



Strengthening Local Public Health Capacity Program 2023

7/01/2022 to 06/30/2023

Request for Application (RFA)pa

I. IMPORTANT DATES AND APPLICATION PROCESS OVERVIEW

Letters of Intent Requested:	Wednesday, February 9, 2022	-	12:00 Noon (EST)
Letters of Intent Due:	Wednesday, February 23, 2022	-	12:00 Noon (EST)
Request for Application Announcement:	Monday, March 7, 2022	-	9:00 AM (EST)
Request for Application Questions Due:	Monday, March 14, 2022	-	3:00 PM (EDT)
Application Open Date in SAGE:	Monday, March 21, 2022	-	9:00 AM (EDT)
Application Close Date in SAGE:	Friday, April 8, 2022	-	1:00 PM (EDT)
Anticipated Intent to Fund Notification:	Friday, May 6, 2022		
Anticipated Start Date:	Friday, July 1, 2022		
All Work Completed/Funds Obligated by:	Friday, June 30, 2023		
All Fund Expended by:	Monday, July 31, 2023		

The New Jersey Department of Health (NJDOH) - Office of Local Public Health's (OLPH) **Strengthening Local Public Health Capacity Program 2023** is a non-competitive grant funding opportunity being announced on **Monday, March 7, 2022**. The expected start date is **Friday, July 1, 2022**. This is a 12-month grant for State Fiscal Year 2023. Grant activities must be completed and funding must be obligated by **Friday, June 30, 2023**. All grant funds must be expended by **Monday, July 31, 2023**.

The Notice of Fund Availability (NOFA) and Request for Application (RFA) for this funding opportunity are located on the New Jersey Department of Health Directory of Grant Programs web page at <https://healthapps.state.nj.us/noticeofgrant/noticegrants.aspx>. Letters of Intent (LOIs) were collected from interested non-LINCS Agency Local Health Departments (LHDs) by the **12:00 Noon (EST)** deadline on **Wednesday, February 23, 2022**. The application will open in the System for Administering Grants Electronically (SAGE) at **9:00 AM (EDT)** on **Monday, March 21, 2022**. All applications must be submitted in SAGE by **1:00 PM (EDT)** on **Friday, April 8, 2022**.

II. INTRODUCTION AND EXECUTIVE SUMMARY

In New Jersey, local health departments (LHDs) are the boots on the ground for public health services. Through the statutory authority granted to municipalities, local boards of health are responsible for providing essential services in areas such as emergency response and disaster resiliency, communicable

disease investigation and outbreak response, environmental and sanitation inspections, chronic disease prevention, and health promotion. There are currently **103 LHDs** in New Jersey, serving diverse populations and ensuring swift and comprehensive public health response to the numerous communicable diseases that threaten the health and safety of the State's nearly nine (9) million residents. These LHDs have varied infrastructures, where some agencies may provide services to an entire county, some to a single city or municipality, and some to a group of municipalities.

To support COVID-19 response initiatives and prepare for future infectious disease events, the New Jersey Department of Health is receiving **\$29.9 million** for state fiscal year 23 (7/1/22-6/30/23) in federal funding to be awarded to county and local health departments to support COVID-19 and other infectious disease response initiatives. During the COVID-19 pandemic, local health departments have been working around the clock to prepare, respond to and contain the spread of COVID-19 in the state, and these funds will provide health departments with more resources to identify, track and address local COVID-19 and other infectious disease outbreaks rapidly.

Health departments in each of the 21 counties and the City of Newark are known as Local Information and Network Communication System (LINCS) agencies and are responsible for preparedness coordination in their jurisdictions for COVID-19 response and preparation for future infectious disease events. For FY23, the 22 LINCS Agency LHDs will be allocated **\$9.35 million** of the federal funding received by the New Jersey Department of Health from the Centers for Disease Control and Prevention (CDC) for COVID-19 response and preparation for future infectious disease events.

The remaining 81 **non-LINCS Agency Local Health Departments**, each covering a varying number of municipal jurisdictions, were determined to be eligible through this RFA to submit a Letter of Intent (LOI) to receive a portion of **\$20.6M** which is funded through a combination of Federal and State funding sources. Below is a breakdown of this RFA's funding into three (3) categories to support the scope of this grant:

a. Local Health Outreach Coordinator (LHOC)

\$9.26 million of federal CDC funds (ELC Strategy 5 Use Laboratory Data to Enhance Investigation, Response, and Prevention) will be distributed to the **non-LINCS Agency LHDs** to appoint/hire a full-time **Local Health Outreach Coordinator (LHOC)** [*formerly known as the Vulnerable Populations Outreach Coordinator (VPOC)*] to assess, mitigate and respond to populations disproportionately affected by the social and health impacts of COVID-19 and other infectious diseases. This includes ensuring that these populations have access to testing and support services such as housing, primary medical care, insurance coverage, and unemployment compensation to allow them to quarantine effectively.

b. Infectious Disease Preparedness Generalist (IDPG)

Another **\$9.72 million** of federal CDC funds (Cooperative Agreement for Emergency Response: Public Health Crisis Response-Workforce Development) will be distributed to **non-LINCS Agency LHDs** to appoint/hire a full-time **Infectious Disease Preparedness Generalist (IDPG)** [*formerly known as the COVID-19 Generalist (CVG)*] to assist with outreach to populations disproportionately affected by COVID-19 and other infectious diseases through POD planning/vaccine logistics, testing, contact tracing, resolving laboratory reporting issues within the jurisdiction, and other COVID-19 and other infectious disease-related activities.

c. **Outbreak Preparedness (OP)**

Additionally, a total of **\$1.6 million** in Strengthening Local Public Health Capacity funds earmarked through the State's 2023 Budget will also be allocated to **non-LINCS Agency LHDs** to strengthen **Outbreak Preparedness** and response capacity by reimbursing eligible COVID-19 and other Infectious Disease-Related Expenses (see Appendix 2) not covered by any other funding source.

