

## Q&A Session #1 – Due 5pm January 28<sup>th</sup>, 2021

### Spending

- Will this be a cost-reimbursement grant?
  - Yes, this is a cost-reimbursement grant. CDPH may provide funding to grant recipients after expenses have been incurred with the expectation that invoices are sent in on a monthly basis. All services will need to be completed by the grant agreement end date (11/17/22), and CBOs will have 30 calendar days to submit their final invoice after the grant ends.
- Is it permissible to use community advisory councils in projects and may the organization pay the members a stipend for meetings and reimburse them for costs related to project travel should travel occur?
  - Yes, you may use community advisory councils in projects.
  - No, you may not pay a stipend for meetings or reimburse for travel expenses.
- Are technology purchases allowable?
  - Yes. You will need to justify the items and costs in the Attachment 2: Budget Overview (Excel). Costs must be reasonable and be related to the proposed activities. Equipment will also need to be pro-rated should staff be funded by multiple sources of funding.

### Subcontracting and In-kind/Unfunded Partners

- Can grant funds be used to engage consultants?
  - Yes, applicants can subcontract consultants providing specialized services (i.e. graphic design) at a maximum cap of 25%. The consultant will only be providing this specialized service and cannot be carrying out the 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).
- Is sub-contracting with individual consultants allowable or is sub-contracting limited only to other 501c3s? Our project relies on input and expertise from tribal culture bearers. These individuals often works as consultants and not as staff at other 501c3.
  - Applicants can subcontract consultants providing specialized services (i.e. graphic design) at a maximum cap of 25%. The consultant will only be providing this specialized service and cannot be carrying out the 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).

- We have two nonprofit organizations in our collaborative that run clinics but not exclusively. They provide social services as a CBO's and have an added clinic. Please advise as to your final determination. Can they be involved as a non-funded partner? I just want to make sure so that we are clear in our proposal since they are part of our collaborative.
  - Anyone anywhere can be an in-kind/unfunded partner. In-kind/unfunded partners do not have to follow the entity eligibility requirements.
- Can grant funds be used to hire independent contractors who have the technical expertise that is needed to develop our project? Our coalition consists of small ethnic community-based organizations (ECBOs) led by members of refugee communities. One of the barriers that has limited our ability to address systemic inequities is lack of access to resources to hire specialists to work alongside us on projects (which is in itself an inequity when small ECBOs are compared to larger well-resourced CBOs). We are exploring two possible projects, one of which is the establishment of a technology resource hub - we couldn't set up the hub without contracting with an IT specialist, we would also like to use a small amount of grant funds for a graphics designer. In both of these cases we want to engage contractors who represent our community - restricting us to contractors who work under a 501 C 3 designation will ironically make this more challenging if not impossible. Perhaps have a cap on the size of contracts with non-CBOs or on the % of total grant award?
  - Applicants can subcontract consultants providing specialized services (i.e. graphic design) at a maximum cap of 25%. The consultant will only be providing this specialized service and cannot be carrying out the 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).
- On page 35 of the RFP under Subcontracts it reads "The proposed subcontract personnel and consultant costs are reasonable, directly support the proposed Pilot Project Activities, and are consistent with the needs of the project and level of responsibility." Does this mean that grant funds can be used to pay consultants, for example an independent planning or evaluation consultant or an IT consultant?
  - Applicants can subcontract consultants providing specialized services (i.e. graphic design) at a maximum cap of 25%. The consultant will only be providing this specialized service and cannot be carrying out the 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 CBO a with 501(c)(3) status or be fiscally sponsored by a 501(c)(3).

- Any ineligible entities can be involved with the application as an in-kind or unfunded partner.
- Would a partnership between 501(c) (3) in LA County and another 501(c) (3) outside of LA County be eligible if the lead is the latter and all the proposed work will be done outside of LA County?
  - Subcontractors will need to follow the entity eligibility requirements.
  - The 501(c)(3) LA County based partner could be an in-kind/unfunded partner and cannot be a subcontractor. Anyone anywhere could be an in-kind/unfunded partner, which means this partner can be from the ineligible list and be located in LA County. In-kind/unfunded partners cannot receive any of the funding.

