

**RFA # 18265 / Grants Gateway # DOH01-HNPH1R-2019**

**New York State Department of Health**  
*Division of Environmental Health Protection*  
*Center for Environmental Health*

**Request for Applications**

***Healthy Neighborhoods Preventive Health Cornerstones - Reissue***

***KEY DATES:***

<b>Release Date:</b>	<b>July 9, 2019</b>
<b>Questions Due:</b>	<b>July 30, 2019</b>
<b>Questions, Answers and Updates Posted (on or about):</b>	<b>August 13, 2019</b>
<b>Applications Due:</b>	<b>September 13, 2019 by 4:00PM</b>
<b>DOH Contact Name &amp; Address:</b>	<b>Rachel Cates Center for Environmental Health New York State Department of Health ESP, Corning Tower, Rm 1629 Albany, NY 12237 hnp@health.ny.gov</b>

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# I. Introduction

## A. Description of Program

The New York State Department of Health (DOH) is re-issuing this Request for Applications (RFA) entitled “Healthy Neighborhoods Preventive Health Cornerstones” to solicit applications to participate in the NYSDOH Healthy Neighborhoods Program (HNP). The HNP is designed to provide preventive environmental health services to targeted geographic areas. These areas sometimes include environmental justice communities and are usually home to at-risk populations including low-income and often minority families, living in homes and neighborhoods with a disproportionate number of residential hazards. The funds will provide the resources needed to address significant public health issues in targeted areas to provide a healthier home environment for the citizens of New York State. Improving home environments is a cornerstone for improving public health and builds the foundation for healthier generations to come. To address the environmental health needs in these neighborhoods, the grant funds are to be used to implement a HNP, with emphasis on reducing residential injuries, childhood lead poisoning, hospitalizations due to asthma, and exposure to indoor air pollutants.

The total anticipated funding available for distribution is \$3,920,052 annually. It is anticipated that 15-20 contracts will be awarded as a result of this RFA. Contracts are anticipated to be for a five-year period (April 1, 2020 – March 31, 2025) with annual budgets and workplans required. Each contract will be funded at a maximum award of \$275,000 per year.

## B. Background

The HNP was originally a primary prevention program that began in New York State in 1985. Since its inception, the program has evolved from a housing sanitation, injury prevention, rodent control, and building code violation program to a healthy home assessment program.

The HNP model revolves around a door-to-door approach and a residential home environmental assessment. By implementing a door-to-door approach in selected target areas, many homes can be reached for identification of existing and potential environmental health problems with a minimal expenditure of resources. During the home assessments, potential health hazards are identified and recorded. Where asthmatic residents are identified, a more detailed asthma trigger assessment is performed. If environmental health hazards are identified, intervention products and educational materials are provided, and appropriate referrals are made to other agencies or community groups.

The Healthy People 2020 (HP 2020) initiative set forth by the U.S Department of Health and Human Services overlaps significantly with the main goals of HNP. As such, efforts should be made to meet HP 2020 benchmarks through HNP activities. Although this grant cycle will continue beyond 2020, NYSDOH will continue to work towards shared goals with HP 2020 including preventing fire deaths, residential injuries and childhood lead poisoning; reducing asthma morbidity; and improving indoor air quality. The Healthy People 2020 national health objectives can be viewed in their entirety at: <http://www.healthypeople.gov/2020/default.aspx>.

## II. Who May Apply

### A. Minimum Eligibility Requirements

Applicants must meet the criteria below to be deemed eligible to submit an application in response to this RFA:

1. Only full-service county and city health departments with qualified environmental health staff are eligible to apply.
2. Applicants must demonstrate a need for HNP in one or more specific geographic areas where funds will be targeted to improve environmental health of residents and promote healthy housing initiatives.
3. Applicants must agree to use the existing tablet-based HNP data management system.
4. Applications must describe the ability to coordinate with other local government agencies and groups within the municipality. The involvement of the Healthy Neighborhoods awardee with at least three other community, government or faith-based organizations in the development and implementation of this project is a requirement of all applicants.

### B. Preferred Qualifications

- a. Applicants that identify one or more geographic target areas that include high numbers of families or individuals living in poverty and neighborhoods with a disproportionate number of residential health hazards. The physical environments of these target populations are generally characterized by neighborhoods with deteriorated and substandard housing, lead paint hazards, pest infestations, garbage/refuse complaints, inadequate heat or heat producing equipment, high incidence of asthma, and incidence of residential fires. Applications should provide data supporting the presence of these populations and environments to substantiate this preferred qualification. Census data may be used to illustrate the presence of high risk populations.
- b. Applicants that identify a medical support network in the community. Include as an upload a list of any facilities that will be part of the medical support network and include a short description of the proposed partnership.
- c. Applicants that demonstrate a strong commitment to partner with a local housing code enforcement agency as one of the three required HNP partners. Details of proposed partnership should be provided and uploaded at the appropriate Program Specific Question.
- d. Applicants that propose to operate the HNP completely and do not plan to subcontract any part of the HNP.

## III. Project Narrative/Work Plan Outcomes

### A. Expectations of Project

#### 1) *Identification of long- and short-term goals:*

Objectives and tasks should include baseline data for the current target area(s). This should include data on potential Environmental Justice communities and concerns. Tasks should be clear, specific, measurable, and include a realistic time frame for completion. Applicants should provide a timeline for each activity to be accomplished and an estimated number of home visits to be completed for the first 12 months of this project. For each year thereafter (years 2-5), an annual workplan will be submitted outlining program activities for the coming year. Anticipated supply purchases and an estimate of how long the supplies will last should be included in the timeline.

## 2) *Home visits:*

This part of the application should include a detailed description of the door-to door approach and methodology to achieve proposed objectives and tasks. Describe the techniques that will be utilized to gain access to dwelling units. Include information on how other areas of your agency, as well as community-based organizations, will contribute toward raising access rates to dwellings. Include your organization's translation policy for effectively communicating with residents of the neighborhood that speak languages other than English.

Applicants should describe how dwellings will be prioritized for revisits. Revisits should determine if safety products (e.g., smoke detectors, products to reduce household allergens, etc.) are still in use, what changes were made to impact environmental housing conditions, and the status of any referrals that were made. Residents should be interviewed to determine if they read any of the educational materials provided and if their behavior conducive to health changed as a result. Residents should be asked if they are satisfied with the program and if they think the program is worthwhile in their community.

Each awardee must conduct three types of home visits: initial home assessments, 90-day revisits, and one-year asthma follow-up visits. Initial visits are counted as the first time a home assessment is performed in a dwelling. During a routine home assessment, potential health hazards are identified and recorded using the tablet application. Residents are provided with education about any hazards identified, given intervention materials if necessary, and referrals are made to community agencies as needed. If during a routine home assessment, a resident self-identifies as asthmatic, additional steps are taken to qualify as an asthma visit.

