

Notice of Funding Opportunity

Government of the District of Columbia Department of Health
HIV/AIDS, Hepatitis, STD, and TB Administration

H A H S T A

The Effi Barry Training Institute Application



RFA Number: HAHSTA_EBTI_07.03.20

Application Deadline: Monday, August 3, 2020 at 6:00 PM

Late applications cannot be accepted



DC | HEALTH
GOVERNMENT OF THE DISTRICT OF COLUMBIA



The Department of Health (DC Health) reserves the right to, without prior notice, reduce or cancel one or more programs listed in this Request for Applications (RFA), reject all applications, adjust total funds available, or cancel the RFA in part or whole. Funding levels in the respective program areas and budget amount in the award, if awarded, sub grant agreement is contingent on

continued funding, sub grantee performance, and/or reduction, elimination, or reallocation funds by a federal grantor, the Executive Office of the Mayor (EOM) of the Government of the District of Columbia and/or the Department of Health in accordance with applicable sections within the sub grant award and/or agreement.

Pre-application Conference:



DATE: **Wednesday, July 8, 2020**
TIME: **2:30 PM – 4:00 PM**

VIRTUAL ZOOM CALL

<https://us02web.zoom.us/j/8178711891>

Zoom/Conference

Meeting ID: 817 8711 8910

(Call Access) - One tap mobile +13017158592-81787118910#

Application Deadline:



DATE: **Monday, August 3, 2020**
TIME: **by 6:00 pm**
WHERE: **Application submission must be done electronically through the Enterprise Grants Management System (See pages 7-9)**

Applications submitted after 6:00 PM cannot be accepted.



You may download this application from:

www.dchealth.dc.gov/ebtifunding

<http://opgs.dc.gov/page/opgs-district-grants-clearinghouse>

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Effi Barry Training Institute Grant 2020

**DEPARTMENT OF HEALTH (DC Health)
HIV/AIDS, HEPATITIS, STD, & TB ADMINISTRATION (HAHSTA)
NOTICE OF FUNDING AVAILABILITY
RFA #HAHSTA_EBTI 07.03.20**

Effi Barry Training Institute

The District of Columbia, Department of Health (DC Health), HIV/AIDS, Hepatitis, STD, and TB Administration (HAHSTA) is soliciting applications from qualified applicants to provide services in the program areas described in this Notice of Funding Availability (NOFA). The Request for Applications (RFA) will be released under a separate announcement with guidelines for submitting applications, review criteria, and DC Health terms and conditions for applying and receiving funding.

– **General Information:**

| | |
|-------------------------------|--|
| Funding Opportunity Title | Effi Barry Training Institute |
| Funding Opportunity Number | FO-HAHSTA-PG-00061-002 |
| Program RFA ID Number | HAHSTA _EBTI 07.03.20 |
| Opportunity Category | Competitive |
| DC Health Administrative Unit | HIV/AIDS, Hepatitis, STD & TB Administration (HAHSTA) |
| DC Health Program Bureau | Capacity Building, Housing, and Community Partnership Division |
| Program Contact | Anthony.Fox@dc.gov |
| Program Description | The awardee shall provide capacity building, trainings, technical assistance, and logistical support determined by HAHSTA based on needs assessed or requests received from prospective HAHSTA and non-Ryan White grantees, non-funded community-based organizations, and current Ryan White grantees or contractors in the Washington, DC eligible metropolitan area (EMA). |
| Eligible Applicants | 501(c)3, not-for-profit within the Washington, DC eligible metropolitan area (EMA). Applicants may be individual organizations or partnerships in collaborations of organizations; one of which must serve as fiscal agent and a Memorandum of Agreement attached with the application. |
| Anticipated Number of Awards | 1 |
| Anticipated Amount Available | \$1,000,000 |
| Floor Award Amount | \$700,000 |
| Ceiling Award Amount | \$1,000,000 |

Funding Authorization

| | |
|--|---|
| Legislative Authorization | DC Appropriated & Ryan White HIV/AIDS Treatment Extension Act of 2009 |
| Associated CFDA Number | 93.914 |
| Associated Federal Award ID Number | H89HA00012 |
| Cost Sharing / Match Required? | No |
| RFA Release Date | July 3, 2020 |
| Pre-App Meeting (Date) | July 8, 2020 |
| Pre-App Meeting (Time) | 2:30 pm-4:00 pm |
| Pre-Application Meeting (Location/Conference Call Access) | Zoom Virtual Conference Meeting https://us02web.zoom.us/j/81787118910 Meeting ID: 817 8711 8910 One tap mobile +13017158592 - 81787118910# |
| Letter of Intent Due Date | Not applicable |
| Application Deadline Date | August 3, 2020 |
| Application Deadline Time | 6:00 PM |
| Links to Additional Information about this Funding Opportunity | DC Grants Clearinghouse http://opgs.dc.gov/page/opgs-district-grants-clearinghouse . DC Health EGMS https://dcdoh.force.com/GO_ApplicantLogin2 |

Effi Barry Training Institute Grant 2020

RFA Terms and Conditions

District of Columbia Department of Health The following terms and conditions are applicable to this and all Requests for Applications issued by the District of Columbia Department of Health (DC Health) and to all awards, if funded under this RFA:

- Funding for a DC Health subaward is contingent on DC Health's receipt of funding (local or federal) to support the services and activities to be provided under this RFA.
- DC Health may suspend or terminate an RFA pursuant to its own grant making rule(s) or any applicable federal regulation or requirement.
- The RFA does not commit DC Health to make any award.
- Individual persons are not eligible to apply or receive funding under any DC Health RFA.
- DC Health reserves the right to accept or deny any or all applications if the DC Health determines it is in the best interest of DC Health to do so. An application will be rejected if it does not comply with eligibility requirements, formatting or submission requirements outlined in the RFA. DC Health shall notify the applicant if it rejects that applicant's proposal for review.
- DC Health reserves the right to issue addenda and/or amendments subsequent to the issuance of the RFA, or to rescind the RFA. The prospective applicant is responsible for retrieving this information via sources outlined in the RFA (e.g. DC Grants Clearinghouse).
- DC Health shall not be liable for any costs incurred in the preparation of applications in response to the RFA. The Applicant agrees that all costs incurred in developing the application are the applicant's sole responsibility. No funds already awarded the applicant under other instruments or agreements shall be used by the applicant to fund the preparation of the application.
- DC Health may conduct pre-award on-site visits to verify information submitted in the application and to determine if the applicant's facilities are appropriate for the services intended.
- DC Health shall determine an applicant's eligibility by way of local and federal registries for excluded parties' searches and documents and certifications submitted by the applicant.
- The Applicant Organization must obtain a Data Universal Numbering System (DUNS) number to apply for funding and register for the federal System for Award Management (SAM) at www.sam.gov prior to award.
- DC Health reserves the right to require registry into local and federal systems for award management at any point prior to or during the Project Period. This includes DC Health electronic grants management systems, for which the awardee will be required to register and maintain registration of the organization and all users.
- DC Health may enter negotiations with an applicant and adopt a firm funding amount or other revision of the applicant's proposal that may result from negotiations.

