

REQUEST FOR PROPOSALS

Program Collaboration: Social Determinants of Health Planning Initiative

October 7, 2008

Issued by:
The Salvation Army

In Partnership with the
Wisconsin Tobacco Prevention and Poverty Network
and
State of Wisconsin Department of Health Services

**Written applications must be submitted no later than 4:00 p.m. Central Standard Time
Monday, November 17, 2008**

Mail or deliver applications to:

Kevin Reeder, MSW, CSWM
Social Services Director
The Salvation Army
Wisconsin/Upper Michigan Division
11315 W. Watertown Plank Road
Wauwatosa, WI 53226-0019

For questions, contact:

Lorraine Lathen
Social Determinants of Health Project Consultant
(414) 302-4300 Ext. 2176
(800) 264-6412
WUM_TobaccoNetwork@usc.salvationarmy.org

Late or faxed proposals will be rejected.

The Salvation Army reserves the right to reject any proposals.

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Attachments

Attachment A: Cover Page Template

Attachment B: Budget Form Template

Attachment C: Work Plan Template

Attachment D: Project Time Line Template

Attachment E: Social Determinants of Health Logic Model

**Program Collaboration:
Social Determinants of Health Initiative**

TIME LINE

October 7, 2008	Salvation Army Releases RFP via The Salvation Army and Wisconsin and Tobacco Prevention and Poverty Network websites (WTPPN)
October 13, 2008	Letter of Intent due (not required but recommended)
October 17, 2008	Deadline to submit RFP inquiries and clarifications via email and/or telephone
October 27, 2008	Review of RFP criteria and scoring presentation/conference call
November 17, 2008	Due Date for Proposals
November 18 -28, 2008	External/Community Review of Proposals
December 1 – 10, 2008	Internal Final Review of Proposals
December 15, 2008	Award Letters Mailed
January 1, 2009	Agreement Start Date
December 31, 2009	Agreement End Date

I. INTRODUCTION AND GENERAL INFORMATION

1.1. BACKGROUND

The Salvation Army in partnership with the Wisconsin Tobacco Prevention and Poverty Network and the Wisconsin Department of Health Services is pleased to announce the availability of grants through its recently established *Program Collaboration: Social Determinants of Health Planning Initiative*. This program is a result of the Wisconsin Tobacco Prevention and Poverty Network and its collaborating partners' interest in building upon theories, concepts and principles highlighted in the seven part documentary series, *Unnatural Causes...is inequality making us sick?* . This documentary explored racial and social inequities in health.

Through its coordination of the Wisconsin Tobacco Prevention and Poverty Network, The Salvation Army has played a leadership role in raising awareness on the social and economic determinants that influence health outcomes. Funding through this initiative will enable communities to increase their knowledge and understanding of theories and concepts of social determinants of health and health equity. Additionally, funding will enable community coalitions and alliances to begin integrating social determinants thinking into their efforts to improve the health status of their communities. Potential follow-on funding, that is contingent on the availability of funding, will allow selected communities to move beyond planning, awareness raising and educating to advocating for improved social conditions that will ultimately support the overarching goals and priorities, articulated in the Healthiest Wisconsin 2010 health plan.

1.2. PURPOSE

Funding through this initiative seeks to promote the goals of the Wisconsin's health plan, Healthiest Wisconsin 2010 within the context of theories and concepts of social determinants of health explored in the PBS series, *Unnatural Causes...is inequality making us sick?* This Request for Proposals invites private, non-profit and public organizations to join and/or establish strategic partnerships and coalitions for the purposes of conducting a health impact assessment on a particular policy, proposed development project, government initiative, or ordinance that may affect the health of Wisconsin's residents. This grant is designed to help communities explore the root causes of health disparities within the context of health equity and social determinants.

