

Olympic Area Agency on Aging

Frequently Asked Questions Rural Health Equity Grants for Clallam County

For accessibility questions or accommodations, please contact: Ingrid Henden at ingrid.henden@dshs.wa.gov or 360.207.1025.

Does the applicant need to be a nonprofit or government agency to be eligible?

No. However, applicants must have a Tax ID or State Vendor number, and awardees will need to submit a copy of their W9.

Can the project serve communities outside of Clallam County?

Yes. Projects may be based in Clallam or Jefferson County and serve communities in one or both counties.

Can Rural Equity Advisory Team (REAT) members apply?

Yes. Any REAT members who apply will not be allowed to review and score received proposals.

Can multiple organizations collaborate on a project?

Yes. However, only one organization is fiscally responsible, submits the application, and handles all documentation. Subcontracts will need to be approved by O3A.

What are examples of projects related to COVID-19 health equity impacts?

Projects should support COVID-19 prevention, mitigation and/or recovery for highrisk or underserved populations, including people living in rural areas, racial and ethnic minority groups and other disadvantaged populations.

Please note, this is not a complete list of possible projects.

- Increasing awareness and education on COVID-19 prevention, testing and vaccination for rural populations
 - o Increasing testing in rural areas
 - o Increasing contact tracing and follow-up
 - Improving emergency preparedness and response capacity in rural communities
- Rural Paramedicine for COVID-19 testing and vaccination. This approach can build community capacity to reach underserved groups such as home bound residents and other adults 65+ years.
- Increasing behavioral health access in rural communities.
- Increasing supports and services for rural residents with long-haul COVID-19 symptoms.
- Design improvements to address rural residents who already face barriers to



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care exacerbated by COVID-19 such as transportation issues, childcare needs to make healthcare visits, limited access to relevant specialists, or being uninsured or under-insured, lack of technology to participate in telehealth interactions from home.

- Recovery from the COVID-19 impacts on healthcare, behavioral health, and public health workforce.
- Recovery from the COVID-19 impacts on key community assets integral to the health of the community.
- Youth strategies, such as structured activities or opportunities meant to assist recovery from the social isolation, depression and anxiety suffered during the pandemic.
- Health promotion programs to address common risk factors for COVID-19, such as heart disease or obesity.
- Community resilience projects to reduce social isolation and strengthen community bonds.
- Outreach and engagement around deferred health care.
- Mobile units to provide outreach, testing, prevention and preparedness supplies, and other items.

What are examples of projects that increase behavioral health access in rural communities?

Activities could include, outreach campaigns aiming to increase awareness of existing services, or to destignatize care, coordinating existing or new services, or training opportunities for current providers (on trauma informed care, for instance, or other emerging best practices). Additional projects could include translation of written resources, pay for local translators or on- demand translation resources, or to pay for staff at a partner organization to expand linkage to behavioral health care services (a CHW, or other staff coordinator, for instance).

How much total funding is available to distribute? \$300,000

What are the minimum and maximum amounts awarded for this grant?

Minimum: There is no minimum.

Maximum: Initial Award: \$75,000; projects may be able to receive additional funding.



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What expenses are not allowable?

Unallowable expenses include, but may not be limited to, clinical care (outside of wraparound services and COVID-19 testing), furniture and most equipment more than \$5,000, vehicles, purchase of COVID-19 vaccine, food and beverages, cash incentives, research, political or legislative campaigns, and needle exchanges.

Are retroactive expenses allowable?

No. Costs incurred before the contract effective date are not allowed.

Are indirect costs allowable?

Yes – in a limited form. Staff time can be paid through the grant funding.

Are COVID-19 vaccination incentives allowable?

Yes, but they need prior approval. If you are interested in providing incentives, you need to reach out to O3A to work through approvals before providing them. Incentives have been approved previously in the form of generic gift cards, store vouchers, fare cards for transportation, and/or gas cards. Incentives are allowable for any dose.

Can one organization complete the application for multiple projects?

Yes. One organization can apply for multiple projects. Each project needs to be a separate application.

How are applications being reviewed?

After closing, all applications will be initially reviewed by the O3A Contracts Manager to ensure project expenses are allowable. Then, applications will be reviewed by members of O3A Advisory Council Allocations Committee and the REAT using a scoring rubric. REAT members who submit a proposal will not be allowed to review proposals.

What kind of project updates will be required?

Monthly billing reports and a monthly or quarterly performance report.

What is a sustainability plan?

For information about what a sustainability plan is please visit this link.

What are in-kind contributions?

*In-Kind Contributions are those items that the proposer donates toward the project – volunteer hours, other employees not billing time to the project but working on it, donated supplies (anything not billed to the project).