- DC Health shall establish terms of agreement for an award funded under this RFA. If funded, the applicant will receive a Notice of Grant Award (NOGA). The NOGA will establish the project period (i.e. the total number of years for which funding has been approved) and define any segments of the Project Period (e.g. initial partial year, or a 12-month budget period). The NOGA shall outline conditions of award or restrictions.
- Continuation of funding, if awarded shall be based on availability of funds, documented satisfactory progress in interim and annual reports, continued eligibility and determination that the continued funding and activities is in the best interest of the District of Columbia.
- DC Health shall provide the citations to the local or federal statute/s and implementing regulations that authorize the award; all applicable District of Columbia and Federal regulations, including OMB Circulars 2 CFR 200 (effective December 26, 2014) and Department of Health and Services (HHS) published 45 CFR Part 75, and supersedes requirements for any funds received and distributed by DC Health under legacy OMB circulars A-102, A-133, 2 CFR 180, 2 CFR 225, 2 CFR 220, and 2 CFR 215; payment provisions identifying how the awardee will be paid for performing under the award; reporting requirements, including programmatic, financial and any special reports required by the funding Agency; and compliance conditions that must be met by the awardee.
- If there are any conflicts between the terms and conditions of the RFA and any applicable federal or local law or regulation, or any ambiguity related thereto, then the provisions of the applicable law or regulation shall control and it shall be the responsibility of the applicant to ensure compliance.

Additional information about grants management policy and procedures may be obtained at the following site: www.opgs.dc.gov (click on Information) or click here: City-Wide Grants Manual.

If your agency would like to obtain a copy of the DC Health RFA Dispute Resolution Policy, please contact the Office of Grants Management and Resource Development at grants.doh@dc.gov or call (202) 442- 9237. Your request for this document will not be shared with DC Health program staff or reviewers. Copies will be made available at all pre-application conferences.

EFFI BARRY TRAINING INSTITUTE GRANT

RFA # HAHSTA_EBTI_07.03.20

Thank you for your interest in applying for the Effi Barry HIV Program. As an applicant for DC public funds, there is documentation you need to provide that is a requirement of DC law and regulation.

Requirements for Applications

- ✓ Applicants must be registered in the federal Systems for Award Management (SAM) and the DC HEALTH Enterprise Grants Management System (EGMS).
- ✓ Complete your EGMS registration **two weeks** prior to the application deadline.
- ✓ Start constructing and uploading your application components into EGMS at least a week prior to the application deadline.
- ✓ The complete **Application Package** should include the following:

| | |
|-----------------------------|-----------------------------------|
| Table of Contents | Federal District & DC Health |
| Project Abstract | Assurances, and Certification |
| Project Narrative | Documents (in EGMS and sign & |
| Work Plan (appendix A) | upload as an attachment (appendix |
| Project Budget (appendix B) | C) |
| Mandatory Certification | Mandatory Disclosures (completed |
| Documents | in EGMS) |
| | DC Health Standard Grant Terms |
| | and Conditions (reviewed & |
| | accepted via EGMS) |

- ✓ Documents requiring signature have been signed by an agency head or AUTHORIZED Representative of the applicant organization.
- ✓ The Applicant needs a DUNS number to be awarded funds. Go to Dun and Bradstreet to apply for and obtain a DUNS # if needed.

The Project Narrative is written on 8½ by 11-inch paper, **1.0 spaced, Arial or Times New Roman font using 12-point type with one-inch margins**. Numbering: Sequentially from page 1 to the end of the application, including all charts, figures, tables, and attachments. **The total size of all uploaded files may not exceed the equivalent of 30 pages when printed. Applications that do not conform to these requirements will not be forwarded to the review panel.**

The application proposal format conforms to the “Application Elements” listed in the RFA.

The proposed budget is complete and complies with the budget forms provided in the RFA. The budget narrative is complete and describes the categories of items proposed.

The proposed work plan, logic model, and other attachments are complete and comply with the forms and format provided in the RFA

Submit your application via EGMS by **6:00pm** on the deadline of **August 3, 2020**.

Applicants are encouraged to attend the Pre-Application Virtual Conference Meeting via Zoom Conference on Friday, July 8, 2020 from 2:30 PM – 4:00 PM. The virtual meeting will give applicants more information about the Effi Barry Institute, program components, and requirements. It will also be an opportunity to ask questions about the application. Electronic copies of the RFA will be made available for review.

The Pre-Application Conference will provide an overview of the programmatic requirements. Additionally, there will be an overview of the review process being employed for this RFA and a 30-minute presentation on Enterprise Grants Management System (EGMS), the new electronic application submission process.

Internet

Applicants who received this RFA via the Internet or other links, and do not plan to join the Zoom pre-application virtual meeting conference must e-mail HAHSTA at Brenda.Hicks@dc.gov with the information listed below. Please be sure to put “RFA Contact Information” in the subject box, including the following information:

- Name of
- Organization Key
- Contact Person
- Mailing Address
- Telephone and Fax Number E-mail Address

Questions Regarding the RFA

Applicants who have questions about the RFA must submit their questions via e-mail to Brenda.Hicks@dc.gov, no later than **Friday, July 17, 2020 by 6:00pm**. HAHSTA will post all Frequently Asked Questions (FAQ), addenda and/or amendments to this RFA on the Office of Partnerships and Grant Services (OPGS) www.opgs.dc.gov DC Clearinghouse website by **Tuesday, July 21, 2020**.

Notice of Intent to Apply

A notice of intent to apply (NOI) *is not required* for consideration under this funding announcement.

Effi Barry Program History

Enacted by the Council of the District of Columbia in 2008, the “Effi Slaughter Barry HIV/AIDS Initiative Act” was placed into law. Effi Slaughter Barry, a former First Lady of the District of Columbia, was among the first public figures in the District to focus attention on the growing health problem of HIV/AIDS; she was a trained and experienced health professional, was a champion of HIV/AIDS prevention and wellness and was particularly concerned with the dearth of services East of the River; and at the time of her death, September 6, 2007, she was Director of Special Projects in the Office of the Director of the Department of Health, providing direct leadership to the East of the River HIV/AIDS Initiative.