Since Public Health Priority Funding was discontinued in 2011, most LHDs are funded solely through local taxes only; resulting in a reduced workforce and reduced available services, even though the need for public health services has increased. As such, it is critical that LHDs build sustainable communicable disease capacity in contact tracing and containment to ensure rapid response to and recovery from COVID-19 and be prepared for future infectious disease events.

III. **GOAL**

The Strengthening Local Public Health Capacity non-competitive funding opportunity is being provided to non-LINCS Agency LHDs to boost public health capacity for response to COVID-19 and other infectious diseases in the following areas:

a) Outbreak Preparedness (OP) - To provide funding to enable non-LINCS Agency LHDs to strengthen outbreak preparedness/response capacity by reimbursing eligible COVID-19 and other infectious disease-related expenses not covered by any other funding source (see Appendix 2).

b) Local Health Outreach Coordinator (LHOC) - To provide funding to enable non-LINCS Agency LHDs to each appoint/hire a full-time Local Health Outreach Coordinator (LHOC) to assess, mitigate and respond to populations disproportionately affected by the social and health impacts of COVID-19 and other infectious diseases.

c) Infectious Disease Preparedness Generalist (IDPG) - To provide funding to enable non-LINCS Agency LHDs to each appoint/hire a full-time Infectious Disease Preparedness Generalist (IDPG) to assist with outreach to populations disproportionately affected by COVID-19 and other infectious diseases, POD planning, logistics, testing, contact tracing, and resolving laboratory reporting issues within the jurisdiction, and other activities related to COVID-19 and other infectious diseases.

*******Important Note:** The IDPG funding is only for staffing and supplies to support IDPG Staff.

Note: The Outbreak Preparedness (OP); Local Health Outreach Coordinator (LHOC); and Infectious Disease Preparedness Generalist (IDPG) grant activities are required for this grant. Applications that do not include all three (3) grant activities cannot be processed.

IV. ELIGIBILITY

To apply for this funding opportunity, the 81 eligible Non-LINCS Agency local health departments (LHDs) were required to meet the following eligibility criteria.

Eligible non-LINCS Agency LHDs:

Submitted an LOI utilizing the <i>OLPH Strengthening Local Public Health Capacity Letter of Intent Template</i> to OLPHGrants@njlincs.net by 12:00 Noon (EST) deadline on Wednesday, February 23, 2022.
Maintain an updated listing in the <i>March 1, 2022 Directory of Local Health Departments in New Jersey</i> on the New Jersey Department of Health OLPH web page at https://www.nj.gov/health/lh/documents/LocalHealthDirectory.pdf .
Demonstrate compliance with N.J.A.C. 8:52-3.3 and N.J.A.C. 8:52-4.1 (a).

V. LETTER OF INTENT

On Wednesday, February 9, 2022, OLPH emailed 81 eligible non-LINCS Agency local health departments (LHDs) a request for Letters of Intent (LOIs) to apply for the 2023 Strengthening Local Public Health Capacity RFA.

Interested non-LINCS Agency LHDs were instructed to complete the *OLPH Strengthening Local Public Health Capacity Letter of Intent Template* that collected the following information:

- 1) Name of LHD; 2) Applicant Federal Employer Identification Number (FEIN); 3) LHD address;
- 4) municipalities served by LHD; 5) contact person to submit the application in SAGE; and 6) confirmation of interest to receive grant funds.

The deadline for submission of Letters of Intent (LOIs) to OLPHgrants@njlincs.net was 12:00 Noon (EST) on Wednesday, February 23, 2022. OLPH **received a total of 75 LOIs** from the non-LINCS Agency LHDs (*to be referred to as non-LINCS Agency LOI LHDs from this point forward in the RFA*).

Although submitting an LOI does not obligate a non-LINCS Agency LHD to complete an application for this funding opportunity, an application will only be accepted if an LOI was submitted. Non-LINCS Agency LHDs that did not submit an LOI by the deadline are not eligible to apply for this funding opportunity.

VI. FUNDING

The breakdown of total available grant funds to be awarded by OLPH by funding source is as follows.

- **\$1,620,462** in **Outbreak Preparedness (OP)** State funds;
- **\$9,264,717** in CDC ELC (Strategy 5 Use Laboratory Data to Enhance Investigation, Response, and Prevention)- **Local Health Outreach Coordinator (LHOC)** funds; and
- **\$9,720,000** in federal CDC (Cooperative Agreement for Emergency Response: Public Health Crisis Response)- **Infectious Disease Preparedness Generalist (IDPG)** funds.

The maximum amount reserved for awards is \$20,605,179.

Awards are contingent upon the receipt of state funds by NJDOH.

Note:

This RFA covers Year 3 of Local Health Outreach Coordinator - LHOC (*formerly VPOC*) funding.

This RFA covers Year 2 Infectious Disease Preparedness Generalist - IDPG (*formerly CVG*) funding.

The following is the breakdown of funds to be received by each of the **75 eligible non-LINCS Agency LOI LHDs** that submitted LOIs by Wednesday, February 23, 2022, to OLPHgrants@lincs.net.

FUNDING BY ACTIVITY CODE
<ul style="list-style-type: none">• \$21,606 in Outbreak Preparedness (OP) State funds to enable each non-LINCS Agency LOI LHD to strengthen outbreak preparedness/response capacity by reimbursing eligible COVID-19 and other infectious disease-related expenses not covered by any other funding source.• \$123,529 in Local Health Outreach Coordinator (LHOC) funds for each non-LINCS Agency LOI LHD to appoint/hire a full-time Local Health Outreach Coordinator (LHOC) to assess, mitigate and respond to populations disproportionately affected by the social and health impacts of COVID-19 and other infectious diseases.• \$129,600 in Infectious Disease Preparedness Generalist (IDPG) funds for each funded non-LINCS Agency LOI LHD to appoint/hire an Infectious Disease Preparedness Generalist to assist with outreach to populations disproportionately affected by COVID-19 and other infectious diseases, POD planning, logistics, testing, contact tracing, and resolving laboratory reporting issues within the jurisdiction, and other activities related to COVID-19 and other infectious diseases.
Maximum of 75 awards at \$274,735 each

This is a non-competitive grant for State Fiscal Year 2023, with a maximum of **75** awards available. If less than 75 applications are received, or if a non-LINCS Agency LOI LHD does not submit an application following the eligibility criteria and directions in this RFA, less than 75 awards will be issued.

