



**CHICKAHOMINY  
HEALTH DISTRICT**



# **CHICKAHOMINY HEALTH DISTRICT**

**CHARLES CITY | HANOVER | GOOCHLAND | NEW KENT**

**Cycle 4 COVID-19 Vaccine Equity Funding**

**REQUEST FOR APPLICATION (RFA)  
2022-2024**

**Project Period: May 1, 2022 - June 30, 2024**

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# SECTION 1 - GENERAL AND ADMINISTRATIVE INFORMATION

## Purpose and Scope of Work

The places where people live, learn, work, play, and worship affect a wide range of health risks and outcomes, such as COVID-19 disease, severe illness, and death. The purpose of Cycle 4 is to fund strategies that increase access, knowledge and uptake of COVID-19 and routine immunizations by those disproportionately affected by the pandemic.

Community-based organizations (CBOs) are an essential partner in the public health system. The relationships and trust CBOs have built places them in a position to best reach populations and make public health stronger. By funding and providing resources to CBOs, we can work together to uplift and protect those most at risk. The scope of the work and communication guidelines for community partners are below.

- Discuss the importance and safety of receiving vaccines
- Communicate who is eligible to receive the COVID-19 vaccine as well as other vaccines
- Assist eligible individuals in scheduling appointments to receive vaccines (if applicable to the organization's proposed activities or goals)
- Follow up with individuals to support them in making an appointment for a COVID-19 first dose, second dose, third dose, or booster doses (where applicable) and provide resources on subsequent potential side effects
- Work with Chickahominy Health District (CHD) to share community members' concerns and input about the process of receiving COVID-19 vaccinations as well as other vaccines
- Work with CHD to coordinate and promote mobile or large scale vaccine events in your community
- Increase and coordinate routine vaccinations

**Grantees are encouraged to propose existing projects that increase vaccination uptake, expand current work around community engagement or implement new, innovative projects.**

## Project Period and Terms

The project period begins on May 1, 2022 and goes until June 30, 2024. Organizations can propose timelines from 6 months to 2 years. The work plans and budgets do not have to be for 2 years. For example, organizations can apply for a 1 year of funding.

## Eligibility Requirements

Organizations applying for funding should be established Community Based Organizations, Community Health Clinics/Centers, coalitions, Faith-based Organizations, etc., with a rapport in any selected population(s) of focus and a demonstrated capacity to engage in relevant

activities. To be eligible for this grant, the organization must conduct operations in, or must be focused on addressing the community needs of, one or more of the following counties: Charles City, Goochland, Hanover, New Kent.

## Electronic Communications Requirements

Applicants do not need an email address to apply.

## Schedule of Important Dates

Event	Date
RFA Issued / Application Open	April 25, 2022
Information Session (virtual)	April 28, 2022
Application Cycle	Rolling

### A. RFA Issued

- i. CHD will post the RFA on our website under the Funding Opportunities section. The RFA may remain on the website until funding is completely allocated to organizations.

### B. Information Sessions

- ii. A meeting about the funding opportunity will be held via video conferencing to address any questions applicants may have, and will be recorded.

Meeting Information:

- <https://vdh.zoom.us/j/92980457947>
- Meeting ID: 929 8045 7947
- Dial In Number: 929-205-6099

- iii. If you have questions outside of the information sessions, please contact Katie Sperberg, Grant Project Coordinator at [katherine.sperberg@vdh.virginia.gov](mailto:katherine.sperberg@vdh.virginia.gov) .  
If you cannot email your questions, call 804-807-1059.

### C. Application Creation and Submission

- iv. The application will be available in an electronic format on Google Forms, as well as a paper version - see Appendix B. Please download and complete the budget template and upload/attach your completed

document. All applicants must complete the budget template - See Appendix C.

1. Apply online [here](#)
- v. Applicants completing a paper application can either type or handwrite their application. If you plan to handwrite your application, email Katie Sperberg to let her know. Handwritten applications must be written legibly.
- vi. All paper applications must be submitted via mail, email, or hand delivered. The application must be in a sealed envelope. See below for details.
  1. Mail packet to:  
Attn: Population Health Manager  
Hanover Health Department  
12312 Washington Hwy  
Ashland, VA 23005
  2. Send a pdf version to this Email:  
[katherine.sperberg@vdh.virginia.gov](mailto:katherine.sperberg@vdh.virginia.gov)
  3. Drop off instructions:  
Arrive to: Hanover Health Department at 12312 Washington Hwy, Ashland, VA 23005 - Applications can go to Caitlin Hodge, Population Health Manager  
*\*\* Masks are required for entry*

#### D. Application Scoring

- vii. Applications will be reviewed by a group of representatives within CHD and evaluated based of the following criteria:

❖ Alignment with Purpose	10 points
❖ Project Outcomes and Design	25 points
❖ Demonstrated Capacity for Implementation	20 points
❖ Completeness of Application	10 points

#### E. Announcement of Funding Grantees

- viii. Applicants selected for funding will be notified by health district staff. A list will also be posted on the [CHD website](#).

