



Increasing Access to Newborn Hearing Screening in Out-of-Hospital Births

GRANT REQUEST FOR PROPOSAL (RFP)

Minnesota Department of Health
Public Health Laboratory, PO Box 64899
St. Paul, MN 55164-0899
651-201-5466
health.newbornscreening@state.mn.us
www.health.state.mn.us

10/14/2022

To obtain this information in a different format, call: 651-201-5466.

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RFP Part 1: Overview

1.1 General Information

- **Announcement Title:** Increasing Access to Newborn Hearing Screening in Out-of-Hospital Births
- **Minnesota Department of Health (MDH) Program Website:** [Newborn Screening Program Information: Announcements](#)
- **Application Deadline:** December 5, 2022

This Request for Proposal (RFP) document provides the instructions, forms and information needed to complete the Increasing Access to Newborn Hearing Screening in Out-of-Hospital Births grant application.

Funding availability is for January 1, 2023 – March 31, 2024, contingent upon federal appropriations. It is suggested that these instructions and a copy of the Criteria for Scoring Applications (Attachment A), be examined prior to writing the application.

1.2 Program Description

Approximately 250 infants and children are identified as deaf and hard of hearing (DHH) each year in Minnesota. The goal of Minnesota's Early Hearing Detection and Intervention (EHDI) Program is to identify all infants and children who are DHH as early as possible and connect those children/families to timely and appropriate services to maximize their linguistic and communicative competence, literacy and social/emotional development. There were 1,823 out-of-hospital births in Minnesota in 2021.

Newborn hearing screening in Minnesota became mandated in 2007. [See Minnesota Statutes 144.966](#). The goal is for all newborns to receive a hearing screen by 1 month of age. All health professionals attending a birth outside of a hospital are required to provide both oral and written information to parents about the importance of hearing screening and where they can have their infant screened. Out-of-hospital birth providers who are trained as hearing screeners and have access to equipment to screen infants can offer the newborn hearing screen instead of having to refer their clients elsewhere.

The purpose of this funding is for out-of-hospital birth providers to purchase portable hearing screening equipment and supplies that may be used in the home as well as at out-of-hospital birth sites to increase access to hearing screening before one month of age. The expected outcome of this program is to increase the rate of hearing screening that occurs before one month of age to infants who are not born in a hospital.

Successful applicants will propose a program to provide timely newborn hearing screening for out-of-hospital births in multiple localities in Minnesota, with an effective sustainability plan.

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Funding

The funding for this grant opportunity will be a sub-award of federal financial assistance from Health Resources & Services Administration (HRSA) to MDH, award number 6 H61MC00035-22-01.

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

Funding	Estimate
Estimated Amount to Grant	\$35,250
Estimated Number of Awards	1-2
Estimated Award Maximum	\$35,250
Estimated Award Minimum	\$7,050

Project Dates

Funding is expected to be available over two fiscal periods:

- January 1, 2023, through March 31, 2023
- April 1, 2023, through March 31, 2024

1.3 Eligible Applicants

Eligible applicants

Nonprofit Organizations whose members are providers for out-of-hospital births

Collaboration

Multi-organization collaboration is welcomed. Hearing screening equipment is expensive and funding is limited. Organizations that can partner to make hearing screening accessible to the largest proportion of out-of-hospital birthed babies will make the largest impact.

1.4 Questions and Answers

All questions regarding this RFP must be submitted by email or phone to health.newbornscreening@state.mn.us or 651-201-5466. All answers will be posted within five business days at [Newborn Screening Program Information: Announcements - Minnesota Dept. of Health \(state.mn.us\)](#).

Please submit questions no later than 4:30 p.m. on November 16, 2022.

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

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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

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. [The Policy on Rating Criteria for Competitive Grant Review](#) 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:

- Infants born out-of-hospital in Minnesota
- Geographic diversity within and across Minnesota – including greater MN, urban/metro

Grant outcomes will include:

- Distribution/utilization of hearing screening equipment around the State of Minnesota to make hearing screening accessible to the largest proportion of out-of-hospital birthed babies
- Sustainability planning to continue hearing screening in out-of-hospital births after the funding period ends
- Track proportion of infants in coverage area who receive hearing screening by their out-of-hospital birth provider

2.2 Eligible Projects

Grantees will be required to do the following:

1. Purchase appropriate and portable hearing screening equipment and supplies before the end of each fiscal period of funding.
2. Plan for distribution/utilization of hearing screening equipment around the State of Minnesota to make hearing screening accessible to the largest proportion of out-of-hospital birthed babies.
3. Require that any out-of-hospital birth provider conducting hearing screenings attend manufacturer/audiologist led training on the hearing screening equipment. Complete initial equipment training with equipment company for providers using equipment.
4. Distribute hearing screening equipment to out-of-hospital birth providers identified in distribution/utilization plan and obtain signed user agreement.
5. Establish a plan for maintenance and upkeep of the hearing screening equipment, including calibrations, and purchasing supplies.

6. Establish a plan for replacement of hearing screening equipment and out of hospital birth hearing screening program.
7. Ensure all providers who attend out-of-hospital births who are utilizing hearing screening equipment have a written policy and procedure for hearing screening that complies with the MN mandate (MN Statute 144.966) for hearing screening, reporting and follow-up.

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. The grantee is expected to read the grant agreement, sign, and comply with all conditions of the grant agreement. Grantee should provide a copy of the grant agreement to all grantee staff working on the grant.

