

Date: June 18, 2020

Subject: COVID-19 Community-Based Organization Grant Opportunity

Frequently Asked Questions

Application

Q: Will there be a contact person for answers or advice on filling in the application requirements?

A: Yes. Please email questions to Community.Covid19@dhsosha.state.or.us

Q: Is June 24th the cutoff date to apply?

A: Yes. If OHA finds that there is a gap in applications from certain areas of the state or certain populations, OHA will solicit applications on or after the deadline.

Q: Are there a character-, word- or page limits for the application?

A: No.

Eligibility

Q: Does my organization qualify as a community-based organization (CBO)?

A: Any 501(c)(3) organization that provides culturally responsive services to communities in Oregon that are disproportionately impacted by COVID-19. Organizations with 501(c)(3) fiscal sponsors are eligible to apply.

Q: Does my project sound like a good opportunity for funding?

A: OHA is looking to partner with CBOs that can provide services within three specific areas: community engagement, contact tracing and social

services/wraparound supports. If you can see your organization doing that kind of work, please consider applying.

Q: Are community health centers eligible or are we considered health systems?

A: Community Health Centers are eligible to apply. Applicants should focus on reflecting and meeting community need. Health care systems, such as hospitals, health plans and coordinated care organizations are ineligible.

Q: Would it be feasible for several organizations to submit a proposal together?

A: Yes.

Q: Are sole community-based, non-profit hospitals in rural counties eligible to apply?

A: Hospitals are not eligible to apply.

Q: My program addresses social determinants of health, we provide funding for rent/ utility assistance, among other things. Can these funds be used for that? It was not clear if this is only for those experiencing isolation/quarantine.

A: Reimbursement for social services and wraparound supports like housing is intended only for those individuals in quarantine or isolation due to COVID-19. OHA expects part of the work CBOs are doing is referring individuals to other programs who provide longer term rent and utility assistance. OHA is working hard at the state level to develop a state safety net for a direct pathway for individuals needing to access these resources.

Q: As a regional food bank working with community partners, would home delivery or distribution of emergency food be eligible?

A: If your organization can provide the services outlined in the scope of work provided in application, OHA encourages you to apply. This funding is guaranteed through December 30, 2020 and we are working to ensure funding will extend beyond that date, but we want to make sure work that's happening is starting right away.

Q: Can a civil rights organization, not a social service organization, apply for community education funding? And does the insurance liability requirement apply to us, if we are simply passing on information?

A: Yes, 501(c)(3) organizations are eligible to apply and yes, the insurance requirement does apply. Purchase of liability insurance can be paid for with funding.

Q: Are organizations that serve smaller numbers of people a good fit? Such as an organization that serves about 50 children and their family members who are among our community's most under-served?

A: Yes, OHA has provided budget range suggestions for how much funding applicants should request dependent on size of population you are serving.

Q: Do service providers have to be certified/traditional health workers?

A: OHA is looking for traditional health workers, community health workers or individuals who possess the knowledge, background and skills that a traditional community healthcare worker possesses. This includes ability to engage community, provide culturally-and linguistically responsive services and be a trusted community member.

Q: Are the social services/wraparound supports specifically for individuals who are formally quarantining or isolating? Or would services for individuals who are more generally impacted by COVID (e.g., folks who need support as they follow stay-at-home orders or are coping with layoffs/lost wages) also be eligible?

A: The direct reimbursement we would provide for social services and wraparound supports are only for individuals who are formally isolating or quarantining. We expect that part of social services and wraparound supports will involve referrals to other organizations providing longer-term assistance.

Q: Similar to a previous question, for social services/wraparound support how are individuals connected with CBO's to ensure that the CBO serve individuals within their community?

A: A local public health authority receives notification of a positive COVID-19 test result and then conducts an interview with that person. This process, called case investigation, includes asking the individual who they may have had contact with during their infectious period. The local public health authority will identify contacts and will share that information with CBOs conducting contact tracing to conduct daily symptom monitoring. Either through the local public health authority's case investigation or through the contact tracing process, referrals will be made to CBOs to provide social services/wraparound supports.