#### F. Memorandums of Agreement (MOA)

- ix. At the end of the application process, a Memorandum of Agreement (MOA) will be presented to the applicant outlining the terms and conditions of its partnership with CHD. CHD representatives will enter the scope of service details into the MOA to reflect the proposed, expected,

and approved activities and expenses will be eligible for monthly reimbursement.

## Withdrawal of Applications

An application may be withdrawn by request of an applicant at any time during the application review and evaluation process. An applicant desiring to withdraw an application shall submit notification including the title of the application, and the applicant organization name via email to Katie Sperberg ([katherine.sperberg@vdh.virginia.gov](mailto:katherine.sperberg@vdh.virginia.gov)).

## Costs of Application Preparation

All costs of preparing the application are the sole responsibility of the applicant. CHD is not responsible for any costs incurred by the applicant which are related to the preparation or submission of the application or any other activities undertaken by the applicant related in any way to this RFA.

## Multiple Applications

Each community-based organization may only submit one application.

## Rejection of Applications

Any application may be rejected outright and not evaluated for any one of the following reasons:

- ❖ The applicant fails to include required information or fails to include sufficient information to determine whether a RFA requirement has been satisfied.
- ❖ The applicant fails to follow the application instructions or presents information requested by this RFA in a manner inconsistent with the instructions of the RFA.
- ❖ The applicant provides misleading or inaccurate answers.
- ❖ The applicant states that a mandatory requirement cannot be satisfied.
- ❖ The applicant's response materially changes a mandatory requirement.

## Application Clarification Process

CHD may request clarification from applicants for the purpose of resolving ambiguities or questioning information presented in the application. Clarifications may occur throughout the application evaluation/review process. Requests for clarification will be issued to the application contact listed on the application. An applicant will not be permitted to modify or amend its application if contacted by the department for this reason.

## Site Visits for Grantees

CHD representatives will conduct site visits at the CBO or at a planned location to meet with the CBOs' staff, volunteers, and/or the community members they serve who are involved with the project.

## SECTION 2 - PROGRAM DESCRIPTION

### Background

On December 27, 2020, the President signed into law the Coronavirus Response and Relief Supplemental Appropriations Act of 2021 (P.L. 116-260). On March 11, 2021, the President signed into law the American Rescue Plan Act of 2021 (P.L. 117-2). Both laws include supplemental funding for coronavirus vaccine activities to support broad-based distribution, access, and vaccine coverage. More specifically, this supplement will be used to ensure greater equity and access to Coronavirus Disease 2019 (COVID-19) vaccine by those disproportionately affected by COVID-19.

There is evidence that some racial and ethnic minority groups, including non-Hispanic American Indian/Alaska Native persons, non-Hispanic Black persons, and Hispanic persons, are disproportionately affected by COVID-19. Data from APM Research Lab [January, 2021] show:

- Pacific Islanders, Latino, Black and Indigenous Americans have a COVID death rate at least double of White and Asian Americans.
- The cumulative COVID-19 death rate per 100,000 population was highest for non-Hispanic American Indian/Alaska Native persons at 168.4 deaths per 100,000.
- Non-Hispanic Black persons had a death rate of 136.5 deaths per 100,000 population and Hispanic persons had a death rate of 99.7 deaths per 100,000 population.

Rural deaths due to COVID-19 continue to be higher on average compared to that for the nation as a whole. [https://covid.cdc.gov/covid-data-tracker/#pop-factors\\_7daynewdeaths](https://covid.cdc.gov/covid-data-tracker/#pop-factors_7daynewdeaths)

### Priority Populations

The CDC has outlined primary populations of focus for vaccination and outreach efforts. After reviewing COVID-19 data and consulting with community partners, CHD has designated its **primary** populations of focus as follows:

- People in racial and ethnic minority groups (non-Hispanic American Indian, Alaska Native, non-Hispanic Black, Hispanic)
- People living in communities with high social vulnerability index
- People living in rural communities
- People who are immigrants and/or refugees
- People with transportation limitations

Additional populations of focus include:

- People with disabilities
- People who are homebound or isolated
- People who are underinsured or uninsured
- Children
- Older adults 62+

- People who have moderately to severely compromised immune systems

## Relevant Activities

Activities for partners to consider include, but are not limited to, the following:

### 1. Vaccine education and outreach

- a. Community and/or grass-roots style outreach and education campaigns (e.g. town-halls, roundtable discussions, and Q/A sessions, phone-banking, text-messages or safely conducted in-person information sharing)
- b. Promoting vaccination through local media outlets, social media, faith-based venues, community events, and other community-based, culturally appropriate venues
- c. Improving and expanding messaging education around COVID-19 and other vaccination

