(Hillsborough County Community Health Assessment Process)

(**RFA23-001**)

APPLICATION GUIDELINES

FY 2023-2024

Florida Department of Health

Division of Community Health, Office of Health Equity, Florida Department of Health, Hillsborough County Health Department

August 10, 2023

Application Deadline:

September 14, 2023 at 12:00pm ET

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FLORIDA DEPARTMENT OF HEALTH STANDARD CONTRACT	

FINANICAL COMPLIANCE AUDIT

LOBBYING AND DEBARMENT (federal funds only)

TIMELINE RFA# 23-001

Prospective applicants shall adhere to the RFA timelines as identified below.

Schedule	Due Date	Location
Request for Applications Released and Advertised	08/10/2023	Department of Health Grant Funding Opportunities Website: <u>https://www.floridahealth.gov/about/administrative-</u> <u>functions/purchasing/grant-funding-opportunities/index.html</u>
Submission of Questions	08/24/2023	Submit Questions to <u>Robert.Morales@flhealth.gov</u>
Anticipated posting of Answers to Questions	09/07/2023	Department of Health Grant Funding Opportunities Website: https://www.floridahealth.gov/about/administrative- functions/purchasing/grant-funding-opportunities/index.html
Applications due (no faxed or e-mailed applications)	Must be received by 09/14/2023, 12:00pm ET	Express Mail or Hand Delivered to: Robert Morales Florida Department of Health in Hillsborough Contract Office/Department 1105 E. Kennedy Blvd. Tampa, FL 33602
Anticipated evaluation of applications	09/21/2023	Review and Evaluation of Applications Begins
Anticipated award date	10/20/2023	Department of Health Grant Funding Opportunities Website: <u>https://www.floridahealth.gov/about/administrative-</u> <u>functions/purchasing/grant-funding-opportunities/index.html</u>

Section 1.0 INTRODUCTION

1.1 <u>Program Authority</u>

The Florida Department of Health is responsible by legislative mandate in Chapter 20.43, Florida Statutes for collecting, managing, and analyzing health data to inform the public and public health planning efforts.

1.2 Notice and Disclaimer

Grant awards will be determined by the Department of Health in accordance with this publication based on the availability of funds.

1.3 <u>Program Purpose</u>

The purpose of this Request for Application (RFA) is to select one Provider to complete a Community Health Assessment (CHA) and Community Health Improvement Plan (CHIP) under the authority of the Department of Health. The goal of the CHA is utilize a public health framework (the National Association of County and City Health Officials' (NACCHO) Mobilizing for Action through Planning and Partnerships (MAPP 2.0), to collect and report on primary and secondary data for the purpose of identifying the health disparities and top health priorities in our county, and for the development of implementation plans in the CHIP. The development of a CHA and CHIP should meet criteria provided by the Department to achieve standards for public health reaccreditation.

1.4 <u>Available Funding</u>

The total amount available to the provider will be \$119,994, for a period from July 1, 2023 through March 31, 2025.

Renewal amount will be based on Federal funding each year.

1.5 <u>Matching Funds</u>

There are no matching fund requirements under this RFA.

Section 2.0 PROGRAM OVERVIEW

2.1 <u>Background</u>

The Department of Health's mission is to promote and protect the health and safety of all people in Florida through the delivery of quality public health services and the promotion of health care standards. To support this work, county health departments collect, manage, and analyze health data to inform the public and their local public health planning efforts, through the CHA and CHIP process. The CHA and CHIP should follow the basic structure outlined in the MAPP 2.0 framework to collect and report on primary and secondary data, identify the top health priorities in our county and develop implementation plans for community health activities to impact these health priorities. The CHA and CHIP are required to be conducted by the Department every five years to maintain current data and continue to meet standards for public health re-accreditation, a process for recognizing the performance of health departments on a set of prescribed standards.

2.2 <u>Priority Areas</u>

The priority population for this project is adult aged 18 years of age and above residing in Hillsborough County. Previous community health assessments indicate that some population groups may be underrepresented in data collection. Special efforts should be made to engage groups underrepresented in community data collection projects, e.g. racial and ethnic minorities, Spanish-speaking individuals, veterans, LGBTQ+ communities, and individuals with disabilities.

2.3 <u>Program Expectations</u>

Provider will be responsible for conducting a CHA and developing a CHIP following the MAPP 2.0 framework developed by NACCHO, adapting as necessary in consultation with the Department to be appropriate for community context. Consistent with the MAPP 2.0 framework, the provider is expected to engage community partners and members in data collection and priority setting processes to identify health priorities and prioritize health disparities.