Schedule B Other Direct Costs - Maximum Allowable Amounts

For the **LHOC (Local Health Outreach Coordinator)** activity code, a maximum of **20%** can be applied towards **Schedule B - Other Direct Costs**.

- a. The maximum amount of **LHOC** funds that can be applied towards **Other Direct Costs** is **\$24,705**.

For the **IDPG (Infectious Disease Preparedness Generalist)** activity code, the majority of the funds are to be used for **Salary (Schedule A)** and expenses to support the IDPG staff.

- b. The only **IDPG Schedule B - Other Direct Costs** allowed are equipment and supplies that support the IDPG staff (i.e. desk, laptop, mobile phone, MiFi, etc.) Redirecting unexpended dollars for other purposes will **not** be permitted with IDPG funding.

VII. RELEASE OF THE REQUEST FOR APPLICATION (RFA)

At **9:00 AM (EST)** on **Monday, March 7, 2022**, the RFA will be posted on the NJDOH Directory of Grant Programs web page at <https://healthapps.state.nj.us/noticeofgrant/noticegrants.aspx>. Additionally, OLPH will notify all non-LINCS Agency LOI LHDs by email at **9:00 AM (EST) on Monday, March 7, 2022**, about the release of the RFA and the question submission process. Included in the email will be the ***RFA Questions Submission Form***.

VIII. SUBMITTING QUESTIONS ABOUT THE RFA

The **75** non-LINCS Agency LOI LHDs, may submit questions about the RFA. The ***RFA Questions Submission Form*** that was emailed to the LOI SAGE Contact and the LOI LHD Health Officer at 9:00 AM (EST) on Monday, March 7, 2022, may be utilized to submit questions to OLPHgrants@njlincs.net by **Monday, March 14, 2022, at 3:00 PM (EDT)**. Questions will not be accepted in any other format or at any other time. Written responses to questions submitted on the *RFA Questions Submission Form* will be compiled and emailed to the **75** non-LINCS Agency LOI LHDs in a Q&A format by **9:00 AM on Monday, March 21, 2022 (EDT)**.

IX. HOW TO ACCESS AN APPLICATION

NJDOH requires all grant applications to be submitted electronically through the System for Administering Grants Electronically (SAGE) at www.sage.nj.gov. If your agency does not have an existing account in SAGE, an account will need to be created to apply for this grant.

If you are a first-time NJDOH applicant whose organization has never registered in the NJDOH SAGE system, you must contact the SAGE System Administrator at 609-376-8508. A new agency form must be completed and submitted to NJDOH. The submitted documents will be reviewed to ensure that applicants have satisfied all applicable requirements. When approved, the organization's status will be activated in SAGE. The SAGE System Administrator will inform the organization's Authorized Official via email or by phone of their authorized access to the grant application in SAGE. Organizations will not have access to any application in SAGE until all documents are received and all procedures are satisfied.

Paper submission of the application or any attachments will not be accepted. SAGE will automatically reject applications after the closing date and time listed in the RFA.

Note: No extensions will be granted for application submissions or required grant documents.

The application will open in SAGE on **Monday, March 21, 2022, at 9:00 AM (EDT)**. Completed applications must be received by **1:00 PM (EDT) on Friday, April 8, 2022**, via the SAGE. Applications received after this date/time will not be accepted.

To streamline the narrative portion of the application process, applicants will utilize the ***OLPH Strengthening Local Public Health Capacity Application Template/Checklist*** on which applicants will provide their grant narrative and budget summary in a short-answer format. Applicants will also need to complete the required forms within SAGE and respective budget pages with sufficient detail. The ***OLPH Strengthening Local Public Health Capacity Application Template/Checklist*** will be emailed to all eligible non-LINCS Agency LOI LHDs on **Monday, March 21, 2022, at 9:00 AM (EDT)**. The completed *Application Template/Checklist* is to be uploaded in **PDF** format into SAGE Attachments.

Applications may be returned for revisions and/or additional information; if the applicant fails to complete this process or fails to provide revisions and/or additional information by the requested due date, NJDOH reserves the right to deny further review of the application.

X. IMPORTANT SAGE GRANT PROPOSAL INSTRUCTIONS

I. Log into SAGE (www.sage.nj.gov) and search for the “***Strengthening Local Public Health Capacity Program 2023***” application and complete as directed.

II. To simplify the Application process, the ***OLPH Strengthening Local Public Health Capacity Grant Proposal PDF*** is to be uploaded to the Attachments Section of SAGE.

III. Please type the following into the corresponding **SAGE** sections ***exactly*** as shown below:

Note: *Applications that are not completed exactly as shown below will be sent back to the Applicant.*

- **Assessment of Need(s):** *See Attached Grant Proposal PDF*

- **Objective(s) of Project:** Please complete the **Objective(s)** section ***exactly*** as shown below. Applications that are ***not*** completed ***exactly*** as shown below will be ***sent back*** to the Applicant.