Ninety-day revisits should be performed between three and five months after the initial interview, are to be initiated on a minimum of 25% of those dwellings that received an initial interview, and should be prioritized based on the severity of conditions existing at the initial visit (severe housing deficiencies, indoor air quality issues, lead hazards, asthmatics present with triggers or poor management plans, etc). Only one revisit is to be completed for each initial visit, unless extenuating circumstances exist justifying an additional revisit.

One-year asthma follow-up visits should assess a reduction of household allergens, improved asthma management, successful referrals, and public satisfaction with the program.

Asthma related revisits should determine and document the following information for the asthmatic:

- How many school and workdays lost by any family member due to asthma? (H.P. 2020 Objectives RD-5.1 & 5.2)
- Does the person with asthma have a written management plan from his/her physician? (H.P. 2020 Objective RD-7.1)
- Did the person with asthma receive education about monitoring peak flow results and recognizing the early signs and symptoms of asthma? (H.P. 2020 Objective RD-7.3)
- Were there activities performed aimed at the elimination of cockroaches in the dwelling unit and was there evidence of a decrease in the cockroach problem? (H.P. 2020 Objective EH-13.1)
- How many hospital admissions/ER visits were made since the initial visit? (H.P. 2020 Objectives RD-2 & RD-3)

3) *Description of referrals to other agencies:*

During field investigations, issues will arise that warrant referral of individuals and families to community agencies and services designated to meet specific needs. These referrals may include but will not be limited to: a personal physician; managed care provider; code enforcement; fire investigation; weatherization programs; Home Energy Assistance Program; senior services; smoking and/or tobacco cessation programs; Women Infants and Children nutrition programs; Child/Family Health Plus; Childhood Lead Poisoning Prevention Programs; U.S. Housing and Urban Development Program; and substance abuse services. The application should detail how these referrals will be conducted and what follow-up activities will be performed to determine if the services were provided or offered, as well as, actions taken by the HNP if the referral is not acted upon and the issue poses a serious health threat. Follow-up is not required for all referrals, but they should all be documented in the space provided within the tablet application.

4) *Demonstration of the cost effectiveness of the HNP:*

Detail how the awardee's accomplishments will be evaluated. A cost-benefit analysis should be submitted annually using the tool provided by DOH. There is no defined acceptable cost per home visit, but programs should make every effort to minimize the cost per visit.

5) *Budget, personnel and training:*

Applicants should submit a 12-month budget, assuming a 4/1/2019 start date, using the online template in the Grants Gateway. All costs must be related to the provision of the HNP, as well as consistent with the scope of services, reasonable and cost effective. Justification for each cost should be submitted in narrative form in the appropriate section. Justification should include the percentage of time and explanation of duties to be performed by both staff and contracted entities.

The applicant should estimate the number and type of inspection and administrative staff needed to inspect dwellings over the term of the program. While indirect costs are permitted, please list them as administrative costs in the Other Category of the budget. They should be shown in line item detail, not as a percentage of total costs. Examples of indirect costs are the percentage of office space needed for HNP staff or chargeback for attorney or clerical services.

6) *Evaluation of the program:*

Each contractor will be responsible for the timely submission of data to the Bureau of Community Environmental Health and Food Protection using a DOH tablet form. The data will be used by DOH to conduct process and outcome evaluations of each program.

Each awardee will be responsible for the timely submission of a narrative report that describes the performance of the program on an ongoing basis. This description should include a process evaluation, which indicates whether the program is reaching its identified target population. The process evaluation should include but not be limited to the following information:

- All data provided by the reporting tools on the tablet application (demographic data as well as information about housing, health status of occupants, referrals made, and materials provided).
- Any promotional events outside of home assessments (including but not limited to: health fairs, community events, and tableing at other agencies).

In addition to process evaluation, the narrative should address outcome evaluation, which evaluates improved health status. Savings achieved through improved health outcomes should be quantified. Outcome evaluation should be used to modify existing activities and develop new program strategies

to improve the awardee’s performance. The 90-day revisit and asthma follow-up survey instruments should be used for this evaluation. The awardee’s outcome evaluation should focus on progress towards the HP 2020 objectives described below in this section.

Applicants may subcontract components of the scope of work. For those applicants that propose subcontracting, it is preferable to identify subcontracting agencies during the application process. Applicants that plan to subcontract are expected to state in the application the specific components of the scope of work to be performed through subcontracts. Applicants should note that the lead organization (contractor) will have overall responsibility for all contract activities, including those performed by subcontractors, and will be the primary contact for the DOH. All subcontractors should be approved by the Department of Health.

**B. Problems/Issues to be solved through this RFA**

Local health departments will be provided with resources to carry out activities associated with the program and to address the following problems/issues in their targeted communities:

- Food and harborage for cockroaches will be reduced.
- More homes will be mitigated for radon.
- More homes will be tested for Carbon Monoxide (CO).
- Moisture problems and water intrusion will be corrected by working with landlords and code enforcement.
- More persons will take the Smoke Free Home Pledge.
- Rodent infestations will be reduced.
- Persons with asthma will know how to control their asthma triggers.
- More persons with asthma will have an Asthma Management Plan.
- More persons who use daily asthma medication will use a peak flow meter.
- More tenants will use covered, pest proof garbage cans.
- More homes will have adequate, working smoke detectors.
- More homes will get their furnace serviced by working with landlords.
- Residents will become more knowledgeable about the availability of Substance Abuse Services.
- More residents will have a fire exit plan.
- More chimneys will have a visual inspection, from street level, for holes and loose mortar.
- More residents will know about “Stop, Drop and Roll” in case their clothes catch fire.
- More vacant buildings will be boarded up by working with Code Enforcement.
- More homes will have a room by room assessment.
- More children will be tested for lead.
- More homes will have intact paint by working with landlords and Code Enforcement.
- Tenants will be educated about the control of bed bugs if the issue comes up.