Effi Barry

Since that time, the Council of the District of Columbia and DC Health HAHSTA have invested over \$4,950,000 in District-based organizations through the Effi Barry HIV/AIDS Program/East of the River Project. To date the Effi Barry HIV Program has provided capacity building grants and group/individual-level capacity building assistance to over 100 organizations based in the District of Columbia. This effort has directly benefitted their ability to develop new innovative approach and/or expand a range of prevention programs that promote testing, maintain treatment, STI, PEP, PrEP, and eliminate stigma. The overarching mission of the Effi Barry HIV Program is to provide training, technical assistance, and resources to the HIV field that will assist in transforming their organizations, partnerships, business practices, systems, and structure to make them sustainable and effective in service to District and metropolitan area residents.

Effi Barry Training Institute Background and Expectations

The Government of the District of Columbia, Department of Health (DC Health) HIV/AIDS, Hepatitis, STD and TB Administration (HAHSTA) is soliciting applications from organizations throughout the DMV region to serve as the administrator of the Effi Barry Training Institute (EBTI). The EBTI is a capacity-building and training center for HAHSTA that seeks to strengthen the DMV-wide community-based organizations, medical and non-medical providers and community members to implement the strategies framed in the National HIV/AIDS Strategy, the District’s 90/90/90/50 Plan, the District’s Ending the Epidemic Plan, the Integrated HIV Care and Prevention Plan, and adapt to the changes in the public health, healthcare and organizational systems with special on the aftermath of COVID-19.

HAHSTA intends to make a single award to fund the Effi Barry Training Institute for development, implementation, administration, facilitation and provision of web-based learning, training, technical assistance, logistical support and capacity building to support regional community members, providers, and organizations in the Washington, DC eligible metropolitan area (EMA), including the District of Columbia, Suburban Maryland, Northern Virginia, and West Virginia. It is our expectation that the funded organization’s staff and leadership be diverse to ensure that the outcomes listed below are met from a culturally and linguistically appropriate framework.

Outcomes: The institute is expected to demonstrate measurable progress toward addressing the

short- term outcomes listed below. These include:

1. Increased accessibility, availability and utilization of culturally and linguistically appropriate capacity building assistance including state-of-the-science information, training, and technical assistance including consultation, services, and facilitation of peer-to-peer mentoring for all service areas and supporting activities.
2. Improved capacity of the community providers and workforce to implement innovative approaches to high impact prevention, HIV care/treatment, and supporting activities, including increases in their knowledge, skills, self-efficacy, and intended use of capacity; and
3. Improved provision of quality service approaches that are available to consumers within the Washington DC regional area.

Program Goals: The institute is expected to establish web-based learning, training and technical assistance activities that are centered around the following goals of the Institute.

1. Develop and implement a comprehensive needs assessment of current and prospective HAHSTA grantees and community-based organizations to inform the development of a comprehensive training and capacity building delivery strategy to address community needs and enhance overall program implementation and sustainability.
2. Offer, evaluate, and report on all web-based learning, training and technical assistance activities that will be offered and delivered to current and prospective HAHSTA grantees and community-based providers to increase knowledge and knowledge transfer of HIV status neutral (Hi-V) model, harm reduction strategies, client centered services, health insurance policies, expansion and development of third party billing systems, linkage of data to monitor HIV health outcomes, and unit-based cost models; HIV service competencies; advanced skills in health care systems; data and health informatics; and high impact prevention and public health strategies, including biomedical and emerging evidence-based or informed approaches.

a. **Training**

- i. A combination of in-person, agency-wide or agency specific, regional and or e-learning trainings.
- ii. Develop training calendars with posting and other promotional information for prior HAHSTA approval.
- iii. Develop training programs (including training manuals, participant manuals, and slides training outline).
- iv. Create a marketing plan using all appropriate media to promote regional trainings or webinars.
- v. Track and report training data, ensure quality training data, confirm participant registration, develop a reminder process, and attendance form.

- b. **Technical Assistance (TA)**
 - i. Facilitation of expert programmatic or technical consultation for services.
 - ii. Assessment of organizational infrastructure.
 - iii. Establishing or strengthening relationships among non-healthcare and healthcare components; and
 - iv. Assess the feasibility of a billing system for HIV prevention or treatment training support.
- 3. Develop, test, and implement organizational tool, an evaluation strategy and performance measures for an initial 60-and 90-day evaluations. Collection of performance measures with 80% of program participants increased knowledge, skills, behavior changes and or completion of TA benchmarks.
- 4. Develop a market plan for technical assistance, trainings, and Web-based e-learning activities for HAHSTA grantees and other community-based organizations.
- 5. Launch Capacity Building Assistance Spanish trainings /webinars based on selected topics.

Application Preparation and Submission

A. Application Format

- a. Font size: 12-point Times New Roman
- b. Spacing: Double-spaced
- c. Paper size: 8.5 by 11 inches
- d. Page margin size: 1 inch
- e. Numbering: Sequentially from page 1 to the end of the application, including all charts, figures, tables, and attachments.

B. Application Elements

Some application sections will be entered directly into EGMS, while other sections will be uploaded as attachments, e.g. program narrative. Applications must conform to the page requirements by section detailed below.

An application package includes the following components:

- A. Abstract: A project abstract must be submitted with the application forms. All electronic project abstracts must be uploaded in a PDF file format when submitting via EGMS. The abstract must be submitted in the following format:
 - a. Maximum of 1 page
 - b. Font size: 12 point unreduced, Times New Roman
 - c. Single spaced
 - d. Written in plain language (i.e., avoid jargon, unexplained acronyms, and confusing sentence structure)
 - e. The project abstract must contain a summary of the project activities suitable for dissemination to the public. It should be a self-contained description of the project and should contain a statement of objectives.
- B. The Program Narrative must be submitted in the following format:
 - a. Maximum number of pages: 10 pages.
 - b. If the narrative exceeds these page limits, only the first 15 pages within the page limit will be reviewed.
 - c. Number all narrative pages; not to exceed the maximum number of pages.
 - d. The funding opportunity announcement number must appear in the application.
 - e. A complete table of contents to the application and its appendices and attachments must be provided
 - f. The narrative should address activities to be conducted over the entire project period (date of award to September 30, 2023) and must include the following items in the order listed:
 - i. Organizational Capacity
 - ii. Program Experience
 - iii. Program Monitoring and Evaluation Plan

