| **RFA No.** | VDH-SWAP-LP-2022-01 |
| --- | --- |
| **RFA Title** | Septic and Well Assistance Program Local Partners with Immediate Projects Request for Applications |
| **Issuing Agency** | Virginia Department of Health, Office of Environmental Health Services, Division of Onsite Water and Wastewater Services; 109 Governor Street, Richmond, VA 23219 |
| **Project Types** | Applications accepted for organizations who can respond to an immediate need to provide funding to homeowners at or below the 200% of the federal poverty guidelines to repair failing onsite sewage (septic) systems, replace straight pipes, replace privies, replace inadequate private wells, and properly abandoning unused wells. Funding for connection to public sewer and water is also allowed. |
| **Eligible Applicant Entities** | Local governments (including counties, cities, towns, and municipal corporations), soil and water conservation districts, Tribes located within the Commonwealth of Virginia, planning district commissions, regional commissions, nonprofit environmental organizations. |
| **Date Issued** | March 21, 2022 | **Applications Due** | April 27, 2022 @ 4:30 p.m. EST |
| VDH is issuing this RFA with a tight response time in order to get projects identified and started by July 1, 2022. Please note that VDH anticipates issuing a second RFA in May 2022 that will be open for a longer period of time for projects that could start after August 2022.  |
| **Funds Available** | $2.85 million of Federal American Rescue Plan Act (ARPA) Funds\*\* \*\* Applicants must provide an anticipated spending plan. Approval of expenditure requests that exceed this spending plan are at the sole approval and discretion of VDH |
| **Award Range** | $100,000 - $300,000  |
| **Period Funding** | Start: 7/1/2022 End: 9/30/2025 (all funds must be obligated by 12/31/2024 and BMPs installed by 6/30/25) |
| **Timeline** | * RFA Issued March 21, 2022
* SWAP Grant Local Partners RFA Webinar April 1, 2022 10 a.m.- 12 p.m.

https://vdhoep.webex.com/vdhoep/j.php?MTID=m5b056acae10573a4e3844a5fc74a23ef* Deadline for Submission of Applications April 27, 2022 by 4:30 p.m. EST
* Notification of Selection to Applicants: Within 60 days of RFA closure
* Project Start Date: July 1, 2022
* All BMP Funding is obligated/allocated December 31, 2024
* All BMPs are completed and installed June 30, 2025
* Project End Date: September 30, 2025
* Final Report and Invoice to VDH: October 31, 2025
 |
| **Questions**  | Nicole Sandberg, Wastewater Infrastructure Manager Phone: 1-804-291-6483 Email: nicole.sandberg@vdh.virginia.gov  |
| **Electronic Application Only** | **Email application to:** VDH\_Swap\_grant@vdh.virginia.gov Email subject line: VDH SWAP RFA-1 [name of applicant organization] Example: VDH SWAP RFA-1 Happy Valley PDC |
| **Application Materials** | <https://www.vdh.virginia.gov/environmental-health/swap/> [Local Partners] or DGS/DPS eVA <https://mvendor.cgieva.com/Vendor/public/AllOpportunities> [Request for Applications] |

In compliance with this Request for Applications (RFA) and all conditions imposed in this RFA, the Applicant hereby certifies that all information provided and in any schedule attached hereto is true, correct, and complete and agrees to furnish all goods and services in accordance with the submitted application package, as mutually agreed upon by subsequent negotiation and resulting signed subaward agreement. **Note: This public body does not discriminate against faith-based organizations in accordance with the *Code of Virginia*, § 2.2-4343.1 or against a bidder or offer or because of race, religion, color, sex, national origin, age, disability, or any other basis prohibited by state law relating to discrimination in employment.**

**Section I - Award Information**

***Purpose of Request for Applications (RFA)***

The purpose of this Request for Applications (RFA) is to seek eligible local partner applicants from state, local, tribal, and non-profit partners to provide funding to homeowners at or below 200% of the federal poverty guidelines (FPG) to repair onsite sewage (septic) systems and private wells. The Virginia Department of Health (VDH) is providing $5.75 million in funding to external partners that are familiar and capable of administering septic and well improvement programs to provide the following services to qualifying homeowners: repair or replace failing septic systems, replace straight pipes or privies, replace inadequate private wells, and properly abandoning unused wells. Applications can include connection to public sewer and water in lieu of onsite replacement solutions. Inadequate private wells will be considered any of the following: 1) replacement of a dry well; 2) replacement of a well that is documented to have an exceedance of a maximum contaminant level or other health standards; 3) replacement of bored wells; and 4) replacement of wells installed prior to any regulatory requirements. All projects funded under the Septic and Well Assistance Program (SWAP) must fully comply with applicable onsite sewage and private well regulations. Homeowners seeking or having received repair waivers under [§32.1-164.1:1](https://law.lis.virginia.gov/vacode/title32.1/chapter6/section32.1-164.1%3A1/) of the Code of Virginia are ineligible for SWAP funding.

Applicants must be eligible to receive federal funds and are required to provide funding for all eligible best management practices (BMPs, or improvements) within the targeted area, with non-BMP costs (e.g overhead costs, etc.) limited to no more than 35% of all funding. BMP Costs: are all costs related to the planning, design, permitting and installation of individual BMPs. Non-BMP costs: are all costs not directly associated with designing or installing an individual BMP and include costs related to program development, administration, outreach, travel, supplies and overhead/indirect costs. All applicants must have a proven record of implementing similar environmental work.