Decades of research demonstrate that social environments lacking in basic resources—healthy food, safe housing, living-wage jobs, decent schools, supportive social networks, access to health care and other public and private goods and services, are the environments that experience the burden of disease and premature death. These social conditions often influence the health behaviors of individuals and inhibit them from engaging in healthier life styles. The purpose of this RFP is to provide community entities with the opportunity to join and/or form alliances and strategic partnerships across disciplines that will support the identification of grassroots efforts aimed at increasing social and economic resources in communities that indirectly or directly influence health. Applicants are expected to conduct a health impact assessment (HIA) of a particular policy, practice, ordinance, or proposed development project, relevant to the identified grassroots efforts. Eventually this information will enable communities to engage in social resource building efforts in depressed communities. Examples of social resource building activities that might affect health include, but are not limited to, efforts that strengthen social institutions, health care systems, economic systems, educational systems, and political structures in resource-poor communities.

This RFP is based on the understanding that social policy is health policy and recognizes that health is more than health care. Health involves the distribution of resources; where people live, work, are educated and their access to social and economic resources, thereby shaping the choices they make that affect their health and well-being.

1.3. SOCIAL DETERMINANTS OF HEALTH

Social determinants of health are the economic and **social** conditions, under which people live, which determine their **health**. Virtually all major diseases are primarily determined by specific exposures to these conditions (the CDC Social Determinants website, www.thecommunityguide.org/social) therefore, the product of multiple factors of influence that include genetic and biologic processes, individual behaviors, and the context within which people live - the social environment.

Social determinants of health can potentially be altered by social and health policies and programs. Three broad categories of social determinants are **a) social institutions** - including

cultural and religious institutions, economic systems, and political structures; **b) surroundings** - including neighborhoods, workplaces, towns, cities, and built environments; and **c) social relationships** - including position in social hierarchy, differential treatment of social groups, social inclusion, and social networks (www.thecommunityguide.org/social). Decades of research suggests that communities with few social resources experience poorer health outcomes than communities that are rich in social resources. Intervention and strategies that augment the social resources of a community might include affordable family housing, increasing neighborhood safety conditions, supporting children's healthy development and learning, or community development to increase economic opportunities. Such initiatives may have an equal or even more profound impact on health than increasing access to affordable, culturally competent, quality healthcare.

Systematic reviews of interventions that address social determinants of health disparities demonstrate that interventions which increase the social resources of neighborhoods have a measurable impact on community health outcomes. Efforts that have been successful in establishing health-enhancing environments have often involved reframing public health questions. A conventional public health question might be, "How can we promote healthy behaviors?" This question reframed within the context of health equity might be, "How can we target dangerous conditions and ensure healthy spaces and places?" This RFP is exploratory in nature and allows applicants to begin reframing public health questions as healthy equity questions. This RFP is more concerned with changing the social context in which people live than influencing individual health risk behaviors.

II. FUNDING AVAILABILITY

2.1 FUNDING LEVEL AND MATCHING REQUIREMENTS

The Salvation Army will distribute up to \$125,000 for matching grant award. Eligible grants, in amounts not to exceed \$25,000 per grant will be awarded for the period of January 1, 2009 to December 31, 2009. The Salvation Army anticipates awarding five grants, one in each of the public health regions (Southeastern, Northeastern, Northern, Western, and Southern). No match is required; however, applicants are encouraged to seek in-kind contributions and/or additional funding to support their "Unnatural Causes" proposed activities. Follow-on funding may be available to selected communities, contingent on the availability of future funds. These funds would be allocated to support selected communities to move beyond planning, awareness

raising and educating to increasing health-enhancing resources in a community and advocating for improved social conditions that would support the overarching goals and priorities, articulated in the Healthiest Wisconsin 2010 health plan.

2.2 ALLOWABLE EXPENDITURES

Funds may be used for a variety of purposes including community mobilizing, capacity building, social change advocacy, public policy awareness raising, and to implement environmental and policy changes; health equity promotion activities, social marketing, and screenings of *Unnatural Causes, is inequality making us sick?*, workshops and conferences and when part of a larger project; interpretation and translation services and personnel. Funds may also be used to support incentives and stipends for community members.