2.4 Applicant Project Results

If selected the provider will be expected to:

- Conduct three assessments for the CHA as described by the MAPP 2.0 framework:
 - Community Partner Assessment an assessment of the systems, processes and capacities of community partners and their ability to impact health disparities and health outcomes;
 - Community Status Assessment a quantitative assessment to understand the health status of the community and factors impacting quality of life, including primary data collection and analysis of primary and secondary data; and
 - Community Context Assessment a qualitative assessment to identify community strengths and assessments, understand the build environment and identify forces of change.
- Lead a community meeting to present analysis of the three assessments and rank the top health priorities to be included in the CHIP.
- Develop a CHIP in collaboration with community partners develop implementation plans for the top three health priorities, taking into consideration partner and Department capacity to implement activities to impact these health priorities and related health disparities.
- Engage a Department-led steering committee of community partners for decision making throughout the CHA & CHIP process.
- Meet standards required for the public health re-accreditation when developing and executing the CHA and CHIP.
- Provide all final CHA and CHIP reports in a Microsoft Word format and a PDF format. Documents should follow ADA Remediation standards (the process by which electronic documents, such as PDFs, are made accessible to screen readers and other assistive technology, enabling the visually impaired to hear an auditory version of the document's contents).

2.5 <u>Current and Prior Funded Projects</u>

Applicants must demonstrate the ability to provide the desired services based on current and prior project efforts and have the following qualifications and work experience:

• Maintenance of sufficient and qualified staff to carry out and/or provide the required services.

2.6 <u>Project Requirement</u>

To complete a comprehensive CHA and CHIP that engages community members and partners in the process and identifies top health priorities and health disparities. The CHA and CHIP should follow the MAPP 2.0 framework and meet standards for public health re-accreditation provided by the Department.

Section 3.0 TERMS AND CONDITIONS OF SUPPORT

3.1 <u>Eligible Applicants</u>

Applicants must be legal business entities include, but are not limited to institutions of higher learning, health care providers, government agencies, and not-for-profit 501(c)(3) entities.

All individuals, organizations and agencies submitting an application for funding are advised that accepting federal and state dollars under this RFA will require recipients' compliance with all federal and state laws, executive orders, regulations and policies governing these funds.

All vendors doing business with the State of Florida must have a completed W-9 on file with the Department of Financial Services. If awarded, the process can be completed at: https://flvendor.myfloridacfo.com. To be eligible to receive a grant, all corporations, limited liability companies or partnerships and their sub-contracts seeking to do business with the State shall be registered with the Florida Department of State in accordance with the provisions of Chapters 607, 608, 617 and 620, Florida Statutes.

3.2 <u>Eligibility Criteria</u>

Eligible applicants should be an individual or organization active in community-focused, collaborative efforts, which serve to bring together agencies, community groups, academic institutions, and other groups to address health or social concerns. These individuals or organizations may serve as the central collaborating body. Providers meeting the following criteria are eligible to apply for funding under this RFA:

- 1. Licensed to do business in the State of Florida for the services they are proposing to deliver, have a 501(c)(3) certification if the agency is not for profit, and meet all State and local laws and regulations.
- 2. Not have been placed on the convicted vendor list.
- **3.** Able to fully communicate with those being served and sensitive to partner and community member/resident's ethnic and cultural background.

3.3 <u>Minority Participation</u>

In keeping with the One Florida Initiative, the Department of Health encourages minority business participation in all its procurements. Applicants are encouraged to contact the Office of Supplier Diversity at 850/487-0915 or visit their website at <u>http://osd.dms.state.fl.us</u> for information on becoming a certified minority or for names of existing certified minorities who may be available for subcontracting or supplier opportunities.

3.4 <u>Corporate Status</u>

For all corporate applicants, proof of corporate status must be provided with the application. Tax-exempt status is not required, except for applications applying as non-profit organizations. Tax-exempt status is determined by the Internal Revenue Service (IRS) Code, Section 501(c)(3). Any of the following is acceptable evidence:

a. A statement from a state taxing body, State Attorney General, or other appropriate state official, certifying that the applicant has a non-profit status and that none of the net earnings accrue to any private shareholders or individuals.

Non-Corporate Status

Documentation that verifies the official not-for-profit status of an organization in accordance with Chapter 617, Florida Statutes.

3.5 <u>Period of Support</u>

The total amount available to the provider will be \$119,994, for a period from July 1, 2023 through March 31, 2025, paid monthly at \$5,714.

3.6 <u>Use of Grant Funds</u>

Allowable Costs – must be reasonable, necessary, and directly related to the provision of services and are limited to the following:

- Personnel
- Consultants employed directly by the Provider
- Supplies
- Meeting space for partner or community engaged meetings (e.g. focus groups, data prioritization meeting)
- Marketing to promote partner or community engaged meetings (e.g. focus groups, data prioritization meeting)
- Promotional items for community member engagement, valued at no more than \$15/item

Unallowable costs – include, but are not limited to the following:

- Building alterations or renovations
- Construction
- Direct services (e.g., hiring grant writers to prepare competitive grant applications, supporting direct patient services such as counseling)
- Food products or services
- Fringe benefits for temporary employees
- Fund raising activities
- Research

Section 4.0 APPLICATON REQUIREMENTS

4.1 <u>Application Forms</u>

Applicants must use the official form attached to this RFA. Alternate forms may not be used.

