

Q&A Session #2 – Due 5pm February 11th, 2021

Subcontracting Individual Consultants

- Please clarify whether it is acceptable to hire an independent contractor to provide technical assistance to the project if that individual is not a 501(c)3 contractor. Must any subcontractors, e.g. medical experts, graphic arts etc. have 501(c)3 status or be fiscally sponsored by a 501(c)3?
 - Applicants can subcontract consultants providing specialized services (e.g. graphic design, evaluator, needs assessment) who are not 501(c)3s at a maximum cap of 25% of total DIRECT costs. The consultant will only be providing this specialized service and cannot be carrying out the primary activities of the project. If the applicant is wanting to subcontract out a portion of the work (activities), then the subcontractor would need to follow the entity eligibility requirements and be a CBO with 501(c)(3) status or be fiscally sponsored by a 501(c)(3).
 - The RFA currently says that subcontractor costs are at a 25% max of indirect costs, but we will indicate this change on the RFA webpage that this subcontractor max is on the total direct costs.
- Can grant funds be used to hire an independent consultant to assist with project evaluation?
 - Yes, project evaluation would count as a specialized service that an independent consultant provides. Applicants can subcontract consultants providing specialized services (e.g. graphic design, evaluator) who are not 501(c)3s at a maximum cap of 25% of total DIRECT costs. The consultant will only be providing this specialized service and cannot be carrying out the primary activities of the project. If the applicant is wanting to subcontract out a portion of the work (activities), then the subcontractor would need to follow the entity eligibility requirements and be a CBO with 501(c)(3) status or be fiscally sponsored by a 501(c)(3).
 - The RFA currently says that subcontractor costs are at a 25% max of indirect costs, but we will indicate this change on the RFA webpage that this subcontractor max is on the total direct costs.
- While direct services are not allowed but if participants are a part of workgroup to develop system change is a reimbursement allowed?
 - You may use an advisory council or workgroup in your proposal, but you may not pay a stipend for meetings, travel, or time. Reimbursement for the workgroup or advisory council is not allowable based off of the funder's (CDC's) guidelines on stipends. However, you may hire these individuals as consultants and place them in the subcontractor line-item, as long as they are not conducting the primary pilot project activities.
- We plan to establish a working group composed of leadership from our coalition members, all small CBOs, to plan and oversee our project. Can we reimburse these individuals based upon an hourly rate for time spent working on the project?

- This sounds like a workgroup or an advisory council. Unfortunately, you cannot use the funds to reimburse for expenses, travel, or time for these individual members due to the funder's (CDC's) guidelines on stipends. However, you may hire these individuals as consultants and place them in the subcontractor line-item, as long as they are not conducting the primary pilot project activities. Planning and oversight of the project is allowable.

Page Limits & Formatting

- Are the IRS letters and evidence of insurance included within the 20 page submission? Because we have multiple subcontractors this would mean that at least 6 of our 20 page allocation would be taken up with these items and would put applications with multiple subs at a disadvantage. Can you please change this so that these documents (or additional documents from subs) are excluded from the page count?
 - OHE has decided that additional documents from subcontractors are excluded from the page count, so you may exceed 20 pages only if you have additional subcontractors. Please note this clearly on the Application Cover Page if this is the case, for our prescreening panelists in the "Brief Description of Project". You may type in red "**Application exceeds 20 pages due to extra subcontractor documents.**" at the end of the section. We will update this on the RFA webpage.
- We were wondering if there was more information on the issue of page limits and how limits are allocated across the various sections of the application? We believe that there was mentioned of a revised RFP forthcoming as well?
 - If you scroll down on the RFA webpage, you can see that we clarified on the submission length on January 21st that applications cannot exceed 20 pages. The revised RFA has been updated as well on January 21st. The RFA also states the length for certain sections of the application (Letters of Support – 1 page max for each letter, 5 Why's – (example is less than 1 page), Logic Model – 1 page or less).
- Can you please confirm if the letter(s) of support count toward the 20 page limit?
 - The letter(s) of support will count towards the page limit. Each letter will be 1 page.
- For the Narrative portion of the proposal, should we use the numbering system/outline provided in the RFA pdf document to organize our response? Is there a preferred way to organize the entire submission package (i.e. have a header with the provided number and name of each section)?
 - It would be ideal for the panelists' review for applicants to use the numbering system/outline provided in the RFA to organize your response.
- Is there a preferred font size that we should use for the submission package?
 - Please have your submission be in 12 point font size with one-inch margins. There is no specific font required.
- Is there a maximum word count for the Narrative portion or is the only requirement that the submission package not exceed 20 pages?

