

**RFA # 1607280511 / Grants Gateway # DOH01-EWPH1-2016**

**New York State Department of Health**  
*Center for Community Health/Division of Nutrition*  
*Bureau of Child and Adult Care Food Program*

***Eat Well Play Hard in Child Care Settings***

**QUESTIONS AND ANSWERS**

*Questions below were received by the deadline announced in the RFA. The NYSDOH is not responsible for any errors or misinterpretation of any questions received.*

The responses to questions included herein are the official responses by the State to questions posted by potential bidders and are hereby incorporated into the RFA # **1607280511**. In the event of any conflict between the RFA and these responses, the requirements or information contained in these responses will prevail.

**PROGRAM QUESTIONS:**

**SECTION I.**

**Question 1:** Will the EWPH funding program continue beyond this current round?

**Answer 1:** Currently, the Department is procuring these services for the period October 1, 2017 through September 30, 2022.

**SECTION I. & II.**

**Question 2:** Am I reading it correctly that awarded applicants will receive a maximum of \$192,000 per target area, and that if you apply to serve three target areas, for example, you can apply for a maximum of \$576,000 (p. 3 para 1)?

**Answer 2:** No. Paragraph 1 on page 3 indicates that approximately \$2.3 million in annual funding is expected to be available to support up to 12 contracts resulting from this RFA. However, minimum proposal requests and maximum amounts potentially available for all awards in a region are listed on pages 7 and 29. Those amounts should be considered annual award amounts. Proposal requests should be reflective of anticipated costs needed to implement all components of the EWPHCCS intervention as outlined on pages 7 through 13. This includes, but is not limited to, all target area zip codes and eligible child care centers proposed in Attachment 6B, as well as the number of Farm to Preschool projects your organization proposes to implement.

## SECTION II.

**Question 3:** Do childcare centers now have to apply for this grant individually?

**Answer 3:** No. Only organizations who wish to administer the EWPCCS grant need to submit an application to this RFA. Those organizations ultimately awarded an EWPCCS grant will be the entity to administer the program to individual child care centers wishing to participate and that meet eligibility requirements.

**Question 4:** What is the maximum award for each grant year or total award dollar amount for the Central Region?

**Answer 4:** As indicated on the bottom of page 6 of the RFA, each region of New York State has a minimum proposal request amount and a regional maximum amount of available funding. Based on the chart on page 7, the minimum proposal per applicant per year is \$100,000 for the Central Region. The regional maximum of all awards in that Region is \$500,000 annually. Actual award amounts may vary based on a range of pre-established criteria.

**Question 5:** Can my organization select high-need zip codes in two or more regions to reach the required number of centers?

**Answer 5:** No. The first paragraph on page 7 states that, "Applicants can only apply for one region."

**Question 6:** We are a little confused by the following paragraph (page 7, Section 2):

*"Applicants within a region may submit collaborative proposals with other eligible organizations to more effectively meet the deliverables outlined in this RFA. To do this, applicants may choose to form regional coalitions in order to more efficiently serve the target areas in their region. If submitting an application on behalf of a coalition, a letter of agreement signed by an authorized signatory of each partnering organization must be submitted with the application. The letter of agreement must indicate which target areas will be reached with EWPCCS and indicate the lead applicant/organization. The application cover sheet (located under Pre-Submission Uploads) must be signed by an authorized signatory of the lead applicant."*

Is this suggesting that a "coalition" as described would not require a subcontracting relationship with a partner? This may be moot because our management may require a subcontract, but since we are looking at collaborating with another agency as described it would be good to know if this is an option. Thanks.

**Answer 6:** No, collaborative proposals submitted in coordination with other eligible organizations to form a regional coalition would require one lead applicant/organization to submit the application. The other organizations planning to serve target areas as part of the application would be considered subcontractors of the lead applicant/organization.

### SECTION III.

**Question 7:** My partner and I are interested in applying for the Eat Well Play Hard in Child Care Settings (EWPHCCS) initiative. Will this grant be used to assist in paying the vendors for the food they prepare for our CACFP programs or will it follow CACFP practices and only reimburse agencies for the food consumed by students?

Example: We run programs that have 45 students on a roster so we must order 45 meals to be delivered each day, but if our attendance is only 30 of the 45 students CACFP only reimburses us for the 30 students who ate which leaves our agency to pay the remaining cost for the 15 uneaten meals.

