



# **Groundwater Protection Initiative (2025)**

# ACCELERATED IMPLEMENTATION GRANT REQUEST FOR PROPOSAL (RFP)

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To obtain this information in a different format, call: 651-201-4695.

# Contents

Ground	lwater Protection Initiative (2024)	i
RFP Par	rt 1: Overview	1
1.1	General Information	1
1.2	Program Description	1
1.3	Funding and Project Dates	1
1.4	Eligible Applicants	2
1.5	Questions	2
RFP Par	rt 2: Program Details	3
2.1	Priorities	3
2.2 P	Projects	3
2.3	Grant Management Responsibilities	4
2.3	Grant Provisions	5
2.4	Review and Selection Process	9
RFP Par	rt 3: Application and Submission Instructions	10
3.1	Application Deadline	10
3.2	Application Submission Instructions	10
3.3	Application Instructions	10
RFP Par	rt 4: Attachments	11

# **RFP Part 1: Overview**

# 1.1 General Information

- **Announcement Title:** Groundwater Protection Initiative (2025) Accelerated Implementation Grant
- Minnesota Department of Health (MDH) Program Website: <u>https://www.health.state.mn.us/communities/environment/water/groundwater/accimpgrant.html</u>
- **Application Deadline:** Application Deadline: March 14, 2025, by 2:00 p.m. Central Time
- Application Walkthrough and Open Call for Questions Teams Webinar: 10:00 11:00 a.m. Central Standard Time, Tuesday, February 25 25, 2025, to attend the webinar, click the following link.
  - Attend the 2025 Call for Questions.

To view the application, go to the Minnesota Department of Health program page:

<u>Groundwater Restoration and Protection Strategies (GRAPS)</u> (https://www.health.state.mn.us/communities/environment/water/cwf/localimplem.html)

or

<u>Drinking Water Grants and Loans</u> (https://www.health.state.mn.us/communities/environment/water/grants.html)

# 1.2 Program Description

The Minnesota Department of Health (MDH) received funding from the Clean Water Fund to advance Groundwater Restoration and Protection Strategies (GRAPS). A portion of this funding is being offered as grants to build capacity to accelerate implementation of groundwater projects across the state. Each applicant will have the opportunity to apply for up to \$50,000 to conduct pre- project identification, planning and design work that is required before on-the-ground projects can be implemented. Whether it is conducting inventories of potential pollutant sites, utilizing existing targeting tools and datasets, providing technical assistance, or increasing citizen interactions, these grants equip local governments with the capacity to increase the installation and/or management of groundwater projects and practices that protect groundwater. This grant cannot be used for project implementation or mitigation purposes.

# 1.3 Funding and Project Dates

# Funding

Funding will be allocated through a competitive process. If selected, you may only incur eligible expenditures when the grant agreement is fully executed.

Funding	Estimate
Estimated Amount to Grant	\$250,000 available for RFP
Maximum Award	\$50,000
Minimum Award	\$10,000

# **Match Requirement**

There are no match requirements.

# **Project Dates**

The estimated grant start date is May 1, 2025, with kick-off meeting in July 2025 and the grant project period end date is January 31, 2027.

# 1.4 Eligible Applicants

Applicants must be a local or regional unit of government working to implement a state approved plan, such as a wellhead protection plan, metro county groundwater management plan or comprehensive watershed management plan. All applicants are advised that if they accept state dollars, they will be required to comply with all state laws, executive orders, regulations, and policies governing these funds. Run the accessibility check by going to File, Check for Issues, Check Accessibility.

# 1.5 Questions

# **Open Call for Questions**

Thursday, February 25, 2025, at 10:00 to 11:00am Central Standard Time.

Interested organizations must email <u>carrie.raber@state.mn.us</u> or <u>erin.harris@state.mn.us</u> to receive an invitation.

# **Questions and Answers**

Additional questions regarding this request for proposals (RFP) must be submitted to Carrie Raber and Anita Smith at <u>carrie.raber@state.mn.us</u> and <u>erin.harris@state.mn.us</u>.

Please submit questions no later than 2:00 p.m. Central Time on February 28, 2025.

Questions and Answers will be posted at <u>Accelerated Implementation Grant</u> (<u>https://www.health.state.mn.us/communities/environment/water/groundwater/accimpgrant.</u> <u>html</u>).

To ensure the proper and fair evaluation of all applications, other communications regarding this RFP, including verbal, telephone, written, or internet initiated by or on behalf of any applicant to any employee of the Department, other than questions submitted to as outlined above, are prohibited. **Any violation of this prohibition may result in the disqualification of the applicant.** 

# **RFP Part 2: Program Details**

# 2.1 Priorities

To build capacity we are seeking grant applicants that consider the priorities identified below. We understand flexibility is needed to respond to local needs, however applications will be favored that support the priorities listed.

# **Health Equity Priorities**

It is the policy of the State of Minnesota to ensure fairness, precision, equity, and consistency in competitive grant awards. This includes implementing diversity and inclusion in grant-making. <u>The Policy on Rating Criteria for Competitive Grant Review (PDF)</u> (https://mn.gov/admin/assets/08-

02%20Grants%20Policy%20Revision%20September%202017%20final\_tcm36-312046.pdf) establishes the expectation that grant programs intentionally identify how the grant serves diverse populations, especially populations experiencing inequities and/or disparities.

This grant will serve:

• all residents of the Soil and Water Conservation District.