**C. Selected Healthy People 2020 Objectives**

In line with Healthy People 2020 objectives, measurable objectives should include:

HNP Category	H.P 2020 Objective	Goal	Target (where available)	Baseline/Most Recent Data Available
Childhood Lead Poisoning	Environmental Health (EH) Toxics EH-8	EH-8.1: Reduce blood lead (EBL) levels in children.	NYS: 0 HP2020: 5.2 ug/dL	5.8 ug/dL Concentration level of lead in blood samples at which 97.5% of

				the population aged 1-5 years is below the measured level (2005-2008)
		EH-8.2: Reduce the mean blood lead levels in children.	1.6 ug/dL whole blood in children 1-5	1.8ug/dL national average in children 1-5 (2003-2004)
	Environmental Health (EH) Healthy Homes and Communities	EH-17.2: Increase the proportion of pre-1978 housing that has been evaluated for the presence of lead-paint hazards.		
		EH-19: Reduce the proportion of occupied housing units that have moderate or severe physical problems.	4.2%	62% in NYS (2008) 5.2% nationwide (2007)
	EH Infrastructure and Surveillance	EH-21: Use existing information systems to determine if all children ages 1-5 have been tested for lead.	85%	65% in NYS (2008)
Asthma	Respiratory Disease (RD) Asthma	RD-1.1: Reduce asthma deaths among children and adults under 35 years.	10% improvement	5.5 deaths per million in NYS 2014-2016 (aged 0-34 years)
		RD-2: Reduce hospitalizations from asthma.	8.7 hospitalizations per 10,000 (age 5-64)	14 hospitalizations per 10,000 in NYS 2012-2014 (aged 5-64)
		RD-3: Reduce hospital emergency department visits for asthma.	49.6 visits per 10,000 (age 5-64)	87.1 visits per 10,000 2005-2007 in NYS (aged 5-64)
		RD-5.1: Reduce the proportion of children 5-17 years with asthma who miss school days.	48.8%	59.1% Nationally (2013)
		RD-5.2 Reduce the proportion of adults 18-64 years with asthma who miss workdays.	26.7%	41.2% Nationally (2013)
		RD-6: Increase the proportion of persons with current asthma who receive asthma education.	14.5%	12.8% Nationally (2013)
		RD-7.1: Increase number of persons with asthma who have an asthma management plan.	36.8%	40.5% Nationally (2013)
		RD-7.3: Increase number of persons with asthma who receive education about monitoring peak	68.5%	68% Nationally (2013)

		flow results, and recognizing early signs and symptoms.		
		RD-7.5: Increase number of persons with asthma who have been advised to change things in their homes to reduce exposure to irritants or allergens to which they are sensitive.	54.6%	47.3% Nationally (2013)
		RD-7.6: Increase the number of persons with current asthma who have had at least one routine follow-up visit in the past 12 months.	60.4%	57.2% Nationally (2013)
Indoor Air Quality	EH Healthy Homes	EH-13.1: Reduce cockroach allergens by 10%.	0.46 units of cockroach allergen/gram of settled dust	0.51 units (2006)
		EH-13.2: Reduce mouse allergens by 10%.	0.14 ug mouse allergen/gram of settled dust	0.16 ug (2006)
		EH-14: Increase the number of homes with an operating radon mitigation system for persons living in homes at risk for radon exposure.	30% of homes with radon levels at or above 4 Pico curies per liter of air (pCi/L).	10.2% of homes with radon levels of 4pCi/L or more prior to mitigation had installed a mitigation system (2007).
		EH-20.4: Reduce exposure to mercury in children 1-5 years.	1.26 ug/L	1.8 ug/L (2003-2004)
		EH-20.5: Reduce exposure to mercury in females 16-49 years.	3.22 ug/L	4.60 ug/L (2001-2002)
	Tobacco Use	TU-11.1: Reduce the proportion of children aged 3-11 years exposed to secondhand smoke.	47%	52.2% nationwide (2005-2008)
	Residential Injury Prevention	Injury and Violence Prevention	IVP-10: Prevent an increase of nonfatal poisonings.	Maintain baseline
IVP-23: Prevent an increase in falls.			Maintain baseline	7.2 deaths per 100,000 population nationwide (2007) 18 ER visits per day in NYS (2010)
IVP 25: Reduce drowning deaths.			10% improvement	1.2 per 100,000 nationally (2007)
IVP-28: Reduce residential fire deaths.			0.86 deaths per 100,000	0.95 deaths per 100,000 nationwide (2007)

	Access to Health Services	AHS-3: Increase the proportion of persons with a usual primary care provider.	10% improvement	76.3% nationwide (2007) 85% of NYS adults in 2006
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## IV. Administrative Requirements

### A. Issuing Agency

This RFA is issued by the New York State Department of Health, Center for Environmental Health, Division of Environmental Health Protection, Bureau of Community Environmental Health and Food Protection. The Department is responsible for the requirements specified herein and for the evaluation of all applications.

### B. Question and Answer Phase

All substantive questions must be submitted via email to: [Rachel.Cates@health.ny.gov](mailto:Rachel.Cates@health.ny.gov).

To the degree possible, each inquiry should cite the RFA section and paragraph to which it refers. Written questions will be accepted until the date posted on the cover of this RFA. This includes Minority and Women Owned Business Enterprise (MWBE) questions and questions pertaining to the MWBE forms.

Questions of a technical nature can be addressed in writing or via telephone by calling Rachel Cates at 518-402-7500. **Questions are of a technical nature if they are limited to how to prepare your application (e.g., formatting) rather than relating to the substance of the application.**

Some helpful links for questions of a technical nature are below. Questions regarding specific opportunities or applications should be directed to the DOH contact listed on the cover of this RFA.

- <https://grantsmanagement.ny.gov/resources-grant-applicants>
- Grants Gateway Videos: <https://grantsmanagement.ny.gov/videos-grant-applicants>
- Grants Gateway Team Email: [grantsgateway@its.ny.gov](mailto:grantsgateway@its.ny.gov)  
Phone: 518-474-5595  
Hours: Monday thru Friday 8am to 4pm  
(Application Completion, Policy, Prequalification and Registration questions)
- Agate Technical Support Help Desk  
Phone: 1-800-820-1890  
Hours: Monday thru Friday 8am to 8pm  
Email: [helpdesk@agatesoftware.com](mailto:helpdesk@agatesoftware.com)  
(After hours support w/user names and lockouts)

Prospective applicants should note that all clarifications and exceptions, including those relating to the terms and conditions of the contract, are to be raised prior to the submission of an application.

This RFA has been posted on the NYS Grants Gateway website at:

[https://grantsgateway.ny.gov/IntelliGrants\\_NYSGG/module/nysgg/goportal.aspx](https://grantsgateway.ny.gov/IntelliGrants_NYSGG/module/nysgg/goportal.aspx) and a link provided on the Department's public website at: <https://www.health.ny.gov/funding/>. Questions and answers, as well as any updates and/or modifications, will be posted on the Grants Gateway. All such updates will be posted by the date identified on the cover of this RFA.

### **C. Letter of Interest**

Submission of a letter of interest is not a requirement for this RFA.

### **D. Applicant Conference**

An Applicant Conference will be not be held for this project.

### **E. How to file an application**

Applications must be submitted online via the Grants Gateway by the date and time posted on the cover of this RFA. Reference materials and videos are available for Grantees applying to funding opportunities on the NYS Grants Gateway. Please visit the Grants Management website at the following web address: <https://grantsmanagement.ny.gov/> and select the “Apply for a Grant” from the Apply & Manage menu. There is also a more detailed “Grants Gateway: Vendor User Guide” available in the documents section under Training & Guidance; For Grant Applicants on this page as well. Training webinars are also provided by the Grants Gateway Team. Dates and times for webinar instruction can be located at the following web address: <https://grantsmanagement.ny.gov/live-webinars>.