Project-related costs covered by the program include:

- Personnel expenses, such as salaries and benefits
 - Personnel directly supervising those implementing the project for the amount of time involved in direct supervision
 - Accounting and bookkeeping personnel for time directly related to managing the project budget and reports
 - Clerical personnel for time directly related the project
- Supplies
- Consultant and contract services
- Incentives and stipends
- Travel
- Other expenses

If awarded the grant, re-budgeting between major budget categories that exceed ten percent (10%) of the annual budget must be requested in writing and approved by The Salvation Army. The funding is for one time only with a grant year of January 1, 2009 through December 31, 2009. All funds must be expended by the end of the grant period, no extension of funds will be granted.

2.3 DISALLOWED EXPENDITURES

Funds may **not** be used for:

- Clinical services related to treatment or follow-up for specific health conditions, however clinical services that involve mobilizing resources to promote healthcare access may be funded
- Entertainment
- Lobbying
- Indirect overhead costs that cannot be directly tied to the project using an approved allocation method
- Debt reduction
- Projects outside the state of Wisconsin
- Supplanting

III. **PROJECT REQUIREMENTS**

3.1 PROJECT CRITERIA

The project funded under this grant must:

1. Conduct a Health Impact Assessment (HIA) on a proposed development project, government initiative, ordinance, policy or practice.
2. Identify and join one to two existing community efforts aimed at:
 - a. increasing affordable family housing
 - b. increasing neighborhood safety conditions
 - c. supporting children's health development and learning
 - d. supporting community development to increase economic opportunities
 - e. increasing other social and economic resources that facilitate healthy outcomes
3. Organize a policy forum to brief officials in government agencies and community stakeholders about social determinants of health inequities.

3.2 PERIOD OF SUPPORT

This project is for 12 months from January 1, 2009 through December 31, 2009. The funding is for one time only. All funds must be expended by the end of the grant period, no extension of funds will be granted. Potential follow-on funding may be available to support project implementation that moves beyond planning, awareness raising and educating to advocating for

improved social conditions and increases health-enhancing resources in a community. These funds are contingent on the availability of future funds.

3.3 ELIGIBLE APPLICANTS

Eligible community partners are private, non-profit or public organizations including:

- Local and county governments or their bona fide agents
- Social institutions - including cultural and religious institutions, economic systems, and political structures
- Voluntary associations, foundations, civic groups
- Scientific or professional associations, primary/secondary (k-12) schools, technical colleges, universities and colleges
- Citizen groups, healthcare organizations and providers
- Federally-recognized Indian tribal governments, Indian tribes or Indian tribal organizations

All projects must be implemented by Wisconsin-based entities in Wisconsin communities, for the benefit of Wisconsin residents. Projects outside the state of Wisconsin are not eligible.

3.4 FISCAL AGENT

Organizations who are not a legal entity (i.e. a governmental or tax-exempt, 501(s) (3) organization must designate a fiscal agent. A fiscal agent is defined as an organization or group which receives IRS recognition of 501(c) (3) status. Fiscal agents must ensure adequate financial control and discretion for specific projects. A fiscal agent and its board of directors, accepts significant financial and legal liability when it manages a project under its 501 (c) (3) designation.

The fiscal agent is responsible for the following:

- a) Receipt and disbursement of grant monies from The Salvation Army.
- b) Proper financial record keeping and reporting for the project based on generally accepted accounting practices consistent with the organizations policies and procedures.
- c) Preparation of all financial reporting to The Salvation Army.
- d) Submitting a signed Partnership Agreement with the project applicant. The Agreement must identify the roles and responsibilities of each partner toward the financial compliance of the project.

IV. GENERAL PROGRAM REQUIREMENTS

The following are required to ensure the continuation of funds. These requirements will become part of the final Contract. Failure to complete with these requirements can result in disallowances and /or termination of the agreement for funds.

4.0 ACCEPTANCE OF PROPOSAL CONTENT

Grant recipients receiving awards must meet all requirements of the RFP.

4.1 ALLOWABLE COSTS

A grant receipt will be required to comply with The Salvation Army's *Allowable Cost Policies and Procedures*.