- No maximum word count, but keep the submission package under the page limit. Please have your submission be in 12 point font size with one-inch margins.

Joint Applications

- We are submitting a joint application with a partner agency for one program (a youth centered program). May we submit a separate application for a different activity (research overcrowding in local housing) as a solo agency?
 - CBOs may only participate in one application. Research is also an unallowable activity.

Allowable Activities

- We are an ECBO working with the refugee community and we are considering a project similar to #18 in the list in the RFA, setting up One-Stop-Shops in different areas of the County where there are large immigrant and refugee communities which would include community health workers who speak the different immigrant and refugee languages. Are CHW salaries allowable if the CHWs provide linkages to services since linkages are not direct services in the same way that providing food or rental assistance are?
 - This is allowable, because they are performing eligible pilot project activities.
- Can Case Managers' salaries be funded as long as they are performing eligible Pilot Project activities, i.e. setting up a system whereby homeless individuals served by a social services non-profit have direct access to FQHC's health practitioners embedded in their service center?
 - This is allowable, because they are performing eligible pilot project activities.
- Are we allowed to use these funds to stipend CHWs or promotoras, (with the understanding that they are not performing direct service delivery)?
 - Yes, this is allowable if they are performing eligible pilot project activities.
- Can these funds be used to set up a system or policy among local community coalitions that would utilize CHWs/promotoras to collect and relay community voices for the purpose of informing decision making around programs and activities that seek to reduce the impact of the pandemic on our county's vulnerable populations?
 - Yes, that proposal would be eligible if all requirements of the RFA are met. Make sure to demonstrate how the proposed activities will ultimately lead to lowering the risk of COVID-19 for this community. CDPH cannot guarantee that this application will meet all requirements or be scored high enough to be awarded funding.
- Our grant will be teaming up scholars from various fields that touch public health, and create a program where we have civic and cbo leaders, and teach about communication and outreach with indigenous communities that are skeptical about the covid vaccine. I know that upstream (education) is not allowed for this grant. But we see this as training. Taking cutting-edge equity theories and

training community leaders about how to address the gaps in communication with indigenous communities despite historical discrimination and criminalization of undocumented peoples. Making sure this is allowable?

- No, this would not be allowable. As stated, vaccination, including addressing vaccine hesitancy, has significant other sources of funding. Furthermore education or training about vaccination does not address an underlying reason that indigenous communities face higher risk.
- Our program provides training for cohorts of individuals to work in their community as health engagement advocates. The advocates will address underlying inequities in the social determinants of health, especially related to this community's high incidence of Covid-19. Would providing the training (for example paying for staff time to recruit participants, organize and deliver the online training) be considered advocacy and community capacity building/organizing (allowable under this grant) or education / direct services (not allowable under this grant)? Thank you.
 - Yes, that proposal would be eligible if all requirements of the RFA are met. You must demonstrate that you are building the capacity to make long-term changes in the policies, structures and systems that lead to inequitable risk, not merely education about individual health issues. Make sure to demonstrate how the proposed activities will ultimately lead to lowering the risk of COVID-19 for this community. CDPH cannot guarantee that this application will meet all requirements or be scored high enough to be awarded funding.
- My organization recently started a hotline that people who are inside prison or recently returned to the community can call to get connected to medical care. When they call to get assistance, we provide them with information about clinics and other resources in their community and often teach them how to advocate for their needs within the health system. Would coordination and staffing of this service be an allowable activity?
 - Yes, that proposal would be eligible if all requirements of the RFA are met. CDPH cannot guarantee that this application will meet all requirements or be scored high enough to be awarded funding.
- Can you please clarify what would acceptable outputs? We would like to propose designing and setting up a program that will address access to income. Would it be acceptable to include establishing an advisory group, holding stakeholder meetings, and similar as outputs? On pg.18 of the RFA, an example is provided using percentage indicators. Setting such indicators may be difficult for a program that is not yet established.
 - These are acceptable outputs, if you can also say what was accomplished by the advisory group and what major decision was made during the stakeholder meeting, etc. Acceptable outputs for the Logic Model (aka Theory of Change, Road Map, Causal Chain, Sequence of Events) can include potential indicators which are percentages, but are not limited to percentage indicators. If you look at the 2 logic model examples on P. 19 and 20, the outputs are not percentage indicators.