To apply for this opportunity:

1. Log into the [Grants Gateway](#) as either a “Grantee” or “Grantee Contract Signatory”.
2. On the Grants Gateway home page, click the “View Opportunities” button”.
3. Use the search fields to locate an opportunity; search by State agency (DOH) or enter the Grant Opportunity name Healthy Neighborhoods Preventive Health Cornerstones - Reissue.
4. Click on “Search” button to initiate the search.
5. Click on the name of the Grant Opportunity from the search results grid and then select the “APPLY FOR GRANT OPPORTUNITY” button located bottom left of the Main page of the Grant Opportunity.

Once the application is complete, prospective grantees are **strongly encouraged** to submit their applications at least 48 hours prior to the due date and time. This will allow sufficient opportunity for the applicant to obtain assistance and take corrective action should there be a technical issue with the submission process. **Failure to leave adequate time to address issues identified during this process may jeopardize an applicant’s ability to submit their application.** Both DOH and Grants Gateway staff are available to answer applicant’s technical questions and provide technical assistance prior to the application due date and time. Contact information for the Grants Gateway Team is available under Section IV. B. of this RFA.

**PLEASE NOTE:** Although DOH and the Grants Gateway staff will do their best to address concerns that are identified less than 48 hours prior to the due date and time, there is no guarantee that they will be resolved in time for the application to be submitted and, therefore, considered for funding.

The Grants Gateway will always notify applicants of successful submission. If a prospective grantee does not get a successful submission message assigning their application a unique ID number, it has not successfully submitted an application. During the application process, please pay particular attention to the following:

- Not-for-profit applicants must be prequalified on the due date for this application submission. Be sure to maintain prequalification status between funding opportunities. Three of a not-for-profit’s essential financial documents - the IRS990, Financial Statement and Charities Bureau filing - expire on an annual basis. If these documents are allowed to expire, the not-for-profit’s prequalification status expires as well, and it will not be eligible for State grant funding until its documentation is updated and approved, and prequalified status is reinstated.
- Only individuals with the roles “Grantee Contract Signatory” or “Grantee System Administrator” can submit an application.
- Prior to submission, the system will automatically initiate a global error checking process to protect against incomplete applications. An applicant may need to attend to certain parts of the application prior to being able to submit the application successfully. Be sure to allow time after pressing the submit button to clean up any global errors that may arise. You can also run the global error check at any time in the application process (see p.64 of the Grants Gateway: Vendor User Guide).
- Grantees should use numbers, letters and underscores when naming their uploaded files. There cannot be any special characters in the uploaded file name. Also be aware of the restriction on file size (10 MB) when uploading documents. Grantees should ensure that any attachments uploaded with their application are not “protected” or “pass-worded” documents.

The following table will provide a snapshot of which roles are allowed to Initiate, Complete, and Submit the Grant Application(s) in the Grants Gateway.

<b>Role</b>	<b>Create and Maintain User Roles</b>	<b>Initiate Application</b>	<b>Complete Application</b>	<b>Submit Application</b>	<b>Only View the Application</b>
Delegated Admin	X				
Grantee		X	X		
Grantee Contract Signatory		X	X	X	
Grantee Payment Signatory		X	X		
Grantee System Administrator		X	X	X	
Grantee View Only					X

**PLEASE NOTE: Waiting until the last several days to complete your application online can be dangerous, as you may have technical questions. Beginning the process of applying as soon as possible will produce the best results.**

Late applications will not be accepted. **Applications will not be accepted via fax, e-mail, hard copy or hand delivery.**

#### **F. Department of Health's Reserved Rights**

The Department of Health reserves the right to:

1. Reject any or all applications received in response to this RFA.
2. Withdraw the RFA at any time, at the Department's sole discretion.
3. Make an award under the RFA in whole or in part.
4. Disqualify any applicant whose conduct and/or proposal fails to conform to the requirements of the RFA.
5. Seek clarifications and revisions of applications.
6. Use application information obtained through site visits, management interviews and the state's investigation of an applicant's qualifications, experience, ability or financial standing, and any material or information submitted by the applicant in response to the agency's request for clarifying information in the course of evaluation and/or selection under the RFA.
7. Prior to application opening, amend the RFA specifications to correct errors or oversights, or to supply additional information, as it becomes available.
8. Prior to application opening, direct applicants to submit proposal modifications addressing subsequent RFA amendments.
9. Change any of the scheduled dates.
10. Waive any requirements that are not material.
11. Award more than one contract resulting from this RFA.
12. Conduct contract negotiations with the next responsible applicant, should the Department be unsuccessful in negotiating with the selected applicant.
13. Utilize any and all ideas submitted with the applications received.
14. Unless otherwise specified in the RFA, every offer is firm and not revocable for a period of 60 days from the bid opening.
15. Waive or modify minor irregularities in applications received after prior notification to the applicant.

16. Require clarification at any time during the procurement process and/or require correction of arithmetic or other apparent errors for the purpose of assuring a full and complete understanding of an offerer's application and/or to determine an offerer's compliance with the requirements of the RFA.
17. Negotiate with successful applicants within the scope of the RFA in the best interests of the State.
18. Eliminate any mandatory, non-material specifications that cannot be complied with by all applicants.
19. Award grants based on geographic or regional considerations to serve the best interests of the state.

#### **G. Term of Contract**

Any contract(s) resulting from this RFA will be effective only upon approval by the New York State Office of the Comptroller.

It is expected that contracts resulting from this RFA will have the following time period:  
04/01/2020 – 03/31/2025.

Continued funding throughout this 5-year period is contingent upon satisfactory contractor performance, as well as the availability of funding and state budget appropriations. DOH also reserves the right to revise the award amount as necessary due to changes in the availability of funding.

A sample New York State Master Contract for Grants can be found in the Forms Menu once an application to this funding opportunity is started.

#### **H. Payment & Reporting Requirements of Grant Awardees**

1. No advances will be allowed for contracts resulting from this procurement.
2. The grant contractor will be required to submit invoices and required reports of expenditures to the State's designated payment office (below) or, in the future, through the Grants Gateway:

Rachel Cates  
Center for Environmental Health  
NYS Department of Health  
ESP, Corning Tower, Room 1629  
Albany, NY 12237

Grant contractors must provide complete and accurate billing invoices in order to receive payment. Billing invoices submitted to the Department must contain all information and supporting documentation required by the Contract, the Department and the Office of the State Comptroller (OSC). Payment for invoices submitted by the CONTRACTOR shall only be

rendered electronically unless payment by paper check is expressly authorized by the Commissioner, in the Commissioner's sole discretion, due to extenuating circumstances. Such electronic payment shall be made in accordance with OSC's procedures and practices to authorize electronic payments. Authorization forms are available at OSC's website at: <http://www.osc.state.ny.us/epay/index.htm>, by email at: [epayments@osc.state.ny.us](mailto:epayments@osc.state.ny.us) or by telephone at 855-233-8363. CONTRACTOR acknowledges that it will not receive payment on any claims for reimbursement submitted under this contract if it does not comply with OSC's electronic payment procedures, except where the Commissioner has expressly authorized payment by paper check as set forth above.