4.2 CAPITAL EQUIPMENT

Funds may be used to purchase capital equipment with prior written approval from The Salvation Army. Capital equipment costs are defined as all costs associated with the acquisition of assets having a value in excess of \$5,000 and a useful life in excess of one year. Funds can also be used to rent communication equipment.

4.3 REPORTS

Reports of both programmatic and fiscal activity will be required for documenting the satisfactory meeting of project goals and objectives, in accordance with the application. Reporting requirements will be specified in the agreement between the successful application and The Salvation Army. Failure of the successful applicant to accept these obligations may result in cancellation of the award.

The grantee shall, at the option of The Salvation Army, appear before The Salvation Army administrators to clarify findings and to answer any questions at any time during the grant agreement or after the grant agreement is completed.

4.4 NEWS RELEASES

News releases pertaining to this award or any part of the proposal shall not be made without the prior written approval of The Salvation Army. Copies of any news releases regarding this grant during the contract period will be submitted to The Salvation Army.

4.5 LEGAL SERVICES

Grant funds can be used to provide legal advice to the recipients but the funds cannot be used to support any legal actions taken against the federal or state government.

4.6 EMPLOYMENT

The applicant will not engage the services of any person or persons now employed by The Salvation Army or the state, including any department, commission or board, to provide services relating to this agreement without the written consent of the employer of such person or persons and The Salvation Army or the Department of Health Services.

4.7 SUBCONTRACTING

If the applicant plans to use subcontractors, this should be clearly explained and cost out separately in the application; however, the primary contractor will be responsible for the contract performance whether subcontractors are used.

4.8 TERMINATION OF AGREEMENT

The Salvation Army may terminate this agreement at any time at its sole discretion by delivering thirty (30) days written notice to the grant recipient. Upon termination, The Salvation Army's liability will be limited to the prorated cost of the services performed as of the date of termination plus expenses incurred within the prior written approval of The Salvation Army. In the event that the grant recipient terminates this agreement for any reason whatsoever, it will refund The Salvation Army within fourteen (14) days of said termination, all payment made hereunder by The Salvation Army of the grant recipient for activities not completed. Such termination will require written notice to that effect delivered by the grant recipient to The Salvation Army not less than thirty (30) days prior to said termination.

4.9 INCURRING COSTS

The Salvation Army is not liable for any cost incurred by proposers responding to this RFP.

4.10 WAIVER OF TECHNICALITIES

The RFP Evaluation Committee reserves the right to accept or reject any or all responses to the RFP and waive minor technicalities. The determination of whether an RFP condition is substantive or a mere technicality shall reside solely with the RFP Evaluation Committee.

4.11 AFFIRMATIVE ACTION

Successful applicants who are awarded contracts of twenty five thousand dollars (\$25,000) or more shall have included in their contracts the following clause:

“A written affirmative action plan is required as a condition for the successful performance of the contract. Excluded from this requirement are grant recipients whose annual work force amount is less than twenty-five employees. The affirmative action plan shall be submitted to The Salvation Army within fifteen (15) working days after the award of the contract.”

4.12 REASONABLE ACCOMMODATIONS

The Salvation Army will provide reasonable accommodations, including the provision of information materials in alternative format, for qualified individuals with disabilities. For special needs, contact Kevin Reeder, Social Services Director of The Salvation Army, Wisconsin/Upper Michigan Division.

4.13 NON-DISCRIMINATION OF EMPLOYEES OR APPLICANTS FOR EMPLOYMENT

In connection with the performance of work under this contract, the grant recipient agrees not to discriminate against any employee or applicant for employment because of age, race, religion, color, handicap, sex, marital status, physical condition, arrest or conviction record, developmental disability as defined in s.51.01 (5), sexual orientation, or national origin.

This provision shall include, but not be limited to the following: employment, upgrading, demotion or transfer; recruitment or recruitment advertising, layoff or termination, rates of pay or other forms of compensation, and selection for training, including apprenticeship. Except with respect to sexual orientation, the grant recipient further agrees to take affirmative action to ensure equal employment opportunities.