In other words is reimbursement based on food consumed or available?

**Answer 7:** No, it cannot be used to assist in paying for meals. EWPHCCS is not a meal reimbursement program. EWPHCCS is a grant to fund awarded organizations to implement the EWPHCCS intervention in eligible child day care centers. According to page 7, Section III. paragraph 1, “This project will include a focus on nutrition education as well as incorporation of policy, systems and environmental changes in child day care programs in an effort to support families in making the healthier choice to eat better and play more.” Please see Section III., beginning on page 7, for a description of the required components of EWPHCCS.

**Question 8:** Is the BFF program aimed only at child care centers with infants, or all child care centers?

**Answer 8:** As indicated in the first paragraph of Section III., page 7 of the RFA, EWPHCCS specifically targets preschool aged children in care, their parents or caregivers, and child care center staff. This means only child care centers serving preschool aged children will be considered eligible to participate in the Eat Well Play Hard in Child Care Centers component. Some of these centers may also provide care to older and younger children. The Breastfeeding Friendly component may only be implemented in those centers participating in the Eat Well Play Hard in Child Care Centers component.

**Question 9:** On page 6 the 3<sup>rd</sup> paragraph: it states that all or a portion of the licensed or registered child care programs serving preschool children with-in the identified high-need areas would be targeted for the EWPHCCS. Throughout the RFA it identifies both EWPHCCC and EWPHCCS, does this mean that Home Based programs will be able to participate? Do we have the following options?

Option 1: Only for Center Based Programs

Option 2: Only for Home Based Programs

Option 3: for both Center and Home Based

**Answer 9:** No. As indicated on page 8 of the RFA, applicants are expected to implement the EWPHCCS required components, which include the Eat Well Play Hard in Child Care Centers, Farm to Preschool, Breastfeeding Friendly, and Community Engagement components. Home based programs are not targeted in the EWPHCCS intervention as part of this RFA.

**Question 10:** Will we need to employ all four strategies on p. 8 in order to be compliant?

- Eat Well, Play Hard in Child Care Settings
- Farm to Preschool (F2P)
- Breastfeeding Friendly (BFF)
- Community Engagement

**Answer 10:** Yes. According to page 8 of the RFA, applicants are expected to implement the following EWPHCCS required components:

- Eat Well Play Hard in Child Care **Centers** (EWPHCCC)
- Farm to Preschool (F2P)
- Breastfeeding Friendly (BFF)
- Community Engagement

**Question 11:** Can a 10 month Head Start program serving 3-5 year old children participate?

We sent a letter of intent and will be contacting the other daycares in the zip code to create a working group. Some, but not all programs will be serving infants or be open in July and August. Our thought is to plant in the classrooms and provide container gardens for the homes.

**Answer 11:** No. Applicants must demonstrate how they will meet the program deliverables on an annual basis. The first paragraph on page 9 states, the "...curriculum is implemented in approximately 16-week cycles during which three child day care programs can receive the intervention." Essentially, this calculates to a minimum of approximately nine child day care programs per year per 100% FTE RD over a period of approximately 48 weeks. An organization providing services for just 10 months of the year will not be able to meet the required Drafted deliverables of the Eat Well Play Hard in Child Care Centers (EWPHCCC) component of the RFA.

**Question 12:** In the paragraph at the bottom of page 6 it states "... agencies must apply for one or more target areas within a Region to ensure a minimum number of child day care programs are reached per award."

Can you tell me what that minimum number is?

**Answer 12:** The minimum number of child day care programs reached per award will vary based on the number of FTE Registered Dietitians supported by the application. The first paragraph on page 9 indicates the center-based intervention must be implemented by a Registered Dietitian (RD) and be implemented in approximately 16-week cycles during which three child day care programs can receive the intervention. Essentially, this calculates to approximately nine child day care programs per year per 100% FTE RD.

**Question 13:** What kind of environment are you looking to provide for the children? Indoor environments or outdoor environments?

If indoors, are you seeking an indoor environment to mimic the outdoors by providing entire room murals and special sky ceilings? And What Kind of equipment will be needed?