Grant outcomes will include:

- Minnesotans will be aware of crucial issues impacting groundwater quality and availability, and will understand the need for protecting, restoring, and conserving water.
- Drinking water sources will be protected and safe for all Minnesotans.

# 2.2 Eligible Projects

# Collaboration

This grant prioritizes collaborative efforts that result in relationship building. This may entail coordinating with local units of government (LGU), public water systems, landowners, and other organizations to advance groundwater protection. When effectively implemented partners have a shared understanding of resource protection needs, conservation delivery opportunities and regulatory oversight that can be achieved.

# **Regional or Multijurisdictional Scale**

This grant prioritizes proposals that target work at a regional or multijurisdictional scale. Examples may include, but not limited to:

- Sharing services with adjoining counties or soil and water conservation districts.
- Targeted action in multiple Drinking Water Supply Management Areas (DWSMA).
- Targeted action in the Minnesota Department of Agriculture's Groundwater Protection Rule priority areas.
- Department of Natural Resources Groundwater Management Areas that span over multiple jurisdictions.
- Targeted action in a watershed Landscape Stewardship Plan.
- Metro County Groundwater Management Plans.
- Targeting at a watershed scale.

# **Capacity Building**

This grant prioritizes efforts that build groundwater expertise to achieve an economy of scale of resource protection. Examples may include, but not limited to:

- Dedicated staff to work on groundwater issues.
- Connecting public water systems to resource protection.
- Evaluate opportunities to successfully apply for implementation grants for protection and/or restoration actions.
- Bringing regional resources to the local level to gain efficiencies of scale.

### **Ineligible Expenses**

Ineligible expenses include but are not limited to:

- Fundraising
- Taxes, except sales tax on goods and services
- Lobbyists, political contributions
- Bad debts, late payment fees, finance charges, or contingency funds

# 2.3 Grant Management Responsibilities

### **Grant Agreement**

Each grantee must formally enter into a grant agreement. The grant agreement will address the conditions of the award, including implementation for the project. Once the grant agreement is signed, the grantee is expected to read and comply with all conditions of the grant agreement.

A sample grant agreement can be reviewed at <u>Accelerated Implementation Grant:</u>

Groundwater Protection Initiative

(https://www.health.state.mn.us/communities/environment/water/groundwater/accimpgrant. html).

Applicants should be aware of the terms and conditions of the standard grant agreement in preparing their applications. Much of the language reflected in the sample agreement is required by statute. If an applicant takes exception to any of the terms, conditions or language in the sample grant agreement, the applicant must indicate those exceptions, in writing, in their application in response to this RFP. Certain exceptions may result in an application being disqualified from further review and evaluation. Only those exceptions indicated in an application will be available for discussion or negotiation.

No work on grant activities can begin until a fully executed grant agreement is in place.

The funded applicant will be legally responsible for assuring implementation of the work plan and compliance with all applicable state requirements including worker's compensation insurance, nondiscrimination, data privacy, budget compliance, and reporting.

# **Accountability and Reporting Requirements**

It is the policy of the State of Minnesota to monitor progress on state grants by requiring grantees to submit written progress reports at least annually until all grant funds have been expended and all the terms in the grant agreement have been met.

# **Grant Monitoring**

The monitoring schedule will be:

- Annual progress report.
- A final report is due by February 2027.

### **Technical Assistance**

MDH will provide technical assistance to grantees to support them in fulfilling their grant objectives.

#### **Grant Payments**

Per <u>State Policy on Grant Payments (PDF) (https://mn.gov/bms-stat/assets/grants\_policy\_08-08.pdf)</u>, reimbursement is the method for making grant payments. All grantee requests for reimbursement must correspond to the approved grant budget. The State shall review each request for reimbursement against the approved grant budget, grant expenditures to-date and the latest grant progress report before approving payment. Grant payments shall not be made on grants with past due progress reports unless MDH has given the grantee a written extension.

The invoicing and payment schedule will be quarterly. Grantees will complete and submit Attachment D "**Groundwater Protection Initiative – Accelerated Implementation Grant Invoice**" for the quarter's expenses by the end of the following month (i.e., December's invoice is due by January 31st).

# 2.3 Grant Provisions

### **Contracting and Bidding Requirements**

- (a) Municipalities A grantee that is a municipality, defined as a county, town, city, school district or other municipal corporation or political subdivision of the state authorized by law to enter into contracts is subject to the contracting requirements set forth under Minn. Stat. § 471.345 (https://www.revisor.mn.gov/statutes/cite/471.345). Projects that involve construction work are subject to the applicable prevailing wage laws, including those under Minn Stat. 177.41 (https://www.revisor.mn.gov/statutes/cite/177.41), et. seq.
- (b) Non-municipalities Grantees that are not municipalities must adhere to the following standards in the event that duties assigned to the Grantee are to be subcontracted out to a third party:
  - i. Any services or materials that are expected to cost \$100,000 or more must undergo a formal notice and bidding process consistent with the standards set forth under Minnesota Statutes 16B.
  - ii. Services or materials that are expected to cost between \$25,000 and \$99,999 must be competitively awarded based on a minimum of three (3) verbal quotes or bids.
  - Services or materials that are expected to cost between \$10,000 and \$24,999 must be competitively awarded based on a minimum of two (2) verbal quotes or bids or awarded to a targeted vendor.