The purpose of the program is to improve the health of Virginians and provide additional protection to Virginia’s communities through the assurance of adequate wastewater treatment and safe drinking water. This is accomplished by repairing or replacing septic systems and private wells with systems that are fully protective of public health and the environment. The program also seeks to prioritize outreach to historically underserved communities. For this RFA “underserved” refers to populations sharing a particular characteristic, as well as geographic communities that have been systematically denied a full opportunity to participate in aspects of economic, social and civic life.

Copies of this RFA, including the necessary forms, instructions, and addenda (if applicable) may be downloaded from the DGS/DPS eVA website’s Business Opportunities (Select Opportunity Type “Request for Applications) at

<https://mvendor.cgieva.com/Vendor/public/AllOpportunities>. This site will be unavailable after 4/15/2022 and all application materials will be available at <https://www.vdh.virginia.gov/environmental-health/swap/> (Local Partners).

Sub-grantees will be awarded for up to a three-year period **beginning July 1, 2022**.

* Name of Federal Grantor: Department of Treasury
* CFDA Number & Name: CFDA 21.027, ARPA State and Local Fiscal Recovery Funds

***Background Information***

VDH’s mission is to promote and protect the health and wellbeing of all Virginians. It is the agency’s vision to make Virginia the healthiest state in the nation. By assuring that people have safe and adequate drinking water and safe recreational water, VDH intentionally improves health by preventing human exposure to disease from sewage or excessive nutrients. VDH measures success and outcomes, builds relationships, educates, and creates policies that improve health as it relates to water, sewage and nutrient pollution.

There are approximately 1.1 million onsite sewage (septic) systems serving residences in the Commonwealth of Virginia. These systems are regulated by VDH through the Sewage Handling and Disposal Regulations (12VAC5-610) and the Regulations for Alternative Onsite Sewage Systems (12VAC5-613). Almost half of these systems are 40 years or older, meaning they were installed under less stringent regulatory requirements, or prior to any regulatory requirements at all. There are also numerous households throughout the Commonwealth that do not have proper sewage disposal for their plumbing - straight pipes - or lack indoor plumbing altogether. Each year VDH processes thousands of repair permits to correct failing onsite sewage systems. However, these are only the issues that are brought to our attention. Homeowners are often afraid to bring their issue forward because they lack the funding to make the necessary system corrections.

There are also more than 700,000 private wells serving residences in Virginia. These private wells are regulated by VDH through the Private Well Regulations (12VAC5-630). These regulations did not become effective until 1990, meaning the vast majority of private wells serving residences in Virginia were installed without having to meet any regulatory requirements at all. Even with regulated private wells, owners are only required to collect an initial bacteriological sample, after which the well can be used for decades without further testing. This means that thousands of Virginians are living with private water systems serving their homes that are of poor construction quality and water quality.

***Program Goal***

This program seeks to provide home owners a pathway to obtain the assistance they need to install fully regulatory compliant private wells and septic systems, to ensure that all Virginians have access to systems that are fully protective of their health. To accomplish this goal, VDH will provide up to $5,750,000 to eligible local partners to administer this grant funding program on either an individual locality or regional scale. Applicants may apply for funds between $100,000 to $300,000, with the amount of funding being determined by the number of localities served. Partners are required to provide services for all eligible [best management practices](https://www.vdh.virginia.gov/environmental-health/swap/) (BMPs), for either private wells or septic improvements. Partners must also present plans that will cover both the full cost of system design and system installation for qualifying homeowners. Local partners can only provide funding for projects where the homeowners household income is at or below 200% of the [U.S. Department of Health and Human Services Federal Poverty Guidelines](https://aspe.hhs.gov/topics/poverty-economic-mobility/poverty-guidelines).

**Section II - Program Background**

Funding will be provided to local partners based on VDH Health Region boundaries. Those boundaries are as shown in the map below.



A complete list of the localities covered within each Health Region is available at:

<https://www.vdh.virginia.gov/content/uploads/sites/20/2022/03/VIRGINIA-HEALTH-REGIONS.pdf>

VDH has used the Center for Disease Control and Preventions (CDC) Social Vulnerability Index (SVI) to determine an equitable distribution of funding throughout the Commonwealth as shown below.

|  |  |
| --- | --- |
| Health Regions | Available Funding for Local Partners within the Health Region\* |
| Central | $1,600,000 |
| Eastern | $1,000,000 |
| Northern | $800,000 |
| Northwest | $850,000 |
| Southwest | $1,500,000 |

Applications can cover more than one Health District and span more than one Health Region. However, Applications will be required to provide an approximate percentage of funding that will be utilized in each listed District/Region.

**Section III - Eligibility Information**

***Minimum Eligibility Requirements***

Local partners eligible for funding. Please reference the eligibility list on page 1.

Requests to include installation of one or more of the following [Best Management Practices](https://www.vdh.virginia.gov/environmental-health/swap/) (BMPs):

* Connection to Public Sewer for Malfunctioning Onsite Sewage System, Straight Pipe or Privy
* Conventional Onsite Sewage System Repair
* Conventional Onsite Septic System Installation to address straight pipe or privy
* Alternative Onsite Sewage System Repair or Installation
* Alternative Onsite Septic System Installation to address straight pipe or privy
* Single Family Alternative Discharge Sewage Treatment System to address failing onsite systems, straight pipe or privy
* Private Well Installation
* Private Well Abandonment
* Connection to Public Water

***Preferred Eligibility Requirements:***

Preference will be given to applicants that demonstrate the following:

* Previous experience with successful implementation of grant or loan programs for onsite sewage systems or private well repairs.
* Ability to provide grant funding across multiple jurisdictions.

