



January 4, 2021

Dear Colleagues:

The Ohio Commission on Minority Health announces the availability of funds up to \$96,000 for State Fiscal Year 2022 (SFY22) to support virtual and or in-person lupus programming focusing on patient and public education. This funding is dependent upon the approval of the 2022/2023 State of Ohio Biennial Budget. Grant funds will not exceed \$16,000 per applicant agency per year for a maximum of six funded grants. Funding priority will be given to service areas demonstrating greatest need for lupus programming such as providing lupus health education to the public and/or persons with lupus and their caregivers.

This is a competitive-bid process. Due to the ongoing COVID-19 pandemic and the related State of Emergency restrictions all grantees must submit applications that comply with in- person service delivery restrictions and/or virtual program activities. Once funded, lupus grantees are to use measures that allow safe in person and or virtual program implementation that align with the directives as outlined by Governor DeWine and the Ohio Department of Health. For more information on Ohio's response to COVID-19, visit coronavirus.ohio.gov or call 1-833-4-ASK-ODH.

APPLICATION PROCESS

Minority Health Grant Management (MHGM) System

All applications must be submitted in the electronic MHGM system. This will allow for application submission and grant reporting. Please note that we recommend using Google Chrome to access the MHGM system.

Pre-Recorded technical Assistance Sessions on how to access, register and complete a grant application are located on the Grant Opportunities page of our agency website, in the Systemic Lupus Erythematosus section.

All grant applications must be submitted in the MHGM system to be considered for funding. In addition, if selected for funding, approved applicants will also submit all quarter, annual program, fiscal and evaluation reports in the MHGM system. Please note that we recommend using Google Chrome to access the MHGM system.

In the following pages, please find the application guidance for the Systemic Lupus Erythematosus (SLE) SFY2022 grant, which will be used along with the MHGM user guide when submitting the application for funding.

Please note all required documents and forms with required signatures must be uploaded in the MHGM to be considered for funding.

We strongly encourage you to: 1) Read the Request for Proposal; 2) Read the MHGM Applicant User Guide; 3) Watch the pre-recorded MHGM system Technical Assistance session 4) Watch pre-recorded Commission Grant Application Overview webinar.

We strongly advice that you allow enough time to allow any questions you may have to be submitted and responded to prior to the application deadline.

Please note, technical assistance questions will not be answered over weekends or on holidays prior to submission. Questions posed over each weekend or on holidays prior to submission will be answered the next business day. Therefore, please submit questions in a timely manner, as described earlier.

The deadline for submission for this funding opportunity in the MHGM system is February 12, 2021 at 11:59 PM

PLEASE BE AWARE that the submission of a technical assistance request regarding the application guidelines and the MHGM system during the application period will not change the application due date.

PLEASE NOTE: HAND DELIVERED, FAXED, MAILED, EMAILED AND APPLICATIONS WILL NOT BE ACCEPTED.

You have our best wishes as you prepare your application.

Sincerely,

Angela C. Dawson

Angela C. Dawson
Executive Director

**Ohio Commission on Minority Health
Request for Proposals
SFY 2022
Systemic Lupus Erythematosus (SLE)**

BACKGROUND

Systemic Lupus Erythematosus (SLE) is a potentially serious, complicated, generalized, inflammatory, connective tissue disease that can affect many different organs of the body in varying combinations. The vast majority of persons with lupus, about 90 percent, are young women. The disease usually begins in adolescence or young adult life. Although the disease may start acutely, the course of the disease is usually chronic and irregular, with periods of activity alternating with periods of remission.

The manifestations of SLE can be quite diverse; they include: joint inflammation (arthritis), fever, a red skin rash (especially in sun-exposed areas), pleurisy (a painful inflammation of the membrane surrounding the lungs and lining the chest cavity), anemia, thrombocytopenia (decreased blood platelets), kidney disease, brain involvement, pneumonia, heart disease and eye disease.

Individuals with Lupus have certain immune system abnormalities. Instead of the immune system serving its normal protective function, it forms antibodies that attack healthy tissues and organs.

It is now clear that SLE is much more common than it was thought to be 25 years ago. It is one of the most frequent, serious disorders of young women. According to the Lupus Foundation of America, between 1.4 million and 2.0 million people have been diagnosed with Lupus.

