Application: COVID-19 Health Equity, Capacity Building, and Sustainability in Rural/Frontier Local Health Departments

Instructions: **APPLICATIONS MUST BE SUBMITTED VIA EMAIL** to the Health Equity and Social Justice Team (HESJ@naccho.org). Applications will not be considered complete unless all associated attachments (listed below) are attached. **DEADLINE: Applications are due by 11:59PM ET on Monday, April 8, 2024.**

Please be aware that responses need to be saved directly into this application form. If you are having issues accessing the application form, please contact our team (HESJ@naccho.org) for support. Additionally, send your completed budget template, budget narrative, NACCHO Vendor Form, W-9, Certification of Non-Debarment, FFATA Form, and proof of active registration with SAM.gov in accordance with active DUNS and or UEI number in a single email to (HESJ@naccho.org).

If you are unable to fully complete all application fields at this time, please enter the information you have available and submit the form for review. If selected, NACCHO may request additional information as part of the contracting process.

A. CONTACT INFORMATION (section will not be scored)		
Local Health Department Name:		
Street Address:		
City:	State/Territory:	ZIP Code:
Approximate population size served by LHD (number):		
ZIP codes in the LHD's jurisdiction (please list all, separating each with a comma) *NOTE: these ZIP codes will be reviewed for associated RUCA codes to determine eligibility based on criteria listed in the RFA. At least 50% of your jurisdiction must be considered a Rural/Frontier area according to corresponding RUCA codes to be eligible for this opportunity. *		
Current number of staff:	full-time equivalents (FTEs) (al non-clinical full-time equivale	
HEALTH EQUITY CAPACITY BUILDING ACTIVITIES: Do you currently have a documented administrative health equity plan or health equity activities? Lead project contact (agency-designated project Name, Title Email Phone	Yes No t contact for all matters pertaining to th	he project):

Applications received after the deadline will not be considered.

Lead finance contact (agency-designated finance contact for all matters pertaining to processing contracts and invoices):		
Name, Title		
Email		
Phone		
B. CONTRACTING INFORMATION (section will not be scored)		
Selected LHDs will enter into a contract with NACCHO to complete the deliverable(s) selected as part of this		
application. To expedite the contracting process for selected sites, agreement with NACCHO standard contract		
terms and conditions, found <u>here</u> , is a requirement for application. No modifications will be made. The The information below will help to begin the contracting process immediately upon selection.		
The LHD (or entity that will be contracting		
with NACCHO, e.g., city government),		
including any relevant financial or legal	Yes	
offices, has read NACCHO's standard contract	No No	
language and would be able to enter into a		
contract without making modifications to the		
terms and conditions.		
The LHD (or contracting entity) will be able to		
sign and return a contract to NACCHO within	Yes	
30 calendar days of receipt.	No	
If you colocted (No' to either of the above		
If you selected 'No' to either of the above, please explain.		
In the last 24 months (July 2021 – December		
2023) has your LHD received any grant funding	Yes	
from NACCHO? (Note: this information is for		
tracking purposes and has no bearing on	No	
review and selection.)		
If yes, provide a general description, dates		
and approximate amount of each separate		
grant funding received.		
Does the organization have prior experience		
in Federal Contracting?	Yes	
in reactar contracting.		
	□ No	
Has the organization completed a Single		
Audit?	Yes	
	□ No	
C. CURRENT COVID-19 HEALTH EQUITY CAPACITY BUILDING ACTIVITIES		

C.1. Describe your recent/current activities aiming to address rural health disparities and advance health equity
as a result of the COVID-19 pandemic. <u>(Max 300 Words)</u>
C.2. Describe your efforts in expanding the capacity and services to prevent and control the infection (or transmission) of COVID-19 and other infectious diseases among populations at higher risk and that are underserved, including racial and otheric minority groups, and people living in rural communities. (Mar 200, Morde)
including racial and ethnic minority groups, and people living in rural communities. (Max 300 Words).
D. COVID-19 HEALTH EQUITY CAPACITY BUILDING CHALLENGES
Please describe the challenges you have encountered in your COVID-19 response that affect your rural
communities, sustainability planning and capacity, ability to implement response programs, and recovery initiatives.
<u>(Max 200 Words)</u>
E. TRAINING & TECHNICAL ASSISTANCE (TTA) NEEDS

NACCHO wants to support the ability of rural and frontier health departments working to expand their capacitybuilding training, technical assistance, and tools/resources to prevent and control the infection (or transmission) of COVID-19 and other infectious diseases among populations at higher risk and that are underserved, including racial and ethnic minority groups, and people living in rural communities. Grant recipients will receive funding, training, technical assistance, and tools/resources to build capacity in the following areas, as selected and proposed by each grant recipient, and be asked to develop project implementation and sustainability plans.

In the space below each TTA area, please provide additional details about your workforce needs and your capacity and capabilities to meaningfully engage with this work. (*Max 200 words per TTA area*)

- **Expand existing and/or develop new mitigation and prevention resources and services** in preparation for future public health emergencies, and to reduce health disparities among populations at higher risk and that are underserved as a result of COVID.
- **Increase/improve data collection and reporting** to guide public health response for rural populations disproportionately burdened by health inequities related to COVID-19 and other health threats.

• **Build, leverage, and expand infrastructure support** for COVID-19 and other communicable diseases to minimize impact among rural populations.

 Mobilize partners and collaborators to develop relevant strategies that nurture health equity and address social determinants of health as they relate to COVID-19 and other communicable diseases, as well as other health disparities among rural populations.

F. PROJECT STAFF & PARTNERSHIPS

This project will offer TTA on supporting LHD grant recipient needs specific to their approved activities and broader cross-cutting areas relevant to the larger cohort, such as action and sustainability planning. This includes facilitating monthly virtual, interactive workshops; facilitating a community of practice to foster peer exchange and learning; providing tools and resources that meet immediate and longer-term needs (ex. Templates, checklists, guides); and providing robust, tailored technical assistance. To benefit from these offerings, it is recommended that your key staff and community partners engage with the TTA, and resources offered. Please list all staff and community partners that you intend to include in this project. Include their names, organization names, titles, and a brief description of their role(s). (Max 200 Words)

G.1. What do you plan to do with this funding? How will you ensure sustainability of capacities built through the grant activities? (*Max 400 Words*)

Submission Information

Timeline (subject to change)

- Monday, March 4, 2024: RFA released
- Deadline for submission of grant applications: Monday, April 8, 2024, by 11:59 PM ET
- Anticipated notice of award: On or around the week of April 12, 2024
- April 18, 2024: Contract period commences
- July 31, 2024: Contract end date

Applicant Questions and Guidance

NACCHO will support interested applicants by offering guidance and addressing specific questions about the RFA. Please address questions to Lluvia Botello (<u>hesj@naccho.org</u>) with the subject line Rural Health Cohort RFA Inquiry.

Funding and Disclaimer Notices

This project is supported by a grant from the Centers for Disease Control and Prevention (CDC). CDC does not endorse any particular product, service, or enterprise. Views expressed in related products do not necessarily reflect those of CDC or the United States Department of Health and Human Services (HHS).

This RFA is not binding on NACCHO, nor does it constitute a contractual offer. Without limiting the foregoing, NACCHO reserves the right, in its sole discretion, to reject any or all proposals; to modify, supplement, or cancel the RFA; to waive any deviation from the RFA; to negotiate regarding any proposal; and to negotiate final terms and conditions that may differ from those stated in the RFA. Under no circumstances shall NACCHO be liable for any costs incurred by any person in connection with the preparation and submission of a response to this RFA.