Payment of such claims for reimbursement by the State (NYS Department of Health) shall be made in accordance with Article XI-A of the New York State Finance Law. Payment terms will be: Contractor will be reimbursed for actual expenses incurred, as allowed in the Contract Budget and Workplan.

2. The grant contractor will be required to submit the following reports to the Department of Health at the address above or, in the future, through the Grants Gateway:
  - A. Narrative/Qualitative Quarterly Report
  - B. Quarterly Data Submission
  - C. Quarterly Expenditure Report
  - D. Annual Report including a Cost Benefit Analysis (tool to be provided)
  - E. Budget Modifications (30 days prior to implementation, when applicable)

All payment and reporting requirements will be detailed in Attachment D of the final NYS Master Contract for Grants.

### **I. Minority & Woman-Owned Business Enterprise Requirements**

Pursuant to New York State Executive Law Article 15-A, the New York State Department of Health ("DOH") recognizes its obligation to promote opportunities for maximum feasible participation of certified minority- and women-owned business enterprises and the employment of minority group members and women in the performance of DOH contracts.

In 2006, the State of New York commissioned a disparity study to evaluate whether minority and women-owned business enterprises had a full and fair opportunity to participate in state contracting. The findings of the study were published on April 29, 2010, under the title "The State of Minority and Women-Owned Business Enterprises: Evidence from New York" ("Disparity Study"). The report found evidence of statistically significant disparities between the level of participation of minority- and women-owned business enterprises in state procurement contracting versus the number of minority- and women-owned business enterprises that were ready, willing and able to participate in state procurements. As a result of these findings, the Disparity Study made recommendations concerning the implementation and operation of the statewide certified minority- and women-owned business enterprises program. The recommendations from the Disparity Study culminated in the enactment and the implementation of New York State Executive Law Article 15-A, which requires, among other things, that DOH establish goals for maximum feasible participation of New York State Certified minority- and women-owned business enterprises ("MWBE") and the employment of minority groups members and women in the performance of New York State contracts.

## **Business Participation Opportunities for MWBEs**

For purposes of this solicitation, the New York State Department of Health hereby establishes a goal of **30%** as follows:

- 1) Municipality Applicants: Eligible Expenditures include the value of the budget in total.

The goal on the eligible portion of this contract will be **15%** for Minority-Owned Business Enterprises (“MBE”) participation and **15%** for Women-Owned Business Enterprises (“WBE”) participation (based on the current availability of qualified MBEs and WBEs and outreach efforts to certified MWBE firms). A contractor (“Contractor”) on the subject contract (“Contract”) must document good faith efforts to provide meaningful participation by MWBEs as subcontractors or suppliers in the performance of the Contract and Contractor agrees that DOH may withhold payment pending receipt of the required MWBE documentation. For guidance on how DOH will determine “good faith efforts,” refer to 5 NYCRR §142.8.

The directory of New York State Certified MWBEs can be viewed at:

<https://ny.newnycontracts.com>. The directory is found on this page under “NYS Directory of Certified Firms” and accessed by clicking on the link entitled “Search the Directory”. Engaging with firms found in the directory with like product(s) and/or service(s) is strongly encouraged and all communication efforts and responses should be well documented.

By submitting an application, a grantee agrees to complete an MWBE Utilization plan as directed in **Attachment #2** of this RFA. DOH will review the submitted MWBE Utilization Plan. If the plan is not accepted, DOH may issue a notice of deficiency. If a notice of deficiency is issued, Grantee agrees that it shall respond to the notice of deficiency within seven (7) business days of receipt. DOH may disqualify a Grantee as being non-responsive under the following circumstances:

- a) If a Grantee fails to submit a MWBE Utilization Plan;
- b) If a Grantee fails to submit a written remedy to a notice of deficiency;
- c) If a Grantee fails to submit a request for waiver (if applicable); or
- d) If DOH determines that the Grantee has failed to document good-faith efforts to meet the established DOH MWBE participation goals for the procurement.

In addition, successful awardees will be required to certify they have an acceptable Equal Employment Opportunity policy statement.

### **J. Limits on Administrative Expenses and Executive Compensation**

On July 1, 2013, limitations on administrative expenses and executive compensation contained within Governor Cuomo’s Executive Order #38 and related regulations published by the Department (Part 1002 to 10 NYCRR – Limits on Administrative Expenses and Executive Compensation) went into effect. Applicants agree that all state funds dispersed under this procurement will, if applicable to them, be bound by the terms, conditions, obligations and regulations promulgated by the Department. To provide assistance with compliance regarding Executive Order #38 and the related regulations, please refer to the Executive Order #38 website at: <http://executiveorder38.ny.gov>.

## **K. Vendor Identification Number**

Effective January 1, 2012, in order to do business with New York State, you must have a vendor identification number. As part of the Statewide Financial System (SFS), the Office of the State Comptroller's Bureau of State Expenditures has created a centralized vendor repository called the New York State Vendor File. In the event of an award and in order to initiate a contract with the New York State Department of Health, vendors must be registered in the New York State Vendor File and have a valid New York State Vendor ID.

If already enrolled in the Vendor File, please be sure the Vendor Identification number is included in your organization information. If not enrolled, to request assignment of a Vendor Identification number, please submit a New York State Office of the State Comptroller Substitute Form W-9, which can be found on-line at: [http://www.osc.state.ny.us/vendor\\_management/forms.htm](http://www.osc.state.ny.us/vendor_management/forms.htm).

Additional information concerning the New York State Vendor File can be obtained on-line at: [http://www.osc.state.ny.us/vendor\\_management/index.htm](http://www.osc.state.ny.us/vendor_management/index.htm), by contacting the SFS Help Desk at 855-233-8363 or by emailing at [helpdesk@sfs.ny.gov](mailto:helpdesk@sfs.ny.gov).

## **L. Vendor Responsibility Questionnaire**

The New York State Department of Health strongly encourages that vendors file the required Vendor Responsibility Questionnaire online via the New York State VendRep System. To enroll in and use the New York State VendRep System, see the VendRep System Instructions available at <http://www.osc.state.ny.us/vendrep/index.htm> or go directly to the VendRep system online at <https://portal.osc.state.ny.us>.

