

**ANNE ARUNDEL COUNTY DEPARTMENT OF HEALTH**  
**OFFICE OF HEALTH EQUITY AND RACIAL JUSTICE**  
**HEALTH AMBASSADOR PROJECT**  
**REQUEST FOR APPLICATIONS (RFA)**  
**FISCAL YEAR 2021**

The Anne Arundel County Department of Health (AACDOH) is issuing this RFA to fund community organizations to engage with disproportionately impacted communities to increase vaccination rates.

**BACKGROUND**

Anne Arundel County's goal is to equitably and efficiently provide the COVID-19 vaccine to everyone who lives and works here. The COVID-19 vaccines are safe, effective and our path out of the pandemic. Getting everyone vaccinated will save lives, allow us to fully reopen schools and get businesses back on track.

The County and the State have both made equity in vaccination a priority. This is critical because in our county, and across the country, COVID-19 has had disproportionate impacts on specific populations based on race, ethnicity, income and age. Data for our county shows:

- Some racial and ethnic minorities have disproportionately higher rates of COVID 19 compared to White residents
  - Blacks are 1.4 times more likely to get COVID-19.
  - Hispanics are 2.4 times more likely to get COVID-19.
- Blacks in the county are 1.3 times more likely to die from COVID-19.
- People aged 65 and older of all races and ethnicities account for over 85% of all COVID-19 deaths but only 12% of all cases.
- Vaccination rates are lower for Blacks and Hispanics despite the disproportionate impact COVID-19 has had on these communities.
- Vaccination rates are lower in communities where the average income is below the poverty line.

Through the COVID-19 Health Equity Initiative, we have heard from many residents about the barriers to equitable vaccination for minority communities and older adults. Repairing trust and addressing structural racism are the foundation of our approach. To address these inequities, Anne Arundel County Department of Health is offering a total of \$500,000 in grant funding to ensure equitable access to the COVID-19 vaccine.

Individual grants up to **\$100,000** will be awarded for the time period of May 1, 2021 to July 30, 2021 (twelve weeks) to eligible community organizations that submit a completed application, work plan and evidence of good tax standing.

## **SCOPE OF WORK**

The Department of Health has identified select census tracts within the county with disproportionately lower rates of COVID-19 vaccinations. Census tracts with rates less than 47 per 100,000 will be targeted for direct outreach. Approximately 258,000 residents live within these census tracts. Community organizations will hire staff to canvas communities in specific census tracts to distribute print materials as well as engage with residents utilizing culturally competent and tailored materials. The County will be divided into five (5) separate geographic areas: Northern, Western, Central, Southern, and Annapolis City. Community organizations shall propose, within their grant application, the geographical area(s) to be covered.

Community organizations will hire staff to effectively engage impacted residents in select census tracts for the 12 week period. Teams of two (2) can reach 600-700 residents per week; and one (1) supervisor can manage 5 teams of 2.

Suggested pay rates:

Health Ambassador: \$20 per hour  
Supervisor: \$25 per hour.

## **ELIGIBILITY**

To apply for the Health Ambassador Project grant, an organization must:

- Be located within Anne Arundel County.
- Be in good standing with the Maryland Department of Assessment and Taxation, the Office of the Secretary of State's Charitable and Legal Services Division (if applicable), the Anne Arundel County Department of Inspections and Permits and all other applicable Federal, State and local requirements.
- Maintain a minimum of \$1,000,000 per incident and \$3,000,000 aggregate professional liability insurance protection.

## **CONTACT**

**For more information contact:**

Krystle Coldiron, MPH  
Director, Office of Assessment and Planning  
Anne Arundel County Department of Health  
3 Harry S. Truman Parkway  
Annapolis, MD 21401  
443-795-1683  
[hdcold11@aacounty.org](mailto:hdcold11@aacounty.org)

## **GENERAL INFORMATION**

The organization or service provider (herewith known as Grantee) wishing to apply must:

- Meet the eligibility requirements listed above.
- Submit an application and work plan (***Attachments 3 and 4***).
- Designate one person to be the liaison with AACDOH to provide information pertaining to reporting, budget monitoring and evaluating the services provided.
- Commit to meet monthly, by phone, virtual or in-person, with the Anne Arundel County Department of Health's Office of Assessment and Planning staff to discuss operations and any concerns and/or needs.
- Commit to providing culturally competent education and information.