### Eligibility

- Are nonprofits that hold their own 501c3 status and are registered in the state of California eligible even if they are affiliated with a national organization?
  - Yes, non-profits that have their own 501(c)(3) and registered in California are eligible for this funding. The national organization, however, cannot receive any funding.
- I'm writing with a question regarding the COVID-19 Health Equity Projects RFA. Since there are geographic restrictions on which organizations are eligible to apply, will there be more information given on similar funding opportunities for those other areas (specifically Los Angeles County)?
  - Los Angeles County was provided its own funding for COVID-19 response and recovery activities and will determine how the funds are spent. You may wish to contact the Los Angeles County Department of Public Health, or you may visit <https://www.grants.ca.gov/> to see if there are similar funding opportunities for Los Angeles County specifically.
- My organization is an FQHC. During the information webinar held on January 20th, it was stated that clinics are not allowed to apply and healthcare services cannot be provided with this funding. Would my organization still be ineligible if our application is for non-health service such as outreach or other potential pilot projects listed as examples within the RFA?
  - Federally Qualified Health Centers (FQHCs) are ineligible to apply, as they are defined as an ineligible entity. However, your FQHC can serve as an in-kind or unfunded partner for another applicant. In-kind and unfunded partners will not receive any funding.
- Are educational institutions with a 501c3 and/or auxiliary eligible to apply?
  - Academic/educational institutions are not eligible to apply.

## RFA Content

- Does the problem explored through the root cause analysis have to be directly related to health or can it be a problem that impacts health such as risk of evictions due to the economic impact of COVID-19?
  - The analysis will illuminate the societal and/or environmental context that leads to poor health, so yes, it can be a problem that impacts health such as risk of evictions due to the economic impact of COVID-19 for your chosen population. Your root cause analysis and logic model should make clear the links between evictions and COVID-19 health impacts.
- The letter from the Local Health Jurisdiction (LHJ) must, “Describe the Applicant’s ability to fulfill the fiduciary and grants management functions (e.g., meet grant obligations, meet deadlines, complete required reports, prepare timely accurate invoices)”. What if the applicant has not had a fiduciary and grants management relationship with the LHJ before and the LHJ cannot attest to these functions?
  - If the applicant has not had a fiduciary and/or grants management relationship with a LHJ, then please have the letter indicate that there was no prior relationship with the LHJ. However, if known, the LHJ can provide information about the organization’s capacity regarding fiduciary and grants management functions. The letter should describe the engagement or intended engagement between the applicant and the LHJ.
- For the letter of recommendation from our local health jurisdiction, would a letter of recommendation from The Central California Alliance for Health fit the criteria or are you looking for a letter of recommendation from a county official?
  - One letter of support is required and must be from the organization’s local health jurisdiction (the county health department or city in the case of Berkeley). The second, optional letter of support can be from the Central California Alliance for Health.

## Funding Tiers

- Why is there 3 tiers? Do we have a greater chance of getting the grant if we submit a project for tier 1 as opposed to tiers 2 or 3?
  - There are three tiers to help with categorizing awardees, since the award is \$5 million that will be split up between 16-30 CBOs. 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.
- Is this grant meant to support organizations of a certain sized budget? Are you looking to award small non-profits with under, say, \$1 million budgets or larger, more established organizations?

- We are not looking towards supporting organizations of certain sized budgets. We do strongly encourage organizations to collaborate with each other either by submitting a joint application, or by collaborating post-award.
- Is there a recommendation for award dollar amounts in relation to the size of an organization's budget? That is, are you expecting organizations with budgets, say, under \$1 million to request to apply within a certain tier?
  - There is no recommendation for award dollar amounts in relation to the size of an organization's budget. You will need to justify your costs in the Attachment 2: Budget Overview (Excel).

#### Allowable and Unallowable Activities

- Our innovative project is called Peninsula Volunteers Inc.(PVI) PVI TECH CONNECT. Our program will allow seniors in San Mateo County to have access to internet as well offer tablets for ones that do not have internet and/or a laptop or computer. The program also includes training on how to use a tablet as well offering classes on using Zoom. Please let me know if this is an approved project.
  - The funds cannot be used for direct services, such as the tablets themselves or individual education (see pages 9 and 10 of the RFA). However, development of innovative systems of coordination or means of increasing access to services (like technology) on an ongoing basis could be. The application would need to describe how the project reduces underlying social or institutional inequities or living conditions. Seniors, without any other intersection of characteristics (listed on the priority populations list) may not score well compared to a priority population or another high-risk population. Please make sure you justify the population chosen with either data and/or information if the population selected is not on the priority population list.
- Can you confirm that a project which focuses on addressing digital literacy and inclusion challenges through advocacy, training and infrastructure development is acceptable?
  - Yes, a project which focuses on addressing digital literacy and inclusion challenges through advocacy, training and infrastructure development should be eligible to apply, if the guidelines of the RFA are met. The project should also address the social determinants of health and inequities of communities facing disproportionate risk of COVID. CDPH cannot guarantee that this application will meet all requirements or be scored high enough to be awarded funding.
- In terms of outcomes for the project, what is the average number of beneficiaries to a historically successful application? We have two impacts, meals served to

food insecure neighbors, and job trainees, and the number of beneficiaries in each area varies greatly.