Activity	No.	Objective	Estimated Completion Date
23PHC IDPG - Infectious Diseases Preparedness Generalist	1	To meet the deliverables described in the Strengthening Local Public Health Capacity 2023 schedule of work	06/30/2023
23PHC LHOC - Local Health Outreach Coordinator	1	To meet the deliverables described in the Strengthening Local Public Health Capacity 2023 schedule of work	06/30/2023
23PHC OP - Outbreak Preparedness	1	To meet the deliverables described in the Strengthening Local Public Health Capacity 2023 schedule of work	06/30/2023

- **Method(s):** *See Attached Grant Proposal PDF*

- **Evaluation:** *See Attached Grant Proposal PDF*

XI. REQUIRED INFORMATION:

Eligible applicants will complete the ***OLPH Strengthening Local Public Health Capacity Application Template/Checklist*** and upload it into SAGE when complete. The **Grant Application** is divided into three sections:

- **Section 1 - Organizational Readiness**
- **Section 2 - Grant Proposal**
 1. **Assessment of Need**
 2. **Description of Goals, Objectives, and Methods**
 3. **Evaluation**
 4. **Plan for Sustainability**
- **Section 3 - Project Budget Summary**

Applicants must provide information for all three (3) sections of the grant application and corresponding sub-sections and should address all questions/bullets listed in each section and sub-section.

Successful awardees will:

- Demonstrate organizational capacity and readiness for this grant program;
- Describe the impact of COVID-19 and other infectious diseases within the non-LINCS Agency LHD's jurisdiction;
- Describe the social/health/other impacts on populations disproportionately affected by COVID-19 and other infectious diseases;
- Identify methods and activities to achieve the grant goals and objectives established by OLPH for the Local Health Outreach Coordinator (LHOC), Infectious Disease Preparedness Generalist (IDPG); and Outbreak Preparedness (OP) focus areas of the funding opportunity;
- Describe how the process/outcome of the grant program will be evaluated;
- Describe plans for sustainability of this program beyond this funding cycle; and
- Prepare a project budget that outlines:
 - Eligible COVID-19 and other infectious disease eligible expenses (not covered by any other source) for reimbursement.
 - Salary/expenses to support the LHOC and IDPG in leading outreach efforts to populations disproportionately affected by COVID-19 and other infectious diseases within the LHD jurisdiction.

The Grant Application must be submitted utilizing the *OLPH Strengthening Local Public Health Capacity Application Template/Checklist*.

Section 1 and Section 2 combined should not exceed fifteen (15) typed pages with 1/2-inch margins.

Section 3 - Project Budget Summary is a table divided into two sections: 1) Schedule A; and 2) Schedule B. There are no size restrictions to the Project Budget Summary.

The applicant non-LINCS Agency LHD must also complete both Schedule A (salary-related costs) and Schedule B (all other costs) in SAGE.

XII. FUNDING RESTRICTIONS/EXCLUSIONS:

Funding Restrictions:

- NJDOH must review and approve all Professional Service Agreements (PSA) before contracts are executed. PSAs must be uploaded into SAGE prior to the start of any consultant/vendor services.
- All consultants used for the sole purpose of auditing compliance with the grant/or expenditures funded by the grant are exempt from this restriction.
- Awardees may not purchase newly requested items (not included in the original approved budget) until the PMO/GMO review and approve the newly requested items for purchase.
- Awardees must receive NJDOH approval prior to submitting newly requested COVID-19 and other infectious disease-related eligible expenses for reimbursement. COVID-19/other infectious disease eligible expenses must not be covered by any other funding source.
- Reimbursement of pre-award staff salaries is not permitted.

Funding Exclusions:

- Awardees may not use LHOC and IDPG funds to fund clinical care.
- Awardees may not use funds to purchase clothing.
- Awardees may not use funds for construction or major renovations.
- Awardees cannot use funds to purchase or lease vehicles.

Note: See **Appendix 3 Funding Exclusions** regarding additional expenses that are not allowable.

Recipient use / financial participation:

Applicants must demonstrate sufficient organizational and policy commitment to support personnel, services, activities, and allowable purchases/expenses through this grant.

Indirect Cost Rates:

Applicants may apply for indirect costs. If indirect costs are requested, a current indirect cost Health & Human Services (HHS) agreement must be uploaded in SAGE under the Cost Summary page. **Indirect costs are capped at 10%.**

If a current indirect cost agreement does not exist, applicants may request a flat de minimis rate of 10% of Modified Total Direct Costs (MTDC). MTDC comprises all direct salaries and wages, applicable fringe benefits, materials and supplies, services, travel, and up to the first \$25,000 of each subaward (regardless of the period of performance of the subawards under the award). MTDC excludes equipment, capital expenditures, charges for patient care, rental costs, tuition remission, scholarships and fellowships, participant support costs, and the portion of each subaward in excess of \$25,000. Other items may only be excluded when necessary to avoid a serious inequity in the distribution of indirect costs, and with the approval of the cognizant agency for indirect costs.

(2 C.F.R. §200.68)

If certain costs are excluded from the indirect cost agreement (i.e. facility, equipment, etc.), an applicant may request those as direct costs, provided that these costs can be directly associated with the grant award and its related activities.

XIII. OTHER INFORMATION:

PROPOSAL REVIEW PROCEDURES

- Proposals will be reviewed for completeness and compliance with RFA requirements. Incomplete proposals and/or proposals that deviate from the required format will not be reviewed. Applications that satisfactorily pass the compliance review will be moved forward into grant processing.
- OLPH reserves the right to render final decisions on the awarding of grants under this RFA, including the determination of noncompliant or incomplete proposals.

GRANT REPORTING

- Awardees will be required to submit quarterly progress and expenditure reports in SAGE.
- Progress reports must address all items and metrics as listed in the applicant’s grant application.

