Funding Opportunity Overview
Building a Breastfeeding Support Model for Community Health Centers
Agenda

1. Welcome and Introductions
2. NACCHO
3. Breastfeeding Project Overview
4. Overview of the Funding Announcement
5. Application Selection & Submission
6. Question & Answer
NACCHO is comprised of nearly **3,000 local health departments** across the United States. Our mission is to **improve the health of communities** by strengthening and advocating for local health departments.
Our Work

- Advocacy
- Partnerships
- Funding
- Training and education
- Networking
- Resources, tools, and technical assistance
NACCHO Breastfeeding Program Background


• Funded and supported 72 local breastfeeding programs/services (2015-2016)

• Developed webinar series, capacity briefs, shared lessons learned, stories, journal articles, and provided training/TA (2016-2018)

• For more info: https://bit.ly/2NLsDmt
FY2019 new project overview:

REDUCING DISPARITIES IN BREASTFEEDING THROUGH CONTINUITY OF CARE
Project Goals

1. Increase operational capacity of LHDs and the broader local public health system to support breastfeeding through PSE changes that strengthen breastfeeding continuity of care.

2. Increase awareness of best practices to increase breastfeeding initiation, exclusivity and duration rates in African American and underserved communities.

3. Strengthen national partnerships to address and expand access to peer and professional support, enhance workplace breastfeeding practices, and support effective maternity care practices.
**Project Activities**

- Develop a blueprint for community support continuity of care, in partnership with other national organizations
- Provide technical assistance to state and local health departments and community based organizations
- Develop a breastfeeding support model for community health centers
Reducing Disparities in Breastfeeding through Continuity of Care

Building a Breastfeeding Support Model for Community Health Centers (CHCs)

FUNDING ANNOUNCEMENT
Building a Breastfeeding Support Model for CHCs

- Funding for a 6-month project for community health centers

Purpose
- Pilot implementation of breastfeeding policies, systems and environmental solutions to increase organizational capacity to support breastfeeding
- Develop and maintain internal/external public health partnerships critical to building community support for breastfeeding.

Goal
- Increase breastfeeding initiation, duration, and exclusivity among African American and underserved populations in the U.S.
RFA Highlights

- Total Available Funds: $60,000
- Number of Awards: 3-6
- Period of Performance: Not to Exceed 6 months
- Range of Awards: $10,000-$20,000
- Anticipated Start Date: February 1, 2019
- Contract End: July 31, 2019
- Type of Award: Goods & Services contract
## Schedule of Events

<table>
<thead>
<tr>
<th>Event</th>
<th>Date/Time</th>
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</thead>
<tbody>
<tr>
<td>Application Submission Deadline</td>
<td>January 6, 2019 6:30 pm E.T.</td>
</tr>
<tr>
<td>Award Notification Date</td>
<td>January 21, 2019</td>
</tr>
<tr>
<td>Contract due to NACCHO</td>
<td>January 31, 2019</td>
</tr>
<tr>
<td>Anticipated Contract Start Date</td>
<td>February 1, 2019</td>
</tr>
<tr>
<td>Mid-March</td>
<td>1\textsuperscript{st} Submission of deliverables to NACCHO &amp; distribution of grant money</td>
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<tr>
<td>Mid-May to End-May</td>
<td>2\textsuperscript{nd} Submission of deliverables to NACCHO &amp; distribution of grant money</td>
</tr>
<tr>
<td>Mid-July to End-July</td>
<td>Submit remaining deliverables &amp; distribution of final grant money</td>
</tr>
<tr>
<td>End-July</td>
<td>Final Report Due</td>
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Eligibility

Community Health Centers that provide comprehensive primary care services, and

- Provide prenatal and postpartum services AND
- Serves predominantly African American and/or Underserved Populations
  - At least 50% of population is African American and/or Underserved
  - Underserved populations may include low income (as defined by Medicaid Eligibility) or other Racial/Ethnic minority groups (e.g. Native American, Hispanic, etc.)

Note: Preference will be given to health centers located in the same service jurisdiction of CDC REACH grantees

Eligibility: Health Centers Only

Community Health Centers (CHCs) provide comprehensive primary care services to over 23 million people in the United States, regardless of a person’s ability to pay.

- FQHCs, rural health clinics, free clinics, healthcare centers

Note:

- Local health departments are NOT eligible to apply for this funding unless they operate a community health center.
- A stand-alone WIC clinic is NOT considered a community health center.
- If WIC is co-located within a health center, the center could apply.
Contract Terms

No modifications to the terms or contract language will be made. Organizational applicants that cannot agree to NACCHO’s standard contract language should NOT apply for this initiative.