## **ANNE ARUNDEL COUNTY DEPARTMENT OF HEALTH RESPONSIBILITIES:**

1. Develop grant objectives, performance measures and budget and provide grant agreement. Upon approval and signature of the Grantee, the grant agreement will be submitted for fiscal process.
2. Provide technical assistance during the application process as requested.
3. Support partners during the COVID-19 pandemic by providing sound information about the virus and guidance for accomplishing safe community outreach.
4. Provide consultation and guidance to Grantee and review activities to confirm fidelity of work.
5. Provide demographic information for each quadrant and City showing areas impacted by poverty using census tracts and zip code data.
6. Provide all print educational and informational materials and other miscellaneous items for distribution.
7. Provide written tools needed for directing residents to health care resources e.g. WIC, free cancer screenings, quit smoking resources, etc.
8. Update information or strategies as needed, upon deliberation with the Grantee.
9. Review bi-monthly reports and monitor grant activities for compliance with the grant agreement.
10. Review, approve and submit completed written invoices to AACDOH Finance office for payment. Checks will be mailed to address provided on the W-9 tax form unless other arrangements are requested. Process all invoices for payment within 30 days of receipt.

## **GRANTEE REQUIREMENTS**

1. Sign and return grant agreement between the AACDOH and Grantee.
2. Must be in good standing with the Maryland Department of Assessments and Taxation to be considered for funding.
3. Develop a work plan and include in the grant application (attachment 4).
4. Hire teams to conduct canvassing within targeted areas.
5. Grantee will notify the DOH in advance of unusual, unexpected or holiday/vacation related office closings.
6. Consult with the Office of Assessment and Planning staff to review planned activities in advance through the monthly report form or by email.
7. Ensure a tobacco-free / smoke free work environment. Consider adopting a no tobacco use policy, including electronic smoking devices, since such policies hold great potential for reducing exposure to secondhand smoke, promoting non smoking norms, and providing additional motivation for residents to quit smoking.

## **ORGANIZATIONAL REQUIREMENTS**

The organization must provide community engagement services at least 5 days a week. Normal operating hours must be, at minimum from 9:00 a.m. until 5:00 p.m. Preference will be given to those organizations that can commit to providing engagement during evening and weekend hours.

Preference will be given to an organization that is:

- Conducts community engagement activities 6 or more days per week.
- Offers extended operating hours.
- Employs bi-lingual and minority staff.

## **MINIMUM REQUIREMENTS FOR SERVICES AND PROGRAMS**

1. The Grantee will identify and describe a process to ensure residents in impacted communities are visited by Health Ambassadors in order to distribute information and education about COVID-19 virus and vaccine.
2. The Grantee will engage in a culturally competent nonjudgmental manner at all times in the community.

## **REPORTING REQUIREMENTS AND DOCUMENTATION**

The Grantee must submit the following to the AACDOH:

- For the 12 week funding period: Monthly reports due by the 5<sup>th</sup> of the next month (May 5, June 5, July 5, 2021).
- Submit reports to the AACDOH's Grant Monitor.
- Invoice containing details of charges associated with activities. Receipts and/or invoices must be submitted for all charges. As a tax-exempt entity, the AACDOH will not reimburse any sales tax paid by the Grantee.
- All funds must be expended by September 30, 2021 or they will be liquidated.
- Record of all employee timesheets must be submitted monthly.
- The Maryland Department of Health requires local health department subvendors to provide an Annual Report (MDH 440) at the close of each fiscal year. Grantee will be required to sign the form and return to the AACDOH.
- Sub-grantee is responsible for providing a copy of their Single Audit Report for the respective fiscal year if they expend more than \$750,000 in federal funds. Sub-recipient is responsible for providing a copy of the annual report if more than \$100,000 in Maryland Department of Health (MDH) funds is received for a cost reimbursement contract/agreement for the fiscal year. Not meeting criteria requires the sub-grantee to submit an attestation signed by an authorized agency official that the agency does not need a Single Audit or an MDH Human Services Sub-vendor Audit.
- Expenditure requirements and restrictions.
  - Receipts and/or invoices must be submitted for all items purchased.
  - Snacks may be provided for staff working in the field. All food must be provided in factory prepared individual-sized packaging and should follow health department guidelines for healthy food suggestions.
  - Educational supplies must be pre-approved by the AACDOH.
  - Travel costs must be detailed by rate per mile, number of drivers, gas cards and/or driver stipends. Rate per mile may not exceed \$0.56 per mile.
  - Indirect costs may not exceed 7% of total award. Provide an explanation of costs.

## **AGREEMENT AND TERMINATION FOR NON-PERFORMANCE**

The Grantee shall enter into an Agreement with AACDOH. Any Agreement resulting from this RFA may be terminated by either AACDOH or the Grantee by giving thirty (30) days written notice to the other party.

If the Grantee shall fail to fulfill in a timely and proper manner its obligations under the Agreement, or if the Grantee shall violate any terms of the Agreement, within the sole discretion of AACDOH, the AACDOH may immediately terminate the Agreement by giving written notice to the Grantee.

## **INVOICING**

Grantee will submit an invoice within ten (10) days after the end of the month. Bills submitted more than three (3) months in arrears will not be considered for payment. Grantee will submit all monthly bills to:

Anne Arundel County Department of Health  
Attn: Bureau of Disease Prevention and Management  
Attn: Leanne Lorraine  
1 Harry S. Truman Pkwy, Suite 200  
Annapolis, MD 21401

The Grantee will submit timekeeping records to ensure accurate invoicing.

Grantee shall be compensated under Federal Identification Number 52-6000878 not to exceed a total of \$100,000 during this contract period.

Advancing funds to Grantees: Up to 25% of the total grant may be advanced as requested.

## **REVIEW PROCESS**

A panel of reviewers will conduct the application review process using the attached rating scale (***Attachment 2***). The decision to award a grant will be based on the merits

of the application. The decision of the reviewers will be final. Applications will be examined for:

1. Organizational Capacity (30 points)
2. Approach to Service Delivery (30 points)
3. Implementation & Operations Strategy (30 points)
4. Appendices/Documentation (10 points)

### **APPLICATION DEADLINE**

Five (5) copies of the application for the Health Ambassador Project grant must be mailed or hand-delivered to Krystle Coldiron, Anne Arundel County Department of Health, 3 Harry S. Truman Parkway, Annapolis, Maryland 21401 by **April 15, 2021**. Applications received after **04:00 PM** on **04/15/2021** will not be considered for review. Faxed applications will not be accepted.

### **HEALTH AMBASSADOR GRANT APPLICATION TIMELINE**

<b><u>STEPS TO COMPLETION</u></b>	<b><u>COMPLETION DATE</u></b>
Advertise/E-mail	April 1, 2021
Pre-Bid Conference	April 9, 2021
<b>Application Submission Deadline</b>	<b>April 15, 2021</b>
<b>Delivered to:</b> <b>Anne Arundel County Department of Health</b> <b>Attn: Krystle Coldiron</b> <b>3 Harry S. Truman Parkway</b> <b>Annapolis, MD 21041</b>	
Review Committee	April 20, 2021
Letters of Award mailed	April 23, 2021

**ANNE ARUNDEL COUNTY DEPARTMENT OF HEALTH  
HEALTH AMBASSADOR GRANT APPLICATION**

Fiscal Year 2021 Health Ambassador grant applications must be typed in English single-spaced on 8½” by 11” paper and include page numbers. Applications must not exceed five (5) pages, excluding appendices, and should include four (4) labeled sections as identified under Review Process of this document. Five (5) copies should be submitted. Applications MUST follow the format below.