- iv. The grantee must take all necessary affirmative steps to assure that targeted vendors from businesses with active certifications through these entities are used when possible:
  - Minnesota Department of Administration's Certified Targeted Group, Economically Disadvantaged and Veteran-Owned Vendor List (<u>Minnesota</u> <u>Department of Administrations' Certified Targeted Group, Economically</u> <u>Disadvantaged and Veteran-Owned Vendor List</u> (<u>http://www.mmd.admin.state.mn.us/process/search</u>).

Metropolitan Council's Targeted Vendor list: Minnesota Unified Certification Program <u>Metropolitan Council's Targeted Vendor list:</u> <u>Minnesota Unified Certification Program</u> (<u>https://mnucp.metc.state.mn.us/)</u>or

- <u>Small Business Certification Program</u> (https://www.stpaul.gov/departments/human-rights-equal-economicopportunity/procurement/cert-program) through Hennepin County, Ramsey County, and City of St. Paul: Central Certification Program.
- v. The grantee must maintain written standards of conduct covering conflicts of interest and governing the actions of its employees engaged in the selection, award, and administration of contracts.
- vi. The grantee must maintain support documentation of the purchasing or bidding process utilized to contract services in their financial records, including support documentation justifying a single/sole source bid, if applicable.
- vii. Notwithstanding (i) (iv) above, State may waive bidding process requirements when:
  - Vendors included in response to competitive grant request for proposal process were approved and incorporated as an approved work plan for the grant or
  - There is only one legitimate or practical source for such materials or services and that grantee has established a fair and reasonable price.
- viii. Projects that include construction work of \$25,000 or more, are subject to applicable prevailing wage laws, including those under Minnesota Statutes 177.41 through 177.44.
- ix. Grantee must not contract with vendors who are suspended or debarred in MN: The list of debarred vendors is available at: <u>Minnesota Debarred Vendors</u> (http://www.mmd.admin.state.mn.us/debarredreport.asp).

# **Conflicts of Interest**

MDH will take steps to prevent individual and organizational conflicts of interest, both in reference to applicants and reviewers per Minn. Stat.§ 16B.98 and the Office of Grants Management's Policy 08-01, "Conflict of Interest Policy for State Grant-Making."

Applicants must complete the Applicant Conflict of Disclosure form (Attachment B) and submit it as part of the completed application. Failure to complete and submit this form will result in disqualification from the review process.

Organizational conflicts of interest occur when:

- a grantee or applicant is unable or potentially unable to render impartial assistance or advice
- a grantees or applicant's objectivity in performing the grant work is or might be otherwise impaired
- a grantee or applicant has an unfair competitive advantage

Individual conflicts of interest occur when:

- an applicant, or any of its employees, uses their position to obtain special advantage, benefit, or access to MDH's time, services, facilities, equipment, supplies, prestige, or influence
- An applicant, or any of its employees, receives or accepts money, or anything else of value, from another state grantee or grant applicant with respect to the specific project covered by this RFP/project.
- An applicant, or any of its employees, has equity or a financial interest in, or partial or whole ownership of, a competing grant applicant organization.
- An applicant, or any of its employees, is an employee of MDH or is a relative of an employee of MDH.

In cases where a conflict of interest is perceived, disclosed, or discovered, the applicants or grantees will be notified and actions may be pursued, including but not limited to disqualification from eligibility for the grant award or termination of the grant agreement.

# **Public Data and Trade Secret Materials**

All applications submitted in response to this RFP will become property of the State. In accordance with <u>Minn. Stat. § 13.599</u>, all applications and their contents are private or nonpublic until the applications are opened.

Once the applications are opened, the name and address of each applicant and the amount requested is public. All other data in an application is private or nonpublic data until completion of the evaluation process, which is defined by statute as when MDH has completed negotiating the grant agreement with the selected applicant.

After MDH has completed the evaluation process, all remaining data in the applications is public with the exception of trade secret data as defined and classified in <u>Minn. Stat. § 13.37</u>, subd. 1(b). A statement by an applicant that the application is copyrighted or otherwise protected does not prevent public access to the application or its contents. (<u>Minn. Stat. § 13.599</u>, subd. 3(a)).

If an applicant submits any information in an application that it believes to be trade secret information, as defined by <u>Minn. Stat. § 13.37</u>, the applicant must:

- Clearly mark all trade secret materials in its application at the time it is submitted,
- Include a statement attached to its application justifying the trade secret designation for each item, and
- Defend any action seeking release of the materials it believes to be trade secret and indemnify and hold harmless MDH and the State of Minnesota, its agents, and employees, from any judgments or damages awarded against the State in favor of the party requesting the materials, and all costs connected with that defense.

This indemnification survives MDH's award of a grant agreement. In submitting an
application in response to this RFP, the applicant agrees that this indemnification
survives if the trade secret materials are in possession of MDH. The State will not
consider the prices submitted by the responder to be proprietary or trade secret materials.

MDH reserves the right to reject a claim that any information in an application is trade secret information if it determines the applicant has not met the burden of establishing that the information constitutes a trade secret. MDH will not consider the budgets submitted by applicants to be proprietary or trade secret materials. Use of generic trade secret language encompassing substantial portions of the application or simple assertions of trade secret without substantial explanation of the basis for that designation will be insufficient to warrant a trade secret designation.

If a grant is awarded to an applicant, MDH may use or disclose the trade secret data to the extent provided by law. Any decision by the State to disclose information determined to be trade secret information will be made consistent with the Minnesota Government Data Practices Act (<u>Ch. 13 MN Statutes</u>) and other relevant laws and regulations.