4.2 Order of Application Package

Applications for funding must address all sections of the RFA in the order presented below and in as much detail as requested. Order of application package:

- 1. Application Cover Page
- 2. Table of Contents
- 3. Narrative Section (Section 5.0)
- 4. Budget Information Forms
- 5. Other Required Forms (Section 9.0)
- 6. Appendices (Optional)

4.3 <u>Compliant Budget Form and Budget Justification Narrative</u>

In addition to filling out the budget form located in the application, a separate budget justification narrative and computation of expenditures must be provided, as outlined below.

Applicants should recognize that costs do not remain static; the budget should reflect the various phases and activities of planning, organizing, implementation, evaluation, and dissemination.

Section 5.0 REQUIRED CONTENT OF THE NARRATIVE SECTION

5.1 <u>Project Summary</u>

This section identifies the summary of the applicant's project and the standards for writing and submitting projects for review.

- Not to exceed 10 pages in length (not including cover page, table of contents, forms, or appendices)

- 12-point font
- -1-inch margins

Content of the Statement of Need, Objectives, Program Plan, Evaluation Plan, and Management Plan should reflect the applicant's current expertise and capacity based on current and prior projects

Note: Page numbering begins with the Project Summary.

5.2 <u>Statement of Need</u>

The Department is required to complete a CHA and CHIP every five years to maintain public health reaccreditation standards. There is a desire to work with a Provider to accomplish the development and implementation of this process in Hillsborough County, by engaging community members and partners in data collection, identifying health disparities, and setting priorities for community health improvement.

Applicants shall identify, in narrative form, the following information:

- 1. Estimated total number of residents to be reached through individual surveys (to include online and paper dissemination).
- 2. Estimated total number of residents to be reached through engagement through focus groups (to allow for in person and online options).
- 3. Process to engage residents, in particular groups underrepresented in community data collection projects, e.g. racial and ethnic minorities, Spanish-speaking individuals, veterans, LGBTQ+ communities, and individuals with disabilities.
- 4. Describe current or prior successes or challenges engaging community members and partners and conducting community health assessments at the county-level. Must provide examples of similar reports (submitted as an appendix).

5.3 <u>Objectives</u>

Applicants should describe their overall project objectives to address the program purpose as stated in Section 1.3. These could be described as SMART goals (specific, measurable, appropriate, realistic, and time-bound), however this format is not required.

5.4 <u>Program Plan</u>

The section must describe how the proposed project will be carried out and be linked to the needs and objectives. The applicant should describe program activities and address:

- How current and prior projects/programs can or will contribute to success of the CHA / CHIP process
- Methods of marketing and outreach for survey dissemination/collection, focus groups, and community partner meeting to set health priorities
- The provider's software and staff capabilities to perform data and statistical analysis.
- The provider's capacity to conduct community engagement, specifically surveys and focus groups, in English and Spanish.

5.5 <u>Evaluation Plan</u>

This section must describe how the applicant will evaluate program activities. It is expected that evaluation activities will be implemented at the beginning of the program in order to capture and document actions contributing to program outcomes. The evaluation plan must be able to produce documented results that demonstrate whether and how the strategies and activities funded under the program made a difference in the improvement of minority health and the elimination of health disparities. The plan should identify the expected result (i.e., a particular impact or outcome) for each major objective and activity and discuss the potential for replication.

5.6 <u>Management Plan</u>

This section identifies those administration and management strategies that will be used in the grant.

For Example:

- Discuss relevant qualifications of proposed key staff for the project. Provide a resume for each proposed staff (not counted toward page total).
- Indicate the level of effort for each proposed key staff position (e.g. 50%, 75%), including pertinent staff provided on an in-kind basis.
- Provide position or job descriptions for staff positions, including those to be filled, if applicable.
- A brief description of the organization and its qualifications.
- A description of the applicant's approach to project management of the CHA & CHIP process.

5.7 <u>Appendices</u>

All appendices must be clearly referenced and support elements of the narrative. Appendices do not count towards the narrative page total.

For Example:

- The organization's mission statement
- Organizational Chart
- Sample data collection instruments

• Previous project reports

Section 6.0 SUBMISSION OF APPLICATION

6.1 <u>Application Deadline</u>

Application Deadline: 05/15/2023 at 12:00pm ET

Applications must be received by the date and time indicated in the Timeline.