**1.) COVER PAGE (See Attachment 3)**

**2.) ABSTRACT/SUMMARY PAGE**

The abstract provides a brief overview of the entire contract for services. It provides information, which enables the reader to quickly identify the overall goal. The abstract should not exceed one page in length and should include:

- Name of applicant organization.
- Type of organization.
- Organization description.
- Location of facility.

**3.) ORGANIZATION DESCRIPTION**

- Summary of relevant experience.
- Brief overview of the applicant organization and previous work or capabilities with the targeted population.
- Organizational Structure, including how the proposed grant work would fit into existing structure.
- Staffing.

**4.) APPROACH TO SERVICE DELIVERY**

- Applicant's philosophy of health equity and equitable access to COVID-19 vaccine.
- Understanding of coronaviruses, COVID-19 and COVID-19 vaccine.
- Importance of providing reputable vaccine information and education.

## **5.) IMPLEMENTATION AND OPERATIONS STRATEGY**

- **Completion of Work Plan (attachment 4)**
  
- **Commitment and plan to adhere to the May 1, 2021 deadline for service implementation.**
  - Hiring and staffing plan.
  - Plan of action that describes how community engagement services will be delivered.
  - Plan on how documentation will be completed and sent to AACDOH.

## **6.) APPENDICIES**

The appendices should include:

- Proof of nonprofit status, if applicable.
- Resumes and license verifications for key staff and consultants.
- Proof of liability insurance.
- Proof of good standing with the Maryland Department of Assessments and Taxation.
- Proof of good standing with the Maryland Department of Charitable Organizations, if applicable.

Do not enclose any photographs, exhibits or other materials that you want returned. Anne Arundel County Department of Health cannot be responsible for these materials. All materials submitted under the application become the property of the Office of Planning and Assessment. All applications must follow the format described above.

**HEALTH AMBASSADOR GRANT RATING SHEET**

- 1.) **COVER PAGE Score \_\_\_\_\_** i) Cover page signed by authorized official. (0-30 TOTAL)
  
- 2.) **ABSTRACT/SUMMARY PAGE**
  - i) Organization name, type, location, organization description, etc.
  
- 3.) **ORGANIZATION DESCRIPTION**
  - i) Summary of Relevant Experience.
  - ii) Brief overview of the applicant organization and previous work or capabilities with the targeted population.
  - iii) Organizational Structure, including how the community engagement services would fit into existing structure.
  - iv) Staffing.
  
- 4.) **APPROACH TO SERVICE DELIVERY Score \_\_\_\_\_** i) Philosophy on health equity and access. (0-30 TOTAL) ii) Understanding of coronaviruses, COVID-19 and COVID-19 vaccine. iii) Importance of providing reputable vaccine information and education in a culturally competent manner.
  
- 5.) **IMPLEMENTATION AND OPERATIONS STRATEGY Score \_\_\_\_\_** (0-30 TOTAL)
  - i) Importance of ensuring health equity for access to COVID-19 vaccines.
  - ii) Ability to meet July 30, 2021 deadline.
  - iii) Clear and concise work plan that describes community engagement plan.
  - iv) Provide estimated budget.
  - v) Plan on how documentation will be completed and sent to AACDOH.
  
- 6.) **APPENDICIES Score \_\_\_\_\_** i) Copy of 501C(3) status. (0-10 TOTAL) ii) Resumes and license verifications for key staff and consultants. iii) Copy of liability insurance.
  - iv) Proof of good standing with Maryland Department of Assessments and

Taxation.  
v) Proof of good standing with Maryland Department of Charitable Organizations.