An overall prevalence rate for lupus has been reported as: 1 in 185 people in the United States; 1 in 123 Caucasian women; and 1 in 62 minority women. In general, blacks have higher rates of incidence, prevalence and mortality than whites. The age of onset of SLE is approximately 6 years earlier for blacks than for whites. The peak age of mortality from Lupus is also earlier in blacks than whites. The incidence rate in black women peaks at the 25 - 34 year old age group. Lupus can also affect men and the elderly.

In addition to African-Americans, Puerto Ricans, Chinese, Japanese, Filipinos, and ethnic Hawaiian women have exhibited increased risk of SLE.

INTRODUCTION

The Ohio Commission on Minority Health announces the availability of funds up to \$96,000.00 for fiscal year 2022 to support virtual and or in-person lupus programming that is compliant with the COVID -19 State of Emergency service delivery restrictions focusing on patient and public education. Grant funds will not exceed \$16,000.00 per applicant agency per year for a maximum of six funded grants. Funding priority will be given to service areas demonstrating greatest need for lupus programming.

In SFY Year 1994, the Ohio General Assembly appropriated funds to the Ohio Commission on Minority Health to provide funding for programs designed to serve Ohioans affected by Systemic Lupus Erythematosus. The Lupus grant program targets all Ohioans in need of services regardless of race, ethnicity or income. It is a goal of this grant program to serve the diverse needs of each city receiving funds.

In July of 1987, the Commission on Minority Health was created by Amended Substitute House Bill 171 for the purpose of providing health promotion and prevention of disease among minority Ohioans who are economically disadvantaged. Grants will be awarded on a statewide competitive bid basis to public or private, nonprofit 501 (c) (3), community-based agencies or organizations.

This Request for Proposal solicits grant applications meeting the requirements set forth in Chapter 3704 of the Ohio Administrative Code. Applications will be accepted exclusively from agencies or institutions meeting the eligibility criteria established by the Commission on Minority Health.

Applications will be accepted from eligible 501 (c) (3), community-based agencies or public organizations within Ohio. Current Lupus grantees that are programmatically and fiscally in compliance and have demonstrated quality services are eligible to apply.

Grant funds and services are limited to the city where applicant is located. In some circumstances adjacent areas may be considered; however, in no event can grant funds be used for regional or statewide projects.

Priority will be given to applicants who develop services in accordance with the mission of the Commission. To receive consideration for funding, applicants must:

- Demonstrate that at least 20% of project funds are received from sources other than grants awarded by the Commission on Minority Health;
- Be a public or private non-profit organization that has a 501 (c)(3);
- Develop a plan that establishes a management board for the administration of the grant, composed of proportionate representation of the population to be served and submit said plan with the grant application;
- Grantee must comply with all current and applicable laws, regulations, rules, and administrative guidelines of the Ohio Commission on Minority Health.

The following are ineligible for funding consideration:
Individuals.

- National organizations: local chapters or affiliates of national organizations may be eligible if they meet the definition of a "community-based health group."
- Organizations applying for the sole purpose of acquiring funds to supplement existing programs without any plan for enlarging their scope of work.
- Organizations in the process of creating or starting a "community-based health group" for the sole purpose of applying for grants from the Commission.

Ohio Revised Code (O.R.C.) Section 9.24 prohibits the State from awarding a contract to any offeror(s) against whom the Auditor of the State has issued a finding for recovery if the finding for recovery is "unresolved" at the time of the award. By submitting a proposal, offer or warrants that it is not now, and will not become a subject of an "unresolved" finding for recovery under O.R.C. 9.24, prior to the award of any contract arising out of this RFP, without notifying the Commission of such finding.

PUBLIC RECORD NOTICE

It is expressly understood by the parties the Ohio Commission on Minority Health (OCMH) is a public office and is subject to the Ohio Public Records Act, O.R.C. 149.43, et. seq. Upon receipt of a public records request, OCMH is required to provide prompt inspection or copies within a reasonable period of time of responsive records that OCMH determines, in its sole discretion, are public records subject to release.