- We are very interested in applying for your grant. We are located in one of the most rural and disenfranchised communities from a health and wellness standpoint. Some of the most disenfranchised groups are agricultural workers, seniors, veterans, and Native Americans. In addition, our county of 200K is represented by 85% Hispanic of decent. Unfortunately, our largest social determinant to health services is transportation. We are inquiring if the grant will allow for capital projects such as a mobile clinic vehicle. We would anticipate the cost being around 220K and our CBO would provide the staffing in-kind. Can you kindly advise if Capital Projects are an allowable expense for this particular grant?
 - A mobile clinic vehicle providing health and clinic services is not allowable, since this is a downstream, direct service.
- Is the language such as *"CDPH cannot guarantee that this application will meet all requirements or be scored high enough to be awarded funding"* provided in your first round Q&A intended to deter applicants or is this standard language that you are using after any question regarding the eligibility of a specific approach?
 - This is standard language that we are using after any question regarding eligibility.
- Can we use grant funds to create mini tech labs (i.e. purchase storage and charging carts plus tablets and a UV cleaning device) that can be used by non-grant funded staff to deliver digital literacy training and other direct services to community members? We are considering this as tech infrastructure but we want to make sure this is an allowable expense.
 - No, these expenses are part of direct service as it's equipment to provide direct services.
- We are confused as to whether projects that address the underlying social determinants of health that have created vulnerabilities for contracting COVID-19 among some population or if the projects (i.e. low income - overcrowded housing - greater risk of contracting COVID) are eligible, i.e. can we propose to address income inequalities? or do we have to have a project that directly
 - The question cut off, but yes, both examples that you mention address underlying inequities that increase risk of COVID-19, so a proposal that addresses them could be eligible if it follows the requirements of the RFA. CDPH cannot guarantee that this application will meet all requirements or be scored high enough to be awarded funding.

Letters of Support & LHJ

- We are in the process of applying and have a question concerning letters of support. If we're working in 3 different geographic locations within California, do we need 3 different letters of support from the local health jurisdiction of each region?
 - You only need 1 letter from the lead applicant's LHJ for a joint application.
- I don't see a due date for the letter of intent but remember hearing the requirement during the call. By chance can you remind me of the LOI due date?

- The letter of support is part of the application packet. The application deadline is 5pm March 2, 2021. There is no Letter of Intent required.
- You state in the RFA and in the first QA session that there is a required Letter of Support from our Local Health Jurisdiction. Is the local health department the ONLY LHJ considered to be acceptable? Here in San Francisco, we work with a number of public health agencies with jurisdiction here, and our closest working relationship is with the Bay Area Air Quality Management District. Would a letter of support from BAAQMD count for the required Letter of Support from an LHJ? (I should add that Letters of Support from the SF Public Health Department often have to receive Health Commission approval, which is far too long a process for many grant applications including this one; and this requirement could also put the Local Health Jurisdiction in the position of choosing which pilot projects are allowed to apply to you, which could restrict proposals; this may or may not be your intention as the funder.)
 - A letter of support from the Bay Area Air Quality Management District will not count as the required letter of support from the LHJ. You will need the letter from the SF Public Health Department.
- Please clarify what is the Local Health Jurisdiction. On the webinar, the LHJ was described as the local office of health equity. Is this the case?
 - The local health jurisdiction is the public health department. There are 58 of them for California's 58 counties, and 3 for cities.
- Would an acceptable signatory for the mandatory letter be the Refugee Coordinator at the County Health and Human Services Department or would that not qualify as the LHJ? We are an ECBO working with the refugee community and so the Refugee Coordinator is the individual who knows our organization best.
 - Yes that is acceptable. The County Health and Human Services Department would qualify as an LHJ.
- For the LHC letter, can we submit on behalf of the county we have a contract with?
 - The letter of support must come from the local health jurisdiction (LHJ).