Total score \_\_\_\_\_

**Note: Please highlight each item in each category that is provided and rate final points on line item. Minimum of 75 total points to qualify**

*Attachment 3*

**FY 2021 ANNE ARUNDEL COUNTY HEALTH AMBASSADOR  
GRANT APPLICATION COVER PAGE**

ORGANIZATION \_\_\_\_\_

CONTACT PERSON

(1) \_\_\_\_\_ TITLE \_\_\_\_\_

CONTACT PERSON

(2) \_\_\_\_\_ TITLE \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY, STATE, ZIP \_\_\_\_\_

PHONE NUMBER \_\_\_\_\_ FAX \_\_\_\_\_

E-MAIL ADDRESS \_\_\_\_\_

IS YOUR ORGANIZATION COMMUNITY-BASED? YES NO DOES YOUR ORGANIZATION HAVE NONPROFIT STATUS? YES NO DATE OF NONPROFIT STATUS \_\_\_\_\_

FEDERAL IDENTIFICATION NUMBER \_\_\_\_\_

I DO SOLEMNLY DECLARE AND AFFIRM THAT THE CONTENTS OF THIS APPLICATION ARE TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE, INFORMATION, AND BELIEF.

PRINTED NAME \_\_\_\_\_

TITLE \_\_\_\_\_

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

*Attachment 4*

### **Action Plan**

#### **FY 2021 HEALTH AMBASSADOR PROJECT Anne Arundel County Department of Health Office of Assessment and Planning**

**Instructions:** Email the completed action plan with the grant application to:  
[HealthAmbassadorProject@aacounty.org](mailto:HealthAmbassadorProject@aacounty.org)

**Complete the following information:**

**Organization Name:**

**Mailing Address:**

**Contact Person/Grant Monitor:**

**Phone Number:**

**Fax Number:**

**Email Address:**

**Name & Title of Person Signing Grant Agreement:**

The purpose of this grant is for \_\_\_\_\_ to engage with disproportionately impacted communities to increase vaccination rates

#### **WORK PLAN:**

Answer the following work plan questions for community engagement. Use your answers to help guide your action plan activities, strategies and timeline. Be specific.

1. Where are you currently implementing community program(s)? (Example: Location name & area of the county.)
2. How often do you conduct community program(s)? (tentative dates or timeline)

3. Identify partnering organization(s) or agencies (other than the Anne Arundel County Department of Health), and explain their role in the program.
4. How will your organization conduct community engagement to ensure all impacted communities are reached?
5. How will your organization conduct community engagement activities while adhering to safe COVID19 social distancing guidelines?
6. What specific challenges do you face this year, as you alter the way in which you conduct your activities? (For example, technology, engagement of community, etc.)
7. How will you reach out to and encourage the community to participate in your program?
8. What assistance do you need from the AACDOH/CE in order to successfully implement your activities?

**Performance Measures for Community Engagement**

Provide an estimate for each performance measure listed that your organization will be able to accomplish from May 1, 2021 to July 30, 2021 (twelve weeks)

<b>Performance Measure/Evaluation</b>	<b>Estimate</b>
Total number of households visited	
Total number of adults educated	
Number of PPE/masks provided	
Number of people served in zipcodes most impacted by COVID (Laurel - 20724, Annapolis - 21403, Annapolis - 21401, Lothian - 20711, Glen Burnie - 21061, Hanover - 21076)	
Number of African American or Black community members served	
Number of Hispanic/Latino community members served	

**Evaluation through Monitoring, Tracking and Reporting**

1. DOH staff will provide on-going technical assistance during the implementation of the program.
2. DOH staff will regularly monitor the implementation and fidelity of the program.
3. Monthly reports and budgets will be reviewed and monitored.
4. Entry and Exit Survey will be used to measure the level of effectiveness of the program.

**Expenditure Request for Community Engagement**

Provide an estimated budget breakdown for each proposed line item.

**Staffing:**

**Travel:**

**Technology:**

**Educational Supplies and Other Supplies:**

**Other Expenses:**

**Indirect Costs:**