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

Here is a sample grant agreement (<https://www.health.state.mn.us/docs/about/org/cfh/expl-nonchb.pdf>.) 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.

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.

Each grantee must formally enter into a grant agreement. The grant agreement will address the conditions of the award, including implementation for the project. Grantee should read the grant agreement, sign, and once signed, comply with all conditions of the grant agreement.

No work on grant activities can begin until a fully executed grant agreement is in place and the State's Authorized Representative has notified the Grantee that work may start.

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 of the terms in the grant agreement have been met.

The reporting schedule will be: Progress report in MDH-approved format will be due 20 days following the end of each fiscal period.

Grant Monitoring

Minn. Stat. § 16B.97 and Policy on Grant Monitoring require the following:

- One monitoring visit during the grant period on all state grants over \$50,000
- Annual monitoring visits during the grant period on all grants over \$250,000
- Conducting a financial reconciliation of grantee's expenditures at least once during the grant period on grants over \$50,000"

The monitoring schedule will be: One monitoring visit during the grant period

Technical Assistance

MDH Staff will provide technical assistance to grantees about newborn hearing screening procedures and public health reporting requirements.

Grant Payments

Per State Policy on Grant Payments, 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: within 60 days of equipment purchase.

2.4 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. Projects that involve construction work are subject to the applicable prevailing wage laws, including those under Minn. Stat. § 177.41, et. seq.

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(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.
- iii. 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 (<http://www.mmd.admin.state.mn.us/process/search>);
 - Metropolitan Council's Targeted Vendor list: Minnesota Unified Certification Program (<https://mnuccp.metc.state.mn.us/>) or
 - Small Business Certification Program through Hennepin County, Ramsey County, and City of St. Paul: Central Certification Program (<https://www.stpaul.gov/departments/human-rights-equal-economic-opportunity/contract-compliance-business-development-9>).
- 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.

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- 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:
<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 E) 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 grantee's 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 [Minn. Stat. § 13.599](#), 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 [Minn. Stat. § 13.37](#), 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. ([Minn. Stat. § 13.599](#), subd. 3(a)).

If an applicant submits any information in an application that it believes to be trade secret information, as defined by [Minn. Stat. § 13.37](#), 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 any 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 as long as 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 particular 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 ([Ch. 13 MN Statutes](#)) 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 [Minn. Stat. § 16B.98](#), subd. 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 of time 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 in regard to 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. [Minn. Stat. § 363A.02](#). 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 in regard to 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.

2.5 Review and Selection Process

Review Process

Funding will be allocated through a competitive process with review by a committee. Reviewers may include MDH staff familiar with grant management and individuals who are familiar with newborn hearing screening or have provided newborn hearing screening services. The review committee will evaluate all eligible and complete applications received by the deadline. Reviewers will be required to identify any conflicts of interest and will not review an application if a conflict is identified.

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.

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- 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 applicant on a 100-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 are outlined in Attachment A: Criteria for Scoring Applications. Applicant's scores will be weighted on their ability to reach diverse populations and cover a large geographic area.

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 financial review prior to a grant award made of \$25,000 and higher to a nonprofit organization, in order to comply with [Policy on the Financial Review of Nongovernmental Organizations](#).

Notification

Final funding recommendations will be based on the scores and comments from reviewers. Consideration will be given to distributing funding throughout the state and/or regions and meeting the funding priorities identified in the legislation (Attachment C). It is anticipated that grant award decisions will be made in November 2022. Applicants will be notified by email of the decision whether their grant application is selected for funding or not.

RFP Part 3: Application and Submission Instructions

3.1 Application Deadline

All applications **must** be received by MDH no later than 4:30 p.m. Central Time, on December 5, 2022.

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.

3.2 Application Submission Instructions

Applications must be submitted Jill Simonetti via mail or email to:

Jill Simonetti

Newborn Screening Manager

Minnesota Department of Health

PO Box 64899

St. Paul, MN 55164-0899

Email: jill.simonetti@state.mn.us

3.3 Application Instructions

You must submit the following for the application to be considered complete:

Submission Requirements

- Current/previous grantees: go to [SWIFT](#) and login and confirm that your organization's name, address, locations, banking information, phone numbers, and other contact information is correct.
- Grant Applicant Face Sheet (Form A)
- Copy of letter granting 501c3 status **(for non-profits only)**
 - If applicant has tax exempt status from the Minnesota Department of Revenue, include a copy of exemption letter
- Program Narrative
- Work Plan (Form B)
- Budget Justification (Form C) submit one for each of the time periods listed on page 5
- Budget Summary (Form D) submit one for each of the time periods listed on page 5
- MDH Indirect Cost Questionnaire (Form E)
- MDH Due Diligence (Form F)
- Applicant Conflict of Disclosure form (Attachment E)

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- ❑ The entire application should be submitted as one PDF document via email to jill.simonetti@state.mn.us
- ❑ If applicant is using a fiscal agent, it must be stated on the Face Sheet. *A fiscal agent is an organization that assumes full legal and contractual responsibility for the fiscal management and award conditions of the grant funds, that has authority to sign the grant agreement. A fiscal agency is a different entity than the entity that will actually perform the work/grantee's duties.*

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.

Project Narrative and Work Plan

The project narrative and work plan describe the applicant's organization and what is intended to be accomplished. To assist applicants, MDH has provided detailed instructions on what information should be included and what grant reviewers will be reviewing in each application.

