

**State of Illinois Uniform Notice of Funding Opportunity (NOFO)
Summary Information**

Awarding Agency Name	Public Health
Agency Contact	Erin Conley (erin.conley@ilinois.gov)
Announcement Type	Initial
Type of Assistance Instrument	Grant
Funding Opportunity Number	NA
Funding Opportunity Title	COVID-19 Community Based Testing and Interventions Targeting Minority Population.
CSFA Number	482-00-2509
CSFA Popular Name	Minority COVID-19 Response
Anticipated Number of Awards	15
Estimated Total Program Funding	\$2,000,000
Award Range	\$1 - \$100000
Source of Funding	Federal
Cost Sharing or Matching Requirements	No
Indirect Costs Allowed	Yes
Restrictions on Indirect Costs	No
Posted Date	12/02/2020
Application Date Range	12/02/2020 - 01/08/2021 : 5:00pm
Grant Application Link	Please select the entire address below and paste it into the browser... https://idphgrants.com/user/home.aspx
Technical Assistance Session	Offered : Yes Mandatory : No Date : 12/21/2020 : 11:30 AM Registration link : https://illinois.webex.com/illinois/j.php?MTID=ee830b48f087e316e43f753d6a15a2e20



Uniform Notice of Funding Opportunity (NOFO)

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1.	Awarding Agency Name: Illinois Department of Public Health
2.	Agency Contact: Name: Erin Conley Phone: 217-785-9212 Email: erin.conley@illinois.gov
3.	Announcement Type: <input checked="" type="checkbox"/> Initial announcement <input type="checkbox"/> Modification of a previous announcement
4.	Type of Assistance Grant
5.	Agency Opportunity N/A
6.	Funding Opportunity Title: COVID-19 Community Based Testing and Interventions Targeting Minority
7.	CSFA Number: 482-00-2509
8.	CSFA Popular Name: COVID-19 Community Based Testing and Interventions Targeting Minority
9.	CFDA Number(s): 93.323
10	Number of Anticipated 10-15
11	Estimated Total Funding \$2,000,000
12	Single Award Range: No more than \$100,000
13	Funding Source: Mark all that apply <input checked="" type="checkbox"/> Federal or Federal pass-through <input type="checkbox"/> State <input type="checkbox"/> Private / other funding
14	Is Cost Sharing or Match Required? Yes <input checked="" type="checkbox"/> No
15	Indirect Costs Allowed? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Restrictions on Indirect Costs? Yes <input checked="" type="checkbox"/> No If yes, provide the citation governing the restriction:
16	Posted Date: December 2, 2020
17	Application Date Range: Start Date: December 2, 2020 End Date: January 8, 2021 End Time: 5:00 p.m. CST
18	Technical Assistance Session: Session Offered: X Yes No Session Mandatory: Yes X No Date and time: Monday, December 21 @ 11:30am-12:30pm CST Conference Info/Registration Link: https://illinois.webex.com/illinois/j.php?MTID=ee830b48f087e316e43f753d6a15a2e20

Agency-specific Content for the Notice of Funding Opportunity

A. Program Description

The Illinois Department of Public Health Center for Minority Health Services is requesting applications from community-based organizations that serve minority populations to provide culturally appropriate COVID-19 prevention and response strategies. The main objectives are to educate minority communities on the COVID-19 prevention, increase access to testing, and through community engagement improve quarantine and isolation compliance with minority communities by addressing resource issues.

The aim of this funding is to establish collaborative agreements with minority community-based organizations to provide community engagement events, including mobile testing, to support prevention and to provide supports for quarantine/isolation interventions.

Programs should be unique, culturally innovative to the specified target group, and increase ongoing efforts of the Department to educate minority communities on the importance of COVID-19 prevention and testing practices. Emphasis is placed on improving community testing rates and quarantine and isolation compliance by addressing resource issues.

Health equity exists when all people can thrive and no one is limited in achieving comprehensive health and wellness because of their social position or any other social factors/determinants of health such as income, education, race/ethnicity, sexual identity, and disability. All applicants must use the attached Health Equity Checklist to engage in a structured inquiry that identifies unmet social determinants of health needs enmeshed within the target community. These unmet needs contribute to population-based disparity in the community-based area of health concern. Such inquiries should be directed at overcoming those unmet needs and dictate the approach used in tailoring effective strategies to obtain the desired health outcome.

Successful applicants must demonstrate their capacity to successfully provide services to their selected population, and demonstrate experience working collaboratively with entities that provide medical service access to the target population. Applicants who propose to target specific risk groups within the selected special population will be noted as having demonstrated responsiveness based on the epidemiology of their proposed target area. Successful applicants should incorporate strategies that will result in an increase in the number of individuals from the target population that are aware of the importance of COVID-19 prevention, prevention strategies, and increases in testing. Applicants who propose to include an emphasis on quarantine and isolation compliance must demonstrate experience in working with safe housing and shelter practices.