Vendors must provide their New York State Vendor Identification Number when enrolling. To request assignment of a Vendor ID or for VendRep System assistance, contact the Office of the State Comptroller's Help Desk at 866-370-4672 or 518-408-4672 or by email at [ciohelpdesk@osc.state.ny.us](mailto:ciohelpdesk@osc.state.ny.us).

Applicants should complete and upload the Vendor Responsibility Attestation (**Attachment #1**) of the RFA. The Attestation is located under Pre-Submission uploads and once completed should be uploaded in the same section.

## **M. Vendor Prequalification for Not-for-Profits – THIS SECTION IS NOT APPLICABLE TO MUNICIPALITIES.**

All not-for-profit vendors subject to prequalification are required to prequalify prior to grant application and execution of contracts.

Pursuant to the New York State Division of Budget Bulletin H-1032, dated July 16, 2014, New York State has instituted key reform initiatives to the grant contract process which requires not-for-profits to register in the Grants Gateway and complete the Vendor Prequalification process in order for applications to be evaluated. Information on these initiatives can be found on the [Grants Management Website](#).

**Applications received from not-for-profit applicants that have not Registered and are not Prequalified in the Grants Gateway on the application due date listed on the cover of this RFA cannot be evaluated. Such applications will be disqualified from further consideration.**

Below is a summary of the steps that must be completed to meet registration and prequalification requirements. The [Vendor Prequalification Manual](#) on the Grants Management Website details the requirements and an [online tutorial](#) are available to walk users through the process.

### **1) Register for the Grants Gateway**

- On the Grants Management Website, download a copy of the [Registration Form for Administrator](#). A signed, notarized original form must be sent to the NYS Grants Management office at the address provided in the submission instructions. You will be provided with a Username and Password allowing you to access the Grants Gateway.

If you have previously registered and do not know your Username, please email [grantsgateway@its.ny.gov](mailto:grantsgateway@its.ny.gov) . If you do not know your Password, please click the [Forgot Password](#) link from the main log in page and follow the prompts.

### **2) Complete your Prequalification Application**

- Log in to the [Grants Gateway](#). **If this is your first time logging in**, you will be prompted to change your password at the bottom of your Profile page. Enter a new password and click SAVE.
- Click the *Organization(s)* link at the top of the page and complete the required fields including selecting the State agency you have the most grants with. This page should be completed in its entirety before you SAVE. A *Document Vault* link will become available near the top of the page. Click this link to access the main Document Vault page.
- Answer the questions in the *Required Forms* and upload *Required Documents*. This constitutes your Prequalification Application. Optional Documents are not required unless specified in this Request for Application.
- Specific questions about the prequalification process should be referred to your agency representative or to the Grants Gateway Team at [grantsgateway@its.ny.gov](mailto:grantsgateway@its.ny.gov).

### **3) Submit Your Prequalification Application**

- After completing your Prequalification Application, click the **Submit Document Vault Link** located below the Required Documents section to submit your Prequalification Application for State agency review. Once submitted the status of the Document Vault will change to *In Review*.
- If your Prequalification reviewer has questions or requests changes you will receive email notification from the Gateway system.

- Once your Prequalification Application has been approved, you will receive a Gateway notification that you are now prequalified to do business with New York State.

**Vendors are strongly encouraged to begin the process as soon as possible in order to participate in this opportunity.**

**N. General Specifications**

1. By submitting the "Application Form" each applicant attests to its express authority to sign on behalf of the applicant.
2. Contractors will possess, at no cost to the State, all qualifications, licenses and permits to engage in the required business as may be required within the jurisdiction where the work specified is to be performed. Workers to be employed in the performance of this contract will possess the qualifications, training, licenses and permits as may be required within such jurisdiction.
3. Submission of an application indicates the applicant's acceptance of all conditions and terms contained in this RFA, including the terms and conditions of the contract. Any exceptions allowed by the Department during the Question and Answer Phase (Section IV.B.) must be clearly noted in a cover letter attached to the application.
4. An applicant may be disqualified from receiving awards if such applicant or any subsidiary, affiliate, partner, officer, agent or principal thereof, or anyone in its employ, has previously failed to perform satisfactorily in connection with public bidding or contracts.
5. Provisions Upon Default
  - a. The services to be performed by the Applicant shall be at all times subject to the direction and control of the Department as to all matters arising in connection with or relating to the contract resulting from this RFA.
  - b. In the event that the Applicant, through any cause, fails to perform any of the terms, covenants or promises of any contract resulting from this RFA, the Department acting for and on behalf of the State, shall thereupon have the right to terminate the contract by giving notice in writing of the fact and date of such termination to the Applicant.
  - c. If, in the judgement of the Department, the Applicant acts in such a way which is likely to or does impair or prejudice the interests of the State, the Department acting on behalf of the State, shall thereupon have the right to terminate any contract resulting from this RFA by giving notice in writing of the fact and date of such termination to the Contractor. In such case the Contractor shall receive equitable compensation for such services as shall, in the judgement of the State Comptroller, have been satisfactorily performed by the Contractor up to the date of the termination of this agreement, which such compensation shall not exceed the total cost incurred for the work which the Contractor was engaged in at the time of such termination, subject to audit by the State Comptroller.

## V. Completing the Application

### A. Application Format/Content

Please refer to the Grants Gateway: Vendor User Guide for assistance in applying for this procurement through the NYS Grants Gateway. This guide is available on the Grants Management website at:

<https://grantsmanagement.ny.gov/system/files/documents/2019/03/grantsgatewayvendorusermanual03-13-2019.pdf>. Additional information for applicants is available at:  
<https://grantsmanagement.ny.gov/resources-grant-applicants>.

**Also, you must use Internet Explorer (11 or higher) to access the Grants Gateway. Using Chrome or Firefox causes errors in the Work Plan section of the application.**

Please respond to each of the sections described below when completing the Grants Gateway online application. Your responses comprise your application. Please respond to all items within each section. When responding to the statements and questions, be mindful that application reviewers may not be familiar with the agency and its services. Therefore, answers should be specific, succinct and responsive to the statements and questions as outlined.

- Pre-Submission Uploads

1. Completion and uploading of documents described in Section IV, I. MWBE and L. Vendor Responsibility.

- Program Specific Questions

2. Program Summary (*Maximum Score: 10 points*)

- a. Summarize your proposed program including your tasks to meet the stated objectives.
- b. Provide program details and explain how the proposed program can meet the objectives of HNP.
- c. Objectives must be consistent with the stated problems and purpose listed in this RFA.
- d. Objectives must be presented in SMART format, illustrating that they are: specific, measurable, achievable, results-focused, and time-bound.
- e. Provide a reasonable timetable for the first year's objectives with measures to show that sufficient progress is being made. Timetable should be included in the program summary narrative.
- f. Include a clearly described plan and methods for conducting the proposed interventions.