If your organization chooses to not have what is considered a proprietary trade secret they must complete the following statement and submit to the Ohio Commission on Minority Health on your agency letterhead.

OCMH agrees not to disclose, without giving prior notice, any specific information that (organization) has previously identified as a proprietary trade secret. In the event that a person seeks that information through a public records request, OCMH will notify (organization) in the course of OCMH's legal review to give (organization) an opportunity to establish to the satisfaction of OCMH that the information constitutes a proprietary trade secret that is exempt from disclosure under the Public Records Act. If OCMH does not find that the information constitutes a proprietary trade secret, OCMH will notify (organization) of its intention to disclose the information in accordance with law. (Organization) may choose to seek appropriate legal action, including injunctive relief, to prevent disclosure of the information at issue.

FUNDING

The Commission will grant awards up to \$16,000.00 to fund or support virtual and/ or in-person Lupus health promotion activities that focus on patient and public education. The funding period is July 1, 2021 to June 30, 2022. Funds must be budgeted on an annual basis, not to exceed the grant award.

IMPORTANT: This is a performance-based grant. The second year of funding is non-competitive but is contingent on measured outcome during the first year of funding. The Commission reserves the right to terminate the grant prior to the second funding cycle if the project does not perform in accordance with stated, measurable outcomes.

Preference will be given to grants that focus expenses on costs related to program services. Equipment purchases will be disallowed and agency personnel expenses should be kept to a minimum.

Successful applicants will be required to participate in Commission supported training and calls.

All grant recipients must have a fully executed Acknowledgement of Terms (AOT), to include required original signatures on the AOT as well as compliance with all identified program and all identified fiscal special conditions within 60 days of grant notice. **Failure to meet this requirement will result in forfeiture of the grant.**

PROPOSAL GUIDELINES

Grantees should review the criteria and apply for funding appropriate to the services delineated. Grants will be evaluated using this criteria and Commission funding decisions will be based on them and performance.

Critical Guidelines

- Projects are required to provide twelve (12) months of active program virtual and or face to face

services through optimal health support groups.

- The minimum number of group participants is ten people with lupus.
- Projects are required to conduct Lupus Optimal Health group services in July 1, 2021 through June 30, 2022. Marketing and outreach activities are not considered program services.
- Grantees will be required to participate in the kick-off events for virtual Minority Health Month in March 2021.
- Commission funds cannot be used to develop educational materials.
- Patient education activities **must** provide strong educational components. Grant funds can be used to pay for expert presenters and result in the transference of skills (i.e., health literacy, relaxation, exercise, positive thinking, proper dietary practices, and other techniques that will improve coping mechanism of persons with lupus and/or their caregivers).
- Commission funds can be used to support awareness projects for the community at-large. This public awareness campaign may be a useful way to help identify cases of lupus for people who have the disease and do not know it. Such public awareness campaigns can be used to generate more public support for lupus concerns. Public awareness campaigns are not viewed as exclusive activities and must be conducted in conjunction with other activities e.g., patient education in this section. Funds allocated to support this activity must be reasonable and budgetary proportionate.
- Lupus grantee are to use measures that allow safe in person and or virtual health promotion, and disease prevention program implementation that align with the directives as outlined by Governor DeWine and the Ohio Department of Health. For more information on Ohio's response to COVID-19, visit coronavirus.ohio.gov or call 1-833-4-ASK-ODH.

Due to the limited funds it is preferential that applicants specify how they intend to meet the needs of diverse population groups based on demonstrated need and/or risk; as opposed to proposing a non-targeted general initiative and/or limiting efforts to one racial/ethnic group to the exclusion of others.

An applicant must meet all criteria in each category to be considered for funding:

Patient Education:

- Conduct at least one monthly face to face and or virtual optimal health support group meeting that is facilitated by a **trained facilitator** and includes **balanced presentations**.
- Provide a referral list of area facilities and physicians that provide medical treatment for SLE related medical conditions (i.e. rheumatologists, dermatologists, nephrologists, etc.).
- Conduct a virtual or in-person training opportunity that enhances the combination of patient, caregiver and professional education on the subject of SLE (i.e., workshop, conference or seminar).
- A mechanism to capture demographics for all services must be in place.
- Provide outreach to minority women via: Telephone Hotline, Literature Updates, On-line Education Sessions, Teleconference Education Discussions, Home Visits, Peer Counseling, and Self-Management Skills. The grantee is required to select and report on a minimum of four out of seven outreach modalities as stated above.
- The minimum number of group participants is ten people total to include participants with lupus and caregivers.

