STATE PARTNERSHIP INITIATIVE TO ADDRESS HEALTH DISPARITIES FUNDING OPPORTUNITY ANNOUNCEMENT #MP-STT-15-001 TECHNICAL ASSISTANCE WEBINAR

Office of Minority Health
April 16, 2015
STATE PARTNERSHIP INITIATIVE TO ADDRESS HEALTH DISPARITIES

FUNDING OPPORTUNITY ANNOUNCEMENT
#MP-STT-15-001
TECHNICAL ASSISTANCE WEBINAR

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Office of Minority Health
STATE PARTNERSHIP INITIATIVE TO ADDRESS HEALTH DISPARITIES

Office of Minority Health (OMH)

Mission Statement
The mission of the office is to improve the health of racial and ethnic minority populations through the development of policies and programs that will help eliminate health disparities.
Purpose

The purpose of the State Partnership Initiative to Address Health Disparities is to demonstrate that partnerships in which
(a) state offices of minority health/health equity (or other similar state entity) and state health agencies, or
(b) tribes and tribal health agencies/organizations, play a significant role, can efficiently and effectively improve health outcomes in selected geographical hotspots (in communities), and address health disparities that affect minorities and disadvantaged populations.
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OMH Expected Outcomes

• OMH expects successful applicants will be able to demonstrate improvements in health outcomes in the applicant’s selected geographical hotspots by addressing health disparities that affect minorities.

• OMH expects successful applicants will use existing state or tribal health agency data to develop a baseline measure for each of the one to three leading health indicator topics identified in the proposal; implement evidence-based and/or promising practices to improve health outcomes and address health disparities within the project period; and present/publish the program findings.
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Organizational Capabilities

(1) Develop a Health Disparities Profile covering one to three LHI topics;

(2) Implement a project in a community(ies) with a real possibility of improving health outcomes for the identified health disparities within the project period; and

(3) Publish materials and articles on the findings and outcome of the identified health disparities, particularly indicating the relation of the baseline measure from the Health Disparities Profile to the outcomes following the implementation of the project; including information about similar work performed by the applicant.
State Partnership Initiative to Address Health Disparities

Leading Health Indicators:

Each applicant should select one to three of the 12 Healthy People 2020 LHI topics in its competitive application. See [http://www.healthypeople.gov/2020/Leading-Health-Indicators](http://www.healthypeople.gov/2020/Leading-Health-Indicators) for additional information on the 12 LHI topics.
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HEALTH DISPARITIES

Health Disparities Profile:

Successful applicants are expected to:

• Develop a user-friendly Health Disparities Profile that depicts one to three LHI topics focusing on gaps that indicate health disparities among racial and ethnic minority populations.
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Health Disparities Profile:

• Provide existing data that conforms to the standards established by the state or tribal health agency to update the Health Disparities Profile.

• The state or tribal health disparities report or similar publication shall (a) include the interpretation of surveillance data, (b) address vital statistics needs and epidemiologic analysis, and (c) may be used to investigate disease outbreaks, conduct data analysis, and explore disease control and prevention strategies and programs.
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Health Disparities Profile:

- Establish a baseline measure for each of the one to three LHI topics the applicant has chosen, for each of the geographical hotspots (i.e., areas within a county where there are one or more hotspots of adverse health outcomes to focus implementation efforts).

- Propose expected outcomes and results that will be compared to baseline measures.
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Implementation Plan

Successful applicants are expected to:

• Develop and carry out an implementation plan(s) including evidence-based and/or promising practices which the applicant will use in the community(ies) selected by the applicant.

The implementation plan must be designed to improve health outcomes and address health disparities in the applicant’s one to three selected LHI topics, (using baseline data/measures from the Health Disparities Profile) that will be tracked and reported on during the project period.
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Implementation Plan

• Document and describe the type of planned community intervention(s) focusing on gaps in health (e.g., using surveillance, screening, testing, and outreach, linkage to services and follow-up, and education of clients/family/gatekeepers/community).