### 2. Improving access to vaccines by expanding and diversifying opportunities for getting immunizations

- a. Hiring and training staff to administer vaccine
- b. Establishing vaccine opportunities (i.e., clinics) for populations of focus

### 3. Strategies for identifying and addressing social determinants/conditions (e.g., transportation, internet access) to eliminate barriers to vaccination

- a. Providing transportation to vaccine clinics/appointments
- b. Providing assistance to help individuals register or access vaccine(s)

The examples provided for each relevant activity serve only as guidelines for potential applicants. All applications will be reviewed to consider how proposal ideas intersect with the relevant activities outlined by CHD. Innovative, evidence-based ideas are encouraged. Consultation with CHD is welcomed before the submission of applications.

## Expectations

Organizations applying for funding should be established Community Based Organizations, Community Health Clinics/Centers, coalitions, Faith Based Organizations, etc., with a rapport in any selected population(s) of focus and a demonstrated capacity to engage in relevant activities. Funded organizations will have to submit a COV W-9 to receive funding from the Commonwealth of Virginia. Grantees will also be required to enroll in [eVA](#), Virginia's procurement marketplace, to receive reimbursement.

The COVID-19 Vaccine Equity Grant, in accordance with the requirements of the COVID-19 Cycle 4 Funding Program, operates on a reimbursement model. The standard for grantees will be to submit valid invoices with supporting documentation by the 10th of the month following the month of service. They will be entitled to reimbursement for expenses relating to their activities so long as they correspond to the contents of their approved budget. Following the Health District's receipt and processing of invoices, the grantee will receive reimbursement approximately 30-45 days later. Grantees may get reimbursed via check or direct deposit.



Grantees will also be required to submit quarterly reports. The organization will be asked to provide a quarterly summary of the progress made using funds from the COVID-19 Vaccine Equity Grant.

## Funding and Budget

Minimum Amount Requested:

- \$10,000

Maximum Amount Requested:

- \$80,000

### Eligible Expenses

- Hiring temporary/contract positions for any need specifically related to enhancing vaccine efforts
- Travel/Mileage reimbursement
- Facility rental (off-site vaccination locations, health fair, etc.)
- Rental space and meeting space venues, specifically to enhance vaccinations
- Monthly storage space to move supplies/equipment for vaccination PODs (Points of Dispensing)
- Vehicle rental to carry out funded activities
- Trailer/modular unit lease to use as office space and a mobile vaccine RV
- Promotional materials (e.g., stickers, pins, etc.)
- Radio, newspaper ads, social media, and other marketing costs
- Associated costs for operating clinics
- Health communications materials and health education services
- Software that helps facilitate information flow
- Hardware such as a laptop or internet hotspot to aid in mobile vaccination efforts
- Training - if vaccine related (e.g. for community health workers or health educators)
- Other expenses not listed below as ineligible, subject to CHD approval

The expenses listed above serve only as guidelines for potential applicants. All applications will be reviewed and considered. Consultation with CHD is welcomed before grant application submission.

### Ineligible Expenses:

- Vehicle purchase
- Purchase of food/meals (unless part of required travel per diem costs)
- Clinical care for non-immunization services
- Building purchases, construction, capital improvements, land acquisition
- Incentive materials (e.g., gift cards given in direct exchange for vaccination)
- Gifts, entertainment costs, alcoholic beverages, goods and services for personal use
- Honoraria/payment for a professional speaker
- Academic research
- Legislative/lobbying activities
- Interest on loans for the acquisition and/or modernization of an existing building
- Payment of bad debt, collection of improper payments
- Purchase of stocks, bonds, ETFs, or any other financial assets

## Required Reporting and Performance Measures

CHD will host regular check-in meetings/calls and review performance measures. CHD holds the right to *terminate the funding period at any time if the grantee's efforts have not adequately met expectations*. Members of CHD will readily provide consultation for grantees on project strategy or budget reallocation, but the effective execution of proposed activities and responsible use of grant funds will be the responsibility of the grantee.

Grantees will also be required to submit quarterly reports. The organization will be asked to provide a quarterly summary of the progress made using funds from the COVID-19 Vaccine Equity Grant. Performance measures will be established through collaboration with CHD and will evolve, as appropriate, with the progression of the organization's proposed activities. Performance measures will be tailored to the organization's proposed project goals and objectives as outlined in the MOA.

Below are some examples of topics and performance measures grantees may be required to report on.

- Describe work in the past quarter to identify and prioritize disproportionately affected populations for vaccination.
- Provide a description of the work and successes/challenges of local partnerships in supporting community engagement and vaccine promotion in the past quarter.
- Describe work and successes/challenges relating to messaging campaigns, community engagement, and building vaccine confidence.
- Describe work in the past quarter to partner with community organizations, and other trusted sources to promote vaccine awareness and uptake.
- Fiscal reports: reporting will include documents to support expenses such as receipts or documentation of staff hours.
- Timeline progress updates.
- Number of hours staff and volunteers are dedicated to this project to help inform future capacity needs.