**Answer 13:** The term “environment” refers to the atmosphere/culture of a center that supports healthy lifestyle changes. The first paragraph on page 9 states that “The RDs will work onsite with center directors and food service staff to change or create new policies that support healthy lifestyle choices taught to children and their parents.” Environmental changes should support the implementation of those documented policies to: create a culture of health by improving the nutrition, mealtime and physical activity environments of child day care programs in targeted areas; and improve the likelihood that low-income children and their families will make healthy food choices and choose physically active lifestyles as indicated on page 3 Section I. The types of environmental changes proposed in the question above are not supportive of this intent.

**Question 14:** On page 9 the 1<sup>st</sup> paragraph under Eat Well Play Hard in Child Care Centers states that this curriculum will be implemented in approximately 16-week cycles during which 3 child care programs can receive the intervention. Also, the center-based intervention can only be implemented by RD. Is this only referring to the potential champion sites? Will the work plan still need to include the 10 week cycles for the number of programs that have been identified to receive the services that are currently required?

**Answer 14:** Awarded applicants from this RFA will be responsible for implementing the Eat Well Play Hard in Child Care Centers intervention in approximately 16-week cycles as outlined in the first paragraph on page 9 of the RFA. All identified centers will receive the same intervention. Previously implemented cycles of 10-weeks are not part of this RFA.

**Question 15:** On page 9 the 1st paragraph under Eat Well Play Hard in Child Care Centers states that this curriculum will be implemented in approximately 16-week cycles during which 3 child care programs can receive the intervention. Also, the center-based intervention can only be implemented by RD. Is this referring to an RD implementing to the potential champions sites or is this saying that only an RD can deliver the intervention regardless of whether or not the program is a potential champion site, 10 week cycle, or Home Based program?

**Answer 15:** This funding requires that Registered Dietitians (RDs) implement the center-based intervention as outlined on page 9 of the RFA. Home based programs and 10-week cycles are not being funded as part of this RFA.

**Question 16:** On page 9 the 1st paragraph under Eat Well Play Hard in Child Care Centers states that this curriculum will be implemented in approximately 16-week cycles during which 3 child care programs can receive the intervention. Also, the center-based intervention can only be implemented by RD. Is this stating that for 16 weeks one program will be able to receive the intervention totaling three in a contract year or is this saying that during each 16 week cycle, 3 programs will participate totaling 9 programs per contract year?

**Answer 16:** The Eat Well Play Hard in Child Care Centers curriculum is implemented in approximately 16-week cycles during which three child day care centers can receive the intervention per 100% FTE Registered Dietitian (RD). This calculates to approximately nine child day care centers per year per 100% FTE RD.

**Question 17:** What will the 16-week periods of the EWPH cycle entail? Will all centers follow the same schedule of what is now called a Champion center?

**Answer 17:** All centers will implement the same 16-week cycle. While the curriculum is currently under revision, the 16-week cycle for the center based Eat Well Play Hard in Child Care Centers intervention as referenced on page 9 of the RFA is planned as follows, though it is subject to change:

- Weeks 1-2 (Set-Up): Conduct meeting(s) with center; Conduct orientation with center
- Weeks 3-14 (Implementation): Conduct 6 RD-led lessons for preschool children in classrooms; Monitor 6 teacher-led lessons for preschool children in classrooms; Conduct 6 RD-led parent lessons; Conduct meeting(s) with center; Conduct 3 workshops for center staff
- Weeks 15-16 (Next Steps): Conduct meeting(s) with center
- 3-6 months post-implementation: Conduct follow up meeting with center

In addition, there will be a 6-month post implementation center-based workshop for each intervention center and annual group workshops for all Champion centers.

And, as indicated on page 9 of the RFA, centers that have completed the center-based intervention will be recognized as Champion Centers.

**Question 18:** On page 9 the 2nd paragraph under Farm to Preschool states that it is preferred that farmers sell produce at a central location within the selected targeted area. Is this stating that the farmers can be centrally located in the community or is it stating that the participating center should be centrally located in the community?

**Answer 18:** One of the goals of Farm to Preschool market venues is to increase access to locally grown fresh produce for parents of children in care, the staff employed by those centers, and the center's food service operations. To support this, the market venues should be located within a target area cluster and easily accessible by private or public transportation to multiple intervention child day care centers such that parents, their children, staff and food service operations of intervention centers have easy access.

**Question 19:** On page 13 the last paragraph under Target Population it states that one F2P project will be located in each targeted area cluster, accessible by the majority of child care sites selected for the intervention. Will the F2P Coordinator provided educational lessons to the selected sites receiving the intervention, as well as, establish a community Farmers Market/Stand that can be utilized by all eligible programs?