**Section IV – Program Requirements**

The specific goals of the Septic and Well Assistance Program are:

* To minimize the overhead (and non-BMP funding) to use the greatest amount possible of the available funding to put BMPs in the ground.
* Improve the health of Virginians and provide additional protection to Virginia’s communities through the assurance of adequate wastewater treatment and safe drinking water. This is accomplished by repairing or replacing septic systems and private wells with systems that are fully regulatory compliant and protective of public health and the environment.
* Prioritize outreach to historically disadvantaged communities.
* That available funds be dispersed equitably based on the [CDC’s Social Vulnerability Index](https://www.atsdr.cdc.gov/placeandhealth/svi/index.html) (SVI).

**

***Project Aims***

To provide the following services to qualifying homeowners: repair/replace failing septic systems, replace straight pipes, replace privies, replace inadequate private wells, and properly abandoning unused wells. Projects can include connection to public sewer and water in lieu of onsite replacement solutions. Inadequate private wells will be considered any of the following: 1) replacement of a dry well; 2) replacement of a well that is documented to have an exceedance of a maximum contaminant level or other health standards; 3) replacement of bored wells; and 4) replacement of wells installed prior to any regulatory requirements. ***All projects funded under SWAP must fully comply with applicable onsite sewage and private well regulations. Owners seeking repair waivers under §32.1-164.1:1 of the Code of Virginia are ineligible for SWAP funding.***

***Elements of Scope of Work/Services***

Eligible applicants will:

* Develop and execute a plan to identify eligible homeowners for well and septic improvements.
* Work with local health departments and properly licensed service providers to obtain private well and septic system repair/installation permits, as necessary, at no expense to eligible homeowners.
* Work with local health departments and properly licensed service providers to install private well and septic system repairs/replacement at no expense to eligible homeowners.
* Work with local public water and sewer authority to complete eligible water and sewer connections at no expense to eligible homeowners.
* Track financial and programmatic deliverables and report accomplishments back to VDH on a timely basis.
* Assure that all project expenditures are associated with approved deliverables in compliance with agreement, Terms and Conditions and standard Federal Cost Principles.

***Program Evaluation Requirements and Satisfactory Progress Determination***

For agreements issued as a result of this RFA, there will be a minimum of three (3) evaluations of the performance during the life of the project and an assessment of progress. The first will be held within six (6) months of the project start date (Preliminary), one (1) every year from the start of the project. A final evaluation must occur within three (3) months of the project end date. Performance and sufficient progress will be measured by examining the performance required; including scope of work, meeting the goals and milestones listed in any executed awards; the equitable, effective and timely obligation, distribution and management of funds; the accuracy and completeness of all reporting requirements; rate of expenditure and obligation of funds (e.g unobligated versus obligated versus spent funds) and other evaluation measures as determined necessary during the development and execution of resulting awards.

***Reporting Requirements***

For any agreements issued as a result of this RFA, subrecipients shall furnish VDH with quarterly written progress reports and financial statements, including the following demographic information for grant applicants: age, race/ethnicity, number of people in household. Homeowners are not required to provide this demographic information but should be allowed to voluntarily submit this information.

VDH will require the use of standardized reporting forms (templates) that will be provided to sub-recipients at the time of execution of subawards. These include, but are not limited to:

* Quarterly Progress Reports (Form A)
* Financial Reporting Form (Form B) and financial statements/narrative
* Milestone and Timeline Tracking (Form C)
* BMP Activity and Demographic Report (Form D)

***Accessibility of Services***

Applicants should propose specific activities designed to achieve the initiative’s goal and outcomes based on the needs and resources of the target community and the developmental, socio-economic, racial, ethnic and cultural needs and perspectives of the population(s) to be served. Applicants should ensure that programming is held in fully accessible spaces and provide program modifications and accommodations for participants with disabilities.

VDH has a long history of supporting and working with community-based organizations that are representative of the populations targeted for services. All families will be eligible to participate in program services without regard to race, ethnicity, language needs, sexual orientation or identity or gender bias. In addition, special considerations such as a child-friendly environment or on-site interpreter may be necessary to ensure access to programming.

***Budget Reimbursement Requirements***

VDH administers and subrecipient SWAP grants, issued based upon the results of this RFA, on a reimbursement basis upon completion of deliverables. This means that expenditures occur, the subrecipient pays these expenses, and then requests reimbursement from VDH (time and materials). All funds must be tracked based on the budget included in the executed award and be based upon the Budget Line-Item Categories. Funds provided including BMP construction funds, will be disbursed by VDH quarterly through the use of a completed and signed Financial Reporting Form (Form B) and other required reporting documents. Any unspent funds remaining at the project end date will **revert to VDH**. The Grantee shall install, complete and have paid for all BMPs and activities by the project end date*.* Any cost overruns incurred by the Grantee during the Agreement’s period of performance shall be the responsibility of the Grantee. All expenditures submitted to VDH for reimbursement under a subaward stemming from this RFA must adhere to the elements outlined also in Section IX.

**Budget Line-Item Categories**

These categories are being provided to ensure appropriate ordering of budget categories and placement of line items. The descriptions under each are examples of allowable costs. Specific line items and costs are negotiated in your initial contract with any modifications requiring approval.

**1. Personnel:** This includes costs for staff paid under the grant that are employees of your agency. This may include administrative, programmatic, evaluation, accounting staff, etc.

**2. Fringe:** Fringe benefits include costs for FICA and other payroll taxes, health and life insurance for employees, etc.

**3. Travel:** This category may include mileage to provide services and costs to attend staff development events such as workshops and training. This category also includes short term vehicle rentals and gas purchased for the rental vehicle. If an agency establishes a long-term contract with a vehicle rental agency then the cost for such vehicle should be included in the contractual line item.

**5. Supplies:** This category should include programmatic and office supplies, including educational materials, incentives, printing or purchase of brochures and posters, envelopes, and paper. Equipment under $5,000 should be included in this category.