The Project Narrative is divided into distinct sections and should be submitted in the sequence as below:

A. Application information (keep this section to one page or shorter)

Applicants should use 12-point font with one-inch margins for this portion. Briefly summarize the background information about your organization. Summarize your agency's mission and goals as it relates to this project. Give a brief summary of your proposed program.

B. Organizational Capacity (keep this section to one page or shorter)

- Briefly describe the administrative structure of the applicant agency, its current experience in providing services for out-of-hospital births, and its grant related experience.
- If agencies outside the organization will provide contract services, also describe the administrative structure of the contracting agencies, and their current experience in out-of-hospital births.
- Describe other key elements that show organizational capacity to provide hearing screening to out-of-hospital birthed babies such as: facilities, staffing, cultural competency, and readiness to use funds.

- Provide a summary of relevant training and/or experience of the key persons who will be implementing the project, how personnel will be recruited, and safeguards in place to protect personnel and participants.

C. Linkages and Collaborations (keep this section to one page or shorter)

Describe your linkages or collaborative efforts to coordinate hearing screening for out-of-hospital birthed babies with other organizations, such as the EHDI program and professional practice groups. This might include how you share or distribute equipment among members. The description should be detailed and include information you think is important for grant reviewers to understand your collaborative efforts, this might include linkages with diverse cultural and/or geographical groups.

D. Statement of need

Please complete a narrative description of the community the project proposes to serve. Include information about target population and any needs assessment that was completed by the applicant separately or in collaboration with, other community partners. Describe how your program will have a local, regional, and/or statewide impact. Detail any racial and ethnic disparities related to families who are planning out-of-hospital births. Describe any cultural considerations given to assure adequate programming for your target population. How will your agency serve families when English is a second language? Discuss how your agency will serve low- and moderate-income individuals and families.

E. Work plans – goals, objectives, and strategies.

Please use the format and instructions in Form B for writing your Work Plan. You may add as many goals, objectives, program activities/timelines and performance indicators as needed to explain what you are proposing and how you will measure your program's effectiveness. Your work plan should give reviewers a clear idea of how you are planning for purchasing appropriate and portable hearing screening equipment and supplies, and the distribution/utilization of hearing screening equipment to make hearing screening accessible to a large proportion of out-of-hospital birthed babies. Describe how you will distribute hearing screening equipment to providers and obtain signed user agreements. Be specific about how you will train providers conducting hearing screenings or ensure they are attending the required trainings. Be specific about how your program will maintain and upkeep hearing screening equipment, as well as your plan for replacement of hearing screening equipment. Describe how your program will reach diverse populations and/or cover a large geographic area. Be specific about ways your program will address health equity and quality improvement.

Note: If the application is approved and funded at the level requested, the Work Plan will be incorporated into the grant agreement between MDH and the applicant as Grantee's duties. Work Plans must be completed according to directions so they can be separated easily from the rest of the application.

Budget Section

Introduction

Before writing the budget, consider the specific activities planned and the resources (staffing, supplies, equipment, etc.) needed to conduct those activities. Are there resources already available? Are there resources that need to be purchased? Which items will need to be replaced during the grant period? Give consideration to the skills needed to carry out the grant activity and comply with any requirements, particularly the financial aspect of the grant. Budgeting for a financial staff person is allowable. Remember to include any training that will be needed for paid staff or volunteers.

Costs of entertainment, including amusement, diversion and social activities where no grant program information is disseminated, and any costs directly associated with such costs (tickets to shows/movies/sporting events, meals, lodging, rentals, transportation, and gratuities) are **unallowable**. For other unallowable costs see Attachment D: Unallowable Uses of MDH Grant Funds.

Required Budget Forms

The applicant will need to complete and submit the following budget forms. Detailed instructions for each form are on the form. These forms are in addition to the programmatic forms required in this RFP listed on page 15.

- Budget Justification Instructions and Form (Form C) for the time periods:
 - **January 1, 2023 through March 31, 2023 and**
 - **April 1, 2023 through March 31, 2024**
- Budget Summary Instructions and Form (Form D) for the time periods:
 - **January 1, 2023 through March 31, 2023 and**
 - **April 1, 2023 through March 31, 2024**
- Indirect Cost Questionnaire (Form E)
- Due Diligence Form (Form F)

Budget Scoring

The Budget Justification Form and the Budget Summary Form will be used for scoring the budget portion of the application. If supplementary information is included, it will not be taken into consideration for scoring purposes. Be sure to double check the calculations and use whole dollar amounts, no decimals.

3.4 Forms

- Application Face Sheet (Form A)
- Work Plan (Form B)
- Budget Justification (Form C)
- Budget Summary (Form D)
- Indirect Rate Questionnaire (Form E)
- Due Diligence (Form F)

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Form A: Application Face Sheet

General Applicant Information

Applicant Legal Name (do not use a “doing business as” name, must match what is in SWIFT if a current vendor):

Business Address (street, city, state, zip):

Minnesota Tax Identification Number:

Federal Tax Identification Number:

SWIFT Vendor ID Numbers (if you have one):

Director of Applicant Agency Information

Name:

Business Address (street, city, state, zip):

Phone Numbers:

Email:

Financial Contact for this Application

Name:

Phone Numbers:

Email:

Contact Person for this Application

Name:

Business Address (street, city, state, zip):

Email:

Requested Funding

Total Amount Requested \$

I certify that the information contained above is true and accurate to the best of my knowledge; that I have informed this agency’s governing board of the agency’s intent to apply for this grant; and, that I have received approval from the governing board to submit this application on behalf of the applicant.