RFA Content

- Can you please provide a copy of the Att 2 Budget Overview Template (Excel)? We are unable to access it via the website without entering credentials.
 - If the credentials window pop up, cancel out of the box and you will be able to access the attachment. For those who still cannot access, please email the inbox and we will provide you with the attachment.
- Please confirm the frequency with which we must submit reports once a project is approved, will it be quarterly or monthly? Can we choose to invoice DPH quarterly instead of monthly, or will monthly invoices be required? Also, can you please provide a link to a sample template of the narrative report and the invoice? This will help applying CBOs to determine the administrative burden that will be required of us if we receive project approval.

- Reports are due quarterly and invoices are due monthly. The quarterly progress reports are in development and will only be provided to awardees. Awardees will need to submit invoices monthly, as stated in the sample grant agreement located on the RFA webpage in the left hand column. We do not have a sample template of the narrative report, but the RFA has detailed instructions and outlines what to include in your application for each portion.
- For the "Evaluation" line item, should a contractor be specified and does the evaluator need to be a 501(c)3?
 - The evaluator does not need to be a 501(c)3, since this is a specialized service that can be provided by an individual consultant. If you are subcontracting out the evaluation work, please indicate this in the subcontracting line item section of the budget. If an applicant lists the subcontracted evaluator in the evaluator section and not the subcontracting section, this will not affect the application status.
- We'd like to use the 5 Why's for our Root Cause Analysis (<https://www.cms.gov/medicare/provider-enrollment-and-certification/qapi/downloads/fivewhys.pdf>). Is submitting this completed form sufficient for this section?
 - The link did not work, but as long you are asking and answering the 5 Why's as directed in the instructions, you can present this in any format. If you didn't develop the root cause analysis yourself, be sure to demonstrate that it addresses the root cause(s) you propose to address in your project.
- Can you clarify what is included as a COVID-19 Health Impact? We understand that contracting COVID-19 and any subsequent health problems would be a health impact, but would increased anxiety due to the economic stressors caused by COVID-19 be considered a COVID-19 health impact?
 - Yes, we are counting mental illness as a chronic condition/health impact of COVID, because poor mental health can lead/contribute to other adverse health outcomes. Unless there are intersectional risks the application might not be the strongest, but not categorically ineligible.

Funding Tiers

- What determines budget tiers? Are there certain outcomes that are required at each tier?
 - There are three tiers to help with categorizing awardees, since the award is \$5 million that will be split up between 16-30 CBOs. There are not certain outcomes required at each tier. The number of awardees per tier is not pre-determined. A CBO does not have a greater chance of getting the grant if they submit a project under one tier than another.
- Hlub Hmong Center is a CBO based in Merced, CA, working on systems within the our communities. I believe the next Q&A session will be held February 16 but we would like to know if we can ask a question before hand regarding the different award tiers. As the RFA has stated, there are currently 3 award tiers.

We would like to know if there are specific and different requirements for each tier? Or are the tiers strictly contingent on the capacity and work that will be developed? All guidance and responses will be greatly appreciated.

- The tiers are contingent on the capacity and work that will be developed, and pilot project activity costs will need to be justified in the Attachment 2 Budget Overview (Excel). There three tiers help with categorizing awardees, since the award is \$5 million that will be split up between 16-30 CBOs. There are not certain outcomes required at each tier. The number of awardees per tier is not pre-determined. A CBO does not have a greater chance of getting the grant if they submit a project under one tier than another.
- I was wondering if a group of 6 organizations in Kern are applying, can the grant ask amount exceed \$300,000 for the group?
 - No, the maximum request of funds is \$300,000 per proposal.