**6. Contractual:** This should include detail of any subcontractors as well as funds paid to consultants, outside trainers, maintenance of equipment, or for bookkeeping/accounting services that are outsourced rather than provided in-house.

**7. Other:** This may include items not listed in the above categories such as rent, insurance, utilities, or postage.

**8. Indirect**/**De Minimis:** Indirect costs may be budgeted only if the applicant has a negotiated and approved indirect cost rate agreement with a cognizant federal agency. Applicants without a cost rate agreement with a cognizant federal agency may elect to charge a *de Minimis* rate of 10% of total modified direct costs, which may be used indefinitely. If an applicant elects to use the *de Minimis* rate, it must do so across all federal awards until such time it chooses to negotiate a rate.

**Section V - Application Submission Information**

***Application Date and Time of Submission***

In order to be considered for selection, an applicant must submit completed applications by April 27, 2022 at 4:30 p.m. EST. Responses received after the submission due date and time will not be accepted.

***Application Submission Instructions***

Applicants must be registered with eVA in order to submit an electronic response to the RFA. If your organization is already registered in eVA, you are strongly encouraged to login to eVA to verify your eVA registration status is active and your account information is correct. **Applications must be submitted electronically to** VDH\_SWAP\_Grant@VDH.virginia.gov as follows:

 **Email subject line**: VDH SWAP RFA-1 [name of applicant organization]

 **Example**: VDH SWAP RFA-1 Happy Valley PDC

 ***Application Preparation Instructions***

The following required and optional application documents should be submitted.

* *Incomplete Application Packages:* Failure to submit all information requested may result in the VDH requiring prompt submission of missing information and/or giving a lowered evaluation of the application. Applications that are substantially incomplete or lack key information may be rejected by VDH. Mandatory requirements are those required by law or regulation or are such that they cannot be waived and are not subject to negotiation.
* *Application:* Applications packages per the guidelines in Section VI “Application Format and Content” and should be prepared simply and economically, providing a straightforward, concise description of capabilities to satisfy the requirements of the RFA. Emphasis should be placed on completeness and clarity of content.
* *Ownership of Materials and Proprietary Information:* Ownership of all data, materials, and documentation originated and prepared for the State pursuant to the RFA shall belong exclusively to the State and be subject to public inspection in accordance with the *Virginia Freedom of Information Act*.
* *Questions Concerning Application Requirements and Documents:* If any prospective applicant has questions about the specifications or other application documents, the prospective applicant should contact the Wastewater Infrastructure Manager or alternative contact indicated below no later than five working days before the application due date related to a specific Application (see Section I). Any revisions to the solicitation will be made only by addendum issued by VDH.

RFA Lead: Nicole Sandberg, Waste Water Infrastructure Manager

 email: Nicole.sandberg@vdh.virginia.gov Phone: 804-291-6483

Alternative Contact: Lance Gregory

 Email: Lance.gregory@vdh.virginia.gov Phone Number: 804-864-7491

Alternative Contact: VDH\_SWAP\_Grant@VDH.Virginia.GOV

**Section VI -** **Application Format and Content**

The application package for the SWAP RFA - Local Partners includes four (4) required documents and four (4) optional documents listed in the table below. Please make sure that all files are titled (named) with consistent, identifying information (example Applicant from Happy Valley PDC would label their files with “HVPDC\_SWAP\_Attachment1” or “HVPDC\_SWAP\_Attachment2”).

| **REQUIRED APPLICATION DOCUMENTS**  |
| --- |
| Attachment 1: Application Form (Excel) – Must be submitted in Excel Form |
| Attachment 2: Application Proposal Narrative - (Word)  |
| Copy of Partner(s) Organizational Chart(s) (PDF or Word) |
| [W-9](https://www.vdh.virginia.gov/content/uploads/sites/20/2016/09/W9_COVSubstitute.pdf) – “Request for Taxpayer Identification Number and Certification” Virginia Substitute Form  |
| **OPTIONAL APPLICATION DOCUMENTS** |
| Vicinity or Project Site Map (limited to one 8 ½ x 11 inch page) (PDF) |
| Letters of Support from partners (limited to one (1) combined PDF document) |
| Description of previous accomplishments (limited to one (1) page, PDF or Word) |
| A copy of the federally approved indirect rate agreement (only if requesting an indirect rate over 10%) |

A. **Attachment 1- Application Form**: All application packages must include a completed excel Attachment 1 - Application Form. Please read the “Read Me” Tab for information and instructions on how to fill out and respond. It is suggested that applicants begin with Tab 1 and work their way through all 6 tabs sequentially (Tab 1 should be filled out before Tab 2, Tab 2 before Tab 3, etc.). What is entered in one tab may populate information in another.

* Read Me Tab
* Tab 1: Application Cover Page
* Tab 2: Project Partners and Technical Leads
* Tab 3: Best Management Practice (BMP) Activity
* Tab 4: Project budget
* Tab 5: Timeline and Milestones
* Tab 6: Certification Statement

B. **Attachment 2 - Narrative Proposal Form:** Application packages must include a filled out Attachment 2 - Narrative Proposal Form. Narrative Proposals should be as thorough and detailed as possible so that VDH may properly evaluate your organization’s capabilities to provide the required services. Please utilize the provided proposal form to provide required information. Some sections of this form are associated with information entered in Attachment 1 - Application Form. Format should not change and should be 8.5’x11’ in Times New Roman font. Narratives submitted should not exceed 6 pages.