• Describe what internal and external partners will do to contribute to the project to improve health outcomes. If sub-grantees will be used to implement activities, the proposal must describe what specific activities they will perform to implement the project, and the oversight provided by the applicant; and
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Implementation Plan

• Provide/collect existing data that conforms to the standards established by the state or tribal health agency to update the Health Disparities Profile, as needed.
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Publish Results/Articles

By the fifth year of the project, successful applicants are expected to:

• Publish results or articles that provide objective data demonstrating a change - through a comparative analysis from the established baseline - in health disparities (e.g., rate of emergency room visits, screenings for Hepatitis B and C among minorities 65 and older, vaccine uptake, weight reduction, links to primary care medical homes, and sentinel surveillance projects for racial and ethnic minority populations); and

• Conduct presentations, and publish results and/or scholarly articles about the project.
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OMH Expectations

OMH expects the proposed State Partnership Initiative to Address Health Disparities will result in:

- Increased awareness of health disparities;
- Increased knowledge of health status, LHIs and geographical areas of the most affected minority and vulnerable populations;
- Improved coordination, collaboration and linkages among state/tribal partners and/or local partners to address health disparities;
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OMH Expectations

- Increased preventive health screenings, disease intervention and management and linkages to care;
- Increased access to public health and/or social services;
- Improved health outcomes for program participants; and/or
- Reduction in rates of disease and/or contributing factors.
State Partnership Initiative to Address Health Disparities

Eligible Applicants

Eligible applicants that may apply for this funding opportunity are:

- Any State, which includes the District of Columbia, any commonwealth possession, or other territory of the United States. If the applicant is a State, the application must include the state office of minority health/health equity (or other state entity with a similar function) and the state health agency as partners, each of whom has a significant role in the project.
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Eligible Applicants

• Any Federally-recognized or State-recognized American Indian/Alaskan Native tribal government or consortium or council. If the applicant is a tribe, the application must include a tribal government, consortium or council and an affiliated health agency/office as partners, each of whom has a significant role in the project.

• The authorized representative from the State or tribe shall apply for and administer the grant awarded under this announcement.
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Eligible Applicants

• A signed letter from the authorized representative must accompany the application; it should include documentation establishing the authorized representative’s authority to apply for and administer the grant funds on behalf of the State or tribe.
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Eligible Applicants

- Documentation that verifies official status as an established state office of minority health/health equity (or other similar entity) must be submitted.

- Examples of such documentation include: a signed statement from a state/territorial level authorizing official (e.g., Governor or designated official, Commissioner of Health, or designee) verifying official status; or a copy of the Executive Order or statute that established the state office of minority health/health equity (or other similar entity), where applicable.
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Eligible Applicants

• Eligible tribes’ status as a Federally-recognized tribe will be verified through the list published by the Bureau of Indian Affairs, which may be found at http://www.bia.gov/cs/groups/webteam/documents/document/idc1-029026.pdf. Eligible tribes whose status is a State-recognized tribe must include a letter of recognition from their State.
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Project Narrative Description (proposal)

- Project Summary
- Background and Experience
- Organizational Capabilities
- Goals and Objectives
- Program Plan
- Evaluation Plan
- Budget Narrative
- Appendices
  - Signed letter from the applicant’s authorized representative
  - Letter of Commitment from the subrecipient, if applicable
  - Organizational Documents/Items
  - Documentation of Official Status
  - Letter of Recognition (tribes), where applicable
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Project Narrative

• Project Summary
  – Describe key aspects of the Background and Experience, Objectives, Program Plan, and Evaluation Plan.
  – The Project Summary is limited to 3 pages.
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Project Narrative

• Background and Experience

• Identify and define the problem and factors contributing or causing the problem(s) that will be addressed by the proposed project and activities.

• Describe and document (with data) demographic information on the minority health and health disparities issues in the state, tribe, or territory, with emphasis on the geographical hotspots that will be the focus of the project, and the significance or prevalence of the health problem(s) or issue(s) affecting the target minority group(s) located in the geographical hotspots.
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Project Narrative

• Describe the minority group(s), where applicable, targeted by the project (e.g., race/ethnicity, age, gender, educational level/income).
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Project Narrative
Background and Experience

Describe the applicant agency/tribe or office, where it is located organizationally and geographically, when it was formally established, and past/current efforts that are being undertaken by the agency/tribe or office to address minority health and health disparities.