**Answer 19:** It could vary. As indicated on page 9 of the RFA, each F2P project should include a market model for the purchase and/or distribution of fresh, local produce as well education and food demonstrations that engage parents, child care center staff and children. F2P Coordinators should also assist and collaborate with gardening projects and related classroom activities for hands-on learning in the child day care centers within that target area cluster. F2P classroom activities should specifically relate to gardening. Given funding limitations and site locations, it is likely that not all intervention child care centers will be included in the F2P projects.

**Question 20:** Can the food tasting component of the F2P intervention be incorporated into EWPH lessons/food tastings?

**Answer 20:** No. As indicated on page 9 of the RFA, F2P projects must include food demonstrations at the market to facilitate increasing the consumption of fruits and vegetables. Demonstrating how to prepare a recipe using the fruits and vegetables available at the F2P market model provides practical knowledge on using market fruits or vegetables. Providing samples of the recipe demonstrated allows parents and their children as well as center staff and community members to taste new foods before investing valuable food resources for purchasing.

**Question 21:** Would collaborating in an online “social marketing initiative to change the norms surrounding the food environment and healthy eating,” count towards the community engagement piece, or do collaborations have to be face-to-face?

**Answer 21:** The example referenced in this question requires the provision of more information before a determination can be made. Collaborations through online collaborations, at least in part, may be considered.

**Question 22:** Are F2P and EWPH interventions to be implemented at the same centers, or will some centers receive one intervention and other centers will receive the other?

**Answer 22:** Centers participating in the F2P project should be selected from those participating in the Eat Well Play Hard in Child Care Centers intervention. Given funding limitations, it is likely that not all intervention child care centers will be included in the F2P projects.

**Question 23:** On page 12 the 1st paragraph under Organizational Infrastructure and staffing, it states that the Program Manager will be allocated at 10% per FTE RD. Will there be a 5% allocation per PTE-F2P Coordinator?

**Answer 23:** While there is no recommended allocation requirement for the Program Manager as related to the supervision and management of a part-time F2P Coordinator, applicants may choose to do so as long as the allocation is sufficiently justified in the Narrative section of the budget proposal. See page 81 of the RFA for a sample budget justification.

**Question 24:** Can you provide more guidance on the role of the RD vs. the role of the F2P Coordinator? Which of these positions will be mainly responsible for the community engagement and BFF pieces?

**Answer 24:** As indicated on page 10 of the RFA, the RDs will be responsible for implementing the Eat Well Play Hard in Child Care Centers component in targeted centers. The RD will also take the lead on working with child day care centers to assist them in creating policies and environments that support breastfeeding mothers and their infants through the Breastfeeding Friendly component. RDs should have some community or public health experience; familiarity with early care and learning programs is preferred.

The F2P Coordinator will be responsible for implementing all aspects of the F2P component as outlined on pages 9 through 12 of the RFA, and should have experience in community organizing; knowledge of farmer's markets is preferred.

**Question 25:** Will the EWPH intervention now be opened to non-CACFP programs?

**Answer 25:** No. Centers must participate in CACFP in order to be eligible to participate in the Eat Well Play Hard in Child Care Centers component, and subsequently the Breastfeeding Friendly component. Nonparticipating centers should be referred to CACFP. Please refer to Page 6, "II. Who May Apply" for minimum eligibility requirements.

**Question 26:** In the city we have plenty of Kosher centers and centers that cater their food. Is there a CACFP plan to integrate these centers into the F2P?

**Answer 26:** Kosher centers that cater their food participate in CACFP. Awarded applicants can implement EWPHCC, including F2P, in these centers. As part of community engagement and marketing of the F2P market model, all community members, businesses and organizations should be made aware of the market model availability and encouraged to participate. Some accommodations can be made to the structure of the F2P intervention on a case by case basis.

**Question 27:** For the BFF program, will non-CACFP centers be recognized on the NYDOH website?

**Answer 27:** No. Only CACFP participating child care centers with preschool aged children will be eligible to participate in the Eat Well Play Hard in Child Care Centers component, and subsequently the Breastfeeding Friendly component. Those centers will be recognized on the NYSDOH website at the following link: [http://www.health.ny.gov/prevention/nutrition/cacfp/breastfeeding\\_centers/](http://www.health.ny.gov/prevention/nutrition/cacfp/breastfeeding_centers/). However, the nonparticipating centers will benefit from the community involvement component.