1. **Description of Applicant Agency**: Provide a narrative description of the purpose and goals of the applicant agency; the agency’s programs and services; geographic areas served; and the number and type of people served. Also include the information regarding the organizational structure of the agency including the number and type of staff; programs, activities, or previous programmatic accomplishments; and effective use of existing community resources.
2. **Description of Proposed Services**: Provide a descriptive summary of the proposed project(s)/activities. Be as specific and detailed as possible.
3. **Need for Project**: Provide a clear statement of the unmet need(s) to be addressed in this proposal by focusing on the community/communities to be served. Describe the need for the specific project/activities compared against existing local services. Include needs of underserved populations in specified service areas, how they were identified, and how the project will provide services to them. Support any statements of unmet need with linkage to statistics, community characteristics, lack of similar resources, etc. Indicate whether the proposed project/activity is new (has never been conducted) or already existing. If the proposed project is a continuation of existing services, information about previously existing financial resources should be cited such as source, amount and any reason funds were terminated or insufficient. Programs should state what attempts have been made to secure other funding sources. Information such as numbers served, cost per client, impact of the project on the problem, and the need for continuation should also be addressed by ongoing projects.
4. **Description of Staff and Responsibilities**: Identify the staff responsible for service provision/project coordination. Provide the number, positions, and qualifications of staff, paid and/or volunteer, who will be involved in the project. Describe how staff will be recruited, if not already in place. Discuss the methods used to monitor staff performance. If the service is subcontracted, provide the name, qualifications and experience of the proposed subcontractor. Describe any technical assistance and support that will be provided to volunteers, staff and others, and how success will be measured. Attach an organizational chart which clearly identifies where this project will fit and that identifies all existing and proposed positions listed in this section, the activities/outcomes work plan, and budget.
5. **Program Goals and Objectives:** Clearly define and discuss the project goals and objectives and describe how they will be met. The goals and objectives must align with the goals and objectives on the Activities/Outcomes Work Plan in the following section.
6. **Activities/Outcomes Work Plan**: Complete a project activities/outcome work plan to describe the project methodology. Detail the strategies and activities necessary to achieve the project goals, objectives and outcomes. Include specific target dates for the beginning and end of each activity, including specific planning activities and staff responsible. Specify any details for subcontracting. Identify target population, numbers to be served and units of service for each objective and activity. Associated with Tab 5 - Milestones and Timeline of the Attachment 1- Application Form.
	* 6. **General Project Information:**
	* 6a. **BMP Implementation – Onsite Septic Program:** If the application is requesting funds to administer and run an onsite septic system please provide specific details in this section.
	* 6b. **BMP Implementation – Private Well Program:** If the application is requesting funds to administer and run a private well system program please provide specific details in this section.
	* 6c. **Education and Outreach Activities:** Describe any and all outreach and education activities that will promote the program, identify and recruit homeowners and assist in the successful implementation of the proposed work.
	* 6d. **Project and Partner Administration**: Describe any general project or partner administrative activities for which funds will be requested include justification for this work and why it is crucial for a successful program.
	* 6e. **Other Activity**: Describe any activities for which funding is requested that cannot fit in the above five areas.
7. **Budget Narrative**: See page 9 “Budget Line-Item Categories” in Section IV. A budget narrative must justify all proposed expenditures by explaining the cost, how the costs were determined, and calculations to support the expense. All requested costs must be linked to the program goals and objectives. Not doing so could result in individual line-item requests not being approved. This is associated with Tab 4 - Budget of Attachment 1 - Application Form.

**Section VII - Application Review Information**

***Review and Selection Process***

1. **Review Panel:** VDH will designate a review panel that will read, review and score all applications based upon the evaluative criteria listed below.
2. **Review:** Applications will be compiled, reviewed, ranked, scored and funding recommendations made for each of the Virginia Health Regions.
3. **Evaluation and Ranking:** For all applications received during each Review, VDH will:
	* + 1. Initial Review: An initial review for adherence to the guidelines of the application will be completed and applications failing to provide the required information may be removed from consideration.
			2. Calculate a final average cumulative score for all Applications based upon the scores from all Reviewers.
			3. Calculate an approval rating based upon the percent of the cumulative score compared to the maximum review score. (e.g. average cumulative score/total maximum score)
			4. Use the Approval Rating to rank the applications from highest to lowest for each Virginia Health Region.
			5. Identify Applications that have Concern for Overlapping/Conflicting projects: Situations when more than one application is received covering the same locality or localities, for the same type of BMPs, but from different applications. There is also a potential for overlap/conflict if an application is covering the same locality or localities and BMPs for an already executed agreement stemming from funds from VDH from a previous RFA or round within this RFA. VDH has concerns about awarding funds for multiple organizations working in the same location as this might develop confusion and undue competition for funding. VDH encourages collaboration between organizations with similar interests.
	1. Applications that scored 79-100% that have been determined to potentially have a concern for overlapping or conflicting with another application or project (either in the current RFA or in a grant project already awarded) will be placed in the Conditional Recommendation Category, regardless of initial Approval Rating.
	2. All impacted applications will require additional review and interaction with applicants and opportunity for all impacted applicants to attend a pre-decision meeting with VDH in order to discuss how to proceed.
	3. Applications may be amended and rescored based upon the outcome of additional VDH discussions. Once rescored a revised Approval Ranking will be assigned. Any rankings 90-100% will be included in the appropriate Regional Approval List. Any rankings 70-89% will be placed in the Conditional Recommendation List.
4. **Selection Process:** VDH will assess Approval Ratings and, based upon the availability of funding (which includes the timing of when funds become available), make recommendations based upon the following:
	* + 1. **Recommended for Funding**: Projects are deemed to be an excellent fit for SWAP funding and are recommended for funding. Funding will be offered as long as funds are available in the health region designated in the application.
5. Identify all applications with an Approval Rating of 90% or greater. Create a sequential Regional Approval List (highest to lowest) by Virginia Health Region.
6. Applications will be funded on a first come, first serve basis from the Regional Approval List created as long as funds are available for the designated health region.
7. Applications that do not receive funding based on availability would be placed on a waiting list if additional funds become available for their indicated Health Region
8. Applications requesting funding from more than one health region may have an offer of less than requested if funds are limited in one of the desired health regions.
9. Applications identified having potential concern for Overlapping/Conflicting projects will initially be placed in the “Conditional Recommendation” category.
10. Applications identified as having potential of overlapping or conflict: Applications identified as having potential for overlapping or conflicting will not be added to a Regional Approval Lists and added must complete the process listed above to resolve potential conflicts or overlapping before the application can be placed in a Regional Approval List.