No advantage will be given to those who can serve more populations or areas than others. Demonstrated capacity for implementation will reflect the applicant's overall ability to operate across all selected areas and serve the selected populations of focus. Organizations will be evaluated not on how many areas and/or populations they can serve but rather on how well they can serve them. A full scorecard can be found in the Appendices section (A).

# APPENDICES

## A. Application Scorecard

<b>Alignment with Purpose</b>	<b>10</b>
Extent to which the proposal aligns with project scope to increase vaccine rates among priority populations	
Extent to which proposal outcomes align with particular activities	
<b>Project Outcomes and Design</b>	<b>25</b>
Budget justification	
Project practicality	
Innovative activities	
Timeliness of the project	
Proposal outcomes are robust	
<b>Demonstrated Capacity for Implementation</b>	<b>20</b>
Previous experience addressing social determinants/conditions that influence population of focus	
Experience and demonstrated trust with priority population(s)	
Proposal scope is reasonable and proactive	
Experience in selected localities	
Previous experience in community health	
Demonstrated workforce capacity for the organization to meet their goals within the project period	
<b>Completeness Score</b>	<b>10</b>
All sections of the application were completed in entirety	
<b>TOTAL SCORE</b>	

B. Application for COVID-19 Equity Funding (FY 2024)

# Cycle 4 COVID-19 Vaccine Equity Grant Application



## ORGANIZATION INFORMATION

<b>Organization Name:</b>
<b>Organization Primary Address:</b>
<b>Additional Location Addresses (if applicable):</b>
<b>Organization Phone Number:</b>
<b>Organization Fax Number (if applicable):</b>
<b>Primary Grant Contact Name:</b>
<b>Primary Grant Contact Email:</b>
<b>Primary Grant Contact Phone Number:</b>
<b>Organization Website (if applicable):</b>
<b>Organization Classification</b>

<input type="checkbox"/> Non-Profit Organization <input type="checkbox"/> Government Organization <input type="checkbox"/> Faith-Based Organization
<input type="checkbox"/> School Organization <input type="checkbox"/> Other:

**Provide a general description of the mission of your organization, the population you serve, and any experience relating to community health, education, and outreach that your organization engages in. Please specify if any work has been related to COVID-19.**

**List the geographic areas of focus for your organization and your organization's history working within the health district's service areas: (Hanover, New Kent, Charles City, and Goochland)**

### **PROJECT/PROGRAM INFORMATION**

<b>Your project/program title:</b>
<div style="border: 1px solid black; height: 30px;"></div>
<b>Your projected grant funding request amount: (Min: \$10,000 - Max: \$80,000)</b>
<div style="border: 1px solid black; height: 30px;"></div>
<b>Briefly describe the goal and purpose of this project (200 character max):</b>
<div style="border: 1px solid black; height: 30px;"></div>

**Please describe your proposed project strategies and activities in detail, and how they align with the project scope.**

**What priority population(s) will be primarily served by the project:**

--

**Explain if this project/program is an extension of current projects you're managing. If so, please describe how they will intersect.**

--

**What outcomes are anticipated from this project? Please include the estimated number of individuals to be reached with education, outreach, or vaccination by locality.**

--

**Please develop at least 2 (to maximum 3) **SMART objectives** as it relates to your project's evaluation method and measurement. *Objectives are the who, what, when and how.***

**Objective #1:**

--

**Objective #2:**

--

**Objective #3 (optional):**

--

**Detail your anticipated timeline for this project/program:**

--

**Describe your organizational capacity to meet your objectives and sustain the overall funding needs of this program/project:**

--

**Grant Template: Complete the following budget table as it relates to your proposed grant request for CHD consideration. Please download and complete the budget template and upload/attach your completed document to the application.**

Budget Line Items	Cost	Total
Contractor Staff Costs	\$	\$
Supplies	\$	\$
Equipment	\$	\$
Travel	\$	\$
Other Contratual	\$	\$
<b>TOTAL</b>	\$	\$

**Please describe and justify your project/program budget:**

I, as a representative of my organization, have reviewed the request for proposal and the answers to this application, accept the requirements and expectations should the application be approved for a grant, and have answered each question to the best of my ability and agree that the information herein is true and correct.

**Printed Name:**

**Signature:**

**Date:**



**C. Budget Template (Electronic and PDF)**

1. Link to download **electronic** budget template (excel)



<https://www.vdh.virginia.gov/chickahominy/funding-opportunities/>

2. Link to download **Printable/PDF** budget template

<https://www.vdh.virginia.gov/chickahominy/funding-opportunities/>