If certain information is found to constitute trade secret information, the remainder of the application will become public; in the event a data request is received for application information, only the trade secret data will be removed and remain nonpublic.

### **Audits**

Per <u>Minn. Stat. §16B.98</u> Subdivision 8, the grantee's books, records, documents, and accounting procedures and practices of the grantee or other party that are relevant to the grant or transaction are subject to examination by the granting agency and either the legislative auditor or the state auditor, as appropriate. This requirement will last for a minimum of six years from the grant agreement end date, receipt, and approval of all final reports, or the required period to satisfy all state and program retention requirements, whichever is later.

# Affirmative Action and Non-Discrimination Requirements for all Grantees

The grantee agrees not to discriminate against any employee or applicant for employment because of race, color, creed, religion, national origin, sex, marital status, status regarding public assistance, membership or activity in a local commission, disability, sexual orientation, or age in regard to any position for which the employee or applicant for employment is qualified. <u>Minn. Stat. § 363A.02</u>. The grantee agrees to take affirmative steps to employ, advance in employment, upgrade, train, and recruit minority persons, women, and persons with disabilities.

The grantee must not discriminate against any employee or applicant for employment because of physical or mental disability regarding any position for which the employee or applicant for employment is qualified. The grantee agrees to take affirmative action to employ, advance in employment, and otherwise treat qualified disabled persons without discrimination based upon their physical or mental disability in all employment practices such as the following: employment, upgrading, demotion or transfer, recruitment, advertising, layoff or termination, rates of pay or other forms of compensation, and selection for training, including apprenticeship. Minn. Rules, part 5000.3550.

The grantee agrees to comply with the rules and relevant orders of the Minnesota Department of Human Rights issued pursuant to the Minnesota Human Rights Act.

# **Non-Transferability**

Grant funds are not transferrable to any other entity. Applicants that are aware of any upcoming mergers, acquisitions, or any other changes in their organization or legal standing, must disclose this information to MDH in their application, or as soon as they are aware of it.

# 2.4 Review and Selection Process

### **Review Process**

Funding will be allocated through a competitive process with review by a committee representing state agencies with knowledge on groundwater science in Minnesota. The review committee will evaluate all eligible and complete applications received by the deadline.

MDH will review all committee recommendations and is responsible for award decisions. **The award decisions of MDH are final and not subject to appeal.** Additionally:

- MDH reserves the right to withhold the distribution of funds in cases where proposals submitted do not meet the necessary criteria.
- The RFP does not obligate MDH to award a grant agreement or complete the project, and MDH reserves the right to cancel this RFP if it is in its best interest.
- MDH reserves the right to waive minor irregularities or request additional information to further clarify or validate information submitted in the application, provided the application, as submitted, substantially complies with the requirements of this RFP. There is, however, no guarantee MDH will look for information or clarification outside of the submitted written application. Therefore, it is important that all applicants ensure that all sections of their application are complete to avoid the possibility of failing an evaluation phase or having their score reduced for lack of information.

# **Selection Criteria and Weight**

The review committee will be reviewing each application on an 80-point scale. A standardized scoring system will be used to determine the extent to which the applicant meets the selection criteria.

The scoring factors and weight that applications will be judged are based on:

- 1. Organizational Capacity (Up to 15 total points for this section.)
  - a. Experience working with other local entities.
  - b. Demonstrated ability and willingness to collaborate with other entities on this project.
  - c. Capacity to meet the project objectives and priorities.
- 2. Project Narrative and Work Plan (Up to 50 total points for this section.)
  - a. Clearly defines project goals and objectives.
  - b. Clearly defines project outcomes.
  - c. Defines the way the project will prepare for future protection and/or implementation.
  - d. Demonstrates how actions benefit already established priorities in state and local plans.
  - e. Clear timeline with key milestones.

- 3. Budget and Budget Justification (Up to 15 total points for this section.)
  - a. Itemized budget.
  - b. Budget reflects grant goals.
  - c. Budget includes in-kind or matching funds.

#### **Grantee Past Performance and Due Diligence Review Process**

It is the policy of the State of Minnesota to consider a grant applicant's past performance before awarding subsequent grants to them. State policy requires states to conduct a preaward risk assessment prior to a grant award. Additional information may be required for proposed budgets of \$50,000 and higher to a potential applicant in order to comply with Policy on Pre-Award Risk Assessment for Potential Grantees.

# **RFP Part 3: Application and Submission Instructions**

# 3.1 Application Deadline

All applications must be received by MDH no later than 2:00 p.m. Central Time, on Friday, March 14, 2025.

**Late applications will not be accepted.** It is the applicant's sole responsibility to allow sufficient time to address all potential delays caused by any reason whatsoever. MDH will not be responsible for delays caused by mail, delivery, computer, or technology problems.

### Notification

MDH anticipates notifying all applicants via email of funding decisions by April 1, 2025.

# 3.2 Application Submission Instructions

Applications must be submitted via email to:

Attention: GRAPS Grant Coordinator health.drinkingwater@state.mn.us

# 3.3 Application Instructions

Each Application must contain the following items to be considered complete:

- Signed Grant Application that includes the Project Narrative, Work Plan, and Budget key points outlined in Attachment A.
- Any narrative or supplemental portions of the application.
- Grantee Conflict of Interest Attachment B.
- Due Diligence Form Attachment C

Incomplete applications will be rejected and not evaluated.