**2. Conditional Recommendation**: Applications are deemed as having potential for funding however additional information or clarification of the application is required before a funding recommendation can be made. A pre-decision meeting between the applicant (and any partners) and VDH may be in order and potential revision of application materials may be required.

* 1. Approval rating of 70-89%: Identify all applications with an approval rating of 79-89%.
	2. Identify all applications that have a concern of overlapping projects.
	3. Identify potential list of questions or clarification of application.
1. Applications identified as having potential of overlapping or conflict: Applications identified with potential for overlapping or conflicting will not be added to a Conditional Regional Approval Lists until after the process listed above is completed and conflict is resolved.
	1. Pre-decision meetings between applicant (and any partners) and VDH will be offered/held.
	2. Review panel will revise any scores and approval ranking. A Conditional Recommendation List will be created by each Health Region based upon the sequential revised approval ranking.
	3. Funding will be offered based upon the Conditional Recommendation List based upon funding available after all applications are funded from the Recommendation List (in #1). Any applications not offered funding will be placed on a regional Conditional Waitlist.

**3. Not Recommended for Funding**: Applications are not deemed as ready for funding and are not recommended for SWAP funding without substantial and necessary changes/updates.

* 1. Approval ranking less than 70%: Identify all applications with an approval rating below 70%.
	2. Applications would not be approved for funding for Review
	3. Applications will receive written comments from the review process that will help applicants to make changes.
	4. Applicants may rework applications based upon feedback from VDH and resubmit during a later RFA (if time and funds are available).

VDH will endeavor to ensure sub-grant awards are made within each region of the state to ensure a continuum of services is provided to the citizens of the Commonwealth.

**Note:** VDH reserves the right to not award all available funding

|  |  |  |
| --- | --- | --- |
| **Review Ranking (%)** | **Points: Average Cumulative Score** | **Funding Recommendations** |
| 90-100% | >206 | Recommended for Funding: (dependent on availability of funding) |
| 70-89% | 160-205 | Conditionally Recommended: Applications may be asked to be clarified, revised or amended before funding is recommended |
| <70% | <160 | Not Recommended for Funding. Applicants can amend and resubmit in a later RFA if available. |

Applications will be rated using the criteria in the table below.

| **Evaluative Criteria** | Max points |
| --- | --- |
| **EXCEL\_ Attachment 1 - Application Form\_ Tab 1: Application Cover Page** | **15** |
| * Was the information from the Cover Page generally completed adequately?
 |  |
| * Does the application indicate in which Health Region(s) and Health District(s) the project will work?
 |  |
| * Did the application indicate the % breakdown of level of work effort per Health District?
 |  |
| * Did the application provide a yearly spending plan for the project?
 |  |
| * Is this application working in more than one Health Region?
 |  |
| * Is this application working in more than one Health District?
 |  |
| * Is this application working in 3 or more Local Health Districts?
 |  |
| **EXCEL\_ Attachment 1 - Application Form\_ Tab 1: Tab 2: Project Partners and Technical Leads** | **9** |
| * Was the information for Partners and Technical Leads generally completed adequately?
 |  |
| * Does the application partner other than the applicant itself?
 |  |
| * Does the application include appropriate partners?
 |  |
| * Does the application include more than 2 partners?
 |  |
| **EXCEL\_ Attachment 1 - Application Form\_ Tab 1: Tab 3: Best Management Practice (BMP) Activity** | **9** |
| * Was the information from the BMP Activity tab generally completed adequately?
 |  |
| * Are the number of BMPs indicated reasonable for the amount of funding requested?
 |  |
| * Are the number of BMPs indicated reasonable to install within the timeframe of the project?
 |  |
| **EXCEL\_ Attachment 1 - Application Form\_ Tab 1: Tab 4: Project budget** | **12** |
| * Was the information from the Budget tab generally completed adequately?
 |  |
| * Were the funds requested reasonable and justified based upon the work proposed?
 |  |
| * Was the budget information allowable and clearly show how the funds will be expended?
 |  |
| * Is the budget clearly aligned within the scope of activities to be conducted?
 |  |