Public Education

- Include caregivers and children of persons living with lupus at monthly *support group* virtual or in-person meetings.
- Conduct virtual or in-person presentations that enhance SLE education.
- Participate in local events (i.e. health fairs) conducted as per CDC guidelines and Governor DeWine's executive orders.
- Participate in Lupus Awareness Month (May 2020).
- Enhance public education via media outlets.
- **Each funded agency is required to administer and review the "symptom checklist" – This is a mandatory requirement of funded agencies. Every person who receives a symptom checklist, and has 4 or more symptoms, their contact information should be collected so the grantee can follow up with those individuals. Please note, requesting contact information for follow up to see if the individuals were able to follow up with a healthcare provider is not a violation of HIPPA.**

Grantees are required to maintain participant files.

Participating Files must contain the following:

1. Individual file for all program participants.
2. Program participant files should not include their first and last names or home address.
The participant identification system can be: (first name, last initial, or vice versa), numbers, group name, sub group, or alphabetic.
3. All progress notes must be written in blue ink or typed and updated after each program activity, signed and dated by the Project Director. Electronic files and signatures are acceptable.

Definitions:

Patient Education Sessions:

An organized group of face to face, or virtually visible individuals led by a trained facilitator in an effort to receive information, share experiences and coping techniques. The group may set its own format for meetings, which may include educational, facilitated discussions or social events.

Trained Facilitator:

The individuals responsible for coordinating the work of the patient education sessions. All new grantees are required to be trained in group facilitation and conflict resolution. The required training will be conducted as part of the Commission's mandatory all grantee training.

Balanced Presentation:

A presentation that allows group members to share their personal experiences and an expert speaker to provide factual knowledge which results in the transference of skills.

APPLICATION SUBMISSION

Minority Health Grant Management (MHGM) System

In an effort to ensure grant application submission and grant reporting processes are more efficient, and to support the state of Ohio's paper reduction initiative, the Commission has launched its electronic grants management system.

The Ohio Commission on Minority Health launched our automated grant application and reporting system. The notice of this system launch was sent out on our list serv and placed on our agency website and social media venues. Pre-recorded sessions of this training will be available on the Commission website at www.mih.ohio.gov.

All grant applications must be submitted in the MHGM system to be considered for funding.

In addition, if selected for funding, approved applicants ~~will also~~ must submit all quarterly and annual program, fiscal and evaluation reports in the MHGM system.

APPLICATION DEADLINE

All applications must be submitted in MHGM by 11:59pm on February 12, 2021. The MHGM system will then be closed for submission of this application type. Any application or supporting documentation submitted after that date and time will not be considered for funding.

HAND DELIVERED, FAXED, MAILED, EMAILED AND APPLICATIONS WILL NOT BE ACCEPTED.

PLEASE NOTE: APPLICANTS MUST ALLOT SUFFICIENT TIME TO SUBMIT THE APPLICATION IN THE MHGM SYSTEM.

We strongly advise that you allow enough time to allow for any question you may have to be both submitted and responded to.

PLEASE BE AWARE: The submission of a technical assistance request regarding the application guidelines and the MHGM system during the application period will not change the application due date.

Pre-Recorded MHGM System - Technical Assistance Session

The Technical Assistance sessions to orient grantees to the new MHGM system and that provide an overview of how to access, register and apply in the MHGM system, are located on the Commission website at www.mih.ohio.gov

Grant Application Details – Technical Assistance Sessions

The SLE Grant Application Overview webinar which provides an overview of the grant application process and provides information to assist you in the development of your proposal, is located on our website at www.mih.ohio.gov.

Application Guidance

Responses to this RFP application should be prepared following the guidance described below.

Proposals that do not provide all of the requested information, or do not meet all the requirements specified in the RFP, will be determined incomplete and will be disqualified.

All grant applications must be submitted in the MHGM system to be considered for funding.

