



THE CENTER

at Sierra Health Foundation

Asthma Mitigation Project

Grant Application FAQ

WHO CAN APPLY

Q: My organization is very interested in this opportunity. Is this funding opportunity open to other than non-profit organizations such as community-based health care providers or county government agencies?

A: Yes, this opportunity is open to the following types of organizations so long as they meet the eligibility criteria and are able to demonstrate work and trusted community relationships with the focus community. Particularly we want to emphasize the following:

- Are a 501 (c)(3) community-based organization, local health department, a community-based health care provider or a Medi-Cal managed care organization.
- Community-based organizations with deep community ties are encouraged to apply.
- Provide services in counties north of Sacramento including: Alpine, Amador, Butte, Calaveras, Colusa, Del Norte, El Dorado, Glenn, Humboldt, Lake, Lassen, Mendocino, Modoc, Nevada, Placer, Plumas, Shasta, Sierra, Siskiyou, Sutter, Tehama, Trinity, Tuolumne, Yolo, Yuba **and/or** to one or more of the following target populations: Asian American/Pacific Islander, Native American and Tribal and Refugees.

Q: Can organizations apply provided they serve Asian American/Pacific Islander, Native American and Tribal and Refugees or is the funding exclusively focused on the northern counties listed in the RFP?

A: California organizations serving one or more of the target populations are eligible to apply, regardless of their geographic location.

Q: Can organizations located in counties that already have Asthma Mitigation Project grantees still apply?

A: Yes, so long as applicants meet the other eligibility requirements.

Q: Are school districts eligible to apply?

A: At this time, school districts are not eligible to apply.

Q: My organization does not already have an asthma home visiting program. Can we apply to develop and launch a new program?

A: Yes, new programs are eligible to apply. Your application should clearly explain why your organization is the appropriate organization to apply including track record of engaging with community members and knowledge and partnerships with other organizations addressing asthma in the community, as well as knowledge of home visiting programs.

Q: My organization has a well-established asthma home visiting program. Is this grant opportunity a good fit for us?

A: Yes, well-established asthma home visiting programs are eligible to apply.

Q: May an organization submit more than one application under this funding opportunity?

A: No, organizations are limited to one application/contract per organization.

Q: Can two organizations or agencies work together for this opportunity?

A: Yes, we welcome partnerships. One organization/agency would need to be the lead applicant, with roles for other organizations/agencies clearly defined in the application. Additionally, we encourage new partnerships.

Q: Can my organization partner with another organization to provide particular services, such as energy efficiency services?

A: Funds may be used for sub-contracted services so long as the services are not readily funded by other publicly available resources for which the service recipients qualify. For example, if the client you're serving is eligible for services from the Low-Income Home Energy Assistance Program (LIHEAP), that program should provide improvements to the ventilation system so that funds from this grant program can focus on other asthma trigger remediation activities. But there may be cases in which funding from this grant program could be used for sub-contracted services, such as if the lead applicant does not have the capacity itself to provide integrated pest management services.

Q: Are grantees required to have partners to help implement their projects?

A: Partnerships are strongly encouraged, especially to provide referrals, but are not required.

Q: What will be the responsibility of our partners who will be submitting letters of support in terms of project implementation? Will they need to be included as having a specific active role in our project/work plan beyond supporting us?

A: By submitting a letter of support from partners, they are not committing to participate in your program but are demonstrating your ability to work with partners. If they have a specific role, such as providing referrals or training, please be sure to include that information in your letter.

Q: Is it recommended that organizations who are applying already conduct asthma home visiting activities?

A: Organizations do not need to be currently conducting asthma home visiting activities. We expect a mix of applicants, including those who have asthma home visiting experience and those who are entering this field.

Q: When will awards be announced?

A: Applications are due April 20, 2021, at 1 p.m. Reviews will occur in May and June and Award Announcements will be made in July.

Q: Some service providers may be working across a large geographic area with multiple MCO's. Within these areas there may be as many as 500 or more patients who fit these categories per MCO. As only one grant per entity is allowed, can a second entity such as the MCO or community health clinic submit a proposal and subcontract services with the first service provider who is the primary entity for a grant in a different service area?

A: If your organization is part of a coalition/partnership, please just submit one proposal for that partnership. You are encouraged to submit a supplemental budget request if you would like to serve more clients than the \$350,000 supports. If your organization is part of multiple distinct coalitions/partnerships, your organization may be part of multiple proposals (but only as the lead on one proposal).

FUNDING

Q: How many people were served through the first round of awardees?

A: In the first round of funding, 22 organizations were funded across the state. This round began in August 2020 and will continue through May 2023.

Q: Can you share how many applications from the first round came in and how many were selected?

A: In the first round of funding, we received requests that totaled over \$28 million and awarded \$10 million to 22 organizations.

Q: How many awards do you anticipate awarding?

A: The number of awards made will be based on applications received. There is up to \$2 million in funding available under this opportunity.

Q: Will you accept a fiscal agent?

A: Organizations are eligible to apply under a fiscal sponsor.

Q: Do you anticipate possible future funding opportunities to continue the work?

A: This funding is through a one-time allocation in the California state budget. Future funding depends on state budget decisions. At this time, we cannot state that there will be renewal funding opportunities.

Q: If we have a negotiated Indirect Cost Rate can we use that percentage or must we use the 15% outlined in the budget?

A: Please use the 15% outlined in the budget.

Q: Is the funding up to a total of \$350,000 for 2 years, or \$350,000 per year for 2 years?

A: The funding is for \$350,000 for 2 years. The total funding amount is \$350,000.

Q: Can we pay subcontractors out of contract funds?

A: Yes, you can pay subcontractors using this funding.

Q: Could you clarify if funding could be used for outreach activities about external environmental triggers?

A: Funding may be used for outreach activities to enroll people into your program, but the bulk of funds should be used for asthma home visitation, education, and environmental remediation.

Q: Can the budgets for years 1 and 2 be different, as long as it does not exceed \$350,000 in the total budget?

A: Yes, the budgets for years 1, and 2 can be different and the total of all two years should not exceed \$350,000.

Q: Is there a requirement for risk stratification for resource management that determines distribution of supplies or amount spent per patient?

A: Risk stratification starts with the priority population, specifically Medi-Cal members with poorly controlled asthma as well as undocumented adults who are not otherwise qualified for Medi-Cal and who have poorly controlled asthma. Trigger remediation activities for a specific project client should be based on the findings of the home trigger assessment. Up to \$1,000 can be spent per patient on remediation supplies/activities.

Q: Given the small number of folks in tribal and refugee populations in certain counties, is there flexibility in the number that will be served by the home visiting program? For instance, caregivers and other family members of the patient with asthma counting as 5 participants instead of just the one patient?

A: The number of participants that will be served by your project will be determined in your work plan and any justification of this number should be provided in your narrative and reflected in your budget. The guidelines listed under Use of Project Funds on page 5 of the RFP reflect the number of visits that are allowed per individual by age, not the total number of participants within your program.

Q: Does number of people served only include those who will receive in home asthma education services? Would we also be able to include community-based education events around asthma education/mitigation?

A: The number of people served only includes those who will receive asthma home visitation, education and environmental remediation. Funding should not be used for community-based education events. However, funding can be used for outreach activities utilizing credible messengers, such as community health workers, promotoras, cultural brokers or others, to encourage the use of home visitation programs.

Q: Do you want return on investment analysis or potential cost savings as a result of the project?

A: The external evaluation team from Harder+Company Community Research, plans to examine health-related costs and return on investment as part of their initiative-wide evaluation. This is not the responsibility of the individual grantee.

Q: For a FQHC serving Medi-Cal and undocumented populations, is a partnership with a Managed Care Organization not required?

A: Correct, a partnership with a Managed Care Organization is not required, but strongly encouraged.

Q: Does a sustainability plan refer to the strength of projects or is the focus more directed on strengthening pre-existing programs?

A: The sustainability question listed in the application is for the sustainability of the proposed project as described in the application.

Q: Is there a target or ballpark range of the number of clients served for the \$350k? How much of a factor would having a lower average cost per client served be in terms of applicant competitiveness?

A: There is not a target or ballpark range of the number of clients to be served. We expect to receive realistic budgets to serve clients within the target population as fully as possible. Within the RFP are additional guidelines on number of visits and costs for home remediation for each individual client.

Q: Could funds be applied to direct habitability costs such as carpet removal or small-scale home repairs?

A: Funds may be used for home remediation, up to \$1,000 per client, including carpet removal and small-scale home repairs.

Q: Is equipment an allowable cost?

A: Yes, equipment is allowed. Please refer to the RFP or webinar slides to see what is not allowed.

Q: If you were going to purchase a software tool to help patients manage their asthma, how would list that item in your budget?

A: On your budget form you can list software under “equipment” or “miscellaneous”. Please be sure to provide a description of the software and its use in your budget justification.

Q: Does home remediation include home relocation assistance?

A: Home remediation does not include home relocation assistance.

APPLICATIONS

Q: What is a "promotora"?

A: Promotora is a Spanish word that refers to a lay health educator with experience and skills in Latino communities. It is often translated as community health worker.

Q: My program serves anyone with an asthma diagnosis at all income levels. Can we apply for this grant?

A: This program is focused on Medi-Cal beneficiaries, particularly those children and adults with poorly controlled asthma, as well as undocumented adults with poorly controlled asthma. While we recognize that your program may serve a broader population, the funds from this grant should focus on the intended population.

Q: Can homeless populations and women and children in shelters be included in the target community?

A: Yes, homeless populations can be included as your target population, if you are serving the geographic areas and/or target populations listed in the eligibility criteria.

Q: We currently have a team that goes out into homeless encampments to provide medical services. Could this be covered under the grant?

A: Yes, visiting homeless encampments could be covered under this funding, so long as the services funded are those detailed in the RFP.

Q: Can the funding be used for clinic-based asthma education in conjunction with home visits?

A: The focus of this funding opportunity is for home visitation, so funding cannot be used for clinic-based asthma education. Funding can be used to coordinate asthma home visits with clinic-based asthma education.

Q: Is it expected the home visitation program will include asthma education, environmental mitigation, AND asthma disease management services? Or can our organization focus on one or two of these components?

A: Evidence shows that comprehensive asthma home visiting programs that include education, an environmental trigger assessment, and remediation, are most effective. Applications need to include all three components.

Q: How can I receive technical assistance for my application? Will this include reading the application before I submit?

A: To receive technical assistance, please email TA@rampasthma.org. TA will not include a review of your application, work plan or budget. TA may include a discussion of the scope of work, assistance identifying data resources or identifying and developing partnerships.

Q: If we are an organization working in large geographic areas/counties, do we complete one application and list the geographic areas that will be involved on this grant or should we submit separate applications for each area?

A: The opportunity is limited to one application/contract per organization so if you will serve multiple geographic areas please provide details in the narrative questions. If needed, please submit a supplemental budget if your budget will exceed \$350,000.

Q: For the boxes that do not apply do we put N/A or explain why it does not apply?

A: Yes, you may put "N/A" for those boxes, but please briefly explain why they do not apply if it is appropriate and possible to do so.

Q: What sort of documents will suffice as the annual budget?

A: We require a financial statement showing your organization's revenue and expenses for the most recent full year. Although an audited statement is preferred, this does not need to be submitted, if not available. If your organization does have an audited statement, we ask that you only submit the summary page(s) from the audited statement. We primarily want to get a sense of the size of your organization, revenue sources and expenses.

Q: What does a letter of support for one's organization look like?

A: The intent of the letter of support is to confirm that leadership in the organization applying knows that the proposal is being submitted, supports the application and affirms participation in learning convenings and evaluation activities. We are requesting the letter of support be from the executive level.

Q: How do we start a new application if we already have an account/login?

A: If the organization already has an account, when you click on the link that directs you to the application, instead of clicking "New Applicant" please click on the "Login" button and enter the organization's credentials.

Q: We understand that the potential supplemental budget should not duplicate services from the base budget. If the supplemental funding is to support services to increased numbers of clients, is it OK if the services provided to the additional clients are the same as those provided to clients served by the funds in the base budget? Also, since there is

not a prescribed number of clients to be served, how can clients served by funds in the supplemental budget be identified as "additional"?

A: Yes, the services provided to additional clients can be the same to those provided by the base budget. Please be sure to identify "additional" clients in your supplemental budget justification and list the number of additional clients you intend to serve.

OTHER

Q: Will we get a copy of the PowerPoint? When will the recorded webinar be available?

A: The PowerPoint slides and recording are on the website: www.shfcenter.org/asthma.

Q: Do you have any data on the designated areas that estimates the number of people with asthma?

A: For asthma data resources, please see <https://www.shfcenter.org/asthma>.

Q: Would the applicant organization be funding the training for home visiting staff as well as fund their position?

A: Yes, the applicant organization is responsible for providing training and professional development for home visiting staff, as well as fund their positions. Additionally, The Center will be providing several technical assistance and training opportunities for funded partners. This includes partnering with the California Department of Public Health to offer their Asthma Management Academy to asthma home visitors, if available.

Q: Who is going to be conducting the capacity building trainings that are part of the technical assistance provided? Can you describe the training further?

A: The Center at Sierra Health Foundation will be providing some capacity building and technical assistance and will work with content and community experts to provide this to funded partners. Please be sure to answer the technical assistance question within the application to provide The Center with additional information on your TA needs. We will build TA plans and plan convenings in partnership with the Asthma Mitigation Project grantees.

Q: Who pays for travel and lodging for the quarterly meetings?

A: Your budget should include travel and lodging for 1-2 convenings per year, along with any travel needed for your home visitor to conduct visits.

Q: What data beyond the standard reporting requirements will grantees be expected to collect for the external evaluation?

A: Round 2 grantees will participate in the external evaluation through the information provided in their progress reports, which are required biannually. Progress reports allow The Center to monitor program progress and identify opportunities to support

implementation. The external evaluation, which is focused on the initiative as a whole and is not an evaluation of individual projects, uses the progress reports to gather data on AMP's overall reach, interventions, and early outcomes. The progress reports ask for data on newly enrolled participants, participants served, and services delivered and on participants who have completed the program. Harder + Company Community Research, the external evaluation company, will provide training and technical assistance to support completion of the progress reports.