Discuss the applicant’s experience in managing projects/activities, especially those targeting the population to be served. Provide outcomes of current and previously funded OMH projects, if Applicable.
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Project Narrative

Organizational Capabilities

Provide a statement(s) of competencies to implement the project requirements, as well as the applicant’s and its partners’ connection to the community(ies) to be served.

Each applicant must provide evidence of its ability to lead community interventions to address health disparities.

An applicant’s evidence of ability may include: documentation of past efforts leading community intervention activities to address health disparities; state/tribal-level reports of improved health indicators by either population, age, socioeconomic status and/or geographic region; state/tribal-level data review to identify health disparities and county/local hot-spots; and published articles and/or other public reports or documents specific to state/tribal-level health disparities data and/or improvement in health status.
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Project Narrative
Organizational Capabilities

An applicant should include areas of expertise, key personnel and credentials of proposed staff, technical experience, unique capabilities, history of performing and implementing similar projects, why the applicant is positioned to respond to the project requirements, why the applicant is best suited to implement and complete the project, what partner resources will be leveraged to support the project, contribution to prior health disparities profiles issued by the state or tribal health agency, and background on the applicant and its partners.

Applicants should provide evidence of organizational competencies in the appendices.
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Project Narrative
Goals and Objectives

Describe the project’s goal(s) and major objective(s). The objectives must be stated in measurable terms, including baseline data, improvement targets, and time frames for initiation and completion.

The application must identify outcomes/impacts, and performance measures for the proposed activities, and the outcomes/impacts should be tied to long-term objectives and goals.

All objectives should be provided in a SMART format (specific, measurable, accurate, realistic, and timely). Baseline data and time frames for achievement should also be provided.
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Project Narrative

Program Plan

Clearly describe:

a) The implementation plan(s), including evidence-based and/or promising practices, which the applicant intends to use in the communities selected by the applicant. The implementation plan(s) must be designed to improve health outcomes and address health disparities in the applicant’s one to three selected LHI topics, within the project period.

b) The baseline data/measures from the Health Disparities Profile that will be tracked and reported on during the project period, and how they will be used to evaluate the effectiveness of the project.

c) The type of community intervention(s) (e.g., surveillance, screening, testing, outreach, linkage to services, follow-up, and education of clients, family, gatekeepers and community) planned by the applicant that focus on gaps in health outcomes.
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Project Narrative
Program Plan

d) The applicant’s plan for accomplishing the project, including: developing the Health Disparities Profile; developing and carrying out the implementation plan; and publishing materials and articles about the outcomes of the project.

e) The practices and interventions planned to achieve each objective, if applicable.

f) Successful, promising, and/or evidence-based strategies and practices to be used in proposed project activities in relation to the problem and factor(s) to be addressed.

g) Each activity to be conducted, including how, when, where, by whom, and for whom it will be conducted.
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Project Narrative
Program Plan
  h) The role of any proposed sub-grantees or other partner organization(s) in the project

  i) The proposed program staff, including job descriptions for key staff, qualifications and responsibilities of each staff member, and percent of time each will commit to the project.

  j) The duties for any proposed consultants and/or collaborating entities or partner organizations.
k) The plan to present and publish the results of the implementation project and/or produce scholarly articles comparing the Health Disparities Profile baseline data to the outcomes/impact measures for the selected LHIs in the selected geographical hotspots.

- It is expected that the applicants will be able to demonstrate that improvements in health outcomes in geographical hotspots (in communities) can be shown during the period of the grant by addressing health disparities that affect minorities.
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Project Narrative
Program Plan

1) Any products to be developed by the project.
2) A time line for each of the budget periods.
3) A project chart indicating reporting channels.
4) The plan to ensure that practices, interventions, and proposed products developed by the project adhere to the National Standards for Culturally and Linguistically Appropriate Services in Health and Health Care (National CLAS Standards). See [www.thinkculturalhealth.hhs.gov](http://www.thinkculturalhealth.hhs.gov).
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Project Narrative