Signature of Authorized Agent for Applicant: _____

Date of Signature: _____

Form B: Work Plan January 1, 2023 – March 31, 2024

Non-Profit Organization:

Contact Person for Work Plan including name, email, and phone number:

GOAL 1: Improve access to newborn hearing screening in out-of-hospital births.

Objective 1: Program will purchase and distribute appropriate and portable hearing screening equipment to out-of-hospital birth providers, obtaining signed user agreements.

Activity: **Instructions: Fill out your plan to purchase and distribute equipment, including details about sharing of equipment and user agreements, then delete these instructions.**

Activity: **Describe how your program will reach diverse populations and/or cover a large geographic area. Be specific about ways your program will address health equity and quality improvement then delete these instructions.**

Objective 2: Program will provide training for Out-of-hospital birth providers in hearing screening practices.

Activity: **Instructions: Fill out your plan to train providers, including details about frequency of trainings, then delete these instructions.**

Objective 3: Program will plan for ongoing sustainability of hearing screening for out-of-hospital births.

Activity: **Instructions: Fill out your plan to maintain equipment including calibrations, and purchasing supplies then delete these instructions.**

Activity: **Instructions: Establish a plan for replacement of hearing screening equipment then delete these instructions.**

Performance Indicator 1: By 03/01/2024, 90% of infants born with help from participating providers will receive a newborn hearing screen at their out-of-hospital birth.

Add more Goals/Objectives/Activities/Performance Indicators as needed to fully explain your proposal

Form C: Budget Justification - Instructions

Introduction

You will need to account for all your grant program costs under six different line items. The following paragraphs provide detailed information on what costs can go into those six lines. You will be required to show detailed calculations to support your costs. Failure to include the required detail could result in a delayed grant agreement if your application is selected for funding.

All costs under this grant must be prorated to reflect fair share of the expense to this program. For example, if a computer is purchased for one staff person who works .5 FTE on this grant and .5 FTE on another program, the cost for that computer should be split 50 – 50 by this grant and the other program.

If the grant agreement(s) are not fully executed in a timely manner, the award funded may be pro-rated to reflect the actual time frame the grant is in effect.

It is strongly suggested that applicants incorporate into their budgets the costs of appropriate financial staff to provide financial oversight to the grant. This could be through contracting with an individual or organization or a direct hire.

You are required to complete a Budget Justification form for each time period listed below:

- **January 1, 2023 through March 31, 2023 and**
- **April 1, 2023 through March 31, 2024**

Salary and Fringe:

For each proposed funded position, indicate the title, the full time equivalent (FTE) on this grant (see example below), the expected rate of pay, and the total amount applicant expects to pay the position for the year. Grant funds can be used for salary and fringe benefits for staff members *directly* involved in applicant's proposed activities.

Any salaries from the administrative support, accounting, human resources, or IT support, **MUST** be supported by some type of time tracking in order to be included in the Salary and Fringe line. Salary and fringe expenses not supported by time reporting documentation may be included in the indirect line if these unsupported salaries and fringe were included on the Indirect Cost Questionnaire form and approved by MDH. Any salary and fringe expenses not supported, not included on the Indirect Cost Questionnaire, and not approved by MDH are unallowable and may not be charged to this grant.

Full time equivalent (FTE): The percentage of time a person will work on this grant project. Each position that will work on this grant should show the following information:

EXAMPLE:

Public Health Nurse: \$30.40/hourly rate
 x2,080/annual hours (or whatever your agency annual standard is)

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\$63,232 annual salary

Multiply annual salary by your agency's fringe rate:

\$63,232 annual salary

x 23% fringe rate (use your agency fringe rate, 23% is just an example)

\$14,543 fringe amount

Provide the breakdown of what your fringe rate includes:

6.20% FICA

1.45% Medicare

3.00% Retirement

12.35% Insurance

23.00% Total Fringe Rate

Now add the annual salary and the fringe amount together:

\$63,232 annual salary

+\$14,543 fringe

\$77,775/annual salary and fringe total

Multiply the annual salary and fringe total by the FTE being charged to this grant:

\$77,775 annual salary and fringe total

X .50 FTE assigned to grant

\$38,888 total to be charged to grant for this position

Contractual Services

Applicants must identify any subcontracts that will occur as part of carrying out the duties of this grant program as part of the Contractual Services budget line item in the proposed budget. The use of contractual services is subject to State review and may change based on final work plan and budget negotiations with selected grantees. Applicants will be responsible for monitoring any subcontractors to ensure they are following all State, Federal, and programmatic regulations including proper accounting methods.

Applicant responses must include:

- Description of services to be contracted;
- Anticipated contractor/consultant's name (if known) or selection process to be used;
- Length of time the services will be provided; and,
- Total amount to be paid to the contractor.

Travel

List the expected travel costs for staff working on the grant, including mileage, parking, hotel, and meals. If project staff will travel during the course of their jobs or for attendance at educational events, itemize the costs, frequency, and the nature of the travel. Grant funds

cannot be used for out-of-state travel without prior written approval from MDH. Minnesota will be considered the home state for determining whether travel is out of state.