Applications must include all required application materials, including attachments. Do not provide any materials that are not requested in this RFP, as such materials will not be considered nor evaluated. **MDH reserves the right to reject any application that does not meet these requirements.** 

By submitting an application, each applicant warrants that the information provided is true, correct, and reliable for purposes of evaluation for potential grant award. The submission of inaccurate or misleading information may be grounds for disqualification from the award, as well as subject the applicant to suspension or debarment proceedings and other remedies available by law.

All costs incurred in responding to this RFP will be borne by the applicant.

# **RFP Part 4: Attachments**

Attachment A: Application Attachment B: Granted Conflict of Interest Attachment C: Due Diligence

Attachment D: Grantee Invoice template





Attachment A

# **Groundwater Protection Initiative Accelerated Implementation Grant Application**

Organization's Legal Name:	
Contact Name and Title:	
Phone No.:	
E-mail address:	
Mailing Address:	
Federal Tax ID #:	
Person Authorized to Sign Grant Agreement on Behalf of the	Organization:
Name:	Title:

The project narrative and work plan describe your organization and details of what you intend to accomplish through the grant program. Successful grant applications will be **no more than four pages long (excluding timeline and budget) and will include the following information.** 

Applicants must provide a list of all entities with which it has relationships that create, or appear to create, a conflict of interest with the work contemplated by the RFP.

# **Organizational Capacity**

(Use separate sheet)

Who will work on this project and what is their training and expertise?

What entities will collaborate on this project?

What is your organization's experience and capacity to work with other entities to achieve the goals of this project?

# Work Plan

(Use separate sheet)

Describe your proposed capacity building project and the groundwater and/or drinking water concerns to be addressed.

What outcomes will be achieved as a result of the proposed actions?

How will you ensure the proposed actions result in future implementation activities and/or sustained groundwater protection?

#### GROUNDWATER PROTECTION INITIATIVE ACCELERATED IMPLEMENTATION GRANT APPLICATION

List the state approved plan(s) and cite the measures and/or actions that identify the need for groundwater protection and restoration.

Submit a timeline showing the major tasks, deliverables, and deadlines for the project. (Use separate sheet)

Tasks	Deliverables	Deadline

# **Budget and Budget Justification**

(Use separate sheet)

Your budget must include the following:

- Itemized projection of costs for each task and deliverable.
- Description of any other funding (including in-kind) that is directed toward accomplishing the same or similar goals as the goals of this grant program.
- Clear identification of the total amount of grant funding requested.

**Certification:** I certify that the information herein is true and accurate to the best of my knowledge, and I submit this application on behalf of the applicant organization.

Signature: \_\_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_

**NOTE:** If you are awarded a grant, NO work should begin until all required signatures have been obtained on the grant agreement and grantee receives a signed copy of the grant agreement.

Applications are to be submitted to: <u>health.drinkingwater@state.mn.us</u>.

Carrie Raber Planning Director Source Water Protection Unit, Environmental Health Division Minnesota Department of Health carrie.raber@state.mn.us

Minnesota Department of Health | Drinking Water Protection Section | 625 Robert Street North | PO Box 64975 St. Paul, MN 55164-0975 | 651-201-4700 | www.health.state.mn.us

February 2025

To obtain this information in a different format, call: 651-201-4700.



# **Applicant/Recipient Conflict of Interest Disclosure**

The purpose of this form is to provide grant applicants and recipients a mechanism to disclose any actual, perceived or potential individual or organizational conflicts of interest that exist, as required by <u>Minnesota Statutes, section 16B.98, subdivision 2-3</u>; Minnesota Office of Grants Management (OGM) <u>Grants</u> <u>Management Policies, Statutes, and Forms</u>; and <u>Code of Federal Regulations, title 2, section 200.112, Conflict of Interest</u>. It is helpful if the applicant/recipient explains the reason for the conflict, but it is not required.

# A disclosure will not automatically result in removal of the applicant/recipient.

# Instructions

Read the descriptions below, mark the appropriate box(es) that pertain to you as the Applicant/Recipient as it relates to this funding, obtain Applicant/Recipient signature (Applicant/Recipient to determine appropriate signer).

# **Notice of Confidentiality**

This form is required from every applicant/recipient and is considered public data under <u>Minnesota Statutes</u>, <u>section 13.599</u>.

MDH staff and external partners are required to comply with <u>Minnesota Statutes</u>, <u>section 13.599</u>, which states that all information, and details, relating to an RFP (if applicable) and applications (if applicable) are non-public until grant agreements are fully executed.

# **Conflicts of Interest**

Conflicts of interest may be actual, potential, or perceived. An actual conflict of interest occurs when a person uses or attempts to use their official position to secure benefits, privileges, exemptions or advantages for self, relatives, or organization with which the person is associated which are different from those available to the general public (<u>Minnesota Statutes, section 43A.38, subd. 5</u>). A potential conflict of interest may exist if an applicant/recipient has relationships, affiliations, or other interests that could create an inappropriate influence if the person is called on to make a decision or recommendation that would affect one or more of those relationships, affiliations, or interests. A perceived conflict of interest is any situation in which a reasonable person would conclude that conflicting duties or loyalties exists. A conflict of interest may exist even if no unethical, improper or illegal act results from it.

The Minnesota Department of Health (MDH) recognizes that applicant/recipients must maintain relationships with other public and private sector entities in order to continue as a viable organization. MDH will take this into account as it evaluates the appropriateness of proposed measures to mitigate actual, potential, and perceived conflicts of interest. It is not MDH's intent to disqualify applicant/recipients based merely on the existence of a relationships with another entity, but rather only when such relationships cause a conflict that cannot be

mitigated. Nevertheless, MDH and its partners must follow federal regulation and statutory guidance on conflicts of interest.