TECHNICAL ASSISTANCE

- a) To obtain general and technical assistance during the grant period, contact your Program Management Officer (PMO) and/or Grant Management Officer (GMO):

Program Management Officers (PMOs)		
<p>Kathy C. Brown New Jersey Department of Health Office of Local Public Health PO Box 360 Trenton, NJ 08625-0360 609-376-8773 Kathy.C.Brown@doh.nj.gov</p>	<p>Kenette Johnson New Jersey Department of Health Office of Local Public Health PO Box 360 Trenton, NJ 08625-0360 609-376-8701 Kenette.Johnson@doh.nj.gov</p>	<p>Sameerah Moore New Jersey Department of Health Office of Local Public Health PO Box 360 Trenton, NJ 08625-0360 609-376-8752 Sameerah.Moore@doh.nj.gov</p>
Grants Management Officers (GMOs)		
<p>Shaqwana Davis New Jersey Department of Health Office of Local Public Health PO Box 360 Trenton, NJ 08625-0360 609-376-8730 Shaqwana.Davis@doh.nj.gov</p>	<p>Mina Macar New Jersey Department of Health Office of Local Public Health PO Box 360 Trenton, NJ 08625-0360 609-376-8764 Mina.Macar@doh.nj.gov</p>	

GRANT REPORTS

Expenditure Report Schedule

Grant Expenditure Reporting Periods	Report Number	Due Date
July 1, 2022 - September 30, 2022	1	October 17, 2022
October 1, 2022 - December 31, 2022	2	January 16, 2023
January 1, 2023 - March 31, 2023	3	April 14, 2023
April 1, 2023 - June 30, 2023	*4/Final	July 15, 2023/ July 31, 2023

*The 4th Expenditure Report must be submitted on or before July 15, 2023. ***IF*** the 4th quarter report will also serve as the final report, be sure to check the “Final Report” box in SAGE. If additional time is needed to complete grant paperwork, in addition to the 4th quarter report, a **final** report must be submitted on or before July 31, 2023.

Note: Final Expenditure Reports MUST be submitted no later than JULY 31, 2023. If a Final Expenditure Report is not received by JULY 31, 2023, the grant may be closed out based on the last Expenditure Report submitted.

Progress Report Schedule

Progress Report Reporting Periods	Report Number	Due Date
July 1, 2022 - September 30, 2022	1	October 17, 2022
October 1, 2022 - December 31, 2022	2	January 16, 2023
January 1, 2023 - March 31, 2023	3	April 14, 2023
April 1, 2023 - June 30, 2023	4/Final	July 15, 2023

Important: Timely submissions are used as a performance measure/indicator that may have an impact on future grant awards if reporting requirement due dates are not met. **Failure to submit timely reports will delay payments to the grantee.** In addition, late reporting may result in an overall 5% reduction of the grant. If necessary, reporting extensions must be submitted with a justification, via email, to the NJDOH PMO/GMO. The NJDOH PMO/GMO must approve the request for the extension to be valid.

Grant Amendment & Budget Revision Requests

Last date to initiate a **Grant Amendment** in SAGE is **Friday, April 1, 2023.**

Last date to initiate a **Budget Revision** in SAGE is **Friday, May 13, 2023.**

Upon approval by NJDOH of a Grant Amendment or Budget Revision Request (Step 1), a revised grant budget (Step 2) must be completed & submitted within **ten (10) business days.**

Note: Applicant is permitted a maximum of two (2) Budget Revision Requests during the budget period.

APPENDIX 1 – *DRAFT - Grant Deliverables

Item #	Suggested Person Responsible	Deliverable	Due Date
1	Local Health Officer	<p>COVID-19/Other Infectious Disease Eligible Purchases:</p> <p>a) The Grantee shall obtain pre-approval for all COVID-19/Other Infectious Disease Eligible Expenses from the Program Management Officer (PMO) and Grants Management Officer (GMO) prior to entering into any contracts or making any purchases not included in the original approved budget.</p> <p>Note: COVID-19/Other Infectious Disease eligible expenses that do not receive pre-approval will <u>not</u> be reimbursed.</p>	Quarterly
		<p>b) Grantee shall accompany all expenditure reports with receipts/invoices for all pre-approved COVID-19/Other Infectious Disease Eligible Expenses uploaded into SAGE quarterly.</p>	Quarterly
2	Local Health Officer	The Grantee shall hire or designate a full-time Local Health Outreach Coordinator (LHOC).	Within 30 days of NOGA
3	Local Health Officer	The Grantee shall hire or designate a full-time Infectious Disease Preparedness Generalist (IDPG).	Within 30 days of NOGA
4	Local Health Outreach Coordinator Infectious Disease Preparedness Generalist	<p>Rapid Public Health Needs Assessment <i>[formerly known as the Vulnerable Population Assessment]</i></p> <p><i>OLPH to provide Technical Assistance on the Rapid Public Health Needs Assessment via the Strengthening Grantee monthly webinar.</i></p> <p>a) The Grantee shall engage its community partners in conducting/updating the rapid public health needs assessment to identify and describe the health and social services needs of populations disproportionately affected by COVID-19 and other infectious diseases in the grantee’s community.</p> <p>Note: <i>Prior grantees are to update the assessment with current data and new grant terminology.</i></p> <p>Note: <i>Rapid Public Health Needs Assessments must include the four (4) required elements described in the Rapid Public Health Needs Assessment Tool (OLPH will provide the updated Rapid Public Health Needs Assessment Tool at the start of the grant).</i></p>	First Quarter
		<p>b) Present results of the rapid public health needs assessment/or rapid public health needs assessment update, including metrics regarding populations disproportionately affected by COVID-19 and other infectious diseases in the grantee's community, to the LHD Health Officer and governing body; and</p>	First Quarter
		<p>c) Oversee development/update of a plan for outreach, prevention, partnerships with community stakeholders, testing, contact tracing, containment, quarantine, and support services for populations disproportionately affected by COVID-19 and other infectious diseases.</p>	First Quarter