**Question 28:** Is the BFF program to be promoted to all child care programs within the target areas, or only to the programs selected for participation in EWPH/F2P?

**Answer 28:** The Breastfeeding Friendly component will only be implemented in those child care centers participating in the Eat Well Play Hard in Child Care Centers component. Only participating centers will be selected to receive the direct intervention. However, centers in the community will benefit from the community engagement component.

**Question 29:** On Page 12, **Evaluation:** RDs complete their data report on a weekly basis. We would like to confirm that there is no change on this task.

**Answer 29:** EWPH Web App data should be updated on a weekly basis. As it states on page 12, additional data collection may be required once grants are awarded.

**Question 30:** Is F2P work seasonal or year-round?

**Answer 30:** All aspects of the F2P projects should be implemented in preparation for, during, and immediately post-harvest season, which is typically mid-March through

November. Page 12 of the RFA indicates that a minimum of one part-time F2P Coordinator is required to implement the F2P intervention in the target areas selected. This part-time position typically spans the period of mid-March through November.

**Question 31:** Can you provide more guidance on the role of the Program Manager?

**Answer 31:** As indicated on page 12 of the RFA, the Program Manager will likely be assigned from the organization's existing administrative or management staff to oversee the project staff and contract deliverables. This includes, but is not limited to, activities like: reviewing, approving and submitting center selections; monitoring staff calendars and scheduled sessions; reviewing and organizing supporting documentation for monthly vouchers; providing clear, succinct justification for budget modifications; preparing annual budget justifications and calculations supported by actual and/or anticipated program costs; preparing COLA proposals and justifications for expenses; reviewing and approving staff mileage logs; and monitoring and approving time records. The Program Manager is also responsible for supervising all grant funded staff as an employee of their organization, including conducting performance reviews, providing oversight and routine monitoring of scheduled sessions as well as site monitoring, including implementing corrective action plans when necessary. The Program Manager will ensure that all grant funded program staff coordinate efforts for the target areas, including recruitment of child care centers, scheduling interventions, locating and promoting the F2P projects, and creating the culture of health in the community. It is the Program Manager's responsibility to ensure the effective and efficient implementation of all components of the EWP HCCS intervention as outlined in this RFA.

**Question 32:** On page 12, the RFP states that contractors will be required to hire a minimum of one full-time RD to implement the EWP HCCS intervention. Does it have to be an RD, or might we use a public health educator instead?

**Answer 32:** As referenced in your question, the staffing requirements are outlined on page 12 of the RFA where it states that grantees will be required to hire a minimum of one full-time Registered Dietitian (RD) to implement the EWP HCCS intervention.

**Question 33:** When discussing collaborative partnerships as part of the second bullet on Page 11, it is indicated that these collaborations and/or partnerships should be used to identify and recruit potentially eligible child day care programs into the EWP HCCS intervention, including those that are non-CACFP participating. What is meant by this?

**Answer 33:** All child care centers in the target area zip codes identified in Attachment 1A are considered potentially eligible. However, recruitment efforts for participation in the Eat Well Play Hard in Child Care Centers component should be limited to those that participate in CACFP and serve preschool aged children. Child care centers within those zip codes that are determined to be non-CACFP participating centers, but who may be interested in participating in the Eat Well Play Hard in Child Care Centers component, should be referred to CACFP.

## SECTION IV.

**Question 34:** When will the list of organizations who submitted LOI's be shared?

**Answer 34:** The organizations that submitted Letters of Intent are included at the end of this document to allow potential applicants to work together to ensure adequate coverage of the identified high need target areas.

**Question 35:** Do you have a mailing list for this program?

**Answer 35:** Yes, there is a mailing list of potentially eligible organizations based on the minimum eligibility criteria outlined in Section II. on page 6 of the RFA. This list includes perspective applicants who submitted letters of interest as indicated on page 15 of the RFA.

**Question 36:** What kind of MWBE Diversity Goals will be included?

**Answer 36:** Page 20 of the RFA states that, "For purposes of this solicitation, the New York State Department of Health hereby establishes a goal of **30%** as follows:

- 1) For Not-for Profit Applicants: Eligible Expenditures include any subcontracted labor or services, equipment, materials, or any combined purchase of the foregoing under a contract awarded from this solicitation.
- 2) For-Profit and 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)."