1. **Organization Capacity:** Applicants must describe organizational capacity (i.e., infrastructure, staff expertise, resources) to provide capacity building and technical assistance services to organizations and communities serving diverse racial, ethnic, cultural, gender identity and sexual orientation populations. (2 pages maximum)
 2. **Program Experience:** Describe your organization's program experience as it relates to the provision of capacity building/technical assistance services to any of the following entities: health departments, planning groups, community-based organizations, and/or other community stakeholders serving diverse racial, ethnic, cultural, gender identity and sexual orientation populations as demonstrated by agency documentation, training and TA products, feedback from recipients of your services, and self-assessment of previous service delivery performance. Additionally, describe types of services provided and list any culturally, linguistically, and developmentally appropriate curricula and materials that the organization has developed or adapted for organizations serving diverse racial, ethnic, cultural, gender identity and sexual orientation populations. (6 pages maximum)
 3. **Program Monitoring/Evaluation:** Describe your processes for data collection, management, and analysis related to stated program goals and objectives. Also, describe your plan for using the process and outcome monitoring and evaluation data to improve your capacity building services, include a logic model for capacity building services. (2 pages maximum). **Work Plan:** Applicant must also complete the work plan attachment (Appendix A). The work plan should include proposed targets and the goals and objectives for the proposed program. (Appendix not included in page count)
- C. **Budget and Staffing Breakdown and Justification:** Provide a detailed budget by cost categories (i.e., salaries and wages, fringes, travel) for all proposed program activities. Justify all operating expenses in relation to the planned activities. Be precise about the program purpose of each budget item and itemize calculations wherever appropriate. (Not included in the page limit, Appendix B is available at a tool and guide)
- a. For each contract and consultant mentioned in the application budget:
 - i. Describe the type(s) of organization(s) or party(ies) to be selected and the method(s) of selections; identify the specific contractor(s), if known
 - ii. Describe the services to be performed and justify the use of a third party to perform these services
 - iii. Provide a breakdown of and justification for the estimated costs of the contracts and consultants.
 - iv. Specify the period of performance.
 - v. Describe the methods to be used for contract monitoring.
 - vi. Provide a job description for each position specifying job title, function, general duties, and activities. Also provide salary range or rate of pay and the level of effort and percentage of time to be spent on activities that would be funded through this funding opportunity. If the identity of any key person filling a position is known, his/her name and resume should be attached.

Experience and training related to the proposed project should be noted.

- b. HAHSTA reserves the right to not approve or fund all proposed activities. For the budget justification, provide as much detail as possible to support each requested budget item. List each cost separately when possible. Provide a brief description for each staff position including job title, general duties and activities related to this grant, including the rate of pay and whether it is hourly or salary and the level of effort expressed as how much time will be spent on proposed activities for each staff position. Describe this “time spent” as a percentage of full time equivalent or FTE (e.g., 50% FTE for evaluation activities)
 - c. DC Health will recognize and accept the federally negotiated and approved indirect cost rates of an applicant, per OMB 2 CFR.414. If an applicant does not have a federally negotiated rate, it may apply a maximum of ten percent (10%) of the amount budgeted for a direct service will be permitted for all administrative or indirect costs activities.
- D. Federal, District and DC Health Statements of Assurances and Certifications (Reviewed and Accepted via EGMS). Also, scan an upload **one copy SIGNED** by the Agency Head or authorized official. SEE APPENDIX C
- E. Mandatory Disclosures (Reviewed, Completed and Submitted via EGMS)
- F. DC Health Standard Grant Terms and Conditions (Reviewed and Accepted via EGMS)
- G. Mandatory Certification Documents* (Not counted in page total. Scan and upload **ONE PDF** file containing the following business documents required for submission uploaded into EGMS)
- a. A current business license, registration, or certificate to transact business in the relevant jurisdiction
 - b. 501(c)(3) certification (for non-profit organizations)
 - c. City Wide Clean Hands Compliance Status Letter (formerly Certificate of Clean hands)
 - d. Official list of Board of Directors on letterhead and signed by the authorized executive of the applicant organization

Failure to submit the required assurance package will make the application ineligible for funding consideration (required to submit applications) or ineligible to sign/execute grant agreements (required to sign grant agreements).

The Applicant Abstract, Table of Contents and the Program Narrative should be uploaded to EGMS as one PDF document and the Budget and Work plan as separate PDF documents.

The number of pages designated above represents the **maximum number of pages permitted per section**. Applications exceeding the maximum number of pages for each section **will not be forwarded for review**.

Note: If selected for a Notice of Intent to Fund, the applicant organization will be required to submit the following additional documents pre-award:

- Comprehensive Automobile Insurance, if applicable for organizations that use company vehicles to administer programs for services funded by grant award
- Certification of current/active Articles of Incorporation from DCRA
- Proof of Insurance for: Commercial, General Liability, Professional Liability, Comprehensive Automobile and Worker's Compensation
- Certificate of Occupancy
- Most Recent Audit and Financial Statements
- Other specialized licenses, etc. required by federal and District laws to conduct business this RFA supports.

Application Submission (Enterprise Grants Management System)

Department of Health application submissions must be done electronically via Department of Health's Enterprise Grants Management System (EGMS), DC Health's web-based system for grant-making and grants management. To apply under this funding opportunity, the applicant organization must register in EGMS and establish an account for the authorized representative.

If the applicant organization has an account already, please ensure that the Primary Account User is authorized to apply on behalf of the organization and his/her account is active. Currently, Secondary Account Users **do not** have submission privileges but can work in EGMS to prepare (e.g. upload documents, complete forms) the application.

IMPORTANT: When the Primary Account User is applying, ensure that there are no other transactions on another device being attempted in EGMS under that Primary Account User's credentials. For security purposes, the system will only acknowledge one transaction and one of the transaction attempts may fail, if done simultaneously.