Item #	Suggested Person Responsible	Deliverable	Due Date
5	Local Health Outreach Coordinator Infectious Disease Preparedness Generalist	The Grantee shall report to NJDOH (through the Quarterly Progress Report) and the County LINCS Health Officer the findings of the Rapid Public Health Needs Assessment and plan for testing, contact tracing, and linkage to social supports and primary care within populations disproportionately affected by COVID-19 and other infectious diseases.	First Quarter
6	Local Health Outreach Coordinator	a) The Grantee shall identify/update/maintain an inventory of local solutions to address identified social support and primary care needs for persons exposed/positive with COVID-19/other infectious diseases within the local jurisdiction.	Quarterly
		b) Grantee shall share the inventory with County LINCS Social Support Coordinator and report changes to the inventory.	Quarterly
7	Local Health Outreach Coordinator	The Grantee shall build/update/maintain an email distribution list that enables the LHD to disseminate information rapidly to community partners that support populations disproportionately affected by COVID-19 and other infectious diseases.	Weekly
8	Local Health Outreach Coordinator	The Grantee shall ensure appropriate linkages to social supports and primary care are made for persons exposed/positive with COVID-19 and other infectious diseases.	Weekly
9	Local Health Outreach Coordinator	a) Grantee shall distribute prevention, testing, contact tracing, and social support messaging to populations identified as disproportionately affected by COVID-19 and other infectious diseases within local jurisdiction and community partners who support these populations.	Weekly
		b) Grantee shall maintain evidence of messaging and make it available to NJDOH upon request.	Weekly
10	Local Health Outreach Coordinator Infectious Disease Preparedness Generalist	a) The Grantee shall convene and/or participate in monthly meetings with local stakeholders (including but not limited to FQHCs, non-governmental organizations, faith-based organizations, community advocates) who support populations identified as disproportionately affected by COVID-19 and other infectious diseases in LHD jurisdiction or as part of a county-based strategy.	Monthly
		b) Grantee will maintain meeting records: agendas/attendee records in their files and will make available to NJDOH upon request.	Monthly
11	Local Health Outreach Coordinator Infectious Disease Preparedness Generalist	The Grantee shall participate in monthly NJDOH Strengthening Grantee technical assistance webinars, conducted in partnership with Rutgers University School of Public Health, to receive training on assisting populations identified as disproportionately affected by COVID-19 and other infectious diseases, share progress, best practices, and find pathways to align initiatives. Note: If grant staff are unable to attend the webinars due to a scheduling conflict, they <i>must</i> listen to the webinar recording(s).	Monthly

Item #	Suggested Person Responsible	Deliverable	Due Date
12	Local Health Outreach Coordinator	The Grantee shall provide to the County LINCS agency and NJDOH <i>upon request</i> (sometimes weekly depending on the needs during COVID-19 and other infectious disease outbreaks) data regarding testing, contact tracing, isolation and quarantine, and the number of referrals for identified social support and primary care needs within populations disproportionately affected by COVID-19 and other infectious diseases.	Weekly (<i>upon request by the LINCS Agency and/or NJDOH</i>)
13	Local Health Outreach Coordinator	The Grantee shall provide outreach assistance to populations disproportionately affected by COVID-19 and other infectious diseases including health and social support information, prevention information, testing information, and contact tracing information at sites in the community, including but not limited to, testing centers, vaccination clinics/sites, community centers, faith-based organizations, and other community locations.	Weekly
14	Infectious Disease Preparedness Generalist	The Infectious Disease Preparedness Generalist shall meet monthly (or more frequently) with the Health Officer/LHD Staff to identify COVID-19 and other infectious diseases-related work assignments. Work assignments may include, but are not limited to, outreach to populations disproportionately affected by COVID-19 and other infectious diseases, POD planning, logistics, testing, contact tracing, and resolving laboratory reporting issues within the jurisdiction, and other COVID-19 and other infectious disease-related activities.	Monthly
15	Infectious Disease Preparedness Generalist	The Infectious Disease Preparedness Generalist shall assist with COVID-19 and other infectious diseases work assignments including, but not limited to, outreach to populations disproportionately affected by COVID-19 and other infectious diseases, POD planning, logistics, testing, contact tracing, and resolving laboratory reporting issues within the jurisdiction, and other COVID-19/other infectious disease-related activities at the LHD and sites in the community (including but not limited to, testing centers, vaccination clinics/sites, community centers, houses of worship, and other community locations).	Weekly
16	Infectious Disease Preparedness Generalist	a) The Infectious Disease Preparedness Generalist shall prepare a monthly report describing work accomplished on COVID-19/other infectious disease work assignments including, but not limited to, outreach to populations disproportionately affected by COVID-19 and other infectious diseases, POD planning, logistics, testing, contact tracing, and resolving laboratory reporting issues within the jurisdiction, and other COVID-19/other infectious disease-related activities.	Monthly
		b) Grantee will maintain monthly accomplishments reports in their files.	Monthly
		c) Grantee will provide a summary of Infectious Disease Preparedness Generalist work assignment accomplishments in the quarterly grant reports.	Monthly

***These are *DRAFT* Grant Deliverables and may be modified by OLPH.
Final deliverables to be included in Attachment C.**

Strengthening Local Public Health Capacity 2023
COVID-19/Other Infectious Disease Capacity-Building Eligible Expenses

Note: Reimbursement of clinical care (nurses giving shots and post-vaccination observation) is **not** allowed under the Strengthening Local Public Health Capacity ELC Local Health Outreach Coordinator (LHOC), or Infectious Disease Preparedness Generalist (IDPG) as determined by the US Department of Health and Human Services.

Note: For reimbursement of wages/overtime, the work location of these LHD staff can be at the Vaccination Clinic, POD, or other Vaccination locations, however, nurses giving shots and post-vaccination observation are **not** allowed under the LHOC or IDPG portions of the grant.