| **Evaluative Criteria (continued)** | Max points |
| --- | --- |
| **EXCEL\_ Attachment 1 - Application Form\_ Tab 1: Tab 5: Timeline and Milestones** | **21** |
| * Was the information from the Milestone Tab generally completed adequately?
 |  |
| * Is the information in line with information from the Attachment 2 Section 6?
 |  |
| * Does the Task 1 Administrative section show sufficient detail to track progress and work?
 |  |
| * Does the Task 2.1 Residential Septic section show sufficient detail to track progress and work?
 |  |
| * Does the Task 2.2 Private Well section show sufficient detail to track progress and work?
 |  |
| * Does the Task 3.1 Outreach and Recruitment section show sufficient detail to track progress and work?
 |  |
| **EXCEL\_ Attachment 1 - Application Form\_ Tab 1: Tab 6: Check List- Certification Statement**  | **6** |
| * Was the information from the Tab 6 Checklist generally completed adequately?
 |  |
| * Were all certification statements marked as "Yes"?
 |  |
| * Was the Statement signed and dated?
 |  |
| **Attachment 2 - Narrative Proposal Form: 1. Description of Applicant Agency** | **22** |
| * Did the application provide its organization/agency purpose?
 |  |
| * Did the application provide its organization/agency goals?
 |  |
| * Did the application adequately provide a description of the organization/agency program & services?
 |  |
| * Did the application adequately describe the geographic area served?
 |  |
| * Did the application provide the number and type of people served?
 |  |
| * Did the application adequately describe the organizational structure and any partners?
 |  |
| * Did the application provide an adequate description of previous associated programmatic accomplishments?
 |  |
| * Did the application provide a description of the partner's current or future effective use of existing community resources?
 |  |
| * Did the application provide adequate and relevant description of staff and activities?
 |  |
| **Attachment 2 - Narrative Proposal Form: 2. Description of Proposed Services:**  | **3** |
| * Did the application provide an adequate summary of proposed activities/services?
 |  |
| **Attachment 2 - Narrative Proposal Form: 3. Need for Project:** | **21** |
| * Did the application provide an adequate statement of unmet needs to be addressed related to communities to be served?
 |  |
| * Did the application describe the need for specific projects/activities compared against existing local services?
 |  |
| * Did the application address needs of underserved populations (provide supporting information)?
 |  |
| * Did the application identify the status of proposed activity, whether or not it was(new, existing or expanding activity?
 |  |
| * Did the application discuss financial resources for existing services and status (if insufficient)?
 |  |
| * Did the application state what attempts have been made to secure other funding sources?
 |  |
| * Does the application clearly define the unmet need(s) that the project will address, the target population and the geographical area(s) of service delivery?
 |  |
| * Does the application provide sufficient evidence that the project does not duplicate existing programs and services currently provided by the applicant organization and/or its partners?
 |  |
| * Did the application provide information on numbers served, cost per client, impact of project on problem?
 |  |
| **Attachment 2 - Narrative Proposal Form: 4. Description of Staff and Responsibilities and Organizational Capacity:**  | **30** |
| * Were the staff responsible for service, project and coordination identified?
 |  |
| * Were the number, positions and qualifications of staff and volunteers provided?
 |  |
| * Did the application describe how staff will be recruited, if not already in place?
 |  |
| * Did the application discuss the methods that would be used to monitor staff performance?
 |  |
| * If the service is subcontracted, did the application provide the name, qualifications and experience of the proposed subcontractor(s)?
 |  |
| * Did the application adequately describe any technical assistance and support that will be provided to volunteers, staff and others, and how success will be measured?
 |  |
| * Does the application identify well-qualified personnel with the expertise to provide the proposed services to the homeowners?
 |  |
| * Does the applicant provide enough information to demonstrate the applicant has adequate facilities and organizational infrastructure to implement the project?
 |  |
| * Does the application provide enough information to demonstrate the applicant has the capacity to begin delivering services quickly, with minimal time required for preparation?
 |  |
| * Has an organizational chart been provided?
 |  |
| * Does the organizational chart clearly identify where this project will fit and that identifies all existing and proposed positions listed in this section, the activities/outcomes work plan, and budget?
 |  |
| **Attachment 2 - Narrative Proposal Form: 5. Program Goals and Objectives:** | **15** |
| * Did the application clearly define and discuss the project goals and objectives and describe how they will be met?
 |  |
| * Does the application clearly explain how it will provide services to the identified target populations(s)?
 |  |
| * Does the application clearly explain how it will assure that the project only serves homeowners at or below200 percent of the federal poverty guidelines?
 |  |
| * Does the application demonstrate a clear understanding of the goals and objectives of the RFA?
 |  |
| * Did the goals and objectives align with the information in the Activities/Outcomes Work Plan in Section 6?
 |  |
| **Attachment 2 - Narrative Proposal Form: 6. Activities/Outcomes Work Plan:**  | **33** |
| * Has a project activities/outcome work plan been completed that describes the project methodology?
 |  |
| * Was enough detail provided regarding the strategies and activities necessary to achieve the project goals, objectives and outcomes?
 |  |
| * Did the application include specific target dates for the beginning and end of each activity, including specific planning activities and staff responsible?
 |  |
| * Was there enough information specifying any details for subcontracting?
 |  |
| * Did the application identify target population, numbers to be served and units of service for each objective and activity?
 |  |
| * 6. General Project Information: Did the application include sufficient information and detail to justify funding this activity?
 |  |
| * 6a. BMP Implementation – Onsite Septic Program: Did the application include sufficient information and detail to justify funding this activity?
 |  |
| * 6b. BMP Implementation – Private Well Program: Did the application include sufficient information and detail to justify funding this activity?
 |  |
| * 6c. Education and Outreach Activities: Did the application include sufficient information and detail to justify funding this activity?
 |  |
| * 6d. Project and Partner Administration: Did the application include sufficient information and detail to justify funding this activity?
 |  |
| * 6e. Other Activity: Did the application include sufficient information and detail to justify funding this activity?
 |  |
| **Attachment 2 - Narrative Proposal Form: 7. Budget Narrative:** | **21** |
| * Was an appropriate and adequate budget narrative provided?
 |  |
| * Did the budget narrative (and the information on Tab 4- Budget of Attachment 1 - Application Form) provide sufficient detail and justification for the proposed expenditures by explaining the cost, how the costs were determined and the calculations to support these expenses?
 |  |
| * Did the application explain or justify how the costs were determined?
 |  |
| * Is the budget as described in the budget narrative reasonable, allowable and clearly shows how funds will be expended?
 |  |
| * Is the budget as described in the budget narrative clearly aligned to the scope of activities to be conducted?
 |  |
| * Did the application provide the calculations or other information to support the proposed costs?
 |  |
| * Did the application appropriately link all requested costs to the program goals and objectives?
 |  |
| **Copy of Organizational Chart** | **2** |
| * Did the applicant provide a copy of their organizational Chart
 |  |
| **W-9 Form** | **2** |
| * Did the applicant provide a signed W-9 form
 |  |
| **Letter of Support** | **3** |
| * If the application chose to include Letters of Support, were these documents adequate and helpful?
 |  |
| **Previous Accomplishments** | **3** |
| * If they provided a copy of Previous Accomplishments, Did this document provide adequate information?
 |  |
| **Copy of Indirect Rate if requested funds** | **2** |
| * If requesting indirect funds over 10%, was a copy of the Indirect Cost Rate Agreement provided?
 |  |
| **Total Points Available** | **235** |