Register in EGMS

DC Health recommends that applicants create an EGMS account, establishing a Primary Account User as the authorized representative **at least two weeks** prior to the application submission deadline. There is no guarantee that the authorized representative would have an approved account if the registration process does not begin at least **two weeks** prior to the deadline. Deadline-day registrations may not be approved by the DC Health Office of Grants Management in time for submission. To register, complete the following:

IMPORTANT: WEB BROWSER REQUIREMENTS

1. **Check web browser requirements for EGMS** - The DC Health EGMS Portal is supported by the following browser versions:
 - a. Microsoft ® Internet Explorer ® (Microsoft Edge)
 - b. Apple ® Safari ® version 8.x on Mac OS X

- c. Mozilla ® Firefox ® version 35 & above (Most recent and stable version recommended)
 - d. Google Chrome ™ (Most recent and stable version recommended)
2. **Access EGMS:** The user must access the login page by entering the following URL in to a web browser: [https://dcdoh.force.com/GO ApplicantLogin2](https://dcdoh.force.com/GO_ApplicantLogin2). Click the button REGISTER and following the instructions. You can also refer to the [EGMS External User Guide](#).
3. Determine the agency's Primary User (i.e. authorized to accept terms of agreement, certify and submit documents, request and accept modifications). The Primary User will determine a Secondary User and send a notification via EGMS for him/her to set-up an account.
4. Your EGMS registration will require your legal organization name, your **DUNS # and Tax ID#** to complete the registration. Your EGMS registration will also require your SAM (System for Award Management) expiration date to be entered into your agency profile. Please ensure that you have an active SAM registration (www.sam.gov).
5. When your Primary Account User request is submitted in EGMS, the DC Health Office of Grants Management will review the request. If the requester is NOT the identified Executive Director, DC Health Office of Grants Management will make an additional request for the Executive Director to send an email to DC Health to confirm that the requester is the authorized representative for EGMS. When requested, your authorized representative should send to grants.doh@dc.gov the name, title, telephone number and email address of the desired Primary User for the account. **SUBJECT LINE: EGMS PRIMARY USER_____ AGENCYNAME**. Note: The email will help to support the validation of authorized users for EGMS. DC Health official grant records will also be used. Please reply asap to any requests from Office of Grants Management to provide additional information, if needed.
6. Once you register, your Primary Account User will get an auto-notice to upload a "DUNS Certification" – this will provide documentation of your organization's DUNS. You can simply upload a scanned copy of the cover page of your SAM Registration.

EGMS User Registration Assistance:

Office of Grants Management at grants.doh@dc.gov assists with all end-user registration if you have a question or need assistance: Primary Points of Contact: Jennifer Prats (202) 442-8983 and Clara McLaughlin (202) 442-9237. Here are the most common registration issues:

- Validation of the authorized primary account user
- Wrong DUNS, Tax ID or expired SAM registration
- Web browser

Review the EGMS External User Recorded Webinar for information on the submission process and navigation of EGMS.

<https://dcnet.webex.com/dcnet/ldr.php?RCID=957d2b20dd173112ea7c2bb1025fc>

[b33](#) (If you have trouble linking, try Google Chrome and not Internet Explorer)

Grant Disbursements

The Effi Barry HIV Institute awardee will receive a total of 4 payments in the grant year. The first payment will consist of one-quarter of the overall grant award upon submitting advance/invoice. The remaining three payments of the grant will be disbursed upon the participants spending 80% of the previous disbursement.

For More information

Please contact:

Brenda Hicks
Capacity Building, Housing and Community Partnership
Division HIV/AIDS, Hepatitis, STD, and TB Administration
(HAHSTA) Department of Health
899 North Capitol Street, NE - 4th Floor
Washington, DC 20002
Phone (202) 671-4900
Fax (202) 671-4860



REVIEW AND SELECTION OF APPLICATIONS

Pre-Screening – All applications will be reviewed initially for completeness, formatting and eligibility requirements by DC Health personnel prior to being forwarded to the external review panel. Incomplete applications and applications that do not meet the eligibility criteria will not advance to the external review. Applicants will be notified if their applications did not meet eligibility.

External Review Panel – The review panel will be composed of neutral, qualified, professional individuals who have been selected for their unique experiences in tobacco control and smoking cessation, public health and prevention health program planning and evaluation, and social services planning and implementation. The panel will review, score and rank each applicant's proposal based on the criteria outlined in the RFA. Individual panel members are required to provide a summary of strengths and weaknesses found in the application.

For this competition, HAHSTA will conduct a two-part review process based on both the submission and a pre-decisional site visit. The overall evaluation will consist of an analysis of the written submission and the results of a site visit. The written proposal is weighted at 40 points and site visit is weighted at 60 points each, for a maximum of 100 points available.

Written proposal/ Program Narrative– 40 points available

The extent to which the applicant:

- A. Organizational Capacity (10 points)
 - a. Demonstrates a comprehensive understanding of the purpose and intended outcomes of the RFA.
 - b. Demonstrates infrastructure, capacity, experience, and expertise to implement entire proposed program.
 - c. Demonstrates defined roles for staff and/or consultants to implement entire proposed program.
 - d. Demonstrates current or future availability of staff and/or consultants with experience and expertise to effectively implement program components.

- B. Program Experience: (15 points)
 - a. Demonstrates program experience and/or expertise with the target audience.
 - b. Demonstrates an established track record and/or expertise in providing culturally, linguistically and developmentally appropriate information, training, technical assistance, and/or capacity building materials development for the target audience.
 - c. Demonstrates acceptability and credibility as a current or future provider of information, training, technical assistance, and/or capacity building materials development for the target audience.

- C. Program Monitoring/Evaluation: (10 points)
 - a. Proposes a data collection and evaluation plan that is consistent with their work plan and that is feasible and likely to demonstrate grantee performance outcomes, including successes and continuous quality improvement.
 - b. Develops a comprehensive work plan for the first project year
 - i. Outcomes: The extent to which the project work plan outcomes are achievable and address the purpose of the RFA.
 - ii. Objectives: The extent to which the project work plan objectives are aligned with the RFA and are specific, measurable, achievable, realistic, and time-based (SMART).
 - iii. Activities: The extent to which the project work plan activities are achievable, able to build capacity in the target audience, and likely to lead to the attainment of the proposed work plan objectives.

- D. Budget and Staffing (5 points)
 - a. Develops a budget and justification that is accurate and supports the implementation of the work plan activities.
 - b. Develops a staffing plan that adequately supports the implementation of the project.

Site Visit – 60 points available

- A. Organizational Infrastructure – 20 points
 - a. The applicant organization has the appropriate foundational resources to support the grant and has adequate human resources (including experience and diversity of staff and leadership), space and other resources to support the proposed project.
- B. Organizational History of Service Provision – 15 points
 - a. The applicant organization describes and demonstrates activities that align with the proposed description of services to be provided.
- C. Fiscal Systems – 15 points
 - a. The applicant organization has the capacity to ensure sufficient financial systems and resources to support the grant.
- D. Organizational Sustainability – 5 points
 - a. The applicant organization has the capacity to ensure the continuance of programs, endurance and growth of the organization.
- E. Data Collection and Reporting – 5 points
 - a. Organizational system has the capacity to collect and report required data elements.

