FREQUENTLY ASKED QUESTIONS ON THE TITLE V BLOCK GRANT

1. Can more than one department in an organization make two applications?

Yes as long as each of them is a complete application.

2. Should the Scope of Work be for one year or two years?

The funding is for one year. The second year of funding depends on performance.

3. In writing up the budget, what would be the start date for the grant?

When formulating your budget, please use a twelve (12) month period cycle set to start February 1, 2013. In the event you receive an award after February 1, 2013 your budget will be modified accordingly.

4. Is there a separate funding for the therapeutic summer camps?

No, however since the summer camps only operate for a portion of the year the grant would be less than the anticipated full project award of \$200,000.

5. What is the maximum amount of the award?

\$200,000 is the maximum.

6. In 2010 and 2011 money was not awarded for the Title V grant; do you see this happening again?

No.

7. Is DOH looking for specific evidence-based services?

No, we are not looking for specific evidence-based programs but naturally you should attempt to support whatever program you propose with relevant evidence.

8. Is there DOH-specific data that is available from previous grants that were funded for summer camps, like how many children did they serve?

DOH can only release the number of kids served and the focus of the camps. In 2012 there were 219 children serviced by 4 summer camps. All the summer camps served children with special health care needs. Examples of emphasis of the 2012 camps included asthma, Down's syndrome and sickle-cell anemia.

9. Is extreme obesity a priority special health care need?

The list of examples of special health care needs provided by Ms. Kornak contains conditions highly prevalent in DC as identified by the RAND report. The list is not comprehensive and other conditions, such as extreme obesity, is a special health care need.

10. Regarding behavioral health conditions, should the proposal be very explicit regarding the behavioral health condition?

Yes there should be an explicit behavioral health condition covered in a proposal rather than a number of such conditions.

11. Is data base development applicable as an infrastructure service if it helps us to identify special health care needs?

Yes.

12. Will DOH accept more than one proposal from an organization in different categories; will they fund more than one proposal in direct services?

Yes to both questions.

13. Just to be clear, would you reject a proposal to provide camping services for children with Down's syndrome, cerebral palsy and ADHD?

No but you would have to explain to us how you would serve these divergent populations simultaneously.

14. So would an afterschool program be considered respite care or direct services?

You have to determine what the purpose of your afterschool program is. Is it primarily educational, therapeutic, or respite? Respite is definitely one of our service categories however it is unlikely to be considered a direct service.

15. Regarding the target population: are they only the conditions covered listed on your screen?

The list, which is provided below, is not comprehensive but merely suggestive as constituting "special health care needs".

- Asthma
- Autistic Disorder
- Attention Deficit/Hyperactivity Disorder (AD/HD)
- Cerebral Palsy

- Deafness/Hearing Loss
- Down's Syndrome
- Emotional Disturbance
- Epilepsy
- Learning Disabilities
- Mental Retardation
- Mood, Emotional and Behavior Disorders
- Pervasive Developmental Disorder (PDD)
- Reading and Learning Disabilities
- Sickle Cell Disorder
- Speech and Language Impairments
- Spina Bifida
- Traumatic Brain Injury
- Visual Impairments

There are a number of additional illnesses that are also considered under the category of special health care needs.

16. Does pregnancy fall in this category?

No.

17. What if you service pregnant women who have a specific health care need?

That may be a suitable proposal but pregnancy itself is not considered a special health care need.

18. Is drug abuse a special need?

Yes.

19. Can we service parents of children with special health care needs?

Yes, but you would need to make a case as to why you are servicing them.

20. Can you talk a little about the Department's priorities in its review process; what will be your goals for the areas submitted?

We do not have goals that assign awarding a certain percentage of the grants in each of the three (3) category areas.

21. Are you looking for an agency to provide all of these services or can we just pick one or two?

I would think you should pick one and do it very well.

22. How does DOH define outreach? What is the goal for outreach? Are you trying to engage getting more people into care or enabling them?

Outreach includes getting additional people into care as well as providing education around service(s).

23. What about training? What do you have in mind for training?

Training is an infrastructure category. It could be training for employees and/or for the community. We are talking about training in the context of assisting in the diagnosis, treatment and/or follow up of children with special needs.

24. Along those same lines, in Section B you have "family support services"; I just want to get a little more clarification about what type of services you mean?

Respite is one example of a family support service but there are additional types of family support services, such as counseling or assisting with difficult health care situations.

25. Regarding the application, does attaching surveys count as pages in the application?

It will not count against your page numbers if you include the surveys as attachments.

26. What if a document requested in the application has not yet been received from the government, i.e. tax status verification?

Whatever is required in this application, which is memorialized on the checklist, has to be in your proposal.

27. In the RFA it talks about pre and posttests; what exactly does that mean?

DOH needs to see your templates in the application. If you choose to add it as an attachment it will not count against your page numbers. What kinds of questions do you propose to ask or choose to measure in some area? DOH wants a template not a completed test. If you are funded, during your pre-award meeting, the evaluator will require seeing the finalized template(s) that you plan to use because we may need to adjust them.

28. If you are funded, do we submit copies of the completed pre and posttests?

Yes.

29. What is the average award? How many awards will be given in each category?

We suggest that the average award will be about \$200,000. per year. DOH is not stating a certain number in each category. It will depend entirely on the quality of the applications.

30. Regarding infrastructure, would trying to change and improve a part of your program which services kids with special health care needs be considered?

Yes.

31. Would providing training or technical assistance and patient education to patient navigators, who work with special needs children, fall into infrastructure?

Yes.

32. If an organization is not funded, will we get feedback?

If you are not funded you will receive a letter from DOH stating your grant award status. If in addition you request feedback, it will be provided.

33. In several of the documents that are requested and included as attachments, the RFA number is printed as RFA #CHA-122612. Can you please comment?

This was an error. The number should be 122112. If you can change the number, please do so, or else print out the old number and mark in the correct number (122112).

34. If you are a health clinic and are considering care coordination/patient navigation for your proposed project does CHA seeing this fall under Program Area A or B? Care coordination/patient navigation are mentioned under both.

Care coordination involving direct services is Program Area A. Patient navigation and associated coordination among the health system to increase the care of the special needs population is considered under Area C.

35. If we are proposing care coordination/patient navigation can we also allocate funds toward direct medical or mental health services?

You can make a proposal in Areas A and C, but as stated you need to prepare 2 full proposals with two different budgets that are distinct.

36. Certified statement of applicant's financial condition – will the organization's most recent audit satisfy this requirement?

No.

37. Appendices – Can you clarify what is required and what is not? The list on page 26 of the RFA is qualified as "May be Included" – with the exclusion of the staff resumes. A couple of the items listed fall under the list of documents in the applicant checklist that

only need to be verified in a statement that we have on hand and not provided unless awarded.

Please include all of the items listed on page 26 with your response to the RFA.

38. Insurance – In the RFA in both the application check list and on page 7 it indicates that proof of insurance will be required after awarded but at the pre-application conference it was mentioned that proof of insurance should be included in the Appendices. Can you clarify if we need to include proof of insurance now or at time of award?

We need proof of insurance by the time of the award.

39. Do we need to include letters of support?

Although letters of support are not a requirement, applicants are free to submit them as an attachment with their RFA to further support their request.

40. In addition to 10% indirect costs for this budget, may we also include additional 10% occupancy costs?

Yes, but remember this would be a separate budget item.