Successful applicants must implement interventions that are scalable, cost-effective and have demonstrated potential to increase awareness of COVID-19 prevention tactics, need for testing, and methods of quarantining and safely isolating.

RACIAL AND ETHNIC MINORITIES

Additionally, due to the diversity of Illinois residents, providers must be engaged in implementing The National Standards for Culturally and Linguistically Appropriate Services (CLAS) in Health and Health Care. The National CLAS standards are intended to advance health equity, improve quality, and help eliminate health care disparities by providing a blueprint for individuals and health and healthcare organizations to implement culturally and linguistically appropriate services. More information on the National CLAS standards can be found here: www.minorityhealth.hhs.gov/omh/browse.aspx?lvl=2&lvlid=53

Due to current or past discrimination, maltreatment, or cultural traditions within certain populations barriers may exist that inhibit the delivery of grant funded services. Successful applicants will demonstrate and ensure that services will be and are provided in a manner that is equitable to underserved, socially disadvantaged, and racial and ethnically diverse groups, regardless of sexual or gender identity, and that services provided are both culturally and linguistically appropriate. Grantee shall also ensure that any services provided by sub-grantees are similarly equitable and culturally and linguistically appropriate.

B. Funding Information

This award is utilizing federal pass-through, state and/or private funds.

The grant will be a 12 month grant. The budget/funding for the grant will be for \$2,000,000 to be used in FY 21 with another \$2,500,000 available in FY22. There is a maximum of \$200,000 per grantee over the two year period.

C. Eligibility Information

Legally recognized organizational entities are eligible to apply for this funding.

1. Eligible Applicants

Legally recognized organizational entities are eligible to apply for this funding. Applications from individual persons will not be considered. Grants may be made to individual organizations or to lead agencies distributing sub-grants to partnering individual organizations. **Only organizations based in Illinois are eligible for funding.**

2. Cost Sharing or Matching

3. Indirect Cost Rate

4. Other, if applicable

D. Application and Submission Information

1. Address to Request Application Package

Applications must be submitted via the Illinois Department of Public Health's Electronic Grants Administration and Management System (EGrAMS), accessible at idphgrants.com.

Since high-speed internet access is not yet universally available for downloading documents or accessing the electronic application, and applicants may have additional accessibility requirements, applicants may request paper copies of materials by contacting:

Illinois Department of Public Health
Center for Minority Health Services
Attention: Erin Conley
535 W. Jefferson, 5th Floor
Springfield, Illinois 62761

2. *Content and Form of Application Submission*

Applications must be submitted via the Illinois Department of Public Health's Electronic Grants Administration and Management System (EGrAMS), accessible at idphgrants.com

3. *Dun and Bradstreet Universal Numbering System (DUNS) Number and System for Award Management (SAM)*

Each applicant (unless the applicant is an individual or Federal or State awarding agency that is exempt from those requirements under 2 CFR § 25.110(b) or (c), or has an exception approved by the Federal or State awarding agency under 2 CFR § 25.110(d)) is required to:

(i) Be registered in SAM before submitting its application. If you are not registered in SAM, this link provides a connection for SAM registration: <https://governmentcontractregistration.com/sam-registration.asp>;

(ii) provide a valid DUNS number in its application; and

(iii) continue to maintain an active SAM registration with current information at all times during which it has an active Federal, Federal pass-through or State award or an application or plan under consideration by a Federal or State awarding agency.

The State awarding agency may not make a Federal pass-through or State award to an applicant until the applicant has complied with all applicable DUNS and SAM requirements and, if an applicant has not fully complied with the requirements by the time the State awarding agency is ready to make a Federal pass-through or State award, the State awarding agency may determine that the applicant is not qualified to receive a Federal pass-through or State award and use that determination as a basis for making a Federal pass-through or State award to another applicant.

4. *Submission Dates and Times*

, 5:00 p.m. CST

5. *Intergovernmental Review, if applicable*

6. *Funding Restrictions*

7. Other Submission Requirement

Key staff members of the grantee organization and any sub-grantee organization must have a minimum of two years' experience providing culturally appropriate services to the targeted minority populations.

Grantee organizations, any sub-grantee organizations, and key staff members of applicable organizations must demonstrate the capacity to successfully provide education to minority communities on COVID-19 prevention techniques, increase access to testing, and through community engagement improve quarantine and isolation compliance with minority communities by addressing resource issues.

Grantee organizations and any sub-grantee organizations must have documented proof of appropriate COVID-19 testing service agreements (where applicable), and an explanation as to how these collaborators will contribute to the overall accomplishment of program description and objectives.

E. Application Review Information

1. Criteria

100 Points - Total

Design & Implementation-15 Points

Scope of Work-Overall Work-10 Points

Scope of Work-Quarterly Objectives-5 Points

Scope of Work-Measurement Instruments-10 Points

Scope of Work-Timeline-10 Points

Health Equity Implementation-35 points

Budget Detail & Justification-15 Points

Your application will be deemed ineligible and will not be reviewed if:

- The application is not electronically submitted by the time specified for submission.
- The application is incomplete, omitting required questions response or attachments.
- The application does not follow format instructions.

