistence and other travel costs are included in your budget – yes or no. If “yes” under “Subsistence” enter the event title, under “Lodging” enter the number of rooms required, number of nights and rate cost and under “Meals” enter the number of people, number of days, and the per diem rate.
 - b. Recipients must follow the federal per diem rates (<https://www.gsa.gov/travel/plan-book/per-diem-rates>) unless there is a written local travel policy. Transportation costs, such as air and rail fares, are at coach rates. Subsistence is paid according to a per diem rate.
 - c. Under Other Travel Costs, enter the event title, number of people attending, number of trips with airfare, the rate, and other travel costs.
 - d. Under the Description and Justification, select the event item being requested and enter in the description of costs (maximum of 500 characters) and justification for costs (maximum of 500 characters) for each item.
5. **Equipment:** (If no equipment is funded by this project use \$0.00 on the budget grid.)

- a. Equipment means tangible personal property (including information technology systems) having 1) a useful life of more than one year and 2) a per-unit acquisition cost of \$5,000 or greater (or the organization's capitalization policy, if it is less than \$5,000). If the organization does not have a capitalization policy in place, the amount of \$5,000 must be followed.
 - b. Indicate if equipment is included in your budget – yes or no. If “yes” enter the item requested, the cost per item or monthly rate, and the total number of items or months for each item.
 - c. Under the Description and Justification, select the equipment item being requested and enter in the description (maximum of 500 characters) and justification (maximum of 500 characters) for each item.
6. **Supplies and Other Expenses:** (If no supplies are funded by this project use \$0.00 on the budget grid.)
 - a. Supplies means all items of tangible personal property that are not equipment. This includes computing devices that cost less than \$5,000 per unit (or the organization's capitalization threshold, if that is less than \$5,000). Supplies and Other Operating Expenses include, but are not limited to, rent, utilities, cell/land/fax/internet services, postage, and office supplies.
 - b. Indicate if supplies and other included in your budget – yes or no. If “yes” enter the item requested, the cost per item or monthly rate, and the total number of items or months for each item.
 - c. Under the Description and Justification, select the supply or item being requested and enter in the description (maximum of 500 characters) and justification (maximum of 500 characters) for each item.

G. Non-Supplantation

Select “yes.” This must be signed by the Project Administrator.

H. Authority Certification

This must be signed by the Project Administrator.

If you have any questions regarding OGMS, please email the OGMS support desk at OGMSSupport@dcjs.virginia.gov

DCJS Staff Contact

For assistance or questions, please contact Greg Hopkins, at 804-692-0977 or by email at gregory.hopkins@dcjs.virginia.gov.