Reducing Breastfeeding Disparities through Continuity of Care

Establishing REACH Breastfeeding Continuity of Care Funding Opportunity

FREQUENTLY ASKED QUESTIONS

ELIGIBILITY

1. What is REACH?

REACH is a national program administered by the Centers for Disease Control and Prevention (CDC) to reduce racial and ethnic health disparities. It stands for Racial and Ethnic Approaches to Community Health (REACH). CDC currently funds 31 recipients to reduce health disparities among racial and ethnic populations with the highest burden of chronic disease (i.e., hypertension, heart disease, Type 2 diabetes, and obesity) through culturally tailored interventions to address preventable risk behaviors (i.e., tobacco use, poor nutrition, and physical inactivity).

Eligible applicants for the Establishing REACH Breastfeeding Continuity of Care Request for Applications opportunity must be located within and working with one of these REACH communities, as well as serving the same population. Review the current REACH recipients on this link below:


2. Can a REACH recipient agency be the grantee? Can REACH awardees apply for this funding directly?

REACH recipients themselves are not ELIGIBLE to apply to receive funds...but will work in partnership with a selected grantee in their community. Note that a letter of support from the REACH recipient agency will need to accompany the proposal submission.

3. Can Nonprofit organizations working in breastfeeding can apply? Can Universities partner with REACH communities and apply for this grant?
Yes. Eligibility is for agencies located within a CDC REACH grant recipient jurisdiction. Any Local Health Department, Community health center, or any organizations that are in the same jurisdiction of a REACH recipient and Serving the same community as one of CDC REACH recipients (African American and/or underserved populations)

4. **Is this opportunity limited to REACH partnerships that were not funded in the first round? Are you looking for people who have received previous NACCHO funding to go deeper on required elements or are you looking for new REACH/Health Partner collaborations?**

All agencies within the 31 REACH recipients communities qualify, as long as they outline the REACH partnership activities, with the exception of the two FY19 NACCHO Community Health Centers grantees (HealthNet (IN), Bluestem (NE).

5. **If the REACH grantee didn’t specify breastfeeding as a goal, is that a problem?**

This is not a problem, as long as the REACH recipient agrees to work in collaboration with the applicant on breastfeeding continuity of care, and states these activities in their letter of support.

**DELIBERABLES**

1. **If my organization already has established all the mandatory activities, do I need to choose new ones?**

Yes. If you do already conduct these activities, or had recently completed one (i.e: community assessment), you can choose to enhance/advance them. However, if you do not feel the need to advance them, you will need to choose new policies, systems, environmental solutions activities that will contribute to your organizational capacity to promote, protect and support breastfeeding in a consistent way. In addition, you must work together on at least one or two continuity of care activities with your REACH recipient. Ensure to note in your work plan that your center already provide the mandatory activities.
2. Are grantees allowed to select which BF evidence-based model will work for their site?

Absolutely. While there are mandatory activities, each grantee should conduct NACCHO’s organizational assessment to identify unique gaps to be addressed, and select breastfeeding evidence-based policies, and practices that best suit their needs.

3. Can you give examples of PSE breastfeeding activities successfully implemented by community organizations in the past?

This story from the field from Esperanza Health Centers, a previous NACCHO grantees, describes internal continuity of care/ systemic breastfeeding support shift created by the grantee with leadership support.


In addition, these two journal articles also provide many examples of PSE interventions implemented by past grantees, which included health departments, breastfeeding coalitions, non-profits and health centers.

https://journals.sagepub.com/doi/metrics/10.1177/0890334418759055
https://journals.sagepub.com/doi/full/10.1177/0890334418757957

FUNDING ALLOCATION

1. Is there a set rate for allowable indirect costs?

No. This grant will provide your organization with a Goods & Services contract, meaning that NACCHO will reimburse grantees upon receipt of deliverables and invoices outlining approved project expenses. This grant requires the development an 8-month line-item budget proposal, which clearly outlines the dollar amount and a narrative cost justification for each line item, and will be graded according to the proposed activities and reasonable expenses to achieve them.
Other allowable/ Non-allowable expenses are listed below:

• Expenses Not Allowed include:
  – Alcoholic Beverages
  – Bad Debts
  – Contributions and Donations
  – Entertainment Costs
  – Fines and Penalties
  – Goods and Services for Personal Use
  – Lobbying
  – Losses on Other Awards
  – Exam Fees (e.g., IBCLC exam fee)

2. Can funding be allocated to conduct Big latch on in August 2020??

  No. The grant period for this opportunity ends in July 31, 2020, so activities should be complete by then. In addition, the work plan activities should outline Policies, Systems and Environmental solutions to be implemented with the goal of establishing community Continuity of Care.

3. Is it appropriate to budget for evaluation support? Will NACCHO be providing all guidance on evaluation and ALL tools, or will some of that be up to us to decide on?

  Applicants may develop their own activities and state them in the work plan. If evaluation support will be needed to complete activities, then you should budget accordingly and provide justification of how this activity fits in with the goals of the grant of implementing PSE activities internally and the goal of establishing breastfeeding continuity of care within the communities.

  NACCHO will provide initial organization assessment tool and recommended resources for other potential activities, such as staff knowledge assessment, community assessment questions, etc.

  For more questions and answers, please contact breastfeeding@naccho.org
For additional resources: Visit:https://naccho.org/programs/community-health/maternal-child-adolescent-health/breastfeeding