2. Review and Selection Process

Funding Recommendations

- Significant or substantial variance between evaluator scores shall be reviewed and documented in EGrAMS during the evaluation process (review consolidation stage), including the revision of individual scores.
- Based on the consolidated score, the applicant is placed in one of three categories:
 - Greater than or equal to 80 points - Recommended for Funding
 - Achieving a score of 80 or above does not guarantee that an applicant will receive funding.
 - 50 to 79 points - Recommended with Revisions

- Grant applications receiving a score of 50-79 may be qualified for resubmission with revisions. Resubmissions must be made within a designated timeframe, as determined by the grant-making office, and subsequently evaluated by the evaluation committee members that evaluated the original grant application, unless the members are unavailable. In this situation, another application evaluation committee shall be convened.
 - Less than 50 points - Declined

Merit-Based Review Appeal Process

- For competitive grants, only the evaluation process is subject to appeal. Evaluation scores may not be contested.
- To submit an appeal, the appealing party must:
 - Submit the appeal in writing and in accordance with the grant application document through IDPH's Smartsheet Form available on the IDPH website.
 - Ensure the appeal is received within 14 calendar days after the date that the grant award notice was published.
 - Include the following information in the appeal:
 - The name and address of the appealing party
 - Identification of the grant
 - A statement of reasons for the appeal
 - If applicable, documents or exhibits to support statement of reason
- The IDPH Appeals Review Officer (ARO) will consider the grant-related appeals and make a recommendation to the appropriate Deputy Director as expeditiously as possible after receiving all relevant, requested information.
 - When an appeal is received, the ARO and the respective office's Deputy Director will be notified.
 - The ARO must review the submitted Smartsheet Form for completeness and acknowledge receipt of the appeal within 14 calendar days from the date the appeal was received.
 - The Appeal Review Tool is used to consider the integrity of the competitive grant process and the impact of the recommendation.
 - The appealing party must supply any additional information requested by the agency within the time-period set in the request.
 - The ARO shall respond to the appeal within 60 days or else supply a written explanation to the appealing party as to why additional time is required.
- The execution of the grant agreement(s) may be stayed until the appeal is resolved. If the grant program requires moving forward with the grant execution process, the grant-making office must submit a written rationale to the ARO.
- Documentation of the appeal determination shall be sent to the appealing party and must include the following:
 - Standard description of the appeal review process and criteria
 - Review of the appeal
 - Appeal determination
 - Rationale for the determination
- In addition to providing the written determination, the grant-making office may do the following:
 - Document improvements to the evaluation process given the findings and re-review all submitted applications.
 - Document improvements to the evaluation process given the findings and implement improvements into the following year's grant evaluation process.
 - Provide written notice to the appealing party as to how the identified actions will be remedied.
- Appeals resolutions may be deferred pending a judicial or administrative determination when actions concerning the appeal have commenced in a court of administrative body.

3. *Anticipated Announcement and State Award Dates, if applicable.*

F. Award Administration Information

1. *State Award Notices*

2. *Administrative and National Policy Requirements*

3. *Reporting*

Successful applicants will be required to submit Periodic Financial and Periodic Performance Reports on a quarterly basis by default. However, some applicants may be required to or opt to submit reports monthly. Specific reporting requirements will be detailed within the terms of each grant agreement. Reports shall include the demographic and geographic indicators of individuals receiving direct service(s) from the Grantee through activities funded under the COVID-19 Community Based Testing and Interventions Targeting Minority Population program. Direct service(s) refers to the act of providing service/assistance directly to individuals, targeted groups and communities that make up the beneficiary population. Direct service may entail face-to-face contact with clients, individually or in group settings. This report shall include, but not be limited to, the following metrics in the format provided to the Grantee by the State, if they are available:

- a. Race
- b. Housing status of client
- c. Ethnicity
- d. Geographic area
- e. Sex
- f. Primary language
- g. Sexual or gender identity
- h. Disability, if any
- i. Insurance status
- j. Income level
- k. Age

Report narratives and Work Plan results shall accompany these metrics and include details of the program impacts upon or influences on social and structural determinants of health within individuals, targeted groups and communities that make up the beneficiary population.

G. State Awarding Agency Contact(s)

Erin Conley

H. Other Information, if applicable

Mandatory Forms -- Required for All Agencies

1. Uniform State Grant Application – Available at idphgrants.com for eligible applicants
New to EGrAMS, click [HERE](#) to see how to Get Started
2. Project Narrative (included in EGrAMS application)
3. Budget (included in EGrAMS application)
4. Budget Narrative (included in EGrAMS application)

Other program-specific mandatory forms: