

Infant Health RFP: Two Year Infant Health Grants Frequently Asked Questions (FAQ)

The question-and-answer period opened September 18, 2023. Responses will be shared below based on topic. Questions have been organized by topic; they are not in order of how they were submitted.

Applicants

1. Are faith-based organizations considered nonprofits?

- a. Eligible applicants include community nonprofit organizations, and community health boards (CHBs). Applicants must have state or federal recognition as a formal organization or entity.

2. Can individuals apply for this grant?

- a. Eligible applicants include community nonprofit organizations, and community health boards (CHBs). Applicants must have state or federal recognition as a formal organization or entity.

3. If we partner with another organization, is it a requirement that all the funded activities take place at one location?

- a. Multi-organization collaboration is welcomed and encouraged. MDH recognizes that achieving health equity will happen only as we work together. Organizations that collaborate on proposals are encouraged to compensate partners appropriately for their contributions and to consider equity in deciding how resources are distributed among partner organizations.

4. For non-current grant recipients, how do we apply?

- a. Awarded applicants who are not current vendors in the State's SWIFT system will need to become vendors before a grant agreement can be made. Work cannot begin on grant activities until a fully executed grant agreement is in place and the State's Authorized Representative has notified the Grantee that work may start.

5. What types of organizations fall under the category of community health boards? Could we get a more specific definition of CHB?

- a. The community health board is the legally recognized governing body for local public health in Minnesota, and the only governmental entity eligible for funding under the LPH Act grant. Community health boards have statutory responsibility under the LPH Act, and work in partnership with MDH to address the areas of public health responsibility. Information on community health boards can be found at [Local Public Health Act \(www.health.state.mn.us/communities/practice/lphact/statute/index.html\)](http://www.health.state.mn.us/communities/practice/lphact/statute/index.html).

6. I see collaboration is encouraged. Can my agency apply as the lead applicant, but have a subcontractor on this one?

- a. Applicants must identify any subcontracts (if applicable) that will occur as part of carrying out the duties of this grant program as part of the Contractual Services budget line item in the proposed budget. The use of contractual services is subject to State review and may change based on final work plan and budget negotiations with selected grantees. Applicants will be responsible for monitoring any subcontractors to ensure they are following all State, Federal, and programmatic regulations including proper accounting methods. Applicant responses must include:
 - i. Description of services to be contracted.
 - ii. Anticipated contractor/consultant's name (if known) or selection process to be used.
 - iii. Length of time the services will be provided.
 - iv. Total amount to be paid to the contractor.
- 7. Page 6, section 1.4, states that applicants must be located in and conduct grant activities in the state of Minnesota, but fiscal agents may be located outside of Minnesota. We are not physically located in Minnesota; we do have a National presence and would be applying ourselves, not as fiscal agents for another organization - does this mean we are automatically disqualified due to our physical location being outside of the state?**
 - a. Applicants **must** be located in and conduct grant activities in the state of Minnesota, but fiscal agents may be located outside of Minnesota.
- 8. I see collaboration is encouraged. Can an organization apply as the lead applicant, but have a sub on this one? Also, will the webinar recording be posted? (Multiple responses)**
 - a. Yes. Collaboration is welcomed and encouraged. MDH recognizes that achieving health equity will happen only as we work together. Organizations that collaborate on proposals are encouraged to compensate partners appropriately for their contributions and to consider equity in deciding how resources are distributed among partner organizations.
 - b. Please review Contractual Services on page 30 of the RFP. Applicants must identify any subcontracts that will occur as part of carrying out the duties of this grant program as part of the Contractual Services budget line item in the proposed budget. The use of contractual services is subject to State review and may change based on final work plan and budget negotiations with selected grantees. Applicants will be responsible for monitoring any subcontractors to ensure they are following all State, Federal, and programmatic regulations including proper accounting methods.
 - c. Applicant responses must include: A description of services to be contracted, anticipated contractor/consultant's name (if known) or selection process to be used, length of time the services will be provided, total amount to be paid to the contractor.
 - d. Webinars are not recorded; therefore, there are no postings available.
- 9. I noticed this grant names Community Health Boards and non-profit organizations. Does that automatically exclude independent service providers?**
 - a. **No. If the LLC is a nonprofit, they could apply.**

Submission and Grant Timeline (SWIFT Questions)

10. What are the dates for year 1 (I understand it is short)?

- a. The estimated grant start date is February 1, 2024, and the projected end date is July 31, 2025. The grant period will be 18 months, contingent on satisfactory grantee performance and funding availability.

11. Is there submission info in the RFP - do we submit it using SWIFT or by mail?

- a. Applications must be submitted by email as PDF files to Health.MCH@state.mn.us.

12. Is there a word document version of the Request for Proposals?

- a. Yes, a word document was added this week to the webpage.

13. Are there any state specific registrations required for submission?

- a. See Appendix A: Application Checklist for business specific information to apply. Applicants must have state or federal recognition as a formal organization or entity. Organizations or groups may apply with a fiscal agent. Applicants must be located in and conduct grant activities in the state of Minnesota, but fiscal agents may be located outside of Minnesota.

14. Are there any state specific registrations required for submission?

- a. See Appendix A: Application Checklist for business specific information to apply. Applicants must have state or federal recognition as a formal organization or entity. Organizations or groups may apply with a fiscal agent. Applicants must be located in and conduct grant activities in the state of Minnesota, but fiscal agents may be located outside of Minnesota.

15. Will there be opportunity to extend the grant period past 18 months for proposals that are projected to take longer?

- a. The funding cycle ends July 31, 2025.

16. With the SWIFT account, if I was a past MDH grant recipient, but my account is no longer active, would I apply as a new or existing supplier?

- a. First, check in with the SWIFT portal to determine if your account is still active. If it is still active, the grantee will need to update their contact information, if applicable. If unable to access the SWIFT portal, the grantee will need to activate a new account.

17. Non-current grant recipients do not require a SWIFT account.

- a. MDH anticipates notifying all applicants of funding decisions by emailing award letters by January 1, 2024. Awarded applicants who are not current vendors in the State's SWIFT system will need to become vendors before a grant agreement can be made. A signed grant agreement between MDH and the awarded agency must be in place before work on the grant can begin.

18. Is it correct that we email the grant as a pdf and the budget keep as an excel document or should the budget be saved as a pdf as well?

- a. Yes. Applicants should email the grant narrative and the budget forms as pdf documents.

19. Do we apply on an online portal for non-current grant recipients?

- a. All applications must be submitted by email as PDF files to Health.MCH@state.mn.us. All awarded applicants who are not current vendors in the State's SWIFT system will need to become vendors before a grant agreement can be made. A signed grant agreement between MDH and the awarded agency must be in place before work on the grant can begin.

20. Is it correct that letters of support/collaboration should be not included in the application and will not be considered or evaluated?

- a. Letters of support are not required for this grant, even those showing support from collaborators. Letters of support are not included on the Application Checklist and will not be included in the community review process.

Proposal Questions

21. Is there an evaluation piece of the program as there was in the Positive Alternatives Grants?

- a. Funding in the budget does not need to be allocated to evaluation, but it is the expectation that the grantee reports back to MDH on work plan project goals and objectives. MDH can provide technical assistance for evaluation.

22. What are the program reporting requirements?

- a. For this grant program, grantees will **submit two written progress reports and conduct two check-in calls during the grant period**. The reporting schedule will be provided to grantees upon execution of the grant agreement.

23. Is part of this grant demonstrating improved infant mortality rates for participants in the program?

- a. The goal of this funding is to implement data-driven strategies and culturally relevant activities to improve infant health by reducing preterm birth, sleep-related infant deaths, and congenital malformations and address social and environmental determinants of health.

24. Is there any guidance on page length for the narrative component?

- a. No minimum or maximum length. MDH requests narratives to be clear, concise, and address all components necessary for project narrative.

25. In the Project Narrative, Section 1, question 3, you ask for “previous experience working with the State of MN and want us to also include the agencies, activities completed, length of time, and money awarded.”. Can you give a time period – e.g. in 2022; to-date in 2023 to write about in the proposal?

- a. Please include recent experience (past 7-10 years), particularly work relevant to this topic.
- 26. We work with communities to think about ways to reduce congenital syphilis. I am curious, although the grant lists areas of interest to be "preterm births, sleep-related infant deaths, congenital malformations, and social and environmental determinants of health" would syphilis and congenital syphilis (perinatal infections?) be considered within the scope of this?**
 - a. Yes.
- 27. In order to be competitive, should applicants propose to serve populations with high rates of disparities (noted in the RFP) including American Indian and/or African American families? For example, would an application serving only Hispanic families be likely to be competitive?**
 - a. Although Black/African Americans and American Indians have historically had the highest infant mortality rates in Minnesota (and still do), applicants can apply to work on one or more risk factors listed in the RFP in other communities experiencing health inequities, such as the Hispanic population, immigrant/refugee populations, and rural, and low-income communities.
- 28. Some of the social determinants of health examples include supporting career pathways starting in middle school, and supporting programs to increase high school graduation... do activities like this need to serve only those who are pregnant or have an infant, or are these activities aimed at broader communities?**
 - a. Yes. Grant funds can be used to close the achievement gap by increasing graduation rates and/or to support programs that create career pathways into allied health professions starting in middle school for students of color and American Indians regardless of whether they are pregnant or have an infant.
- 29. Does the work plan have to include 2 objectives like in the template? Or can there be less or more?**
 - a. Yes. The workplan must include two or more objectives as shown in the template.
- 30. Is there a cutoff for ages served? So they would have to be under 12 months?**
 - a. Although the grant aims to improve pregnancy and birth outcomes among childbearing people (15-44 years of age) and infants under 1 year of age, there is no age cutoff *per se*. For example, an applicant may choose to focus their efforts on people as young as middle school aged students to close the achievement gap or on all pregnant people who need to access prenatal care services regardless of age.
- 31. Does this grant have a name?**
 - a. The name of the grant is Minnesota Partnership to Prevent Infant Mortality: Improving Infant Health Grants.

32. While the RFP does not mention fetal death or stillbirth, would stillbirth prevention efforts be an option for this RFP?

- a. The grant is to implement activities to improve infant health outcomes and prevent infant mortality. Activities can focus on improving maternal health during pregnancy including practices that improve protective factors in the birthing parent. Suggested strategies and examples are listed on page 8 of the RFP.

33. How long postpartum may families be served with these funds?

- a. Families may be served during the 18-month grant period of February 1, 2024 – July 31, 2025. All funds must be spent during the grant period.
- b. If the activity aligns with addressing target risk factors, the applicant should communicate how this would apply in the postpartum period.

Budget

34. Grant amounts can be under \$200,000.00, correct?

- a. Correct. Funding for activities is over an 18-month period. The grant funding is over 2 state fiscal years breakdown is as follows:
 - i. February 1, 2024- July 31, 2024. Applicants can request up to \$200,000.00 for this period.
 - ii. August 1, 2024- June 30, 2024. Applicants can request up to \$200,000.00 for this period.

35. Since year 1 is so short, will we be able to roll funds from Year 1 into Year 2? Or do we need to spend everything in Year 1?

- a. Yes. Funds can be rolled over from year one into year two. However, all funds must be spent during the 18-month grant period, which starts on February 1, 2024, and ends on July 31, 2025.

36. Are we submitting a budget for the full two years? It's ok if they're different between the two years?

- a. All applicants are required to submit a budget for the full grant period of February 1, 2024, to July 31, 2025, by completing the [Infant Health Grant Budget Summary and Justification \(Excel\)](https://www.health.state.mn.us/people/womeninfants/infantmort/infanthealthbudget.xlsx) (<https://www.health.state.mn.us/people/womeninfants/infantmort/infanthealthbudget.xlsx>). Instructions on how to complete the forms can be found in Appendices F and G of the RFP.

37. Only 1 budget for the entire grant period? Or 2 budgets to match year1 and year 2?

- a. All applicants are required to complete a budget for the full grant period of February 1, 2024, to July 31, 2025, by filling out the [Infant Health Grant Budget Summary and Justification \(Excel\)](https://www.health.state.mn.us/people/womeninfants/infantmort/infanthealthbudget.xlsx) (<https://www.health.state.mn.us/people/womeninfants/infantmort/infanthealthbudget.xlsx>).

[.xlsx](#)). Instructions on how to complete the forms can be found in Appendix F and Appendix G of the RFP and on the forms themselves.

38. I see that cash assistance cannot be paid directly to individuals. Would housing assistance paid to vendors be eligible expenses?

- a. Yes. Housing assistance can be provided to program participants/clients. However, the grantee must pay the leasing agent directly on behalf of the client. The grantee will be responsible for the documentation of the payment.

39. Can you provide some examples of the most common eligible expenses?

- a. Examples of some of the most common types of eligible expenses include salaries, contractual services, outreach, materials and supplies such as diapers, portable cribs, training expenses, in-state travel, evidence-based curriculum, and breastfeeding supplies.

40. Is rent/mortgage an eligible expense?

- a. If a grantee is charging the grant for rent/mortgage, they must determine the percentage of service or program space used by the grant versus the share of non-grant space used by their organization and charge the calculated fair share cost to the budget. To estimate the fair share percentage, use the percent of square footage occupied by the grant program divided by the total organizational space.

41. I'm seeking one clarification: As a CHB/LPH agency with many grants with MDH, do you need a Due Diligence Report completed? I know we have in the past, however I interpret this as only non-profits need to submit that.

- a. Grantee Past Performance and Due Diligence Review Process
 - i. It is the policy of the State of Minnesota to consider a grant applicant's past performance before awarding subsequent grants to them.
 - ii. State policy requires states to conduct a financial review prior to a grant award made of \$25,000 and higher to a nonprofit organization, in order to comply with [Policy on the Financial Review of Nongovernmental Organizations \(https://mn.gov/admin/assets/grants_policy_08-06_tcm36-207113_tcm36-207113.pdf\)](https://mn.gov/admin/assets/grants_policy_08-06_tcm36-207113_tcm36-207113.pdf).
- b. CHB's do not need to complete additional Due Diligence/Pre-awards. CHB's have already submitted them to MDH Grants office at early this year meeting this requirement.

42. Does the attached budget template provided on the RFP webpage [[Healthy Beginnings Healthy Families: Infant Health \(www.health.state.mn.us/people/womeninfants/infantmort/hbhfinfant.html\)](http://www.health.state.mn.us/people/womeninfants/infantmort/hbhfinfant.html)] satisfy the requirements for both Appendix F and Appendix G? Or should the response for Appendix F be incorporated into the project narrative as prose?

INFANT HEALTH RFP: TWO YEAR GRANT FAQ

- a. Grantees must complete Appendix F and G as combined budget forms in Excel, which should be submitted as pdf documents. The narrative should include justification regarding how your agency will use grant funds to complete activities proposed in your workplan.

43. Is rental assistance (helping a family pay their rent) an eligible expense?

- a. Yes. Rental assistance to help families pay for their rent is considered an eligible expense for program participants/clients. However, the grantee must pay the leasing agent directly on behalf of the client. The grantee will be responsible for the documentation of the payment. (See also question #32 above)

Infant Mortality Reduction Initiative
Maternal and Child Health Section
PO Box 64975
St. Paul, MN 55164-0975
651-201-3650
Health.Infantmortality@state.mn.us
<https://www.health.state.mn.us/people/womeninfants/infantmort>

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To obtain this information in a different format, call: 651-201-3650.