## SECTION V. (& ADDENDUM #1)

**Question 37:** "3B4 Describe how your organization proposes to develop community partnerships and connect with key leaders to enhance collaboration and support for Eat Well Play Hard strategies; Include a list of organizations and leaders within each selected target area and letters of support from those who agree to be a part of your partnership."

However, it's not clear where we upload those - there doesn't seem to be a place for that in the "presubmission uploads" section. Please advise where we should upload letters of support.

**Answer 37:** Addendum #1 issued on 11/28/16 addresses this issue. The upload property was inadvertently omitted from this question in the Grants Gateway and cannot be modified once the opportunity is published.

Applicants are instructed to upload the list of organizations and leaders within each selected target area and letters of support from those who agree to be a part of your partnership along with the required upload for Question # 3A "High Need Target Areas."

Combine all documents into one PDF file and upload in Question #3A.

## ATTACHMENT 1

**Question 38:** What is a Zip Code Tabulation Area?

**Answer 38:** ZIP Code Tabulation Areas (ZCTAs) are approximate area representations of U.S. Postal Service (USPS) five-digit ZIP code service areas. ZCTAs are created by the Census Bureau to present statistical data from censuses and surveys.

**Question 39:** In regard to Attachment 1, how is a ZCTA related to a U.S. Postal Service Zip Code?

**Answer 39:** ZCTAs primarily use residential addresses and are biased towards ZIP codes used for city-style mail delivery. There may be ZIP Codes that are primarily nonresidential or P.O. boxes only, that may not have a corresponding ZCTA. These ZIP codes are combined with other more residential ZIP codes into a ZCTA. In other words, sometimes two or more ZIP Codes are represented by one ZCTA. The differences between ZCTAs and ZIP codes does not affect the list of high need ZIP codes. Every effort was made to include in the high need list all ZIP Codes that may be represented by any identified high need ZCTA.

**Question 40:** Can my organization select more than one high-need zip code to reach the required number of eligible centers?

**Answer 40:** Yes. Page 32, Attachment 1, bullet A. states, “Applicants are expected to select zip codes to identify target area clusters containing an appropriate number of child day care programs to support the number of 100% FTE Registered Dietitians (RDs) proposed in the budget.” However, the first paragraph on page 7 states that, “Applicants can only apply for one region.”

**Question 41:** Can my organization select high-need zip codes in two or more counties to reach the required number of centers?

**Answer 41:** Yes. Page 32, Attachment 1, bullet A. states, “Applicants are expected to select zip codes to identify target area clusters containing an appropriate number of child day care programs to support the number of 100% FTE Registered Dietitians (RDs) proposed in the budget.” Depending on the concentration of eligible child day care centers, it may be necessary to identify high-need zip codes in two or more counties. However, the first paragraph on page 7 states that, “Applicants can only apply for one region.”

## ATTACHMENT 7

**Question 42:** I am in the process of drafting a letter of intent and wanted to know if there are any specific restrictions that I should be made aware of (i.e. organizations cannot use the money for salaries).

**Answer 42:** Yes, there are some specific restrictions that organizations should be aware of:

- All costs must be allowable under SNAP-Ed rules (see page 73, bullet 8)
- Administrative costs may not exceed 15% of the total grant (see page 74, second paragraph)
- Applicants may subcontract components of the scope of work; however, a minimum of 30% of the budget must be retained by the applicant organization (see page 76)
- In regard to travel related expenses (see page 76, last paragraph):
  - Travel expenses must follow either the written standard travel policy of the contractor, the OSC guidelines, or United States General Services Administration rates, whichever is less
  - No out-of-state travel allowed
- The following expenses must be preapproved by CACFP:
  - Cost allocation plans for Equipment & Space (see page 78, first paragraph)
  - Furniture and computer equipment/software purchases (see page 79)
- Allocated costs will be limited to a maximum of 12% of total Personal Service Salary and Fringe Benefits plus the subtotal of Non-Personal Service costs.
- All costs considered “Other” costs, including Indirect costs (see page 80)

**Question 43:** On page 78, the Space/Property Expenses: Rent budget category indicates that rent for commercial/certified kitchen space may be included for recipe preparation. Based on the language, does this mean we will need to prepare food for demos at our organization, at the center, or in a rented kitchen space only?