Non-tribal applicants:

Budget for travel costs (mileage, lodging, and meals) using the rates listed in [the State of Minnesota's Commissioner's Plan \(https://mn.gov/mmb-stat/000/az/labor-relations/commissioners-plan/contract/commissioners-plan-accessible.pdf\)](https://mn.gov/mmb-stat/000/az/labor-relations/commissioners-plan/contract/commissioners-plan-accessible.pdf).

Hotel and motel expenses should be reasonable and consistent with the facilities available. Grantees are expected to exercise good judgement when incurring lodging expenses.

Mileage will be reimbursed at the current IRS rate at the time of travel.

Tribal Nation applicants:

Budget for travel costs (mileage, lodging, and meals) using the rates provided by the [General Services Administration \(GSA\) \(http://www.gsa.gov/portal/category/100120\)](http://www.gsa.gov/portal/category/100120). Current lodging amounts and meal reimbursement rates vary depending on where the travel occurs in Minnesota.

Consult the breakdown of the current [Meals and Incidental Expense \(M&IE\) rates \(https://www.gsa.gov/travel/plan-book/per-diem-rates/mie-breakdown\)](https://www.gsa.gov/travel/plan-book/per-diem-rates/mie-breakdown) for Tribal Nations.

Mileage will be reimbursed at the current IRS rate at the time of travel.

Supplies and Expenses

Briefly explain the expected costs for items and services the applicant will purchase to run the program. These might include additional telephone equipment; postage; printing; photocopying; office supplies; training materials; and equipment. Include the costs expected to be incurred to ensure that community representatives, partners, or clients who are included in the applicant's process or program can participate fully. Examples of these costs are fees paid to translators or interpreters.

Other

Include in this section any expenses the applicant expects to have for other items that do not fit in any other category. Some examples include but are not limited to: hearing screening devices, staff training, and, incentives. Grant funds cannot be used for capital purchases, permanent improvements; cash assistance paid directly to individuals; or any cost not directly related to the grant. Expenses in the "Other" line should represent the appropriate fair share to the grant.

Indirect Costs

Indirect costs are expenses of doing business that cannot be directly attributed to a specific grant program or budget line item. These costs are often allocated across an entire agency and

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may include administrative, executive and/or supervisory salaries and fringe, rent, facilities maintenance, insurance premiums, etc.

The following are examples that could be included in indirect costs:

- Your department pays a general percentage to the city/county attorney's office or the sheriff's department and these costs cannot be specifically attributed to an individual grant.
- Your CHB or department pays a fee or percentage to the county/city human resources department and these costs are not tied to a specific grant.
- The CHBs accounting system does not allow community health services (CHS) administrator's time to be directly attributed to specific grant activities.

In contrast, administrative costs are expenses not directly related to delivering grant objectives, but necessary to support a particular grant program. These are items that while general expenses, can be attributed and appropriately tracked to specific awards. These items should be included in the grantee budget as direct expenses in the appropriate lines of Salaries and Fringe, Supplies, Contractual Services, or Other. They **should not** be included in the Indirect line.

The following are examples of administrative costs that should be included in direct lines of the budget and/or invoice:

- The CHS administrator's time that can be tracked through time studies to a specific grant (include in the Salary/Fringe line).
- A portion of secretarial/administrative support, accounting, human resources or IT support staff expenses that can be tracked through time studies to a specific grant (include in the Salary/Fringe line).
- Printing and supplies that your accounting system is able to track (for example through copy codes) to a specific grant (include in the Supply line).

Any salary costs included in the Salary and Fringe line of the budget and/or invoice must be supported by proper time documentation. The total allowed for indirect costs can be charged up to your federally approved indirect rate, or up to a maximum of 10%.

If the applicant will be using a Federally Negotiated Indirect Cost Rate, you will need to submit with your application your most current federally approved indirect rate.

Please go to the next page to start completing the Budget Justification Form.

Budget Justification

Complete one form for each time period listed on page 5.

Applicant Agency:

Contact Person for Budgets:

Phone number:

Email address:

Budget Period: to

1. Salary and Fringe

For each proposed funded position, list the title, the full time equivalent based on 2,080 hour/year, the expected rate of pay, fringe rate (%), total annual salary and fringe, and the percent of each position being charged to the grant. Failure to provide the requested detail for each position may result in a delayed grant agreement. Please refer to **page 21 – 22** for an example of how to show the salary/fringe expenses. Be sure to include a breakdown of your fringe benefit costs in the specified area below.

Justification:

Fringe Benefits Breakdown:

Total Salary and Fringe Requested \$

2. Travel

Explain the expected instate travel costs, including mileage, parking, lodging, and meals. If program staff will travel, itemize the costs, frequency and nature of the travel. Be sure to use the current IRS mileage rate and the appropriate meal amounts referenced on **page 23**.

Justification:

3. Total Travel Requested \$

3. Supplies and Expenses

Explain the expected costs for items and services that will be purchased to run the grant program. Include telephone expenses that are part of this proposal; cell phones and new telephone equipment to be purchased, if applicable. Estimate postage if part of the project. List printing and copying costs necessary for the project (other than occasional copying on an office copy machine). List office and program supplies and expendable equipment such as training materials, curriculum and software. Generally supplies include items that are consumed during the course of the project, equipment under \$5,000 and items such as rent for program space, participant transportation, participant training and other direct costs as needed.