Note: Reimbursement of Wages/Overtime/Comp Time/Fringe Benefits is allowed for vaccination support (*excluding nurses giving shots and post-vaccination observation*), case investigation, contact tracing, biosurveillance, data management, emergency management coordination, COVID-19, and other infectious diseases Call Center Support, data entry into the New Jersey Immunization Information System (NJIS), CDC Vaccine Administration Management System (VAMS), and NJ Vaccine Scheduling System (NJVSS), and other information management systems as related to assisting populations disproportionately affected by COVID-19 and other infectious diseases.

Salary Related Eligible Expenses

- **Wages**
 - Staff overtime (not covered by any other grant/source) for case investigation, contact tracing, biosurveillance, vaccination, data management, and emergency management coordination
 - Hours worked by part-time staff above pre-COVID-19 levels
 - Hours worked by part-time or full-time staff hired specifically for COVID-19/other infectious diseases
 - Expanded salary of existing LHD staff during COVID-19 (i.e. existing LHD staff went from part-time to full-time during COVID-19). The extra hours worked, including overtime during COVID-19 beyond the staff's pre-COVID part-time hours, are allowable
 - Hiring an REHS, CHES, or other LHD staff, to do community outreach for COVID-19/other infectious diseases
 - Health Officer Salary (**maximum of 10% of the health officer's total annual salary**) is allowable under the grant). Health Officer Salary/OT/Comp Time/Stipend must be listed on Schedule A with the Health Officer name and Annual Salary to be eligible for reimbursement.
- **Comp Time/Overtime**
 - Reimbursement of COVID-19/other infectious diseases Comp Time/Overtime (OT) is allowed at a maximum of 10% of the LHD staff's total annual salary. OT must be listed on Schedule A with the staff names and Annual Salary to be eligible for reimbursement.
 - In other words, you may pay the employee at their regular rate instead of providing comp time and then submit for reimbursement through the grant.
- **Fringe Benefits**
 - Fringe benefits are reimbursable; however, you must provide Proof of Fringe Rate for the jurisdiction. It needs to be an official document indicating the fringe rate, which you can get from your town/county/business administration office.

Other COVID-19/Other infectious diseases Eligible Expenses

- **Advertising**
 - Website, radio, television, print, social media advertising to disseminate COVID-19/other infectious disease information and support testing and vaccination efforts
- **Air Purifiers/Filters**
 - Air Purifiers (portable)
 - Air Purifier Filters
 - Air Conditioner Filters
- **Data Management**
 - Electronic Medical Records System & Server
 - Electronic Vaccine Scheduling System
 - Hardware for Laptops/PCs
 - IT Setup/configuration of network/software/ hardware
 - Laptops/Tablets for contact tracers, local health department data management- **\$2,000 max per computer/laptop**
 - Memory Upgrade for Computers/Servers
 - MiFi wireless internet devices
 - Mobile phones
 - PCs for LHD offices
 - Printers, printer toner
 - Software (1-year allowable max.)
 - Rolling laptop cases/backpacks
 - Secure/encrypted messaging capability (i.e. Zix messages, etc.)
 - USB Storage Drives/Data Sticks
 - Wi-Fi system - Equipment/Installation
- **Engineered Methods for COVID-19/Other Infectious Disease Infection Prevention**
 - Installation of furniture in public spaces that is easily cleanable (i.e. plastic and not fabric)
 - Installation of plexiglass shields in customer service areas to prevent the spread of COVID-19/other infectious diseases
 - Improving ventilation in areas where the LHD and public are interfacing
- **Food Support/Food Pantry Support**
 - We allow *limited* food support under this grant.
 - The provision of food can be limited to emergency food provided at a food pantry or to persons that need to isolate/quarantine until they can receive further support/assistance from social services agencies/community agencies.
 - Under Schedule B-Other Direct Costs, a Professional Service Agreement with a food vendor will be *required* as we cannot provide direct food support to persons under this grant.
 - The Professional Service Agreement with a Vendor for food assistance and the amount must be pre-approved by the PMO and the GMO if not in the original approved budget. This also applies to food to be provided at food pantries.
 - The Professional Services Agreement Document can be uploaded into the Shared Documents section of your application in SAGE. We cannot process payments until the PSA/MOU/MOA is signed and uploaded into SAGE.
- **Food Vendors for Vaccination Events/Outreach**
 - Food vendor/food truck (professional services agreement/quote) to provide light refreshments (i.e. ice cream, popsicles,) at vaccination events to boost vaccination rates.
 - The Professional Service Agreement with a Food Vendor and the amount must be pre-approved by the PMO and the GMO if not in the original approved budget.
 - The Professional Services Agreement Document can be uploaded into the Shared Documents section of your application in SAGE. We cannot process payments until the PSA/MOU/MOA is signed and uploaded into SAGE.

- **Generator (backup power)**
 - Generator to provide emergency backup power to Vaccine Refrigerator/Freezer.

- **Hotel Lodging /Housing Expenses/Sheltering for Isolation and Quarantine Support**
 - This grant covers hotel stays/housing expenses/sheltering expenses for isolation and quarantine to prevent the spread of COVID-19/other infectious diseases to other members of a person’s household or the community.
 - A Professional Services Agreement (PSA)/Memorandum of Agreement (MOA) is **required** for the provision of hotel lodging/housing expenses/shelter expenses directly related to isolation and quarantine support for the LHD.
 - The PSA/MOA with a Vendor/Agency for hotel lodging/housing expenses/sheltering expenses and the amount must be **pre-approved** by the PMO and the GMO if not in the original approved budget.
 - The **signed** Professional Service Agreement document is to be uploaded into the Shared Documents section of your application in SAGE **before** the start of any service. We cannot process payments until the PSA/MOU/MOA is signed and uploaded into SAGE.
 - A Budget Revision is also required to add Isolation and Quarantine Expenses to the Grant.