The grant recipient agrees to post in conspicuous places, available for employees and applicants for employment, notice to be provided by the contracting officer setting forth the provision of the nondiscrimination clause.

V. TECHNICAL ASSISTANCE

The Salvation Army's Social Determinants of Health Consultant, Lorraine Lathen and website offers technical assistance, information, and training on the grant application process. The website will routinely post official responses and clarification to the RFP, as well as revisions to specifications and requirements. The Wisconsin/Upper Michigan Division of The Salvation Army website can be accessed at, www.usc.salvationarmy.org/usc/www_usc_wum.nsf. Applicants are encouraged to visit these websites for additional information, www.unnaturalcauses.org, www.thecommunityguide.org/social, www.cdc.gov/DHDSP/library and www.who.int/soicaldeterminants.org.

VI. CLARIFICATION AND/OR REVISION TO SPECIFICATIONS AND REQUIREMENTS

Any questions concerning this RFP should be addressed, in writing on or before **October 17, 2008** to:

Lorraine Lathen
Social Determinants of Health Project Consultant
The Salvation Army
Wisconsin/Upper Michigan Division
11315 W. Watertown Plank Road
Wauwatosa, WI 53226-0019
(414) 302-4300 Ext. 2176
800-264-6412
WUM_TobaccoNetwork@usc.salvationarmy.org

Applicants are expected to raise any questions, exceptions, or additions they have concerning the RFP Document at this point in the process. If an applicant discovers any significant ambiguity, error, conflict, discrepancy, omission or other deficiency in the RFP, the applicant

should immediately notify the Social Determinants of Health Project Consultant, Ms. Lorraine Lathen of such error and request modification or clarification.

In the event that it becomes necessary to provide additional clarifying information or to revise any part of the RFP, revisions/amendments, and/or supplements will be communicated via The Salvation Army website at www.usc.salvationarmy.org/usc/www_usc_wum.nsf.

Any contact with employee's of The Salvation Army concerning this RFP is prohibited, except as authorized by the Social Determinants of Health Project Consultant during the period from the date of the release of the RFP until the notice of intent to contract is released.

VII. SUBMITTAL OF APPLICATION AND GRANT APPLICATION REQUIREMENTS

7.1 APPLICATION GUIDELINES

Proposals must be submitted in English only and should avoid jargon and unusual abbreviations. Number all pages and organize the application according to the application format below. The proposal should be typed using at least 11point Arial font, double-spaced on 8 1/2 by 11 inch paper, with at least one-inch margins (single spacing allowed on cover page narrative). **Proposals should not exceed 15 pages**, excluding the cover page and budget/budget narrative pages. **Submit one clearly marked original with authorized signatures, plus six identical copies of the entire application.** The original must be single-sided and bound with a removable binder clip. The copies should be double-sided and stapled in the upper left-hand corner. Ineligible projects, incomplete submissions, and submissions that do not conform to all the requirements and instructions of this RFP will not be considered and will not be returned. Applications must be submitted by mail or hand delivered. Applicants will be notified of any failure to meet the submission requirements. The RFP document can be down loaded at The Salvation Army website at www.usc.salvationarmy.org/usc_usc_wum.nsf.

7.2 APPLICATION DEADLINE

All Requests for Proposals are due by 4:00 p.m. Central Standard Time on Monday, November 17, 2008. They may be mailed or hand delivered to Kevin Reeder. The Salvation Army will not accept emailed or faxed proposals. All proposals received after 4:00 p.m. November 17, 2008

will be discarded. Proposals that do not follow the guidelines and required proposal will also be discarded. The Salvation Army also reserves the right to reject all proposals.