**Section VIII – Program Terms Conditions**

 The Virginia Department of Health reserves the right to:

* Reject any or all applications received in response to this RFA.
* Withdraw the RFA at any time, at the Department’s sole discretion.
* Make an award under the RFA in whole or in part.
* Disqualify any applicant whose conduct and/or proposal fails to conform to the requirements of the RFA.
* Seek clarifications and revisions of applications.
* Use application information obtained through site visits, management interviews and the state’s investigation of an applicant’s qualifications, experience, ability or financial standing, and any material or information submitted by the applicant in response to the agency’s request for clarifying information in the course of evaluation and/or selection under the RFA.
* Prior to application opening, amend the RFA specifications to correct errors or oversights, or to supply additional information, as it becomes available.
* Prior to application opening, direct applicants submit proposal modifications addressing subsequent RFA amendments.
* Change any of the scheduled dates.
* Waive any requirements that are not material.
* Award more than one contract resulting from this RFA.
* Conduct contract negotiations with the next responsible applicant, should the Department be unsuccessful in negotiating with the selected applicant.
* Adjust the amount of funds reserved for each Health Region if the amount of funding requested does not allow VDH to allocate all resources in a timely manner.

**Section IX - Payment Terms**

Disbursement of funds will follow a cost reimbursement procedure and will be for actual funds expended. Actual expenditures shall be invoiced pursuant to approved line-item budget categories of the subaward agreement. Sub-recipients shall be reimbursed only for costs that have been incurred within the contract period. Requests for reimbursement for allowable costs incurred shall be submitted no more frequently than monthly.  The sub-recipient should allow 30 days from the time expenditure statements are received by VDH until reimbursement is received. If errors are found in the expenditure statements, the 30 days will begin on the date the errors are corrected. All invoices shall be submitted using the VDH SWAP Form B Financial Report form, but can also include the sub-recipient’s standard invoice template . All expenditures submitted to VDH for reimbursement under a subaward stemming from this RFA must be included in the Grantee’s quarterly report which shall include the Grantee’s receipt, reporting forms (A, B, C,D, etc. as listed in Section IX), invoice and other materials. All expenditures submitted to VDH for reimbursement under a subaward stemming from this RFA must:

* Be submitted for the subrecipient’s actual costs.
* A signed financial report Form B that includes the required certification signed by authorized signing official pursuant to 2 CFR 200.415 “required certifications”
	+ Include point of contact for invoice and related questions
	+ Include date of invoice and billing period for current invoice
	+ Include current billing period costs and cumulative to date costs listed by budget categories
	+ Include information on match (cost-share, in-kind) if applicable
* Be submitted in accordance with any Terms and Conditions, the Uniform Guidance, 2 CFR Part 200 (<https://www.ecfr.gov/current/title-2/subtitle-A/chapter-II/part-200>), and the [Federal Cost Principles](https://www.ecfr.gov/current/title-2/subtitle-A/chapter-II/part-200/subpart-E). Recipients should refer to the Assistance Listing (<https://sam.gov/fal/873d18612d254b19b9a535ec6901b5a1/view>) for detail on the specific provisions of the Uniform Guidance that do not apply to this program.
* Not exceed the current Commonwealth of Virginia “Commonwealth Accounting Policies and Procedures (CAPP) Manual”/ “Travel Regulations” at:

<http://www.doa.virginia.gov/Admin_Services/CAPP/CAPP_Alpha_Listing.cfm>.

* Relate to the grant scope of work.
* Be signed and certified by an authorized representative of the Grantee.
* Include supporting documentation for reimbursable costs. This includes (but is not limited to): a financial narrative, time and effort reports (for staff), receipts from purchases, mileage reports, etc.
* Recipients that receive an aggregate amount of federal financial assistance in a given fiscal year that exceeds the Single Audit Threshold are subject to the requirements in [2 CFR 200 Subpart F, Audit Requirements](https://www.ecfr.gov/current/title-2/subtitle-A/chapter-II/part-200/subpart-F).

Subrecipients/Grantees must submit the final request for reimbursement (an all associated reporting) to VDH within 30 days after the expiration of the grant period. If the grant period ends 9/30/2025 then all reporting and final reimbursement requests must be submitted to VDH by 10/31/2025. Reimbursement requests received after the expiration of the grant period will not be reimbursed. The funded entity shall be required to maintain accounting records to support all requests for reimbursement for a minimum period of 5 years after the expiration of the grant award. These records shall be available for review by the Commonwealth of Virginia. VDH will monitor expenditures accordingly.