Q: Can an organization participate both as being funded and as a fiscal sponsor?

A: Potentially. OHA would recommend having a discussion about what the CBO is proposing.

Q: The RFP mentions bilingual CHWs. Is it okay if the CHWs only speak Spanish?

A: Yes, please make sure to mention you have monolingual staff to help us determine the support you may need.

Q: Would hiring a community health worker (CHW) to do the outreach and healthcare piece be an appropriate use of these funds? If so, are most local health depts. a willing partner in this?

A: Yes. OHA recognizes there aren't enough certified CHWs to do this work. OHA encourages CBOs to think about this as a capacity building opportunity. How would you build a team to do this work? Local public health authorities play a critical role in this partnership. The OHA Public Health Division is currently building a structure within the Community Engagement Team that will assign each CBO an OHA staff person to be their liaison. The liaison will support CBOs all aspects of implanting projects, including work and communication with LPHAs.

Q: *Are public health entities eligible for this funding?*

A: No. LPHAs have already received funds for contact tracing, case investigation, and working with CBOs in their jurisdiction.

Q: *Are agencies required to have community health workers (CHWs) and health care interpreters (HCIs) in order to provide social services/wraparound supports?*

A: No.

Q: *Can this effort be used for work, such as supporting efforts of those self-isolating because they are high-risk? Or are people only eligible if the OHA has identified the person?*

A: Someone in isolation would have already tested positive for COVID-19, so yes, they would be eligible for social services and wraparound support services. If individuals are staying home because they are high-risk, reimbursement for these services would not apply to them. OHA suggests thinking of how you could leverage the community engagement portion of this grant opportunity to best serve this population.

Q: *We use Peer Support Specialists instead of community health workers so could these funds help support them doing the social services/wrap work?*

A: Yes.

Q: *Does the sponsor need to be in the same service area as the one doing the work?*

A: Not necessarily, but OHA wants to clearly understand the oversight relationship.

Funding

Q: *Can I use this grant opportunity to purchase isolation and quarantine related supplies, or other supplies for my community?*

A: No. Grantees must implement one or more of the three areas included in the scope of work in full: community engagement, contact tracing and social

services/wraparound supports. If a grantee is conducting social services/wraparound supports then they can access additional reimbursement for provision of housing, food, health care supplies not covered by insurance, telephone and childcare for individuals in isolation or quarantine.

Q: Could you tell me the total funds available per grantee for this opportunity? Is it only \$110,000 total, and then you'll select one or more entities from those funds? Or is \$110,000 the max for one organization and the total pool is larger?

A: The total investment is \$25 million over a six-month period of time and that it will be divided by up to 120 organizations. The ranges are suggested based on the number of individuals served. If a CBO covers multiple regions or works statewide, please note this in your application as your proposed budget may be adjusted to accommodate the number of people proposed to be served.

Q: How can I sign a grant agreement and hire staff without knowing if/what I can pay the staff beyond the first six months?

A: The CARES Act funds that OHA is using for this investment go through December 30, 2020. OHA is working to identify other Federal and non-Federal funding sources and continue to voice the critical importance of this investment during the second six months. At this point, there are some funds that will be available for CBOs for contact tracing specifically after December 30, 2020. Additionally, the scope of work will be adjusted if less funding is available for the second six months.

Q: Can I end my grant agreement if funds are insufficient for the second six months?

A: Yes, grantees may end their grant agreement with OHA if funds are insufficient to continue the work into the second six months.

Q: If we are using a fiscal sponsor will they be able to be the organizations holding the commercial general liability insurance?

A: Yes, the fiscal sponsor may be the insurance policyholder.

Q: Are the funding ranges per quarter or for the duration of the grant?

A: Provided funding ranges are for the quarter.

Q: How will CBOs report on the services provided?

A: The report form will be online and will be filled out quarterly. CBOs will be assigned an OHA Community Engagement Coordinator who will check in bi-monthly. OHA will also create opportunities for CBOs to connect with other CBOs via collaborative sessions.