6.2 <u>Submission Methods</u>

Applications may only be submitted by regular/express mail or hand delivered.

6.3 Instructions for Submission of Applications

Applicants are required to submit the application as follows:

• The application must be signed by an individual authorized to act for the applicant agency or organization and to assume for the organization the obligations imposed by the terms and conditions of the grant.

• Applicants are required to submit three copies of the application via express/regular mail or hand delivered.

• Mailed or hand-delivered applications will be considered as meeting the deadline if they are received by the Office of (office title) by **the date and time indicated in the Timeline**. Applicants are encouraged to submit applications early. Applications that do not meet the deadline will be returned to the applicant unread.

6.4 <u>Where to Send Your Application</u>

Express Mail or Hand Delivered to:

Robert Morales Florida Department of Health in Hillsborough Contract Office/Department 1105 E. Kennedy Blvd. Tampa, FL 33602

Section 7.0 EVALUATIONS OF APPLICATONS

7.1 <u>Receipt of Applications</u>

Applications will be screened upon receipt. Applications that are not complete, or that do not conform to or address the criteria of the program will be considered non-responsive. Complete applications are those that include the required forms in the Required Forms Section of this application. Incomplete applications will be returned with notification that it did not meet the submission requirements and will not be entered into the review process.

7.2 <u>How Applications are Scored</u>

Applications will be scored by an objective review committee. Committee members are chosen for their expertise in health and their understanding of the unique health problems and related issues in Florida.

Each application will be evaluated and scored based on the evaluation criteria below. Evaluation sheets will be used by the review committee to designate the point value assigned to each application. The scores of each member of the review committee will be averaged with the scores of the other members to determine the final scoring. The maximum possible score for any application is 100 points.

Evaluation Question	Maximum Possible Points			
Purpose and Goals (20 points)				
To what extent does the applicant demonstrate an understanding of and Ability to fulfill the				
goals and requirements of the CHA/CHIP process?				
Services (30 points total)				
To what extent does the applicant demonstrate ability to furnish the eligible services listed in this				
RFA including:				
A. Prior experience conducting Community Health Assessments / Community Health	30			
Improvement Plans (10 points)	50			
B. Capacity to engage community members in data collection steps (5 points)				
C. Collaboration with community partners for implementing the process (5 points)				
D. Examples of prior projects i.e. reports provided as appendices (10 points)				
Program Plan (5 points each)				
Does the applicant completely describe the:				
A. How current and prior projects/programs can or will contribute to success of the CHA / CHIP process				
B. Methods of marketing and outreach for survey dissemination/collection, focus groups, and community partner meetings	20			
C. The provider's software and staff capabilities to perform data and statistical analysis.				
D. The provider's capacity to conduct community engagement, specifically surveys and focus				
groups, in English and Spanish.				
Approach to Health Disparities (10 points each)				
To what extent does the applicant describe:				
A. The ability to engaged communities underrepresented in community health assessment	20			
processes	30			
B. Plans to identify health disparities in primary and secondary data collection analysis				
C. The ability to prioritize health disparities in data presentations and reports				
Total	100			

7.3 Grant Awards

Grant awards will be determined by the Department of Health at its sole discretion based on the availability of funds. The awards will be awarded to one provider.

7.4 <u>Award Criteria</u>

Funding decisions will be determined by the Department of Health on the basis of merit as determined by responses to this RFA and with established evaluation criteria as described in Section 7.2. The Department will fund projects countywide.

7.5 <u>Funding</u>

The Department of Health reserves the right to revise proposed plans and negotiate final funding prior to execution of contracts.

7.6 **Posting of Awards**

Awards will be listed on the website at: <u>http://www.floridahealth.gov/about-the-department-of-health/about-</u>us/administrative-functions/purchasing/grant-funding-opportunities/index.html on or about 06/09/2023.

Section 8.0 REPORTING AND OTHER REQUIREMENTS

8.1 **Post Award Requirements**

Funded applicants will be required to submit:

• Progress reports and other supporting documents in accordance with the Attachment I.

• The Department reserves the right to evaluate the organization administrative structure, economic viability, and ability to deliver services prior to final award and execution of the contract.

Section 9.0 REQUIRED FORMS

- 9.1 <u>Application for Funding</u>
- 9.2 <u>Budget Information</u>
- 9.3 <u>Budget Narrative</u>
- 9.4 <u>Personnel Form</u>
- 9.5 <u>Statement Of No Involvement</u>
- 9.6 <u>Certification Of Drug Free Work Place</u>
- 9.7 IRS Non-Profit Status 501 (C) (3)
- 9.8 Florida Department of Health Standard Contract
- 9.9 Financial Compliance Audit

9.10 Lobbying and Debarment forms (federal funds only)