- NACCHO’s standard contract language is provided in the RFA Announcement.
- NACCHO will **reimburse** grantees, bi-monthly (i.e., every other month), upon receipt of deliverables and invoices outlining approved project expenses.
Expectations (Scope of Work)

1. Attend virtual monthly grantee meetings (day and time TBD)

2. Develop and refine a 6-month work plan with SMART objectives that includes the adoption of policies, systems, and environmental solutions

3. Participate in assessments to determine training and technical assistance needs of the organization and staff.

4. Participate in project-related webinars, quarterly individual calls, and other activities to support Breastfeeding Project activities

5. Implement activities, as defined in the project work plan.

6. Collect and report data to facilitate understanding of barriers and facilitators of implementation.

7. Participate in project-related evaluation activities, including pre-post assessments, and other identified evaluation activities, and provide written recommendations (final report)
NACCHO Support

Provide background information related to the project

Support an online community of practice portal

Provide direct technical assistance for completion of tasks

Provide tools, guidance, and assistance for evaluation

Assist in the development of sustainability plans
Building a Breastfeeding Support Model for Community Health Centers (CHCs)

PROPOSAL RESPONSE
Proposal Response Format

A. Problem Statement
B. Proposal Overview
C. Organizational Capacity and Experience
D. Work Plan and Timeline
E. Budget Proposal
F. Attachments
A. Problem Statement (max 500 words)

Describe the target population, providing:

- Community demographics (e.g., racial/ethnic data, population size)
- Breastfeeding data related to the population served by the center
- Disparities in breastfeeding initiation, duration, and exclusivity in your county/city/state
- Community landscape of breastfeeding support services
B. Proposal Overview (max 750 words)

Describe, in detail, how you propose to meet each of the project goals and specifications outlined above in order to enhance your organization/agency and community’s ability to:

(a) implement evidence-based breastfeeding policies, practices within your organization; and
(b) develop and maintain internal/external public health partnerships for breastfeeding.
C. Organizational Capacity (max 700 words)

Describe your organization’s:

• Mission and structure.
• Staff qualifications and experience engaging in breastfeeding promotion efforts.
• Capacity to collect or obtain data regarding services provided and women served.
• Readiness to start this project by February 1, 2019.
Project Work Plan and Timeline

* Detailed 6-month work plan for the project period
  - Work plans should not exceed 4 pages
  - Work plans should be submitted using the **template provided** in the RFA
  - Work plan objectives/activities should clearly indicate a partnership between community organizations/or internal collaborations, and how the partnership benefits the organizations and the community served.

<table>
<thead>
<tr>
<th>OBJECTIVE:</th>
<th>By March 2016, establish formal referral partnership with 2 hospitals for follow-up breastfeeding support.</th>
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</thead>
<tbody>
<tr>
<td>ACTIVITY</td>
<td>TIMELINE</td>
</tr>
<tr>
<td>Identify hospitals and staff within 25 miles of target community to provide referral services</td>
<td>Jan 2016 – March 2016</td>
</tr>
</tbody>
</table>

**ANTICIPATED PRODUCTS OR RESULTS**
- Establishment of MOUs with 2 local hospitals to facilitate breastfeeding follow-up referrals.
Examples of Breastfeeding PSE solutions activities

Applicants must include the activities related to policies, practices, systems and environmental changes

- Internal assessment /Education Needs Assessment*
- Breastfeeding support policy development*
- Consistent Messaging/Materials
- Community Resource Guide development
- Referral Network & forms
- Peer/Professional Led Support Groups or individual counseling
- Prenatal provider and pediatric/family provider partnerships
- Provide prenatal breastfeeding education and postpartum support*
- All-staff breastfeeding training*
- Engagement with a Local Breastfeeding Coalition *
- Culturally attuned Social Marketing campaigns*

* Denotes mandatory activities
Mandatory activities

1. Conduct an breastfeeding support Gap Analysis/Staff Education Needs Assessment/Organizational Assessment

2. Develop a Referral form and establish a network for Community Lactation Support or within health center support

3. Provide initial and On-going all- staff training to improve or enhance skills of current staff in lactation care, counseling and case management in a community setting

4. Develop or actively participate Local Breastfeeding Coalition or Advisory Board development and planning; or active participation on existing ones

5. Provide evidence-based breastfeeding information and support to all pregnant and postpartum families and caregivers

6. Develop or identify Social Marketing campaigns with culturally sensitive breastfeeding-friendly images throughout the health center and elimination of any marketing display of breast milk substitutes
**6-month Budget (not to exceed $20,000)**

<table>
<thead>
<tr>
<th>Allowed Expenditures</th>
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<tbody>
<tr>
<td>✰ Staff Salary &amp; Fringe Benefits Costs</td>
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<tr>
<td>✰ Indirect Costs for Overhead</td>
</tr>
<tr>
<td>✰ Consultant Costs</td>
</tr>
<tr>
<td>✰ Supplies to Support Project Activities</td>
</tr>
<tr>
<td>✰ Project-Related Travel</td>
</tr>
<tr>
<td>✰ Staff Training</td>
</tr>
<tr>
<td>✰ Other Project-Related Expenses</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Non-Allowed Expenditures</th>
</tr>
</thead>
<tbody>
<tr>
<td>✰ Alcoholic Beverages</td>
</tr>
<tr>
<td>✰ Bad Debts</td>
</tr>
<tr>
<td>✰ Contributions and donations</td>
</tr>
<tr>
<td>✰ Entertainment Costs</td>
</tr>
<tr>
<td>✰ Fines and Penalties</td>
</tr>
<tr>
<td>✰ Goods and Services for Personal Use</td>
</tr>
<tr>
<td>✰ Lobbying</td>
</tr>
<tr>
<td>✰ Losses on Other Awards</td>
</tr>
<tr>
<td>✰ Exam Fees</td>
</tr>
</tbody>
</table>
Attachments

