

Answers to Questions
for
Request for Applications (RFA) Entitled
Migrant and Seasonal Farmworker Health Program

Question # 1 Will the application be made available in a format that allows the applicant to complete it electronically without having to duplicate the forms, such as Microsoft Word?

Answer: Yes, the forms included in the RFA for applicants to submit as part of their completed application have been posted on the DOH web site in Word format. These include RFA Attachments 1- 7, pages 27-53. Web link: <http://www.nyhealth.gov/funding/rfa/0604030230/>

Question # 2 Page 13, first paragraph: If the target area includes one entire county and a portion of another county, does the application have to include a letter from both County Health Departments?

Answer: Yes, this helps ensure needed linkage and service coordination for communicable diseases such as TB, STD and HIV. Both county health departments should provide a letter of support and be part of the local, MSFW Collaboration of partnering service-providing agencies and other key stakeholders. Also, both should be listed in Attachment 3 of your application. Attachment 3 (page 29) is the MSFW Collaboration Summary.

Question # 3 Pages 13 and 29, Attachment 3: What types of collaborations should be included on the form? Is this just for subcontractors or should any collaborative agency be included, such as those that are accepting referrals from the program or attending health fairs as vendors?

Answer: The purpose of Attachment 3 entitled, “MSFW Collaboration Summary” (page 29) is to identify the various service-providing and other agencies and partners that should be at the table. These collaborators should be engaged in joint planning around: identifying MSFWs in the catchment area, outreach, health education/promotion, sharing migrant-related information, referrals, health fairs, meeting needs of MSFWs and their family members, service coordination, filling service gaps, identifying barriers to access to health care, so forth. Recommended key collaborative partners to consider are included on pages 13 and 29. You may also want to consider a local representative of the Department of Labor. Collaborative partners who accept referrals and help you in other ways (e.g., vendor at health fair) should be considered. The MSFW Collaboration Summary (Attachment 3) isn’t just for subcontractors and may include representatives of other local coalitions and partnerships (e.g., rural health, immunization, etc.) to help inform joint planning and enhance information sharing. Some global, long-term outcomes sought via this RFA include: (a) reduction in disparities in health status and improved quality of life for MSFWs and their families, (b) local MSFW-focused collaborations successfully tap an array of resources to meet health and other needs of this population, including food, housing, clothing, etc., and (c) improved infrastructure and partnering at local level for assessment, planning and coordination of services to MSFWs and their families.

Question # 4 Page 16, Sixth paragraph: What types of budget items will be considered administrative and general overhead costs that will be removed from the budget if the total exceeds 10%, resulting in the amount requested being reduced?

Answer: Administrative and overhead costs that exceed 10% of the total allocation will not be considered for state funding. The applicant can budget as much as they want in other sources (in kind, other grant, etc.), if it's not state funds. The 10% limitation applies to the amount the applicant is requesting from the state via this RFA. Administrative costs, as we are considering them here, are generally items of expense that have no direct impact on Workplan deliverables (e.g., audit, billing, payroll).

Question # 5 Can this grant address only dental health issues?

Answer: No. Clearly dental health services are needed by MSFWs and family members. However, the intent of this RFA is to provide such services, along with other health and enabling services, through a well-coordinated, comprehensive, collaborative MSFW Health Program. Therefore applicants are required to outline plans for such a program that includes the array of services covered by Component A (general adult services) and/or Component B (child services). It is anticipated that most applicants will address the dental health needs of this vulnerable population by proposing either to provide such services themselves or making arrangements with dental health provider(s) to meet that need.

Question # 6 Can it be for children and adolescent dental issues?

Answer: See answer to Question # 5. Funds can be used for meeting the dental health needs of MSFW children/adolescents, but such services must be linked to the type of comprehensive, MSFW Health Program highlighted above (i.e., answer to Question # 5) with dental health providers engaged in joint planning through the required MSFW collaborative partnership covered by Attachment 3, page 29.

Question # 7 Is a partnership with a School of Dental Hygiene or Dental Residency program allowed?

Answer: Yes, such a partnership is allowed. Applicants are encouraged to partner with dental health providers and stakeholders.

Question # 8 Can it be a partnership with a BOCES Education program, i.e., Herkimer Co. BOCES Migrant Education?

Answer: Yes, a partnership with a BOCES Education program is acceptable.