**Answer 43:** Yes. Some organizations and centers will have sufficient kitchen space available for food storage and recipe preparation. However, if this is not the case, then it is expected that applicants will include a budget line item to rent a commercial/certified kitchen space for this purpose. No food storage or preparation will be allowed in staff’s home-based kitchens.

## ATTACHMENT 8

**Question 44:** Can you tell me whether construction costs are allowable under Eat Well Play Hard funding?

**Answer 44:** No, construction costs are not allowable. According to page 88 of Attachment 8, the FFY17 SNAP-Ed Guidance, costs associated with the establishment and maintenance of environmental or policy changes outside of the scope of SNAP-Ed, such as infrastructure, equipment, space, land, or construction are not allowable.

## MISCELLANEOUS

**Question 45:** Is this F2P requirement in this RFA replacing the current F2P funding or in addition to it?

**Answer 45:** The current F2P funding is part of a grant that expires on September 30, 2017. The F2P initiative in this RFA is replacing the current F2P funding, however the crux of grant funded efforts should be focused on the Eat Well Play Hard in Child Care Centers component of the EWPHCCS intervention.

**Question 46:** What specific guidance and support will be provided for the new aspects of grant?

**Answer 46:** CACFP will be providing training and technical assistance to applicants receiving awards from this RFA as related to all four EWPHCCS components, and will also include guidance pertaining to evaluation, data collection and reporting, fiscal matters, site monitoring, etc. Each awarded applicant will be assigned a CACFP contract manager to provide tailored technical assistance on a regular basis.

**Question 47:** Will an RFP be released soon for EWPH in Family Child Care Programs?

**Answer 47:** No. The Eat Well Play Hard in Day Care Homes (EWPHDCH) program is no longer being implemented through a grant. CACFP Public Health Nutritionists employed by the NYSDOH will be implementing the EWPHDCH program in family day care homes.

## ATTACHMENT TO QUESTIONS AND ANSWERS DOCUMENT

According to page 15, Section C. third paragraph of the RFA, the identified target areas are to be included in this questions and answers document and posted on or around the date listed on the cover of the RFA. For the purpose of providing the potential for applicants to work together to ensure adequate coverage of the identified high need target areas, the organizations that submitted Letters of Intent are also included. See below:

<b>Organization Name</b>	<b>City</b>	<b>Target Areas Identified</b>
Holy Cross Head Start, Inc.	Buffalo	TBA
Community Action Organization of Erie County, Inc.	Buffalo	TBA
New Square Community Improvement Council, Inc.	Spring Valley	TBA
Easterseals NY, Inc.	New York	Lower Hudson Valley Region; Monticello; Port Jervis
Child Care Resources of Rockland, Inc.	Spring Valley	TBA
Child Care Council of Nassau, Inc.	Garden City	Nassau County; Suffolk County
Child Care Solutions, Inc.	Syracuse	Cayuga County (13201); Oneida County (13501, 13502); Onondaga County (13209, 13088, 13108, 13120, 13202, 13202, 13204, 13205, 13206, 13208, 13209, 13210, 13224, 13244)
NYC Department of Health and Mental Hygiene	Long Island City	All target zip codes within 5 boroughs of NYC
Nana's House Child Care Center, Inc.	Rock Hill	Sullivan County
Cayuga County Health Department	Auburn	TBA
Day Care Council of New York	New York	Range of zip codes in Brooklyn and Bronx; Manhattan; Queens
Olean, NY and Bradford, PA YMCA	Olean	TBA
Child Care Aware® of Steuben and Schuyler	--	TBA
Cornell Cooperative Extension Oneida County	Oriskany	Oneida County; Herkimer County; Madison County
Capital District Child Care Coordinating Council, Inc.	Menands	All target areas as defined as the Capital Region
Leake and Watts Services, Inc.	Yonkers	Castle Hill/Soundview section of the Bronx (primary zip codes are 10472 and 10473)
North Country Healthy Heart Network	Saranac Lake	Clinton County; Essex County; Franklin County
Police Athletic League of New York City	New York	Queens County; Kings County
Child Care Council, Inc.	Rochester	The following counties of the Western Region of NYS: Monroe; Wayne; Livingston; Erie; Niagara; Genesee; Orleans; Wyoming; and Chautauqua
Family of Woodstock	--	TBA