Evaluation Plan

a) Specific problem(s) and factors causing or contributing to the problem(s) that will be addressed;

b) Intended results (i.e., impacts and outcomes);

c) How impacts and outcomes will be measured (i.e., what indicators or measures will be used to monitor and measure progress toward achieving project results);

d) Methods for collecting and analyzing data on measures;

e) Evaluation methods that will be used to assess baseline measures compared with anticipated outcomes and impacts;
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Project Narrative

Evaluation Plan

f) potential challenges to implementation of evaluation plan and data collection with proposed approaches to mitigate challenges;

g) evaluation expertise that will be available for this purpose; and

h) how results are expected to contribute to the objectives of the program as a whole.
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Project Narrative
Evaluation Plan

- Evaluation plans should be guided by the impacts and outcomes outlined in the *Strategic Framework for OMH: Improving Racial and Ethnic Minority Health and Eliminating Racial and Ethnic Health Disparities* (OMH Strategic Framework) and logic model [http://minorityhealth.hhs.gov/omh/browse.aspx?lvl=3&lvlid=20](http://minorityhealth.hhs.gov/omh/browse.aspx?lvl=3&lvlid=20). OMH suggests applicants refer to Evaluation Planning Guidelines for Grant Applicants (June 2010) when developing the evaluation plan for the proposal. This document is provided as part of the application kit. A sample logic model template and worksheet, and an example of a completed logic model, can be found in appendices 6, 7 and 8 of that document.
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Project Narrative
Budget Narrative

The Budget Narrative text should use the formatting required of the Project Narrative for the explanatory text. Budget tables may be single-spaced but should be laid out in an easily-readable format and within the printable margins of the page.

- You are required to submit a combined multi-year Budget Narrative, as well as a detailed Budget Narrative for each year of the potential grant. Unless specified, you should develop your multi-year budgets based on level funding for each budget period. A level-funded budget is equal to the exact dollar figure of the year one budget. **Please Note:** Because the proposal must demonstrate a clear and strong relationship between the stated objectives, project activities, and the budget, the budget justification should describe the cost estimated per proposed project, activity, or product. This budget justification should define the amount of work that is planned and expected to be performed and what it will cost. The Budget Narrative does not count toward your total application page limit.
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Appendices:
All items described in this section will count toward the total page limit of your application.

• **Work Plan.** The Project Work Plan should reflect, and be consistent with, the Project Narrative and Budget, and must cover all five (5) years of the project period. However, each year’s activities should be fully attainable in one budget year. Multi-year activities may be proposed, as well as activities that build upon each other, but each phase of the project must be discreet and attainable within a single budget year.

• The Work Plan should include a statement of the project’s overall goal, anticipated outcome(s), key objectives, and the major tasks, action steps, or products that will be pursued or developed to achieve the goal and outcome(s). For each major task of each year, action step, or product, the work plan should identify the timeframes involved (including start- and end-dates), and the lead person responsible for completing the task.
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Appendices

- Letters of Commitment from Subrecipient Organizations and Agencies

- Letters of Commitment (LOC) are required for all organizations and entities that have been specifically named as a subrecipient or partner to carry out any aspect of the project.

- The signed letters of commitment must detail the specific roles and resources that the state office of minority health/health equity (or other state entity with a similar function) and the state health agency will provide, or activities that will be undertaken, in support of the applicant.

- If the applicant is a tribe or tribal health agency, the LOC must specify the role of the applicant, the tribal health agency, and any other partner agency or entity.
Appendices

- The organization’s expertise, experience, and access to the targeted population(s) should also be described in the Letter of Commitment.

- Letters of Commitment are not the same as letters of support.

- Letters of support are letters that are general in nature that speak to the writer’s belief in the capability of an applicant to accomplish a goal/task. Letters of support also may indicate an intent or interest to work together in the future, but they lack specificity.