- **Kiosk** - must be ADA compliant/accessible to all persons including those with mobility (can use while sitting in wheelchair), hearing (can raise volume), visual accommodations

- **Language Line**
 - Language line services to support LHD’s communication with New Jersey’s diverse populations and provide Culturally Linguistic Appropriate Services (CLAS) during COVID-19 and for response to other infectious diseases

- **Personal Protective Equipment (PPE)/Other Supplies**

<ul style="list-style-type: none"> ○ Aprons ○ Face Shields ○ Gloves ○ Goggles 	<ul style="list-style-type: none"> ○ Gowns ○ Hand Sanitizer ○ Masks-Cloth ○ Masks-N95
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- **Photography/Videography**
 - Photographer or videographer providing services for vaccination event promotion or publicity

- **Printed materials and printed signage**

- **Promotional Items under OP**

<ul style="list-style-type: none"> ○ Stickers ○ Pencils ○ Pens ○ Hand Sanitizer 	<ul style="list-style-type: none"> ○ Magnets ○ Mini flashlights ○ Stress balls ○ Similar items of <i>low dollar value</i>
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- **Signage Equipment - Electronic**
 - LED Sign to disseminate information, alerts, warnings, and notifications about risks and self-protective measures to the public, particularly to populations disproportionately affected by COVID-19/other infectious diseases.

- **Temperature Sensing Equipment**
 - Mobile infrared thermal imaging machine/temperature sensing equipment installed at LHD and/or municipal bldg.
 - Thermometers (no-touch)

- **Testing Site Support**
 - COVID-19 viral and antibody testing site support services such as facility maintenance, electronic signage maintenance, and testing site tents
 - Food/Snacks/Water
 - Food/Snacks/Water for LHD staff working at testing sites or doing community outreach activities
 - Water for residents waiting in line to be tested or something similar
 - Homelessness testing site support
 - Table and chairs rental
 - Portable toilet rental

- **Training**
 - Training is not allowed under LHOC or IDPG. Training will be considered only under OP. LHDs requesting training must submit an OLPH Training Request **60 days in advance** of the training for pre-approval. Hotel stays in New Jersey are not allowed as part of training.

- **Transportation to Clinic/Testing**
 - Clinic transportation driver. Salary must be on Schedule A or a ***signed*** Professional Services Agreement established on Schedule B.

- **Vaccination Support (only allowed under OP)**
 - Bandages (i.e. Band-aids)
 - Epinephrine (Epi-Pens)
 - Food/Snacks/water for clinic workers and workers doing outreach
 - Hand sanitizers for everyone receiving a vaccination (for individual use only)
 - Laptops with Internet Capability to track administration of vaccine through NJIS and the CDC Vaccine Administration Management System (VAMS)
 - Medical Director Services (to be provided by the LHD) to sign the CDC Vaccination Agreement
 - Medical Waste Removal/Disposal - Sharps Containers
 - Pens for everyone receiving a vaccination (for individual use only)
 - Personal Protective Equipment
 - Aprons
 - Face Shields
 - Gloves
 - Goggles
 - Gowns
 - Hand Sanitizer
 - Masks-Cloth
 - Masks-N95
 - Portable Toilet Rental
 - Rolling Nursing Carts
 - Sharps containers
 - Signage for Vaccination Site
 - Stickers/Magnets (i.e. *Got my shot*)
 - Syringes/Needles - *Adult & Pediatric*
 - Table and Chairs Rental for clinics or vaccination outreach events
 - Traffic Cones- You may purchase cones for the site as part of your clinic supplies.
 - Vaccine Refrigerators/Vaccine Cooling for vaccine-specific cold chain management
 - Other Items to support mass vaccination

- **Other COVID-19/Other Infectious Disease Expenses**
 - May be submitted for consideration

APPENDIX 3

Strengthening Local Public Health Capacity 2023

FUNDING EXCLUSIONS

ALL FUNDING SOURCES (LHOC, IDPG, OP)

- Cleaning/Disinfection Services (Professional) at public facilities
- Clothing
- Construction or major renovations
- Extermination/Pest control
- Gift Cards/Store Vouchers/Store Coupons - not allowed (may use a vendor to provide the service)
- Hoarding-Related Assistance/Training
- Laptops/PCs >\$2,000 - PCs/laptops allowed at \$2,000 max each. Laptops/PCs over \$2,000 are not allowed
- Police costs/salaries are not permitted under this grant-only Local Health Department salaries are permitted
- Printing >\$5,000 reviewed on a case-by-case basis
- Professional Certifications/Licenses (i.e. CHES, RN, REHS, HO).
- Rental Assistance- The request for Rental Assistance is not allowable. Municipalities and County Social Service Agencies have received various funds for emergency rental assistance (i.e. CDBG). In New Jersey, there are moratoriums on evictions, and the above agencies can provide the details on start/end dates for moratoriums and rent relief during COVID-19 for both renters and landlords.
- Stipends/Overtime/Staff/Health Officer Salary-There is a limit of 10% cap max. of Staff / Health Officer Annual Salary for Overtime/ Comp Time/ Stipends for this grant.
- Vehicle Leasing or Purchasing

Infectious Disease Preparedness Generalist (IDPG)

- Equipment and supplies that support the IDPG staff (i.e. desk, laptop, mobile phone, MiFi, etc.) are allowed.
- Any other Direct Costs expenses are not allowed.

Local Health Outreach Coordination (LHOC)

- Clinical care- (allowable under OP - State funds)
- Epi-Pens (allowable under OP - State funds)
- Medical/Clinical supplies i.e. bandaids, needles, medications, etc. (allowable under OP - State funds)
- Nurses putting shots in arms- (allowable under OP - State funds)
- Nursing Post-Vaccination Observation - (allowable under OP - State funds)
- Training is not allowed under the ELC funding (IDPG or LHOC) - (allowable under OP - State funds)
- Travel to National Conferences is not allowed under the ELC funding (IDPG or LHOC) - (allowable under OP - State funds)