For community engagement, CBOs will report on activities quarterly.

For contact tracing, CBOs will be required to enter daily information into the ARIAS System and communicate regularly with local public health authorities (LPHAs).

For social services and wraparound supports, CBOs will be required to report quarterly on how you are providing services and submit invoices for reimbursement for any isolation and quarantine-related direct costs that are covered by the grant. OHA is also interested in the stories-- What happened in your community? How did your efforts impact your community? Was the impact positive or negative? OHA will need to be able to communicate impact with policy makers to continue to strengthen the work the state is doing around community engagement.

Q: Are you going to provide a budget example?

A: Due to the quick turnaround for application submission, OHA is requesting a high-level estimated budget for each of the areas you wish to apply for and a full budget narrative by August 30. A budget narrative will be posted to the grant opportunity website as soon as it is available.

Q: Can you explain the cap on funding per region?

A: OHA put available funding for CBOs through a formula that includes population and several demographic factors to identify targets for how much funding should be allocated to the emergency preparedness regions around the state. These are the same regions that are being used for several COVID-19 indicators that are being published and are a part of county reopening plans. The dollar amount helps OHA determine about how much funding should be going into the regions to assure there is statewide reach.

Q: When we submit our application and it asks "Estimated total budget per category:" do we put the per quarter cost or the annual total?

A: Please provide your per quarter cost. Please refer to Attachment 2 for more guidance on how to fill that out.

Q: The estimated funding sheet identifies range of people served per month for each funding category. For Community Engagement and Outreach, there is not a funding level listed for less than 100 people served per month. Will you accept applications for this funding area if less than 100 people are served per month? We are in a small rural county.

A: Yes. CBOs can use funding ranges as a guideline for how to fund your program.

Q: As budgets are reviewed after each quarter, does the remainder of grant money need to be returned to the state? Or is it forgiven to be used for ongoing support of people in our community?

A: OHA will review expenditures and progress reports and may adjust awards for the second three months based on community need.

Q: Does reimbursement for already spent costs supporting families in isolation/quarantine count or only going forward?

A: OHA will provide CBOs the opportunity to pay for childcare if an individual needs child care in order to be in isolation or quarantine. Reimbursement would start at the beginning of grant agreement and would not be retroactive.

Q: Should communities be applying to this funding in preparation for possible cases/outbreaks? We don't necessarily know how many people will be served at this point.

A: Yes, OHA recognizes the need to have these services in place now and that cases cannot be predicted. CBOs are asked to estimate the number of people your organization could serve in each area you want to apply for.

Q: It seems like magnitude of the need for the first of the three tasks (education/outreach) is not necessarily based on the number of COVID cases in a community. But the other two (contact tracing and social services/wrap around) are based on actual incidence. Is that an accurate summary?

A: Yes. OHA recognizes the need to connect and engage with your community and the number of people you'd reach is potentially broad. OHA also realizes it is difficult to anticipate how the number of people your proposed efforts will serve, since it's dependent on the number of cases in your area. OHA asks you make your best estimate based on anticipated need of social services and wrap around support. This is also why OHA is providing three months of funding up front, and then reassess and adjust figures based on need for the second three months.

Q: If an organization is receiving funding from the local public health authority for similar work, would they still be eligible for this funding?

A: Potentially. OHA has asked CBOs to identify these efforts they are already doing with local public health authorities in the application. We may be able to fund additional areas of work you aren't currently receiving funding for.

Q: What cost per participant are funding ranges based on?

A: OHA looked at the available amount of funds and estimated the amount of time spent across the three activities to determine example ranges. The ranges are meant to serve as a guide for you as you estimate financial need in the application.

Q: Are quarantine-related reimbursements separate and apart from the grant funding request?

A: Correct, that is a separate amount of money set aside for reimbursement for isolation and quarantine-related direct costs. You do not need to include this in projected costs in your application.

Q: Can training for healthcare workers to better serve specific populations be funded through this process?