- Applicants should NOT provide letters of “support,” and letters of support such as this will not be considered during the review.
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APPLICATION REVIEW INFORMATION

Criteria: Eligible applications will be assessed according to the following criteria:

Factor 1: Organizational Capabilities 25 points
Factor 2: Background and Experience 10 points
Factor 3: Goals and Objectives 10 points
Factor 4: Program Plan 25 points
Factor 5: Evaluation Plan 25 points
Factor 6: Budget 5 points
Total 100 points
OFFICE OF GRANTS MANAGEMENT

• Presenter
  Eric West
  Senior Grants Management Specialist

• Questions
  Deborah Speight
  Grants Management Specialist
OFFICE OF GRANTS MANAGEMENT

• State Partnership Initiative (SPI) Webinar Topics
  – Award Information
  – Budget Information
  – Eligibility
  – Screening Criteria and Responsiveness
  – Submission Process

• SPI FOA is available at www.grants.gov
  – Search by FOA # (MP-STT-15-001) or CFDA # 93.296
SPI AWARD INFORMATION

• See FOA page 10-11

• An estimated $3,000,000 is available.
  ‣ Anticipated Number of Awards: 15-17.
  ‣ Budget Period Length: 12 months.
  ‣ Award range $170,000 to $200,000 per year.
  ‣ Period of Performance: 5 years.
  ‣ Anticipated Award Start Date: 08/01/2015.
SPI BUDGET INFORMATION

• See FOA pages 16 and 25

  ▸ Budget Period: 1 year

  ▸ Project Period: 5 years

  ▸ Funding for all approved budget periods beyond the first year is contingent upon the availability of funds, satisfactory progress of the project, and adequate stewardship of Federal funds.

  ▸ Submit a combined multi-year detailed Budget Narrative for each year of the potential grant.
SPI BUDGET INFORMATION (continued)

- See FOA page 25

- Develop detailed multi-year budgets based on level funding for each budget period.

- A level-funded budget is equal to the exact dollar figure of the year one budget.

- The proposal must demonstrate a clear and strong relationship between the stated objectives, project activities, and the budget, the budget justification should describe the cost estimated per proposed project, activity, or product.
A wide range of entities are eligible to apply to the State Partnership Initiative to Address Health Disparities.

All eligible applicants are delineated on pages 11-12 of the funding opportunity announcement.
SPI APPLICATION SCREENING CRITERIA

• See FOA pages 13-14

2. Adhere to requirements on spacing, margins and font size.
3. Project Narrative (incl. Summary) must not exceed 60 pages.
4. Total application (incl. Appendix) must not exceed 85 pages.
5. Proposed budget does not exceed $200,000.
6. The application has met the Application Responsiveness Criteria listed on page 13.
SPI SUBMISSION PROCESS

• See FOA pages 18 -19
• Carefully follow submission instructions on www.grants.gov
  – DUNS Requirement:
    • A Dun and Bradstreet, Data Universal Numbering System (DUNS) number is required when applying to this FOA.
  – SAM Requirement:
    • A valid and active System for Account Management (SAM) registration is mandatory in order to submit an application – allow a minimum of 10 days for processing.
    • Must renew SAM registration each year. (5 days)
• Submission trouble – contact grants.gov helpdesk 1-800-518-4726 or support@grants.gov.
SPI SUBMISSION DATE AND TIME

• See FOA pages 1-2
• Application Due Date for SPI is May 24, 2015 at 5:00 pm Eastern Time.
  ‣ Applications must be submitted electronically via www.grants.gov by the due date.
  ‣ Applications that fail to meet the application due date will be returned and will receive no further consideration.
  ‣ Applicants must receive a written exemption from the Director, OASH Office of Grants Management to submit any way other than electronically through www.grants.gov.
SPI SUBMISSION EXEMPTION

Exemption Request:
Specific information is on page 1-2 of the SPI FOA

- Submit request at least 4 business days prior to application deadline.

- Submit request via email to OGM Director.

- Provide details why technologically unable to submit electronically via www.grants.gov.

- Must obtain written exemption from Director, HHS/OASH Office of Grants Management 2 business days in advance of deadline to submit application outside of grants.gov.
CONCLUDES OGM PRESENTATION

For questions and information related to administrative and budgetary requirements contact:

HHS/OASH Office of Grants Management
Deborah Speight
Grants Management Specialist
1101 Wootton Parkway, Suite 550
Rockville, MD 20852
Phone: 240-453-8822
e-mail: deborah.speight@hhs.gov