Kevin Reeder, MSW, CSWM
Social Services Director
Wisconsin/Upper Michigan Division
The Salvation Army
11315 W. Watertown Plank Road
Wauwatosa, WI 53226-0019

NO FAXES OR ELECTRONIC PROPOSALS WILL BE ACCEPTED

7.3 APPLICATION CHECK LIST

The grant proposal should include the following:

- Cover page
- Narrative (not to exceed 15 pages, doubled-spaced) with the following sections:
 - Project Purpose, Statement of Need and Statement of the Problem
 - Project Goals, Objectives and Intermediate Outcomes
 - Work Plan
 - Methodology and Strategies
 - Evaluation
 - Organizational Capacity and Experience of Partners agencies, key staff and community volunteers
- Budget form and budget narrative
- Letters of support and/or memorandums of understanding between coalition members and/or partnership agreements

7.4 APPLICATION FORMAT

A. Cover page

- a) complete Attachment A Cover Page. Make sure it is the first page of the submitted proposal.
- b) provide brief background on the significance of the topic
- c) describe the primary goal or aim of the project
- d) provide a brief description of the project
- e) describe the intermediate outcomes of the project
- f) provide a brief statement on how this project will make a difference for the specific community or target population and for similar populations in Wisconsin

B. Narrative

1) Project Purpose, Statement of Need and Statement of the Problem

- a. Clearly state the need for and purpose of the project.
- b. Clearly and concisely, describe the target audience and demonstrate that the selected target audience(s) routinely experiences health inequities.
- c. Clearly identify the social determinant(s) and one to two existing social conditions in the social and/or economic environment to be addressed.
- d. Describe the significance of the social condition or the social resources to be addressed.
- e. Describe how the project will advance the understanding and application of social determinants-focused interventions to improve community health.
- f. Describe how the project addresses at least one of the three overarching goals and/or health priorities of the Healthiest Wisconsin 2010 health plan.

2) Project Goals, Objectives and Intermediate Outcomes

- a) Discuss the project's goals, objectives, design, and activities to achieve the stated goals.
- b) Describe the intermediate outcomes relevant to social determinants, as described in 3.1 of this RFP that the project expects to achieve.
- c) If appropriate, describe the existing knowledge or research of evidence and best practices to support the program design, approach or strategy.
- d) State the design of the project in measurable outcomes objectives that are consistent with 3.1, *Project Criteria in Section III Project Requirements*.

3) Work Plan

Provide a project work plan and corresponding timeframe of activities. Applicants should use the work plan template in Attachment C and Time Line Template in Attachment D as part of the work plan to define:

- a) Project goals
- b) Project objectives
- c) Measurable intermediate outcomes (quantitative or qualitative)--process or impact measures that provide a basis for assessing achievement, change, or improvements in social environments over time

4) Methodology and Strategies

- a) Describe the methodology used to integrate the principles of social determinants of health-centered strategies to improving social environments and increasing social resources that impact public health.
- b) Describe the applicants' methodologies to implement strategies and best practices that support co-learning of information explored in *Unnatural Causes...is inequality making us sick?*
- c) State the approaches and methods used to support the applicant in working collaboratively across disciplines and sectors with strategic partners and/or coalition members and community members and stakeholders.
- d) State the strategies, techniques, and methods used to increase the awareness of social determinants-centered planning and social environments improvements models, among strategic partners, coalition members and the broader public.

5) Evaluation

- a) Describe the criteria used to evaluate the success of your project.
- b) Describe the process continuously used monitor progress in achieving intermediate outcomes relevant to project criteria described in section 3.1.

6) Organizational Capacity and Experience of Partners agencies, key staff and community volunteers

- a) Describe the organization's history, mission, and qualifications to implement the proposed project.
- b) Describe previous experience and collaborative efforts to involve community members in program planning and public policy advocacy activities.
- c) Describe your ability to identify community needs and affect broad based change in vulnerable communities.
- d) Describe key personnel and their qualifications to lead this effort.

D. Budget norm and budget narrative

1) Budget Form

Complete Attachment B Budget Form. The budget form serves as a one-page summary of the anticipated expenditures. Base your budget on the best available estimates of personnel and supporting resources needed to perform the services described in the proposal. Round all figures to the nearest dollar. Calculate the total for each category and the Grand Total—All Costs Categories. Re-check all figures and calculations.