The site visit shall include a tour of the organization, to include the facility where proposed services will be offered. HAHSTA anticipates that site visits will occur September 14-18, 2020 and will last approximately one and a half hours. Site visits will be scheduled prior to September 11, 2020. At that time, HAHSTA will share site visit preparation guidelines.

Internal Review – DC Health program managers will review the individual and summary recommendations of the external review panel and make recommendations for awards. Program Managers will weigh the results of the review panel against other internal and external factors in making the final funding determinations. Those factors will include minimally a past performance review, risk assessment and eligibility assessment, including a review of assurances and certifications, and business documents submitted by the applicant, as required in the RFA. DC Health will also conduct an excluded parties list search (EPLS) of the organization and executives via the federal System for Award Management (SAM) and conduct an DC Clean Hands review to obtain DC Department of Employment Services and DC Office of Tax and Revenue compliance status.

In this phase of the review process, DC Health reserves the right to request clarifying supplemental information from applicants and request on-site pre-decisional reviews for those applicants being considered for award. Any request for supplemental information or on-site visits is not a commitment by DC Health to fund the applicant.

The internal review panel prepares and submits a formal recommendation of prospective awardees, funding levels and service/activities to the DC Health Director for signature. The DC Health Office of Grants Management is responsible for certifying that all District rules and standards were followed for the RFA process.

Funding Decisions

Based on the total scores from the site visit, written proposal, and internal review of eligible applications, HAHSTA will prepare and submit a formal recommendation of prospective awardees, proposed funding levels to the DC Health Director for approval. The final funding recommendations will ensure that the overall portfolio of funded services meets the overall programming needs of the jurisdiction.

Pre-Award Activities

Successful applicants will receive a letter of Notice of Intent to Fund from HAHSTA. Grant approval and issuance activities will take place in EGMS. Successful applicants will interact with HAHSTA staff to review draft sub-grant provisions, prepare final Work plan and Categorical Budget and Budget Narratives.

Organizations receiving Notification of Intent to Fund cannot begin activities until a Notice of Grant Award (NOGA) is issued and a Grant Agreement has been signed by the DC Health Director and accepted by the Grantee. The Applicant shall not announce publicly receipt or award of funding from DC Health under this RFA until an actual NOGA is received.

Grant Terms and Conditions

All grants awarded under this program shall be subject to the DC Health Standard Terms and Conditions for all DC Health issued grants. The Terms and Conditions are in the attachments and in the Enterprise Grants Management System, where links to the terms and a sign and accept provision is imbedded.

Additional program and administrative terms:

Grantees **must** submit monthly progress and outcome reports and invoices for reimbursement through EGMS using the tools provided by HAHSTA and following the procedures determined by HAHSTA.

Drug-Free Workplace

The organization agreement shall contain a provision requiring the organization to abide by the certifications contained in this announcement (inside Appendix D)

Confidentiality

The applicant must demonstrate that they will protect the identity of people living with HIV receiving services. All records and other identifying information will be maintained in a secure place. The purpose of confidentiality is to protect persons by minimizing disclosure of information about them. Any breach of this policy is liable for civil penalty damage.

All Covered Entities and Business Associates (as defined by the HIPAA Privacy Standards) must comply with HIPAA.

Monitoring/Evaluation

If awarded, a Program Officer and Grants Monitor will be assigned to monitor and evaluate the performance of the program participant according to the approved activities and approved budget. The program managers shall review all written policies and procedures applicable to the project; review final program and fiscal reports; conduct site visits; and hold periodic conferences with the program participant to assess performance in meeting the requirements of the program.

Compliance with the Americans with Disabilities Act

Consistent with the American with Disabilities Act of 1990, all facilities shall be accessible persons with mobility limitations.

APPENDICES

APPENDIX A: WORK PLAN

| | | | |
|--|-------------------------|---------------------------|------------------------------|
| Agency: | Program Period: | | |
| Grant #: | Submission Date: | | |
| Focus Population /Service: | Submitted by: | | |
| <i>Total Budget \$</i> | Telephone # | | |
| GOAL 1: | | | |
| Measurable Objectives/Activities: | | | |
| Process Objective #1: <i>[Example: By December 31, 2008, provide 2,500 face-to-face outreach contacts for 500 unduplicated injection drug users in Wards 5 & 6]</i> | | | |
| <u>Key activities needed to meet this objective:</u> | <u>Start Date/s:</u> | <u>Completion Date/s:</u> | <u>Key Personnel (Title)</u> |
| <ul style="list-style-type: none"> • | | | |
| Process Objective #2: | | | |
| <u>Key activities needed to meet this objective:</u> | <u>Start Dates:</u> | <u>Completion Dates:</u> | <u>Key Personnel (Title)</u> |
| <ul style="list-style-type: none"> • • • • | | | |
| Process Objective #3: | | | |
| <u>Key activities needed to meet this objective:</u> | <u>Start Dates:</u> | <u>Completion Dates:</u> | <u>Key Personnel (Title)</u> |
| <ul style="list-style-type: none"> • • • • | | | |

APPENDIX B: Budget Format and Guidance

Provider Name

Service Area Name _____

Service Area Budget Summary

| | Proposed Budget |
|--|------------------------|
| | |
| Salaries & Wages Subtotal | |
| | |
| Fringe Benefits Subtotal | |
| | |
| Consultants & Experts Subtotal | |
| | |
| Occupancy Subtotal | |
| | |
| Travel & Transportation Subtotal | |
| | |
| Supplies & Minor Equipment Subtotal | |
| | |
| Capital Equipment Subtotal | |
| | |
| Client Costs Subtotal | |
| | |
| Communications Subtotal | |
| | |
| Other Direct Costs Subtotal | |
| | |
| Administrative Cost Subtotal 10% | |
| | |
| Advance Subtotal | |
| | |

| | |
|--------------|---|
| TOTAL | - |
|--------------|---|

Personnel Schedule

| Position Title | Site | Option No. 1 | | Option No. 2 | | Monthly Salary or Wage | No. of Mo. | Budget Amount |
|-------------------|------|------------------|-----|----------------|-----------------------|---------------------------------|------------------|------------------|
| | | Annual Salary | FTE | Hourly Wage | Hours per Month | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| TOTAL | | | | | | | | |