# **Organizational Conflict of Interest**

An **organizational conflict** of interest exists when, because of other activities or relationships with other persons, a person is unable or potentially unable to render impartial assistance or advice, or a person's objectivity in performing the grant work is or might be otherwise impaired, or a person has an unfair competitive advantage.

An example of organizational conflict of interest includes, but is not limited to:

Unequal Access to Information. Access to information that is classified as nonpublic data or is otherwise unavailable to the public could provide an entity a competitive advantage in a later competition for another grant. For example, a nonprofit entity, in the course of conducting grant work for the State, may be given access to information that is not available to the public such as government plans, opinions, interpretations or positions. This nonprofit entity cannot use this information to its advantage in securing a subsequent grant, and measures must be put into place to assure this. Such an advantage could be perceived as unfair by a competing entity who is not given similar access to the relevant information.

# **Individual Conflict of Interest**

An individual conflict of interest occurs when any of the following conditions is present:

- An applicant/recipient, or any of its employees, uses their position to obtain special advantage, benefit, or access to MDH's time, services, facilities, equipment, supplies, prestige, or influence.
- An applicant/recipient, or any of its employees, receives or accepts money, or anything else of value, from another state grantee or grant applicant/recipient with respect to the specific project covered by this funding.
- An applicant/recipient, or any of its employees, has equity or a financial interest in, or partial or whole ownership of, a competing grant applicant/recipient organization.
- An applicant/recipient, or any of its employees, is an employee of MDH or is a relative of an employee of MDH.

Examples of individual conflict of interest include, but are not limited to:

- An individual owns Entity C and also sits on the board of Entity D, and both entities are applying to the same RFP.
- An employee or volunteer of the applicant/recipient has previously worked with MDH to create the "ground rules" for a solicitation by performing work such as, but not limited to: writing the RFP, preparing evaluation criteria, or evaluation guides for the RFP.
- An employee or volunteer of the applicant/recipient is compensated for serving on the board of a non-profit that may benefit from this work.

Instances in which an individual or applicant/recipient worked in a volunteer capacity with MDH should be evaluated on a case-by-case basis. Volunteer status has the potential to, but does not necessarily create a conflict of interest, depending on the nature of the relationship between the two parties. Volunteer is defined as "[a]n individual who performs hours of service for a public agency for civic, charitable, or humanitarian reasons, without promise, expectation or receipt of compensation for services rendered, is considered to be a volunteer during such hours" (Code of Federal Regulations, Title 29, section 553.101(a)).

#### Certification and signature required on next page.

#### COI - APPLICANT/RECIPIENT FORM

# Certification

Applicant/Recipient Name:	
RFP Title (if applicable):	
MDH Grant Program Name:	

(Example: Women, Infants, and Children (WIC) Grant)

#### Select ONE of the following responses below:

- □ To the best of Applicant/Recipient's knowledge and belief, and except as otherwise disclosed, there are no relevant facts or circumstances that could give rise to individual or organizational conflicts of interest.
- □ Applicant/Recipient, or employees of Applicant/Recipient, have an actual, potential, or perceived conflict(s) of interest which are listed below.

To the best of Applicant/Recipient knowledge, write the names of entities/individuals with which the Applicant/Recipient have an actual, potential, or perceived conflict:

Name of entity/individual:\_\_\_\_\_

Relationship (e.g., volunteer, employee, contractor, family relation):\_\_\_\_\_

Description of conflict (optional):\_\_\_\_\_

\*Add additional names on separate sheet as necessary.

#### By signing in the space provided below, Applicant/Recipient certifies the following:

- If a conflict of interest is discovered at any time after submission of this form, Applicant/Recipient will immediately provide full disclosure in writing to MDH. If a conflict of interest is determined to exist, MDH may, at its discretion, take action.
- Applicant/Recipient will obtain, and keep record of, conflict of interest disclosure forms from any subgrantees or subcontractors and keep them on file.

#### **Applicant/Recipient's Signature**

Printed Name:	
Title:	
Signature:	
Date:	

# **MDH Program Use Only**

This section to be completed by appropriate Grant Program staff.

- Applicant/Recipient has no conflict(s) of interest.
- Applicant/Recipient has disclosed conflict(s) of interest and appropriate MDH Program staff have reviewed the conflict(s) in accordance with <u>Grants Conflict of Interest Standard</u>. MDH Program has determined the conflict(s) can be mitigated as described below:

Mitigation Plan:
Example: Applicant's application will not be reviewed by External Partners with which they have a conflict.

Applicant/Recipient has disclosed conflict(s) of interest and appropriate MDH Program staff have reviewed the conflict(s) in accordance with ST510.01. MDH Program has determined the conflict(s) cannot be mitigated. As such Applicant/Recipient will not move forward. MDH Program will communicate back to the Applicant/Recipient and keep documentation of such communication.

I certify that the conflict(s) has/have been discussed with this applicant/recipient and the actions above have been taken.