The Applicant User guide can be accessed on the Commission website at www.mih.ohio.gov. Please refer to the Applicant User Guide to obtain general MHGM information to include account creation, passwords, login and quick tips.

Section 1: Application

QUICK TIPS:

- Click the 'Next' button to save and advance to the next section of the application.
- Fields with red asterisks * are required to be answered before advancing on to the next section of the application.

- **Session Expiration:** Please gather all materials needed to complete and submit the application. Please be aware that your application session will expire after 30 minutes. There will be a countdown clock at the top of the page and under 5 minutes a pop up will be displayed. The pop up will ask if you want to continue the session. If you are not at your desk when the pop up comes up the system will log you out. When logged back in an indicator triangle will show up and ask if you want to retrieve the unsaved data.

1. **Face Sheet:** To complete this section access the application in the MHGM system and refer to the Applicant User Guide.
2. **Organization Information:** To complete this section access the application in the MHGM system and refer to the Applicant User Guide.
3. **Project Abstract:** To complete this section access the application in the MHGM system and refer to the Applicant User Guide.
4. **Proposal Narrative:** To complete this section access the application in the MHGM system and refer the Applicant User Guide.
 - a. Health Areas to be Addressed
 - b. Demographics
 - c. Sustainability Summary
 - d. Evaluation Plan
 - Describe the method(s) that will be used to determine whether the standardized goals and objectives are being met and whether the expected outcomes are being achieved. The proposal should offer valid time-lined outcomes and effectiveness of the project.
 - **PLEASE NOTE:** Evaluation of objectives must occur on a regular basis. Please ensure that your plan includes the collection of required participant data feedback or additional measures on a regular basis. Numbers from the previous quarters are brought forward and added to the new quarter's numbers. Please ensure that the numbers are accurate when reporting from quarter to quarter.
5. **Staff Description:** To complete this section access the application in the MHGM system and refer to the Applicant User Guide.
 - a. Staff Demographics
 - b. Board/Advisory Group Demographics
6. **Method of implementation:** To complete this section access the application in the MHGM system and refer to the Applicant User Guide.
7. **Project Action Plan:** To complete this section access the application in the MHGM system and refer to the Applicant User Guide.

Applicants will complete this required section in the MHGM system under Project Action Plan (formally standardized goals and objectives) FY22.

As a reminder all required objectives must be responded to. Optional objectives are not required. For instructions on how to complete this section please refer to your MHGM Applicant User Guide.

8. **Line Item Budget:** To complete this section access the application in the MHGM system and refer to the Applicant User Guide.

A. General Information:

- i. Enter the required budget information in the MHGM system. Be sure to include costs associated with developing and implementing your proposed SLE grant. Instructions are included for each form as appropriate.
- ii. Enter the budget narrative describing unit cost and itemization of each line item in the MHGM system.
- iii. Enter the 20% required matching funds.
- iv. Budget Appropriateness and Reasonableness:

Administrative Code 3704-2-02 states: *“That at least twenty percent of applicant funds and/or resources are received from sources other than grants awarded by the Commission on Minority Health”*. In other words, the Commission cannot be the sole funding source of an agency. Please note, this 20% match is not required to be a cash match but can be in-kind resources.

- Specified line-item costs are appropriate and reasonable/justifiable.
- Costs support direct client activities.
- All line items must be itemized and list unit cost for each requested expenditure.
- **The budget narrative must include the unit costs only for specific item(s) that agency is requesting Commission funding.**

All line items need to be itemized and list unit costs. This should be detailed and reflect a per/hour or unit costs.

B. Direct Costs (Personnel/Fringe Benefits/Other – Instructions)

- i. Only those positions which provide direct client services are to be listed in the personnel section.
- ii. Do not list contractual personnel or consultants in this section. They should be entered in the Contractual section.
- iii. Provide the yearly salary budgeted for each position listed. The amount should be consistent with similar positions in the agency based on Full-Time Equivalency (FTE).
- iv. The total number of months of employment projected per position for this grant.
- v. Calculate the percent of time the employee will devote exclusively to the project under this grant; for example, a 40-hour per week agency employee who provides 20 hours of service on this project would be listed as 50%.
- vi. Provide a narrative on the the employee's salary that will be funded by the Commission based on annual salary number of months on the project and the percentage of time on the project.