2) Budget Narrative

Complete a budget narrative to explain how figures were determined when this is not clear from the budget form. Identify optional in-kind contributions in the budget narrative. Descriptions of the budget categories are as follows:

Category I – Personnel

List by title each position that will be supported in whole or in part with grant funds or local match. In the *Grant Amount* column, indicate the total salary that is to be paid with grant funds during the grant period. If fringe benefits are to be paid, indicate the percentage/rate and add the total fringe benefit amount for all positions paid with grant funds. The Salvation Army and Department of Health Services funds cannot be used to support staff hours that will be concurrently obligated to other sources of funding, including federal or state grants and private or local foundations. Agency records are subject to audit.

NOTE: If you plan to subcontract out part or all of your project, you must provide the above information pertaining to your agency and/or the subcontractor(s). Be clear in describing and distinguishing between your agency's staff and/or the staff of the subcontractors.

Category II – Consultants and Contractual

The organization may choose to subcontract to provide some required program components. The Salvation Army reserves the right to approve all subcontracts as a condition of the award.

Identify consultants and/or subcontractors who will provide services that will be paid with any matching funds. All expenditures to be made to consultants and/or subcontractors must be fully explained in the budget narrative.

Category III – Program Supplies

Examples of costs to be included in this category include education and outreach, supplies, including stipends and incentives. Estimate the cost for each type of expenditure and itemize it in the space provided.

Category IV- Agency/Organization Operations

Include costs such as rent, telephone, utilities, staff development, travel, office supplies, postage, printing and data processing.

Category V – Indirect Costs

For community-based organizations, indirect charges may not exceed 10 percent of salaries/wages (excluding fringe benefits) charged to the grant. (Tribal organizations may adhere to the DHS Tribal Indirect Cost Policy.) An indirect cost rate plan may be requested for review and subject to approval by The Salvation Army.

3) In-kind Contributions

Examples of in-kind match include staff time, travel costs, private donations and other contributions.

E. Letters of Support and Memorandums of Understanding

Attach no more than three letters of support for your specific project and/or memorandums of understanding or linkage documentation that highlight commitments of strategic partners to work collaboratively to implement this project.

VIII. AWARD/REVIEW CRITERIA AND SCORING

Awards will be granted competitively based on the Review Criteria and Scoring stated in this RFP. An External Evaluation Review Committee will score and rank applications according to the numerical score received and make recommendations to the internal review team. The Internal Review Committee, consisting of The Salvation Army, Wisconsin Tobacco Prevention and Poverty Network, Department of Health Services and its designees will make the final

decision on contract awards. The Salvation Army reserves the right to reject any and all applications and to negotiate the award amount, the evaluation process, authorized budget items and specific programmatic goals with the selected applicants prior to entering into an a grant agreement. Anyone receiving a contact must comply with Salvation Army's affirmative action and civil rights compliance requirements.

REVIEW CRITERIA AND SCORING

- Cover page (not scored)**
 - Proposer completes Attachment A Cover Page that succinctly provides the following information:
 - provides brief background on the significance of the topic
 - the primary goal or aim of the project
 - the intermediate outcomes of the project
 - a brief statement on how this project will make a difference for the specific community or target population and for similar populations in Wisconsin
- Narrative (not to exceed 15 pages, doubled-spaced) (90 points)**
 - Project Purpose, Statement of Need and Statement of the Problem (15 points)**
 - Proposer demonstrates ability to meet the requirements of the grant
 - Proposer clearly and concisely describes the social determinant of health that the project will address
 - Proposer clearly and concisely, demonstrates that the selected community (target audience) routinely experiences health inequities
 - Proposer clearly and concisely describes the need to address the identified social determinant and current community efforts that are addressing issues related to the determinant
 - Proposer describes how addressing the identified social determinant might improve social conditions and positively impact health outcomes
 - Project Goals and Objectives (10 points)**
 - Proposer clearly identifies the overall purpose or goal of the initiative
 - Project goals and objectives reflects and understanding of the principals of healthy equity and social determinants of health
 - Work plan (15 points)**
 - Attachment C, Work Plan completely and accurately completed
 - Attachment D, Time Line completely and accurately completed