#### **MDH Program's Signature**

Printed Name:	
Title:	
Signature:	
Date:	

# **Resources**

- Minnesota Statutes, section 16B.98, subd 2-3 (https://www.revisor.mn.gov/statutes/cite/16B.98#stat.16B.98.2)
- <u>Grants Management Policies, Statutes and Forms (https://mn.gov/admin/government/grants/policies-statutes-forms/)</u>
- <u>Code of Federal Regulations, title 2, section 200.112, Conflict of Interest</u> (<u>https://www.ecfr.gov/current/title-2/subtitle-A/chapter-II/part-200/subpart-B/section-200.112</u>)
- Minnesota Statutes, section 13.599 (https://www.revisor.mn.gov/statutes/cite/13.599)
- Minnesota Statutes, section 43A.38, subdivision 5 (https://www.revisor.mn.gov/statutes/cite/43A.38)
- <u>Code of Federal Regulations, title 29, section 553.101(a) (https://www.ecfr.gov/current/title-29/subtitle-</u> B/chapter-V/subchapter-A/part-553/subpart-B/section-553.101)

For questions about this form: Minnesota Department of Health Grants Program <u>health.grantsoffice@state.mn.us</u> www.health.state.mn.us

1/17/23

To obtain this information in a different format, contact: <u>health.grantsoffice@state.mn.us</u>.

# DEPARTMENT OF HEALTH

# **Due Diligence Review Form**

The Minnesota Department of Health (MDH) conducts pre-award assessments of all grant recipients prior to award of funds in accordance with federal, state and agency policies. **The Due Diligence Review is an important part of this assessment.** 

These reviews allow MDH to better understand the capacity of applicants and identify opportunities for technical assistance to those that receive grant funds.

# **Organizational information**

Organization	Information
Organization name:	
Organization address:	
Enter employer identification number (EIN). If no EIN, leave blank.	
If the organization has done business under any other name(s) in the past five years, please list here:	
If the organization has received grant(s) from MDH within the past five years, please list here:	

# Section 1: Organization structure

1. How many years has your organization been in existence?

Less than 5 years (5 points)

5 or more years (0 points)

Points\_\_\_\_\_

2. How many paid employees does your organization have (part-time and full-time)?

1 (5 points) 2-4 (2 points) 5 or more (0 points)

Points\_\_\_\_\_

MDH DUE DILIGENCE REVIEW FORM

3. Does your organization have a paid bookkeeper?

No (3 points)

Yes, an internal staff member (0 points)

Yes, a contracted third party (0 points)

Points\_\_\_\_\_

SECTION 1 POINT TOTAL

#### Section 2: Systems and oversight

4.	Does your organization have internal controls in place that require approval
	before funds can be expended?

No (6 points) Yes (0 points)

Points\_\_\_\_\_ 5. Does your organization have written policies and procedures for the following processes? • Accounting

- Purchasing
- Payroll

No (3 points)

Yes, for one or two of the processes listed, but not all (2 points)

Yes, for all of the processes listed (0 points)

6. Is your organization's accounting system new within the past twelve months?

No (0 points)	
Yes (1 point)	

7.	Can your organization's accounting system identify and track grant
	program-related income and expense separate from all other income and
	expense?

No (3 points) Yes (0 points)

8. Does your organization track the time of employees who receive funding from multiple sources?

No (1 point) Yes (0 points)

Points\_\_\_\_\_

Points

Points

SECTION 2 POINT TOTAL

#### MDH DUE DILIGENCE REVIEW FORM

# Section 3: Financial health

9.	If required, has your organization had an audit conducted by an independent certified public accountant (CPA) within the past twelve months?	
	Not Applicable (N/A) (0 points) – if N/A, skip to question 10	
	No (5 points) – if no, skip to question 10	
	Yes (0 points) – if yes, answer question 9A	
		Points
	9A. Are there any unresolved findings or exceptions?	
	No (0 points)	
	Yes (1 point) – if yes, attach a copy of the management letter and a written explanation to include the finding(s) and why they are unresolved.	
		Points
10.	. Have there been any instances of misuse or fraud in the past three years? No (0 points)	
	Yes (5 points) – if yes, attach a written explanation of the issue(s), how they were resolved and what safeguards are now in place.	
		Points
11.	<ul> <li>Are there any current or pending lawsuits against the organization?</li> <li>No (0 points) – If no, skip to question 12</li> </ul>	
	Yes (3 points) – If yes, answer question 11A	
		Points
	11A. Could there be an impact on the organization's financial status or stability	ı?
	No (0 points) – if no, attach a written explanation of the lawsuit(s), and why they would not impact the organization's financial status or stability.	
	Yes (3 points) – if yes, attach a written explanation of the lawsuit(s), and how they might impact the organization's financial status or stability.	
		Points
12.	<ul> <li>From how many different funding sources does total revenue come from?</li> <li>1-2 (4 points)</li> </ul>	
	3-5 (2 points)	
	6+ (0 points)	
		Points

SECTION 3 POINT TOTAL

#### **Section 4: Financial review**

Community Health Boards (CHBs), political subdivisions, including municipalities (county, town, city, school districts), are exempt from this section and should proceed to Section 6. All other entities must complete one of the following subsections as applicable. This section is unscored.

#### Section 4A: For non-profit organizations only

13. Does your organization have tax-exempt status from the IRS?

No – If no, go to question 14.

Yes – If yes, answer question 13A.

13A. What is your nonprofit's IRS designation?

501(c)3

Other, please list:

14. What was your organization's total revenue (income, including grant funds) in the most recent twelve-month accounting period?

Enter total revenue here: \_\_\_\_\_

15. What financial documentation will you be attaching to this form?

If your answer to question 14 is less than \$50,000, then attach your most recent financial statements.