Question # 9 On page 10 under the “Reporting and Monitoring Requirements” section of the RFA it states, “A program surveillance and monitoring tool will be used to evaluate program effectiveness.....” Can a copy of this tool be made available?

Answer: This tool is being revised and is not available at this time. It is anticipated that the new tools for program data collection/reporting and surveillance will be helpful for monitoring the four, core

goals of the program, current and emerging health trends, contractor performance, and early identification and resolution of MSFW-related needs and issues.

Question # 10 On page 16, 2nd paragraph, the RFA state, “THIS FUNDING MAY ONLY BE USED TO EXPAND EXISTING ACTIVITIES OR CREATE NEW ACTIVITIES PURSUANT TO THE RFA. THESE FUNDS MAY NOT BE USED TO SUPPLANT FUNDS FOR CURRENTLY EXISTING STAFF ACTIVITIES.”

A) Our program currently uses NYSDOH Migrant and Seasonal Farmworker Health Program grant funds to provide Migrant Program services. Can the funding provided through this new RFA continue to be used for the personnel and nonpersonnel services currently funded through the NYSDOH Migrant and Seasonal Farmworker Health Program?

Answer: Yes, funding provided (awarded) as a result of this RFA may be used to continue to fund some services currently being provided to MSFWs, as long as these services are consonant with the goals and requirements of this new RFA. This is a competitive grant process. All service providers currently funded through the state’s MSFW Health Program must submit an application responsive to this RFA, if they wish to be considered for continued funding.

B) Do all new workplan activities need to be developed or can some/all of the current activities funded through the NYSDOH Migrant and Seasonal Farmworker Health Program grant remain in the new workplan? (e.g., “provide referral and related support services to assist MSFWs in accessing health care.....”)

Answer: It is anticipated that some of the activities listed in the new Workplan (RFA Attachment 5, pages 42 – 45) and included in the application will be the same or similar to those appearing in the existing Workplan of a service provider currently funded via the state’s MSFW Health Program. Note, however, that the submitted (new) Workplan must include and address all the “Measurable Objectives” listed in Attachment 5 (pp. 42 – 45) for the four, core programmatic goals.

Question # 11 On Attachment 3, page 29, the RFA discusses a MSFW-Focused Partnership. Can you please describe/define this/these partnership(s) and provide any relevant requirements?

Answer: Creating and/or sustaining a local, MSFW Collaboration is a key RFA requirement and deliverable. In fact Workplan GOAL # 1 (e.g., page 13) requires the applicant to “*Lead the Development of a Comprehensive Local Response to the Health and Human Service Needs of the MSFW Population and Their Families*” and outlines relevant “Measurable Objectives” that must be included in an applicant’s submitted Workplan (see page 42). This local partnership is also addressed by Attachment 3, page 29, which is entitled, “MSFW Collaboration Summary.” Attachment 3 should be completed and submitted with your application. The intent of the RFA is for an applicant to create (or sustain if one already exists) a local, MSFW-focused partnership for joint planning, including the development of collaborative implementation strategies to address MSFW needs and participatory evaluation of those plans and strategies. (Also see answer to Question # 3)

Question # 12 Does the term “true” MSFWs include immigrant day laborers who have temporary residences in Putnam County?

Answer: It depends. To be eligible for funded services via this RFA these “immigrant day laborers” must be employed in agricultural work on a seasonal basis and have established a temporary residence for the purpose of agricultural employment. Families that have “settled-out” or resettled, that is, individuals who once followed the migrant stream and then decided not to follow the crop and to settle in a given community, are not the primary focus of this RFA funding. Many of these resettled families are eligible for the same health and social resources available to other community residents.

Question # 13 On Page 4 of the RFA it talks about additional funding for different levels of MSFWs served. Are those numbers unduplicated or number served regardless of the number of visits or types of services rendered?

Answer: This additional funding is based on the estimated number of unduplicated MSFWs and/or their children to be served via the array of services covered by Component A and/or B, not the number of service visits or types of services rendered.

Question # 14 I'm working on the RFA for Orleans County for this up coming year..... I would like to know how you would like the information put on the forms in the RFA. Can it be done electronically? Any advice you have would be greatly appreciated.

Answer: Yes, the forms included in the RFA for applicants to submit as part of their completed application have been posted on the DOH web site in Word format. These include RFA Attachments 1- 7, pages 27-53. Web link: <http://www.nyhealth.gov/funding/rfa/0604030230/>