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Florida HEALTH

Vision: To be the **Healthiest State** in the Nation

Ron DeSantis
Governor

Scott A. Rivkees, MD
State Surgeon General

Questions and Answers
RFA #20-001
Florida Department of Health - Office of Minority Health and Health Equity - Closing The Gap Grant Program (CTG)

DATE: April 3, 2020

TO: Applicants

FROM: Office of Minority Health and Health Equity, Closing the Gap Grant Program
               Florida Department of Health

SUBJECT: Questions and Answers: RFA #20-001

RFA20-001 Questions Received via RequestforApplication@flhealth.gov

1. We are interested in developing a data infrastructure that would enhance capacity to assess clients' SDOH needs, refer clients to community services to address these needs, and support data analytics to track improvement in SDOH. Would the development of data infrastructure and tracking/analytic capacity qualify as an evidence-based intervention as required by the RFP?

Unfortunately, Closing the Gap (CTG) Grant Programs are direct service based as directed by the Florida Statute. In addition, current software exists (e.g. Social Solutions) which achieves similar functions and outcomes. Lastly, considering this is a new project there is no evidence to substantiate this process as an Evidence-based intervention (EBI).

Please reference Appendix A of the Request for Application (RFA) for a list of EBIs to consider.

2. During the 11-month project period, we anticipate that we will observe improvements in process measures, such as referral to community-based services (e.g. for food access, transportation, employment services). Although we would anticipate these process measures would ultimately lead to improved health outcomes in the target population, measurable improvements in health outcomes may not yet be observed during the 11-month project period. The proposed evaluation plan would focus primarily on assessing the impact of the intervention on process measures, with the long-term goal of developing recommendations for a next phase of implementation and a longer-term evaluation plan as a project deliverable. Would this be acceptable?

Considering the small implementation period of this grant (i.e. 11-months), program efforts should be primarily focused on short term outcomes. Short term outcomes refer to changes in the level of knowledge, attitudes, beliefs and skills of the target population. However, short term

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outcomes could also include increasing personnel capacity so that the delivery of services are more efficient.

Applicants should outline a process evaluation which examines how successful the program followed the strategy laid out in the logic model, particularly the first three segments (i.e. the inputs, activities, and outputs) and how they work together.

For this grant cycle, evaluation findings from the initial plan are deemed a requirement. Your proposed long-term outcome should be revised. Use this logic model as reference when developing your evaluation plan and [logic model](#) for your program.

3. Where can we find a current list of the Florida Front Porch Communities or can you share the list of Florida Front Porch Communities with us?

The current list of Front Porch Communities we have is from 2008 as designated by the Florida Senate. We attempted to reach out the Department of Economic Opportunity for a more up-to-date list; however, we were unable to reach anybody. We have provided the working list we have below:

Central City (Daytona Beach)
-Dorsey-Riverbend (Ft. Lauderdale)
-Duval Area (Gainesville)
-East Tampa (Tampa)
-Gifford (Vero Beach)
-Goldsboro (Sanford)
-Greater Frenchtown (Tallahassee)
-Greater Pensacola (Pensacola)
-Greater South Central (St. Petersburg)
-Holden Heights (Orlando)
-Newtown (Sarasota)
-Northwood, Pleasant City, NW (W. Palm Beach)
-Opa-Locka (Opa-Locka)
-Riverside (Miami)
-Rogers, Rousch Field, Singletary, & Washington (Bradenton)
-Sherwood Forest (Jacksonville)
-South Immokalee (Immokalee)
-West Bartow (Bartow)
-West Ocala (Ocala)

4. Can virtual educational classes/presentations be considered an activity to meet an educational deliverable?

Given the current pandemic, virtual education and training opportunities are considered an appropriate method of service delivery. However, once face-to-face interactions are deemed safe, direct contact is expected to serve as the primary method of delivery for all. Be sure to clearly describe all methods for community recruitment and engagement for all virtual activities in your application. If selected, grantees will be responsible for submitting supporting documentation to verify participant attendance (i.e. sign-in sheets, meeting recordings.).

5. Some of the priority areas have several goals. Can we select 1 goal, or do we need to select all goals under the priority area?

For this grant cycle, completion of all goal areas as listed in Appendix A are not required. This list was created only as a resource for applicants to use and in no way is considered a comprehensive list of evidence-based interventions and goals for the eleven priority areas. We encourage you to select goals based on the needs of the service area, target population and the capacity and resources of your agency or organization.
Thus, you may define alternative goals as long as they are supported by an accredited evidence-based interventions source.

6. Can we submit one proposal for multiple priority areas?

Yes. However, it is highly recommended that the selected priority areas be complimentary in nature (i.e. Cardiovascular Disease and Diabetes or Prostate Cancer and Social Determinants of Health). Applications should clearly state the basis, capacity, target population, and evidence-base intervention (EBI) to address the selected priority area(s). Reference the Request for Application (RFA) for additional guidance on this topic.

This is not a competitive solicitation subject to the notice or challenge provisions of section 120.57(3), Florida Statutes.