□ **Methodology and Strategies (25 points)**

- Proposer clearly and concisely describes the methods and strategies used to integrate the principles of social determinants and healthy equity into improving social environments and increasing social resources that impact public health
- Proposer clearly describes activities proposed to accomplish stated objectives and how grant funds will be used to achieve stated goals and objectives
- Proposer demonstrates promising or evidence-based practices for raising awareness, educating and incorporating social determinants of health and health equity principles into social and health policy agendas
- Proposed planning uses strategies tailored to the specific cultural, linguistic and social norms of the communities
- Proposed project demonstrates an ability to contribute to an expanded understanding of how communities can mobilize within a social determinants/healthy equity framework to improve the health of Wisconsin's residents

□ **Evaluation (10 points)**

- Proposer demonstrates ability to achieve intermediate outcomes to improved health in at least one of the following areas: a) neighborhood living conditions, b) opportunities for learning and developing capacity, c) community development and employment opportunities, d) prevailing community norms, customs and processes, e) social cohesion, civic engagement and collective efficacy or f) health promotion, disease and injury prevention and health care
- Proposer provides realistic and measurable intermediate objectives for the proposed project and expected long-term outcomes
- Proposer clearly describes the methods and criteria that will be used to evaluate the success of the project (proposer defines success and how it will be measured)

- **Organizational Capacity and Experience of Partners agencies, key staff and community volunteers (15 points)**
 - The organization’s history, mission, and qualifications are relevant for conducting this exploratory planning initiative
 - Proposer demonstrates experience in leading and/or participating in collaborative community-led social justice and/or health policy efforts
 - Proposer demonstrates an innovative partnership that is likely to affect social change that will facilitate strengthened social environments that influence health equity and health outcomes

- **Budget form and budget narrative (10 points)**
 - Proposer completes budget form with correct calculations
 - Proposer adequately describes budget line items in budget narrative
 - Proposer describes in-kind or funding match (no required but encouraged)
 - Staff, equipments, resources, etc. appear to be reasonable and reflective of the services and deliverables that will be provided through the project

- **Letters of support, memorandums of understanding between coalition members and/or partnership agreements (not scored)**
 - Proposer provides letters of supports, memorandums of understanding or other documents that clearly describe the level of effort, commitment, and linkage among the partners that are pursuing this grant

8.1 APPLICANT RESPONSES

Applications submitted in reply to this RFP should respond to the specifications stated herein. Failure to respond to the specifications may be a basis for an application being eliminated from consideration during the selection process.

In the event of an award, the contents of the RFP (including all attachments), RFP addendum and revision and the proposal from the successful applicants will become contractual obligations. The Salvation Army reserves the right to negotiate the award

amount, the programmatic goals and the budget items with the selected applicants prior to entering into an agreement.

Justifiable modifications may be made in the course of the agreement only through prior consultation with and written approval by The Salvation Army. Failure of the successful applicant to accept these obligations may result in cancellation of the award.

8.2 WITHDRAWAL OF APPLICATIONS

Applications may be withdrawn by written notice. Proposals may be withdrawn in person by the applicant or his/her authorized representative, provided his/her identity is made known and he/she signs a receipt for the application.

8.3 AWARD PROCEDURES

An External Evaluation Committee will score and rank applications according to the numerical score received and make recommendations to the internal review team. The Internal Review Committee consisting of The Salvation Army, Department of Health Services and its designees will make the final decision on contract awards. The Salvation Army reserves the right to reject any and all applications and to negotiate the award amount, the evaluation process, authorized budget items and specific programmatic goals with the selected applicants prior to entering into an a grant agreement. Anyone receiving a contact must comply with The Salvation Army's affirmative action and civil rights compliance requirements.

8.4 NOTICE OF INTENT TO AWARD A CONTRACT

Each applicant whose proposal is reviewed by the External and Internal Evaluation Review Committee shall receive written notice of the determination of approval or non-funding of the proposed project.

8.5 PUBLIC INFORMATION

No entire application submitted to The Salvation may be marked as confidential and any materials so marked by being included in the application will be considered public information.