Fiscal Sponsors

- We are a fiscal sponsor for several programs and are interested in applying for the captioned. Are we allowed to submit multiple applications for this opportunity?
 - If you are not performing any of the work or receiving the funding for serving as a fiscal sponsor, you may submit your own application. However, one CBO can only be involved in 1 application as either the lead applicant or a subcontractor.
- I was wondering: If you have a project in mind for Orange County, but the 5013c that will be fiscally sponsoring this project is located in Long Beach (and only has one office there), is the project eligible? The project will only be implemented in Orange County. If ineligible, would you recommend finding a fiscal sponsor in Orange County?
 - The fiscal sponsor for an applicant can be from Long Beach, as long as they are not doing any of the work and are not receiving funds.

Eligibility

- Can one of the subcontractors be a partner that represents a UC system?
 - Subcontractors also need to follow the entity eligibility, and academic entities are ineligible entities for both leads and subcontractors. However, anyone anywhere could be an in-kind/unfunded partner, and the un-kind/unfunded partner cannot receive any funds.
- Muslim American Society Social Services Foundation(MAS-SSF) provides mental health peer counseling/support by mental health peer specialists. MAS-SSF is planning to start offering clinical counseling by supervised associates and clinical counseling by a volunteer pro bono licensed MFT in 2021. Fees are on a sliding scale from free to \$\$ per session. MAS-SSF is not set up to accept insurance and is not associated with any insurance company or government insurance such as Medicare or Medi-Cal. Is MAS-SSF, therefore one of the following ineligible entities: 1) Hospitals, Healthcare Providers, and (Social)

Health Maintenance Organizations, OR 2) Rural, Urban, and Suburban County and Private Clinics Providing Any Healthcare Service?

- As long as your organization is not part of or affiliated with a clinic, your organization is eligible. However, mental health peer counseling/support is a direct service and ineligible.
- Muslim American Society Social Services Foundation(MAS-SSF) holds its own 501(c)3 status and operates in Sacramento, CA, however it is affiliated to a national organization that provides services nationwide, including LA. Does this affect our eligibility?
 - You are eligible to apply as long the office headquarters is not located in LA and that none of the funds goes to work completed in LA.
- Though MAS-SSF operates in Sacramento CA, one of our youth crisis intervention Hopeline is open to all throughout the US, and we also receive calls from LA. Does this affect our eligibility?
 - You are eligible to apply as long the office headquarters is not located in LA and that none of the funds goes to work completed in LA. Operating a hotline is a direct service and an ineligible activity for this funding source.
- I have a question regarding the grant. Can two CBOs apply separately and add each other as a subcontractor for each other as regional partners?
 - Each entity can only be involved in 1 proposal, either as a lead or as a subcontractor. However, you can serve as in-kind or unfunded partners for each other's applications.
- The majority of our work is being done in Orange County, but we do some work in Los Angeles, too. Would we be eligible to apply as the main application or as a subcontractor?
 - If you are referring to project activity work, funding for this project cannot be used for any work done in Los Angeles county.
 - If you are referring to your organization's work, and the headquarters/main office is outside of LAC, and the work will be done outside of LAC, then you are eligible as both the main applicant and as the subcontractor.
 - Any ineligible entity could be an in-kind/unfunded partner to the proposal.

Miscellaneous

- I was wondering if there will be another webinar on the 16th of this month for the COVID 19-Health Equity Pilot project grant? If so, where can I find the link?
 - There will not be a second webinar held, but the questions for Q&A Session #2 are planned to be posted on the 16th on February. You may view the [recording](#), [slide deck](#), and [Webinar Q&As](#) that are located in the left hand column of the [RFA webpage](#).
- Do you need the resume of the evaluator we will hire as a subcontract?
 - No.
- Do we have time to hire or do we need to have the staff ready to start?
 - This will depend on your project timeline. The project period ends November 17, 2022 and all activities need to be completed before this date.