3. Statement of Need (*Maximum Score: 10 points*)

- a. Discuss the environmental health issues prevalent in the target area(s). Included in the documentation should be a baseline survey of asthma morbidity/mortality, childhood lead poisoning, indoor air pollutants, and rates of residential fires and associated injuries. Trend data is also helpful to support the need for your program. The costs to the community of these problems should be documented as well. An upload field has been added for this question if additional text beyond the 4,000 character limit is

needed. No more than 2 additional pages should be included for the response to this question.

- b. Define the population(s) that will be targeted, identify and upload a map of the geographic project area (neighborhood), as well as a narrative description of the target area justifying its selection. List all block identifiers, municipal boundaries, census tracts, and/or zip codes, as appropriate, that will be targeted by this project. The applicant's plan should not attempt to cover more than four census tracts or municipal districts during any one fiscal year. Targeted areas should be of a reasonable size, approachable on a door-to-door basis during the projected time frame.
- c. For the preferred qualification, provide supporting data to document that the geographic area(s) include high numbers of families or individuals living in poverty and neighborhoods with a disproportionate number of residential health hazards. The physical environments of these target populations are generally characterized by neighborhoods with deteriorated and substandard housing, lead paint hazards, pest infestations, garbage/refuse complaints, inadequate heat or heat producing equipment, high incidence of asthma, and incidence of residential fires. Applications should provide data supporting the presence of these populations and environments to substantiate this preferred qualification. Census data may be used to illustrate the presence of high risk populations. An upload field has been added for this question if additional text beyond the 4,000 character limit is needed. No more than 2 additional pages should be included for the response to this question.

#### 4. Applicant Organization (*Maximum Score: 10 points*)

- a. Describe your agency, its mission and services.
- b. Describe your agency's experience providing HNP or similar services.
- c. Demonstrate capacity and experience in initiating and implementing related environmental, health, and housing projects.
- d. The applicant organization's program must be under the direction of a responsible official with the authority to work across agency lines to ensure maximum coordination of this program with other related programs operating within the local jurisdiction.

#### 5. Program Activities (*Maximum Score: 35 points*)

- a. Describe the organizational structure of your proposed program. Upload a listing of essential staff and their qualifications (Licensure, Certification, Curricula Vitae, etc), as well as anticipated time to be devoted to the program by each staff member. Include staff whose salaries are in-kind as well as any currently vacant positions to be filled. Describe how staff time will be documented if other than full time for HNP. Include in the staff descriptions any involvement of community based organizations, subcontractors and other principal components of your health department that will participate in Healthy Neighborhoods. All documents must be combined into one PDF document, no larger than 10MB.
- b. Provide a detailed description of each prevention and intervention approach that addresses the project's objectives and tasks should be provided, as well as a plan for implementing each approach. The intervention plan should describe how the awardee will ensure that the content and delivery of the interventions are socioeconomically, minority, and linguistically (culturally) sensitive in order to provide meaningful participation opportunities and to communicate effectively within the target community.

An upload field has been added for this question if additional text beyond the 4,000 character limit is needed. No more than 2 additional pages should be included for the response to this question.

- c. Identify the activities that will be undertaken by each personnel position and describe how each will contribute to the program. An upload field has been added for this question if additional text beyond the 4,000 character limit is needed. No more than 2 additional pages should be included for the response to this question.
- d. List at least three agencies that the HNP plans to partner with and explain the services these agencies provide in the community that will augment HNP goals, objectives, and activities. Include a detailed description of these departments and agencies and the arrangements and agreements that will be undertaken. A collaboration of community organizations, and local government agencies should be demonstrated. An upload field has been added for this question if additional text beyond the 4,000 character limit is needed. No more than 1 page for each of the three agencies should be included for the response to this question.
- e. To meet the preferred qualification, demonstrate a strong commitment to partner with a local housing code enforcement agency as one of the three required HNP partners. Details of proposed partnership should be provided and uploaded at the appropriate Program Specific Question.
- f. To meet the preferred qualification, upload a list of all facilities included in the proposed medical support network in the community and include a short description of the anticipated partnership. Such networks may include facilities such as hospitals or clinics that will take new patients, or health plans that will refer asthma patients for environmental assessment. No more than 2 pages should be uploaded in response to this question.
- g. To meet the preferred qualification, please indicate whether your organization proposes to operate the HNP completely and does not plan to subcontract any part of the HNP.

6. Project Evaluation (*Maximum Score: 15 points*)

- a. Describe the evaluation experience within the organization.
- b. Include an evaluation plan designed to measure process and health outcomes. The plan should be designed to evaluate the progress toward objectives and completion of tasks. An upload field has been added for this question if additional text beyond the 4,000 character limit is needed. No more than 2 additional pages should be included for the response to this question.
- c. A written evaluation will be implemented in the form of quarterly reports and an annual report, including a cost-benefit analysis, to evaluate progress towards objectives and completion of tasks. Applicants should acknowledge these reporting requirements and demonstrate a willingness to comply. If the applicant is a current recipient of HNP funds, please discuss how timely reporting is currently ensured. If the applicant is not currently receiving HNP funds, describe a plan to ensure timeliness of reports. Please also discuss your reporting history for similar programs.

7. Budget (*Maximum Score: 20 points*)

- a. Applicants should submit a 12-month budget, assuming a 4/1/2020 start date, using the template in the Grants Gateway.
- b. A timeline should reflect when supplies are anticipated to be purchased and how long

they are expected to last. Timeline should be in table format, and uploaded at this Program Specific Question.

- c. Applicants should provide a detailed explanation of how the proposed expenditures will support attainment of goals and objectives.

Applicants will complete year one of the budget. All costs must be related to the provision of the Healthy Neighborhoods Program as well as be consistent with the scope of services, reasonable and cost effective. Justification for each cost should be submitted in narrative form in the appropriate section. For all existing staff, the Budget Justification must delineate how the percentage of time devoted to this initiative has been determined. **THIS FUNDING MAY ONLY BE USED TO EXPAND EXISTING ACTIVITIES OR CREATE NEW ACTIVITIES PURSUANT TO THIS RFA. THESE FUNDS MAY NOT BE USED TO SUPPLANT FUNDS FOR CURRENTLY EXISTING STAFF ACTIVITIES.**

Any ineligible budget items will be removed from the budget prior to contracting. The budget amount requested will be reduced to reflect the removal of the ineligible items.

It is the applicant's responsibility to ensure that all materials to be included in the application have been properly prepared and submitted. Applications must be submitted via the Grants Gateway by the date and time posted on the cover of this RFA. The value assigned to each section is an indication of the relative weight that will be given when scoring your application.