Consultant/Contractual

| Item | Unit | Unit | Cost | Number | Budget |
|--------------|------|------|------|--------|--------|
| | | | | | |
| | | | | | - |
| | | | | | |
| TOTAL | | | | | - |

Occupancy Schedule

| Facility | Site | Unit | Unit | Cost | Number | Budget |
|----------|------|------|------|------|--------|--------|
|----------|------|------|------|------|--------|--------|

| | | | | | |
|-----------------------------------|--|--|--|--|---|
| | | | | | |
| Rent | | | | | - |
| Utilities (Gas/Electric/Water) | | | | | - |
| | | | | | |
| TOTAL | | | | | - |

Travel / Transportation Schedule

| Item | Unit | Unit | Cost | Number | Budget |
|--------------|------|------|------|--------|--------|
| | | | | | |
| | | | | | - |
| | | | | | |
| | | | | | |
| TOTAL | | | | | - |

Supplies

| Item | Site | Unit | Unit | Cost | Number | Budget |
|--------------|------|------|------|------|--------|--------|
| | | | | | | |
| | | | | | | - |
| | | | | | | |
| TOTAL | | | | | | - |

Capital Equipment Schedule

| Item | Site | Unit | Unit | Cost | Number | Budget |
|--------------|-------------|-------------|-------------|-------------|---------------|---------------|
| | | | | | | |
| | | | | | | |
| | | | | | | |
| TOTAL | | | | | | |

Client Cost Schedule

| Item | Site | Unit | Unit | Cost | Number | Budget |
|--------------|-------------|-------------|-------------|-------------|---------------|---------------|
| | | | | | | |
| | | | | | | - |
| | | | | | | |
| | | | | | | |
| TOTAL | | | | | | - |

Communications Schedule

| Item | Site | Unit | Unit | Cost | Number | Budget |
|--------------|-------------|-------------|-------------|-------------|---------------|---------------|
| | | | | | | |
| | | | | | | - |
| | | | | | | |
| | | | | | | - |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| TOTAL | | | | | | - |

Other Direct Costs Schedule

APPENDIX C. APPLICANT / GRANTEE ASSURANCES, CERTIFICATIONS & DISCLOSURES

This section includes certifications, assurances and disclosures made by the authorized representative of the Applicant/Grantee organization. These assurances and certifications reflect requirements for recipients of local and pass-through federal funding.

A. Applicant/Grantee Representations

1. The Applicant/Grantee has provided the individuals, by name, title, address, and phone number who are authorized to negotiate with the Department of Health on behalf of the organization;
2. The Applicant/Grantee can maintain adequate files and records and can and will meet all reporting requirements.
3. All fiscal records are kept in accordance with Generally Accepted Accounting Principles (GAAP) and account for all funds, tangible assets, revenue, and expenditures whatsoever; all fiscal records are accurate, complete and current at all times; and these records will be made available for audit and inspection as required;
4. The Applicant/Grantee is current on payment of all federal and District taxes, including Unemployment Insurance taxes and Workers' Compensation premiums. This statement of certification shall be accompanied by a certificate from the District of Columbia OTR stating that the entity has complied with the filing requirements of District of Columbia tax laws and is current on all payment obligations to the District of Columbia, or is in compliance with any payment agreement with the Office of Tax and Revenue; (attach)
5. The Applicant/Grantee has the administrative and financial capability to provide and manage the proposed services and ensure an adequate administrative, performance and audit trail;
6. If required by DC Health, the Applicant/Grantee is able to secure a bond, in an amount not less than the total amount of the funds awarded, against losses of money and other property caused by a fraudulent or dishonest act committed by Applicant/Grantee or any of its employees, board members, officers, partners, shareholders, or trainees;
7. The Applicant/Grantee is not proposed for debarment or presently debarred, suspended, or declared ineligible, as required by Executive Order 12549, "Debarment and Suspension," and implemented by 2 CFR 180, for prospective participants in primary covered transactions and is not proposed for debarment or presently debarred as a result of any actions by the District of Columbia Contract Appeals Board, the Office of Contracting and Procurement, or any other District contract regulating Agency;
8. The Applicant/Grantee either has the financial resources and technical expertise necessary for the production, construction, equipment and facilities adequate to perform the grant or subgrant, or the ability to obtain them;
9. The Applicant/Grantee has the ability to comply with the required or proposed delivery or performance schedule, taking into consideration all existing and reasonably expected commercial and governmental business commitments;
10. The Applicant/Grantee has a satisfactory record of performing similar activities as detailed in the award or, if the grant award is intended to encourage the development and support of organizations without significant previous experience, has otherwise established that it has the skills and resources necessary to perform the services required by this Grant.
11. The Applicant/Grantee has a satisfactory record of integrity and business ethics;

12. The Applicant/Grantee either has the necessary organization, experience, accounting and operational controls, and technical skills to implement the grant, or the ability to obtain them;
13. The Applicant/Grantee is in compliance with the applicable District licensing and tax laws and regulations;
14. The Applicant/Grantee is in compliance with the Drug-Free Workplace Act and any regulations promulgated thereunder; and
15. The Applicant/Grantee meets all other qualifications and eligibility criteria necessary to receive an award; and
16. The Applicant/Grantee agrees to indemnify, defend and hold harmless the Government of the District of Columbia and its authorized officers, employees, agents and volunteers from any and all claims, actions, losses, damages, and/or liability arising out of or related to this grant including the acts, errors or omissions of any person and for any costs or expenses incurred by the District on account of any claim therefrom, except where such indemnification is prohibited by law.

B. Federal Assurances and Certifications

The Applicant/Grantee shall comply with all applicable District and federal statutes and regulations, including, but not limited to, the following:

1. The Americans with Disabilities Act of 1990, Pub. L. 101-336, July 26, 1990; 104 Stat. 327 (42 U.S.C. 12101 et seq.);
2. Rehabilitation Act of 1973, Pub. L. 93-112, Sept. 26, 1973; 87 Stat. 355 (29 U.S.C. 701 et seq.);
3. The Hatch Act, ch. 314, 24 Stat. 440 (7 U.S.C. 361a et seq.);
4. The Fair Labor Standards Act, ch. 676, 52 Stat. 1060 (29 U.S.C. 201 et seq.);
5. The Clean Air Act (Subgrants over \$100,000), Pub. L. 108-201, February 24, 2004; 42 USC ch. 85 et seq.);
6. The Occupational Safety and Health Act of 1970, Pub. L. 91-596, Dec. 29, 1970; 84 Stat. 1590 (26 U.S.C. 651 et seq.);
7. The Hobbs Act (Anti-Corruption), ch. 537, 60 Stat. 420 (see 18 U.S.C. § 1951);
8. Equal Pay Act of 1963, Pub. L. 88-38, June 10, 1963; 77 Stat. 56 (29 U.S.C. 201);
9. Age Discrimination Act of 1975, Pub. L. 94-135, Nov. 28, 1975; 89 Stat. 728 (42 U.S.C. 6101 et seq.);
10. Age Discrimination in Employment Act, Pub. L. 90-202, Dec. 15, 1967; 81 Stat. 602 (29 U.S.C. 621 et seq.);
11. Military Selective Service Act of 1973;
12. Title IX of the Education Amendments of 1972, Pub. L. 92-318, June 23, 1972; 86 Stat. 235, (20 U.S.C. 1001);
13. Immigration Reform and Control Act of 1986, Pub. L. 99-603, Nov 6, 1986; 100 Stat. 3359, (8 U.S.C. 1101).
14. Executive Order 12459 (Debarment, Suspension and Exclusion).
15. Medical Leave Act of 1993, Pub. L. 103-3, Feb. 5, 1993, 107 Stat. 6 (5 U.S.C. 6381 et seq.).
16. Drug Free Workplace Act of 1988, Pub. L. 100-690, 102 Stat. 4304 (41 U.S.C.) to include the following requirements:

- 1) Publish a statement notifying employees that the unlawful manufacture, distribution, dispensing, possession or use of a controlled substance is prohibited in the Applicant/Grantee's workplace and specifying the actions that will be taken against employees for violations of such prohibition;
 - 2) Establish a drug-free awareness program to inform employees about:
 - a. The dangers of drug abuse in the workplace;
 - b. The Applicant/Grantee's policy of maintaining a drug-free workplace;
 - c. Any available drug counseling, rehabilitation, and employee assistance programs; and
 - d. The penalties that may be imposed upon employees for drug abuse violations occurring in the workplace; and
 - 3) Provide all employees engaged in performance of the grant with a copy of the statement required by the law.
17. Assurance of Nondiscrimination and Equal Opportunity, found in 29 CFR 34.20.
18. District of Columbia Human Rights Act of 1977 (D.C. Official Code § 2-1401.01 et seq.).
19. Title VI of the Civil Rights Act of 1964.
20. District of Columbia Language Access Act of 2004, DC Law 15 - 414 (D.C. Official Code § 2-1931 et seq.).
21. Lobbying Disclosure Act of 1995, Pub. L. 104-65, Dec 19, 1995; 109 Stat. 693, (31 U.S.C. 1352); and
22. Child and Youth, Safety and Health Omnibus Amendment Act of 2004, effective April 13, 2005 (D.C. Law §15-353; D.C. Official Code § 4-1501.01 et seq.) (CYSHA). In accordance with the CYSHA any person who may, pursuant to the grant, potentially work directly with any child (meaning a person younger than age thirteen (13)), or any youth (meaning a person between the ages of thirteen (13) and seventeen (17) years, inclusive) shall complete a background check that meets the requirements of the District's Department of Human Resources and HIPAA.

C. Mandatory Disclosures

The Applicant/Grantee certifies that the information disclosed in the table below is true at the time of submission of the application for funding and at the time of award if funded. If the information should ever change, the Grantee shall notify the Grant Administrator within 24 hours of the change in status. A duly authorized representative must sign the disclosure certification

1. Applicant/Grantee Mandatory Disclosures

| | |
|---|------------------------------|
| A. Per OMB 2 CFR §200.501— any recipient that expends \$750,000 or more in federal funds within the recipient’s last fiscal, must have an annual audit conducted by a third – party. In the Applicant/Grantee’s last fiscal year, were you required to conduct a third-party audit? | <input type="checkbox"/> YES |
| | <input type="checkbox"/> NO |
| B. Covered Entity Disclosure During the two-year period preceding the execution of the attached Agreement, were any principals or key personnel of the Applicant/Grantee / | <input type="checkbox"/> YES |

| | | |
|---|--------------------------|-----|
| Recipient organization or any of its agents who will participate directly, extensively and substantially in the request for funding (i.e. application), pre-award negotiation or the administration or management of the funding, nor any agent of the above, is or will be a candidate for public office or a contributor to a campaign of a person who is a candidate for public office, as prohibited by local law. | <input type="checkbox"/> | NO |
| C. Executive Compensation: For an award issued at \$25,000 or above, do Applicant/Grantee's top five executives <u>do not receive</u> more than 80% of their annual gross revenues from the federal government, Applicant/Grantee's revenues are greater than \$25 million dollars annually AND compensation information is not already available through reporting to the Security and Exchange Commission. <i>If No, the Applicant, if funded shall provide the names and salaries of the top five executives, per the requirements of the Federal Funding Accountability and Transparency Act – P.L. 109-282.</i> | <input type="checkbox"/> | YES |
| | <input type="checkbox"/> | NO |
| D. The Applicant/Grantee organization has a federally negotiated Indirect Cost Rate Agreement. If yes, insert issue date for the IDCR: _____ If yes, insert the name of the cognizant federal agency? _____ | <input type="checkbox"/> | YES |
| | <input type="checkbox"/> | NO |
| E. No key personnel or agent of the Applicant/Grantee organization who will participate directly, extensively and substantially in the request for funding (i.e. application), pre-award negotiation or the administration or management of the funding is currently in violation of federal and local criminal laws involving fraud, bribery or gratuity violations potentially affecting the DC Health award. | <input type="checkbox"/> | YES |
| | <input type="checkbox"/> | NO |

ACCEPTANCE OF ASSURANCES, CERTIFICATIONS AND DISCLOSURES

I am authorized to submit this application for funding and if considered for funding by DC Health, to negotiate and accept terms of Agreement on behalf of the Applicant/Grantee organization; and

I have read and accept the terms, requirements and conditions outlined in all sections of the RFA, and understand that the acceptance will be incorporated by reference into any agreements with the Department of Health, if funded; and

I, as the authorized representative of the Grantee organization, certify that to the best of my knowledge the information disclosed in the Table: Mandatory Disclosures is accurate and true as of the date of the submission of the application for funding or at the time of issuance of award, whichever is the latter.

Sign: _____ Date: _____

NAME: INSERT NAME

TITLE: INSERT TITLE

AGENCY NAME:

**Government of the District of Columbia
Department of Health
HIV/AIDS, Hepatitis, STD and
TB Administration (HAHSTA)**

**899 North Capitol Street, NE
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