Justification:

Total Supplies and Expenses Requested \$

4. Contractual

List the services that are expected to be contracted out, the contractor's name, whether the contractor is a non-profit or for-profit entity, the length of time the services will be provided and the total amount expected to be paid. Supplies and travel of the contractor should be included here, if applicable. Itemize equipment rented or leased for the project.

Justification:

5. Total Contractual Requested \$

5. Other

Briefly describe any expenses that do not fit in any other category. Examples include hearing screening devices, applicant staff training, incentives, gift cards, and emergency need cards.

Justification:

Total Other Requested \$

6. Subtotal

Add up the totals for lines 1 through 5.

Subtotal \$

7. Indirect

If applicable, enter the indirect cost rate being requested. The maximum that can be used is 10% unless using a federally approved indirect rate. %

Multiply the indirect percentage by the Subtotal and enter the dollar amount here. Be sure to use whole dollar amounts, no decimals. \$

8. Total

This is the sum of line 6 (subtotal) and line 7 (indirect). Be sure to double check your calculations as errors could result in a delay in executing a grant agreement. Use whole dollar amounts, no decimals.

Total \$

Form D: Budget Summary

Complete one form for each time period listed on page 5.

Applicant information

Applicant Agency:

Contact Person for Budgets:

Phone number:

Email address:

Budget Period: to

This form is used to capture the summarized information from the Budget Justification Form(s). Please enter zero (0) in the Total Proposed Amount column if no grant funds will be expended in a line item.

Be sure to double check your calculations as errors could result in a delay in executing a grant agreement. Use whole dollar amounts, no decimals.

<u>Line Item</u>	<u>Amount</u>
1. Salary and Fringe	\$
2. Travel	\$
3. Supplies and Expenses	\$
4. Contractual	\$
5. Other	\$
6. Subtotal	\$
7. Indirect	\$
8. Total	\$

Form E: Due Diligence 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.

Organization	Information
Name of MDH Grant Program applying for:	
Organization Name:	
Organization Address:	
If the organization has an Employer Identification Number (EIN), please provide EIN here:	
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: Organizational Structure	Points
1. How many years has your organization been in existence? <input type="checkbox"/> Less than 5 years (5 points) <input type="checkbox"/> 5 or more years (0 points)	
2. How many paid employees does your organization have (part-time and full-time)? <input type="checkbox"/> 0-1 (5 points) <input type="checkbox"/> 2-4 (2 points) <input type="checkbox"/> 5 or more (0 points)	
3. Does your organization have a paid bookkeeper? <input type="checkbox"/> No (3 points) <input type="checkbox"/> Yes, an internal staff member (0 points) <input type="checkbox"/> Yes, a contracted third party (0 points)	

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SECTION 1 POINT TOTAL	
Section 2: Systems and Oversight	
	Points
<p>4. Does your organization have internal controls in place that require approval before funds can be expended?</p> <p><input type="checkbox"/> No (6 points)</p> <p><input type="checkbox"/> Yes (0 points)</p>	
<p>5. Does your organization have written policies and procedures for the following processes?</p> <ul style="list-style-type: none"> • Accounting • Purchasing • Payroll <p><input type="checkbox"/> No (3 points)</p> <p><input type="checkbox"/> Yes, for one or two of the processes listed, but not all (2 points)</p> <p><input type="checkbox"/> Yes, for all of the processes listed (0 points)</p>	
<p>6. Is your organization's accounting system new within the past twelve months?</p> <p><input type="checkbox"/> No (0 points)</p> <p><input type="checkbox"/> Yes (1 point)</p>	
<p>7. Can your organization's accounting system identify and track grant program-related income and expense separate from all other income and expense?</p> <p><input type="checkbox"/> No (3 points)</p> <p><input type="checkbox"/> Yes (0 points)</p>	
<p>8. Does your organization track the time of employees who receive funding from multiple sources?</p> <p><input type="checkbox"/> No (1 point)</p> <p><input type="checkbox"/> Yes (0 points)</p>	
SECTION 2 POINT TOTAL	

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Section 3: Financial Health	Points
<p>9. If required, has your organization had an audit conducted by an independent Certified Public Accountant (CPA) within the past twelve months?</p> <p><input type="checkbox"/> Not Applicable (N/A) (0 points) – if N/A, skip to question 10</p> <p><input type="checkbox"/> No (5 points) – if no, skip to question 10</p> <p><input type="checkbox"/> Yes (0 points) – if yes, answer question 9A</p>	
<p>9A. Are there any unresolved findings or exceptions?</p> <p><input type="checkbox"/> No (0 points)</p> <p><input type="checkbox"/> 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.</p>	
<p>10. Have there been any instances of misuse or fraud in the past three years?</p> <p><input type="checkbox"/> No (0 points)</p> <p><input type="checkbox"/> Yes (5 points) – if yes, attach a written explanation of the issue(s), how they were resolved and what safeguards are now in place.</p>	
<p>11. Are there any current or pending lawsuits against the organization?</p> <p><input type="checkbox"/> No (0 points) – If no, skip to question 12</p> <p><input type="checkbox"/> Yes (3 points) – If yes, answer question 11A</p>	
<p>11A. Could there be an impact on the organization’s financial status or stability?</p> <p><input type="checkbox"/> 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.</p> <p><input type="checkbox"/> 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.</p>	
<p>12. From how many different funding sources does total revenue come from?</p> <p><input type="checkbox"/> 1-2 (4 points)</p> <p><input type="checkbox"/> 3-5 (2 points)</p> <p><input type="checkbox"/> 6+ (0 points)</p>	
SECTION 3 POINT TOTAL	

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Minnesota Office of Grants Management Policy 08-06 requires state agencies to assess a recent financial statement from nonprofit organizations before awarding a grant of over \$25,000 (excluding formula grants).