## 8. Workplan

The required workplan will be Grantee Defined, within the Grants Gateway. HNPs are expected to design, implement, and evaluate a targeted project to address the four main objectives outlined below and in the table in Section III. C. of this RFA:

- Childhood Lead Poisoning Prevention
- Asthma
- Indoor Air Quality
- Residential Injury Prevention

These four areas will be the objectives of the workplan, with the tasks that fall under each objective describing the specific interventions and activities proposed by each individual HNP. There will likely be much variation between tasks identified by different HNP programs, and throughout the 5 year grant cycle, but the four main objectives must be addressed in each year's workplan.

The project should contribute to a measurable decrease in morbidity and/or environmental hazards. Any changes to the proposed tasks under each objective should be based on accomplishments or challenges reported the previous year.

Required performance measures will consist of quarterly reports, and annual reports (including a cost benefit analysis), submitted to NYSDOH. All required reporting must be received in a timely fashion with quarterly reports received within 30 days of the close of the quarter being reported, and annual reports received within 30 days of the end of the

fiscal year. Lateness in reporting will likely result in the withholding of funds until reports are received.

Please note that the Work Plan for this RFA is limited to the following: 4 Objectives, 60 Tasks, and 90 Performance Measures. The Grants Gateway does not keep a running count of these; applicants will be responsible for ensuring that they stay within these limits. **If you exceed these limits it will jeopardize your ability to submit your application.**

## B. Freedom of Information Law

All applications may be disclosed or used by DOH to the extent permitted by law. DOH may disclose an application to any person for the purpose of assisting in evaluating the application or for any other lawful purpose. All applications will become State agency records, which will be available to the public in accordance with the Freedom of Information Law. **Any portion of the application that an applicant believes constitutes proprietary information entitled to confidential handling, as an exception to the Freedom of Information Law, must be clearly and specifically designated in the application.** If DOH agrees with the proprietary claim, the designated portion of the application will be withheld from public disclosure. Blanket assertions of proprietary material will not be accepted, and failure to specifically designate proprietary material may be deemed a waiver of any right to confidential handling of such material.

## C. Review & Award Process

Applications meeting the guidelines set forth above will be reviewed and evaluated competitively by the NYSDOH Center for Environmental Health, Division of Environmental Health Protection, Bureau of Community Environmental Health and Food Protection.

All applications will be reviewed after the receipt deadline. Applications that do not meet the deadline will be disqualified. Applications will be reviewed for technical merit as well as cost effectiveness. Applications must receive a passing score of 65 to be considered for funding. The value assigned to each section indicates the relative weight that will be given in scoring the Application:

Program Specific Questions	Points	Percentage
Program Summary	10	10%
Statement of Need	10	10%
Applicant Organization	10	10%
Program Activities	35	35%
Project Evaluation	15	15%
Budget	20	20%
Total	100	100%

Awards will be regionally based to ensure geographic diversity . All applications will be scored, and the top two applications from each region (MARO, Capital, Central, and Western) will be funded. After funding those eight applicants, all other applications will be ranked and the top scoring applications from the remaining pool will be funded as resources allow. If no applications are received from a particular region, or if all applicants from one region are disqualified or fail to receive a passing score, no applications will be funded for that particular region.

In the event of a tie score, the scores on the individual application components will be compared in the following order: 1 (Statement of Need), 2 (Program Activities), 3 (Project Evaluation), 4 (Applicant Organization), 5 (Budget), and 6 (Program Summary). The applicant with the highest score on the first component where there is a difference will be considered the winner of the tie.

Applications with minor issues (missing information that is not essential to timely review and would not impact review scores) MAY be processed, at the discretion of the State, but all issues need to be resolved prior to time of award. An application with unresolved issues at the time award recommendations are made will be determined to be non-responsive and will be disqualified.

Applications failing to provide all response requirements or failing to follow the prescribed format may be removed from consideration or points may be deducted.

If changes in funding amounts are necessary for this initiative, funding will be modified and awarded in the same manner as outlined in the award process described above.

Applicants will be deemed to fall into one of three categories: (1) not approved, 2) approved but not funded due to resources, and 3) approved and funded. Approved but not funded applications may be funded should additional funds become available.

Once an award has been made, applicants may request a debriefing of their application (whether their application was funded or not funded). Please note the debriefing will be limited only to the strengths and weaknesses of the subject application and will not include any discussion of other applications. Requests must be received no later than fifteen (15) business days from date of award or non-award announcement.

To request a debriefing, please send an email to Rachel Cates at [Rachel.Cates@health.ny.gov](mailto:Rachel.Cates@health.ny.gov). In the subject line, please write: *Debriefing Request – Healthy Neighborhoods Preventive Health Cornerstones - Reissue*.

In the event unsuccessful applicants wish to protest the award resulting from this RFA, applicants should follow the protest procedures established by the Office of the State Comptroller (OSC). These procedures can be found on the OSC website at <http://www.osc.state.ny.us/agencies/guide/MyWebHelp>. (Section XI. 17.)

#### **D. Supplemental Information**

The following resource materials on environmental health and evaluation are recommended for preparing applications. Please contact the Bureau of Community Environmental Health and Food Protection staff to obtain a copy of these materials that are not available on-line.

- CDC Program Performance and Evaluation Office: <https://www.cdc.gov/eval/indicators/index.htm>
- [www.census.gov](http://www.census.gov)
- EPA Smoke-free Home Pledge: <https://www.epa.gov/indoor-air-quality-iaq/smoke-free-home-pledge>
- Healthy People 2020: [www.healthypeople.gov](http://www.healthypeople.gov)

- "An Injury Prevention Program in an Urban African-American Community", American Journal of Public Health, May 1993, Vol. 83, No. 5.
- "A Cost-Benefit Analysis of a State-Funded Healthy . . .", Journal of Public Health Management vol. 23 Issue 2 p. 229-238
- Douglas, M.R., Mallonee, S., and Istre, G.R. Comparison of community based smoke alarm distribution methods in an urban community. Injury Prevention (1998) 4: 28-32
- "Measured Basement Screening Radon Levels by Town" (NYSDOH, October 2017): <https://www.health.ny.gov/environmental/radiological/radon/towns.htm>

## VI. Attachments

Please note that all attachments are accessed in the "Pre-Submission Uploads" section of an online application and are not included in the RFA document. In order to access the online application and other required documents such as the attachments, prospective applicants must be registered and logged into the NYS Grants Gateway in the user role of either a "Grantee" or a "Grantee Contract Signatory".

- Attachment #1: Vendor Responsibility Attestation
- Attachment #2: Minority & Women-Owned Business Enterprise Requirement Forms
- Attachment #3: Grants Gateway Budget Instructions
- Attachment #4: Data Application Attestation
- Attachment #5: eForm Paper Version