Vendor Information Form (template provided)

Letters of Support (2-3)

A-133 or Certification of Non-applicability (not required)
Vendor Information Form

* Applicants must complete the **Vendor Information Form** and attach to application

![Vendor Information Form](image)

<table>
<thead>
<tr>
<th>Organization</th>
<th>Official Name of Organization:</th>
</tr>
</thead>
<tbody>
<tr>
<td>NACCHO Member #</td>
<td>____________________________</td>
</tr>
<tr>
<td>DUNs Number</td>
<td>____________________________</td>
</tr>
<tr>
<td>EIN Number:</td>
<td>____________________________</td>
</tr>
<tr>
<td>Size of Population Served</td>
<td>____________________________</td>
</tr>
<tr>
<td>Street Address:</td>
<td>____________________________</td>
</tr>
</tbody>
</table>

**Primary Contact**

| Name: | ____________________________ |
| Title: | ____________________________ |

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**National Associations of County & City Health Officials**

**NACCHO**

National Association of County & City Health Officials
Letters of Support

- Fiscal Agent (Person eligible to establish a contract)
- One from Leadership
- From partner organization (not mandatory)
Reducing Disparities in Breastfeeding through Continuity of Care

Building a Breastfeeding Support Model for Community Health Centers

SELECTION CRITERIA AND SUBMISSION
Submission Instructions

Due 1/6/2019 at 6:30 ET

Responses received after this deadline will not be considered

Create a NACCHO account

Link: http://application.naccho.org

Auto-confirmation of receipt applications

Receipt of applications does not guarantee verification of completeness
## Selection Criteria

<table>
<thead>
<tr>
<th>Complete:ness of the Proposal Narrative</th>
<th>Community Needs</th>
<th>Evidence of agency capacity to carry out the proposed activities</th>
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<tbody>
<tr>
<td>Evidence of history of working in collaboration with key stakeholders</td>
<td>Ability to start proposed work plan by 2/1/2019</td>
<td>Realistic and appropriate budget</td>
</tr>
<tr>
<td>Letter(s) of Support</td>
<td>Demonstration of overall commitment</td>
<td>Submission of all required information and documents</td>
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Award Notices

Award notifications are anticipated to be made on or about January 21, 2019

Selected applicants

- Notification via email
- Submission of standard NACCHO contract for approval
- Standard contract will include: Award Amount, Purpose of Grant, Scope of Work, and Terms and Condition

Non-selected applicants will be notified by letter of the final outcome by February 2019
Application Tips

- Read the entire RFA and application materials BEFORE writing
- Read and follow instructions for completing the application and supporting documents
- Read the selection criteria
- Complete the Budget Worksheet
- Turn in application no later than 6:30 p.m. ET on January 6, 2019
- Remember that the RFA is the primary guide to programmatic requirements
- Contact breastfeeding@naccho.org for questions
Application Technical Assistance Resources

NACCHO Breastfeeding Project Website

Organizational Breastfeeding Support resources:

✓ 9 Steps to Breastfeeding Friendly: Guidelines for Community Health Centers and Outpatient Care Settings.

✓ Breastfeeding Friendly Washington Community Health Clinics
https://www.doh.wa.gov/ForPublicHealthandHealthcareProviders/BreastfeedingFriendlyWashingtonClinics#tensteps

✓ Breastfeeding Friendly Health Departments
http://www.health.state.mn.us/divs/oshii/bf/healthdeptBFF.html

✓ Breastfeeding in the Community: Addressing Disparities Through Policy, Systems, and Environmental Changes Interventions:
http://journals.sagepub.com/doi/metrics/10.1177/0890334418759055
FAQs

Frequently Asked Questions

NACCHO
National Association of County & City Health Officials
Are local/ state health departments eligible to apply?

* If your LHD operates a community health center, you would absolutely be eligible to apply for funding.

* Local health departments are NOT eligible to apply - unless they also operate a community health center that provides comprehensive primary care services, such as Prenatal Care, and/or Pediatric services.

* A WIC clinic is NOT considered a community health center, although many are located within a health center. In this case, the health center could apply, and WIC can support project activities.
Does the health center need to be a NACHC member?

* No.

A health clinic that only offers prenatal and postpartum breastfeeding education and support is eligible to apply?

* No.
What are the deliverables for this grant?
The activities outlined in your work plan, including a final report with lessons learned, barriers, facilitators and recommendations that will be incorporated into a draft of a national Breastfeeding Support Model for community health centers.

If my center already has established all the mandatory activities, do I need to choose new ones?
Yes. You can choose new ones, but you can also choose to further advance/enhance the mandatory activities.
Questions

Questions can be submitted to the chatbox, and later to breastfeeding@naccho.org