If your answer to question 14 is \$50,000 - \$750,000, then attach your most recent IRS Form 990 or 990 EZ.

If your answer to question 14 is more than \$750,000, then attach your most recent certified financial audit.

- 16. If your organization is exempt from filing, or your organization has been in business for less than one year, applicant must:
  - a) Demonstrate exemption by providing a copy of the IRS determination letter indicating exemption, OR submit the most recent set of board reviewed financial statements; AND
  - b) Describe the internal controls you have over business expenditures and outcomes of the grant funds, if awarded.

My organization is exempt and I have attached the requested information.

#### Section 4B: For-profit organizations only

17. What was your organization's total revenue (income, including grant funds) in the most recent twelve-month accounting period?

Enter total revenue here: \_\_\_\_\_

#### MDH DUE DILIGENCE REVIEW FORM

18. Has your organization filed its most recent state and federal tax returns?

No

Yes – attach a copy of your most recent state and federal tax returns, AND most recent financial statements.

19. Do you have any liens on assets?

No

- Yes attach a description of the assets and associated liens.
- 20. Is your business currently under bankruptcy proceedings?

No

- Yes attach a description of the current status of the proceedings.
- 21. If your organization has been in business for less than one year, applicant must:
  - a) Submit the most recent set of financial statements; AND
  - b) Describe the internal controls you have over business expenditures and outcomes of the grant funds.

Is the proposed budget included with this application less than \$50,000?

- □ YES skip Sections 5-7, proceed to Signature Section.
- □ NO complete all remaining sections.

### Section 5: Evidence of good standing

Community Health Boards (CHBs), Tribal Nations, political subdivisions, including municipalities (county, town, city, school districts), are exempt from this section and should proceed to Section 6.

Organizations must certify their organization has a status of "In Good Standing" with the Minnesota Secretary of State as required by Minnesota Statutes, section 16B.981, subdivision 2 (4). Search for your business name on the Minnesota Secretary of State's website at <u>Search Business Filings</u> (<u>https://mblsportal.sos.state.mn.us/Business/Search</u>). This section is unscored.

Attach a copy of the most recent registration or renewal confirmation.

Documentation is attached.

#### **Section 6: Performance capacity**

All state agencies are required by Minnesota Statutes, section 16B.981, subdivision 2, to review an applicant's history of performing similar activities, financial documents, and other related documents. This section is unscored.

- 1. Describe your organization's history of performing similar activities to those being proposed. Response:
- 2. Describe your organization's current staffing and budget. Response:

#### **Section 7: Financial crimes certification**

Minnesota Statutes, section 16B.981, subdivision 2 (6) requires that no current principals of a grantee have been convicted of a felony financial crime in the last 10 years. A principal is defined as a public official, a board member, or staff (paid or volunteer) with the authority to access funds provided by this grant opportunity or to determine how those funds are used. This section is unscored.

No current principal(s), as defined above, have been convicted of a felony financial crime within the last 10 years.

Yes, our organization has current principal(s), as defined above, that have been convicted of a felony financial crime within the last 10 years.

# **Applicant signature**

I certify that the information provided is true, complete, and current to the best of my knowledge. The submission of inaccurate or misleading information may be grounds for disqualification from the grant agreement award and may subject me/this organization to suspension or debarment proceedings, as well as other remedies available to the State, by law.

SIGNATURE:	 	
NAME AND TITLE:		
PHONE NUMBER:		
EMAIL ADDRESS:		

For questions, or to obtain this document in a different format: Send an email to health.GrantsOffice@state.mn.us.

#### MDH DUE DILIGENCE REVIEW FORM

# MDH staff use only

### **Program information**

MDH Grant Program	Information
Organization's project name	
MDH grant program name	
Division/Section	
Date review completed	
Review conducted by	

#### **Review and award decision**

Review the financial documents submitted in response to Section 4.

- 1. Were there significant operating and/or unrestricted net asset deficits?
  - Yes proceed to question 2.
  - No proceed to question 5.
- 2. Were there any other concerns about the organization's financial stability?
  - Yes proceed to question 3.
  - No proceed to question 5.
- 3. Describe the deficit(s) and/or other concerns about the organization's financial stability:
- 4. Describe how the applicant organization addressed deficit(s) and/or other concerns about their financial stability:
- 5. Granting decision:
- 6. Rationale for grant decision:

### **Total points from scored sections**

Section 1	+	Section 2	+	Section 3	=	Total Points
	+		+		=	



# **Groundwater Protection Initiative – Accelerated Implementation Grant Invoice**

# **Grantee Information**

Organization name			
Address			
Contact person			
Phone number	Email		

### Reimbursement Description: "Activities for Quarter \_\_\_, 20XX"

# **Expenditure Description**

Use an additional page if necessary

Activity Description	Personnel	Hours	Rate	Cost
Invoice total				

**Disclaimer and signature:** I declare that no part of this claim has been previously billed to MDH, and that the Total Expenditures reflect only charges related to the source water protection project. I also declare that the data on this document is correct and all transactions that support this claim were made in accordance with all applicable Federal and State statutes and regulations.

Authorized grantee signature	Date				
For Minnesota Department of Health Use Only					
Grantee manager signature	Date				
PO	Approved by				
Period of service	Date sent to F.M.				
Minnesota Department of Health   Drinking Water Protect	tion Section   651-201-4696   <u>www.health.state.mn.us</u>				
March 2024					

To obtain this information in a different format, call: 651-201-4696.