Example: 1) An employee with an annual salary of \$15,000 who works 12 months at 50% of his/her time would earn \$7,500 from Commission funds; 2) an employee with an annual salary of \$20,000 who works nine months at 25% of his/her time on the project would earn \$3,750 from the Commission.

- vii. If the agency pays one rate during a probationary period with an increase after probation, state budget

assumptions on separate lines for each category and provide a narrative explanation.

- viii. Only employees who implement services detailed in the project proposal may charge their time to this grant.
- ix. Provide the detailed narrative for the fringe benefits to be charged to the grant for all positions listed in the budget.
- x. Provide the percentage of employee fringe benefits.
- xi. Where appropriate, match must be identified for each line item.

C. **Non-Personnel - Instructions**

i. **Travel**

- State estimated number of miles that will be traveled and the rate at which payment would be made, not to exceed the State of Ohio of \$.45 cents per mile. Example: 2,000 miles at \$.45 cents = \$900.00.
- Projected number of overnight lodgings, number of people involved and the rate per day/per person should be stated. Lodging rate per day/per person may not exceed the state rate of \$80.00 plus room tax (if applicable).
- Meal expenses are allowable for dinner and breakfast when on an approved overnight stay, not to exceed \$27.00 per day with receipts for full days of travel preceded and followed by overnight stays.
- Out-of-state travel is a non-allowable cost under this grant.
- Fees for conferences/training sessions, when determined to be related to specific job-duties and/or responsibilities, are reimbursable or allowable. Projected number of such sessions and costs should be stated.
- Only employees who implement services detailed in the project proposal may be reimbursed for actual travel expenses.
- Travel cost (mileage, meals, and hotel accommodations) to attend the virtual Awards Ceremony and Health Expo scheduled for March 2021 will not allowable, as the ceremony will be virtual.-

ii. **Equipment**

Equipment is any tangible item having a useful life of one year or more which is purchased in whole or in part with Commission funds. Non- allowable costs include, but are not limited to, the following under this grant:

- DVD players/accessories
- Portable cameras
- Television
- Computers (laptops, tablets, notebooks, etc.)
- Ink Cartridges
- Typewriters
- Furniture (*will provide state/federal salvage applications to successful grantees*)
- Cell phones
- Vehicle purchases
- Reflotron machines
- Copiers
- Refrigerators
- Baby/infant seats, cribs, clothing, shoes
- Wii and other high priced computer games
- Projectors
- PPE Equipment (mask/gloves, ventilator, etc.

Leasing/rental of any of this equipment may be considered. The rate per month and the number of months for leasing/rental should be stated.

iii. **Supplies** (Each item must have a cost per unit stated)

For purposes of Commission funds, supplies consist of expendable property items which have a useful product life of one year or less. Supplies include all tangible, expendable property other than equipment purchased with Commission funds. Equipment priced less than \$100 (e.g., staples, scissors, wastebaskets, paper, and pens) is considered office supplies.

Consistent with the Governor's Executive Order 2007-09S, "refreshments" are not reimbursable under this grant. (See Commission website at www.mih.ohio.gov to review this EO.)

Printing: Costs may include typesetting, actual printing or photocopying of the material which is completed by a commercial printing company. Included also are costs for pamphlets, brochures and flyers. Provide the unit cost.

Contracts: Agreements for all sub-contracts must be submitted with the following being addressed: scope of service, beginning/ending date, hourly rate and total number of contract hours.

Advertising: Specify the media and cost of advertisement (e.g. 3 ads at \$50.00 per ad).