Section 4: To be completed by nonprofit organizations with potential to receive award over \$25,000 ONLY (excluding formula grants)	Points
<p>13. Does your nonprofit have tax-exempt status from the IRS?</p> <p><input type="checkbox"/> No - If no, go to question 14</p> <p><input type="checkbox"/> Yes – If yes, answer question 13A</p>	Unscored
<p>13A. What is your nonprofit’s IRS designation?</p> <p><input type="checkbox"/> 501(c)3</p> <p><input type="checkbox"/> Other, please list:</p>	Unscored
<p>14. What was your nonprofit’s total revenue (income, including grant funds) in the most recent twelve-month accounting period?</p> <p>Enter total revenue here:</p>	Unscored
<p>15. What financial documentation will you be attaching to this form?</p> <p><input type="checkbox"/> If your answer to question 14 is less than \$50,000, then attach your most recent Board-approved financial statement</p> <p><input type="checkbox"/> If your answer to question 14 is \$50,000 - \$750,000, then attach your most recent IRS form 990</p> <p><input type="checkbox"/> If your answer to question 14 is more than \$750,000, then attach your most recent certified financial audit</p>	Unscored

Signature

I certify that the information provided is true, complete and current to the best of my knowledge.

- **SIGNATURE:**
- **NAME & TITLE:**
- **PHONE NUMBER:**
- **EMAIL ADDRESS:**

Form F: Indirect Cost Questionnaire

Background

Applicants applying may request an indirect rate to cover costs that cannot be directly attributed to a specific grant program or budget line item. This allowance for indirect costs are a portion of any grant awarded, not in addition to the grant award. Please refer to **pages 23-24** for more detailed information on indirect costs.

Instructions

Please complete the information below and return this form as part of the application.

1. Name of applicant agency: _____
2. **Are you requesting an indirect rate?**
 Yes No
3. **Do you have an approved Indirect Cost Rate Agreement with a Federal agency?**
 Yes and that is the rate being requested. Please submit a copy of your current rate with this completed form.
 Yes but requesting a rate different from our Federally approved rate. _____
 No – Please continue completing the rest of this form.
4. **Non-federal indirect rate being requested:** _____
Up to 10% of the direct expenses in the budget for the grant program listed above can be used for indirect costs per CFR Part 200 - Uniform Administrative Requirements, Costs Principles, and Audit Requirements for Federal Awards, and per MDH policy for State funds.
5. **Please list the expenses included in your indirect cost pool below, or attach a copy of your current indirect cost allocation plan to this form.**

RFP Part 4: Attachments

- Attachment A: Criteria for Scoring Applications
- Attachment B: Link to MDH Grant Agreement Sample
- Attachment C: Minnesota Statute 144.966
- Attachment D: Unallowable Uses of MDH Grant Funds
- Attachment E: [Applicant Conflict of Interest Disclosure Form](#)
 - Follow link above to view Attachment E

Attachment A: Criteria for Scoring Applications

A numerical scoring system will be used to evaluate eligible applications. Scores will be used to develop final recommendations. Applicant's scores will be weighted on their ability to reach diverse populations and/or cover a large geographic area.

Applicants are encouraged to score their own application using the evaluation criteria before submitting their application. This step is not required but may help ensure applications address the criteria evaluators will use to score applications.

Scoring Guidelines – Key Principles for Reviewers

Please keep the following key principles in mind while scoring proposals:

- Evaluate the proposal using the selection criteria provided.
- Evaluate and score the proposal only on the information contained in the proposal.
- When scoring, each factor is weighted equally. Do not give more weight to one factor over another. Rather, follow the scoring as designated for criteria.
- When assigning a score, start in “the middle” of the total possible points and add or subtract points depending on the quality of the response. (Example: If the factor you are scoring is worth 5 points, start at 2.5 points and add or subtract points from there.)
- Only assign 0 points to a criterion or factor if it is missing or not addressed at all.

Rating Guide (for Reviewers)

- Excellent (5 points): Outstanding level of quality; significantly exceeds all aspects of the minimum requirements; high probability of success; no significant weaknesses, reviewers could not think of a better answer.
- Very Good (4 points): Substantial response; meets in all aspects and in some cases exceeds, the minimum requirements; good probability of success; no significant weaknesses.
- Good (3 points): Generally, meets minimum requirements; probability of success; significant weaknesses, but correctable.
- Marginal (2 points): Lack of essential information; low probability for success; significant weaknesses, but correctable.
- Unsatisfactory (1 point): Fails to meet minimum requirements; little likelihood of success; needs major revision to make it acceptable.

Writing Comments (for Reviewers)

The numerical scores you assign to a proposal's response to the selection criteria must be consistent with your comments. Therefore, if a criterion has almost a perfect score, you should have substantially more strengths than weaknesses.

- If the proposal is poorly written or organized, it should be noted as such. However, if the relevant information is found anywhere in the proposal, it should be considered in the score.