- This is a new fund source so there are no examples of historical projects. The funding cannot be used for direct services. The funding cannot be for meals, since this is a direct service, but the funding can be used to set up a system for access to healthy foods for food-insecure neighbors.
- With the understanding that direct services are not allowable for this funding opportunity, would a program that provides health advocacy trainings that educate Latinas on how to: 1) Advocate for themselves, peers, and communities; and 2) Engage city, county, and state leaders and health systems to undermine health disparities they experience.
  - 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.
- Would the following pilot program fit within guidelines for this grant? We propose to equip, train and support low-income older adults in the community with technology for critical social connection, telehealth, and access to information and services which are so vital during the COVID pandemic. We would screen for need, then provide tablets and pair each participant with a local student volunteer to provide in-person weekly support so participants are comfortable using the technology on their own. Self-reported health outcomes will be measured including reduction of loneliness and isolation, increased independence and overall health of participants.
  - This will be an allowable activity. However, the funds cannot be used for the tablets as this is a direct service. CDPH cannot guarantee that this application will meet all requirements or be scored high enough to be awarded funding.
- The application will be for a 501(c)(3) Family Resource Center currently operating with several family orientated support and service programs. In mid November, there was county funding for a 6-month program to develop a Promotores de Salud for COVID-19 response. The promotores are based in a small rural community. The program has been effective and processes and materials have been shared however not systematically or with enough support that allows others to replicate the efforts. The application would be for replicating this model throughout the county with partner networks that identify interested and trusted community members to function as promotores. As much of the critical information from the County remains lacking in translation we would use funding to support personnel and material support for: (1) collaborative and

participatory coordination of efforts informed and led by Promotores, (2) To streamline energy and efforts processes and personnel for: (2a) centralized translation, (2b) centralized / standardized training, (2c) centralized graphic design support for outreach materials that can be amended for local contacts and resources, (2d) processes to employ various methods for getting critical information out timely and effectively to monolingual Spanish speakers - especially those without internet, and (3) any feedback on whether this is an eligible effort would be appreciated.

- Family resource centers are allowable, and this activity would be allowable.
- The COVID pandemic has changed the ways we connect and support each other and has impacted emotional well-being through loss of social connectedness and support. According to the CDC, finding ways to maintain this support and connection can “empower and encourage individuals and communities to protect themselves, care for those who become sick, keep kids healthy, and better cope with stress.” To prevent the spread of COVID-19, we must work to ensure people have resources to maintain their mental health, including easy access to mental health care. We need programs and practices for racial and minority communities who have been disproportionately impacted by COVID-19. We would like to submit a proposal for a pilot program to develop a bi-lingual counseling/therapy center to address the PTSD, anxiety, depression, and grief associated with COVID-19 for children with special health care needs and their families. Many of these families identify as Latinx, farmworkers, immigrants, low-wage and frontline essential workers, limited English proficiency and low-income individuals. Can proposals to reduce the risks associated with COVID-19 include expanding access to mental health resources to mitigate the impact of the virus on these target populations, or are you looking for applications that reduce the risks of transmitting the COVID-19 virus?
  - Providing counseling/therapy itself would be a direct service and a downstream effort, which is not allowable. Proposals can be systems improvements to expand access to mental health resources but cannot be directly providing these resources. The development of the plan for the center, engaging mental health consumers in developing the plan, identifying sources of ongoing funding, reducing stigma, expanding the categories of beneficiaries qualifying for mental health services under health plans, etc., could be eligible activities, if the other requirements of the RFA are met. Proposals can also be targeting the social determinants of health that will reduce the risks of transmitting the virus.

- On page 11 of the RFA, it states that universal basic income programs for residents would be an allowable pilot project. Can you please clarify whether cash distributions would be considered direct service and unallowable?
  - The example states: “Enact universal basic income programs for residents, to ensure they can stay housed, fed, and healthy even if they lose their jobs or get sick.” Cash distribution is not allowed, because this is a direct service and are unallowable. However, a system or a solution to increase access, or address the lack of access to basic income would be appropriate by enacting and setting up a universal basic income program, such as designing the universal basic income plan, engaging residents in planning processes, identifying ongoing funding, getting the program approved by the municipality, identifying recipients, developing the evaluation plan, training staff on how to implement the program, etc.