A: No. These funds are specific to the following three areas: community engagement, contact tracing, social service and wraparound supports specifically for those impacted by isolation or quarantine.

Q: Will CBOs collect REAL-D data for clients served? Will CBOs use technology tools to support and report on this work?

A: In terms of contact tracing, OHA will be adding REAL-D data collection into the ARIAS system. We are currently working on this with our developers.

Q: Do we propose a 6-month budget in the application? I notice the estimated funding shows 3-month estimates.

A: Please propose a 3-month budget.

Q: What does the adjustment look like between a single-community organization and one that serves multiple communities and/or statewide?

A: Please refer to the suggested ranges we provided. If you plan to offer your services statewide, give your best estimate in terms of the number of people you anticipate serving and adjust funding accordingly.

Q: Will the grant funds come all at once or will we be reimbursed quarterly?

A: Grantees will receive their three-month funding up front, and will then be reimbursed directly for any isolation and quarantine-related costs. CBOs will receive additional funding in the second quarter based on need. Reimbursement for isolation/quarantine related costs can be processed monthly or quarterly.

Q: Can funds be used to support the administration costs, like for a CFO?

A: You can include indirect costs. If you have a CFO who is helping to support the work, you may list them as funded personnel to do things like develop and process reimbursement for isolation and quarantine-related costs, for example.

Q: Being a small community we work closely with other agencies to best assist our clients. Can other agencies specifically organizations affiliated with or departments of our medical center be used as subcontractors in our project?

A: Yes, subcontracting is allowed.

Contact Tracing

Q: How would we be alerted of COVID-19 positive cases?

A: More information about case investigation and contact tracing can be found here:

[https://www.oregon.gov/oha/PH/DISEASESCONDITIONS/DISEASESAZ/Emerging%20Respiratory%20Infections/COVID-19-CBO-and-Contact-Tracing-](https://www.oregon.gov/oha/PH/DISEASESCONDITIONS/DISEASESAZ/Emerging%20Respiratory%20Infections/COVID-19-CBO-and-Contact-Tracing-Workflows.pdf)

[Workflows.pdf](https://www.oregon.gov/oha/PH/DISEASESCONDITIONS/DISEASESAZ/Emerging%20Respiratory%20Infections/COVID-19-CBO-and-Contact-Tracing-Workflows.pdf), with slide 5 providing a clear diagram of how communication will flow between a local public health authority and a community-based organization. The local public health authority receives notification of a positive COVID-19 test result. When that happens, they reach out to that individual and do a case investigation. As a part of that investigation, they are asking individuals who they may have come in contact with. At that point LPHAs will work with CBOs in local area and jurisdiction to begin daily symptom monitoring for individuals and recommending quarantine. If individual is symptomatic and needs testing, CBO is responsible for working with LPHA to start case investigation on that individual. It is a nuanced process, so OHA is dedicated to working closely with CBOs interested in offering this service along with LPHA to assure there are agreements in place for sharing protected health information. Your assigned Community Engagement Coordinator will be involved in supporting that process.

Q: Since outreach to marginalized communities for contact tracing will be dependent on public health for referrals, what is a reasonable number of contacts a month with that consideration?

A: It isn't possible to predict exactly how many contacts a CBO may need to trace. The number is dependent on number of cases in the jurisdiction and then for each of those cases how many contacts they've had. For the purposes of your application, it's best to determine the volume you could support on a monthly basis and include that in your response.

Q: How does a CBO know how much contact tracing is needed, and how much to request?

A: OHA recognizes it is difficult to determine exact numbers at this time, so CBOs should make their best to estimate the number of hours they could spend on contact tracing. OHA wants your community to be ready if needed and can readjust at the three-month mark.

Q: How are people connected to CBOs that are providing social services and wraparound supports? Are they referred to the CBO by the local public health authority?

A: Yes, if your CBO only provides social services and wraparound supports, the referral will come from the LPHA.

Q: *Will OHA provide training to CHWs on COVID and contact tracing, or will each org be responsible for developing training material?*

A: Yes, OHA will provide contact tracing training for CBO grantees.