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- When referring to a specific part of the proposal in your comments, indicate the page number.
- Write or electronically enter comments that are clear, legible, and well-justified.
- Write comments that reflect a thorough review of the entire proposal.
- Use complete sentences and thoughts.
- Clearly state “no strengths” or “no weaknesses” when applicable.
- The comments should evaluate the strengths and weaknesses of the proposal, not just simply rehash the information contained in the submitted document.

Selection Criteria (100 points)

Applicant Information and Organizational Capacity (20 points)

1. Does the applicant clearly describe how their organization’s mission relates to this project and provide a clear summary of their program proposal? (5 points)
- Does the applicant have the organizational capacity (grant experience, administration, facilities, computer/internet access, cultural competency, readiness to use funds, etc.) to implement the project? (5 points)
- Does the applicant describe how they will contract with other agencies, including a description of the administrative structure of the contracting agencies and their experience in providing out-of-hospital births and newborn hearing screening? (5 points)
- Does the applicant provide a summary of relevant training and/or experience of the key persons who will be implementing the project, how they will be recruited, and safeguards in place to protect personnel and participants? (5 points)

Linkages and Collaboration (15 points)

- Does the applicant provide a clear description of their collaborative efforts with other organizations or professional practice groups? (5 points)
- Does the applicant provide a clear description of linkages with diverse cultural and/or geographical groups to assure outreach and access of services for families from various racial, ethnic, cultural, and geographic backgrounds? (5 points)
- Are collaborative relationships effective, well-established, and likely to assure coordination? (5 points)

Statement of Need (15 points)

- Has the applicant identified the community need or target population that the applicant hopes to address with the application, and why the applicant is suited to provide services to the target population? (5 points)
- Does the applicant include in their description of need: any racial, ethnic, or geographic disparities related to families who are planning out-of-hospital births, and a clear description of how they will provide culturally appropriate outreach and services to families from diverse backgrounds, including families where English is their second language? (5 points)

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Does the applicant include in their description of need: a clear description of the how their program approach will serve low- and moderate-income individuals and families? (5 points)

Work Plan: Goals, Objectives, Strategies (35 points)

Did the applicant propose appropriate and realistic activities likely to improve the ability of out-of-hospital birth providers to provide newborn hearing screening? (5 points)

Does the applicant clearly describe how they are planning to purchase and distribute appropriate and portable hearing screening equipment and supplies, including receiving signed user agreements from providers? (5 points)

Do they include a plan for maintenance and upkeep of equipment? (5 points)

Do they include a plan for replacement of hearing screening equipment and a sustainability plan for how they will continue hearing screening in out-of-hospitals births after the funding period ends? (5 points)

Does the applicant clearly describe how they will train providers conducting hearing screenings or ensure they are attending the required trainings? (5 points)

Does the work plan clearly define deliverables and outcomes? Do they include specific timelines/milestones and outcomes that will be used to demonstrate the program's effectiveness? (5 points)

Does the applicant clearly describe how they will reach diverse populations and/or cover a large geographic area? (5 points)

Budget (15 points)

Are the budget forms complete? (5 points)

Is the information contained in the budget and work plan consistent? (5 points)

Are the projected costs, reasonable, cost-effective, and sufficient to accomplish the proposed activities? (5 points)

Attachment B: Grant Agreement Sample

[MDH Sample Grant Agreement \(https://www.health.state.mn.us/docs/about/org/cfh/expl-nonchb.pdf\)](https://www.health.state.mn.us/docs/about/org/cfh/expl-nonchb.pdf)

Link contains sample language only. If awarded a grant, your actual language may vary.

Attachment C: Minnesota Statute 144.966

In 2007, [Minnesota Statute section 144.966](#) mandated the reporting of newborn hearing screening results and added hearing loss to the panel of more than 50 rare conditions for which every newborn in Minnesota is screened unless parents opt-out. Among many items, this legislation requires:

- A physician, nurse, midwife, or other health professional attending a birth outside a hospital or institution shall provide information, orally and in writing, as established by the Department of Health, to parents regarding places where the parents may have their infant's hearing screened and the importance of the screening.

Attachment D: Unallowable Uses of MDH Grant Funds

Unallowable costs are expenditures in which grant funds cannot be used. MDH does have the right to disallow expenditures if grantees do not obtain prior approval. The MDH Grant Manager will be reviewing invoices and reserves the right to question and/or take action for inappropriate uses of funds. The following list of unallowable uses of grant funds include, but are not limited to, the following:

- Alcohol or any illegal substance
- Any cost not directly related to the grant and its approved work plan and budget
- Bad debts
- Capital improvements
- Cash assistance paid directly to individuals to meet their personal or family needs
- Contingencies
- Contributions or donations
- Costs incurred prior to or after the grant award (unless otherwise indicated)
- Direct patient medical services or care
- Fines and penalties
- Gifts for staff
- Goods or services for personal use
- Grant writing
- Interest
- Lobbying at the federal or state level
- Losses on agreements or contracts
- Memberships to clubs, camps, fitness centers and similar groups
- Mischarging of costs
- Personal electronic devices, such as Smart phones, iPhones, iPads, etc.
- Political campaigns on behalf of, or in opposition to, any candidate for public office
- Raffles
- Research
- Scholarships (e.g. camp fees and scholarships for individuals to participate in events)
- Staff meals (except during approved travel, or approved events where majority of participants are non-grantee staff)
- Supplanting of funds from other sources
- Transportation (except during approved travel)
- Treatment of a disease or disability