Evaluation participation: Funded organizations will participate in evaluation activities initiated by the REEP program of the Commission on Minority Health to improve collection of program outcomes.

iv. **Indirect Costs/Rent/Administrative/Maintenance/Repair/Other:** Total cost must not exceed 15% of the amount requested. The following may be charged as indirect costs/services and must be itemized:

- 1) **Administrative charges:** salaries of support staff (administrators, secretaries, accountants). Provide the percentage of time on the project per line item;
- 2) **Rental/space leasing:** space rental is an allowable cost. Space for which rental fees will be paid must meet the following requirements:
 - a. the number of months and the rate at which payment will be made should be stated;
 - b. when rent is shared among several programs, the amount charged to the Commission must not exceed the Commission's fair share. The agency must submit documentation of how the Commission's fair share was determined (e.g., if Commission-funded project uses 20% of the space, the Commission may be charged no more than 20% of the total rent);
 - c. submit a copy of the lease which includes the building owner's name, location of the building, square footage, total amount of rent paid, terms of agreement, termination clause, signatures of lessee and lessor;
 - d. approved rent is non-transferable from the original site to a new or relocated site.
 - e. Rent will not be approved for:
 - space which is paid for by another state/federal program or private grant;

- space in buildings purchased with federal funds;
- space donated to the applicant agency.
- utilities: heat, water, electricity, etc.

9. **Project Documentation:** To complete this section access the application in the MHGM system and refer to page 44 in the Applicant User Guide. Applicants are required to submit multiple documents in the Project Documentation screen which are outlined.

10. **Signatures:** To complete this section access the application in the MHGM system and refer to page 48 in the Applicant User Guide.

11. **Submit:** To complete this section access the application in the MHGM system and refer to page 49 in the Applicant User Guide.

Required Grant Reporting/Participation Requirements

Applicants will be required to adhere to grant reporting mechanisms and evaluation reports that are required to be submitted to the Commission on a quarterly basis if continued funded is approved. Grant management is required by your agency to be responsible for:

1. Uploading the signed Acknowledgement of Terms and respond to the Program and Fiscal Special Conditions, if any are given.
2. Submission of Program and Fiscal quarterly reports (on appropriate Commission forms) along with quarterly Program Evaluation Reports in the MHGM system.
3. Virtual participation in MHM Kickoff Expo sponsored by the Commission.
4. Submission of FY21 year-end summary data (formerly the Annual Program report) in the FY21 - 4th quarter program by the required deadline.
5. Submission of FY21 year-end summary data for the Evaluation Report by required deadline.
6. Submission of FY20 and FY21 - two year summary data (formally the Biennial Program Report) in the FY21 - 4th quarter program report by required deadline (if awarded in FY21).
7. All grant recipients must have a fully executed Acknowledgement of Terms (AOT), to include original signatures on the AOT as well as compliance with all identified program and all identified fiscal special conditions within 60 days of grant notice. This document will be uploaded in the MHGM system. The AOT will be provided electronically within the MHGM system to grant recipients after the awarding of the grant.
8. Responsible for conducting two Lupus Awareness Month activities in May of 2021.
Failure to meet these requirements will result in forfeiture of the grant.

PROPOSAL EVALUATION

Responses to this RFP that are determined to be complete and in compliance with the requirements of the Commission will be reviewed by teams following the general criteria listed below.

The final selection process will involve a ranking system based on scores, reflecting compliance with the evaluation criteria.

Evaluation Criteria for Applications (Items which are considered during review of grant applications):

(1) Service Area Design

- The need for the program is well documented.
- The project explains assurances for provision of technically accurate information.
- Programs are directed at a clearly defined target population consistent with the Commission's definition for economically disadvantaged minority(ies).

(2) Innovativeness and Impact

- The project is designed specifically for the proposed target population.
- The project will result in some measurable impact on the identified population.
- The applicant states expected outcomes as a result of proposed interventions.

(3) Program Design

- The applicant has demonstrated that cultural beliefs, attitudes and practices have been considered and included in designing the program.
- Barriers to service; i.e., availability, acceptability, language and cost have been considered and appropriate recourse is included in the approach to the project.

The problems to be addressed are clearly stated in specific rather than general terms, reasonably addressed during the grant period, and accomplished with the dollars available for the project.

(4) Budget Appropriateness and Reasonableness

- At least 20% of the applicant's operating budget during the funding period is from a source other than the Commission is clearly documented. In other words, the Commission cannot be the sole funding source of an agency. This 20% should not be perceived as matching funds.
- All line item costs are appropriate and reasonable/justifiable.
- Costs support direct client activities.
- All line items must be itemized and list a unit cost for each requested expenditure.

(5) Evaluation

- The proposal offers valid time-lined outcomes and effectiveness of the project.