

FREQUENTLY ASKED QUESTIONS & INFORMATION

RESOURCES:

Logic Model

<https://ctb.ku.edu/en/table-of-contents/overview/models-for-community-health-and-development/logic-model-development/main>

Smart Goal, Objective, and Activity:

<https://www.cdc.gov/std/Program/pupestd/Developing%20Program%20Goals%20and%20Objectives.pdf>

Example of Goals, Objective, and Activity

Goals: Reduce infant unsafe sleep related deaths in our region.

Objectives: By December 2021, 40% of participants will always use the three safe sleep requirements.

Activities: Provide safe sleep education at every appointment.

Resources

[IDOH MCH Website](#)

[MCH Data Page](#)

[Indiana MMRC: 2024 Annual Report](#)

[Birth Outcomes and Infant Mortality Dashboard](#)

[Adolescent and School Health Data](#)

[Indiana Youth Advisory Board](#)

[Grow Rural Health](#)

[Health First Indiana](#)

FREQUENTLY ASKED QUESTIONS:

- 1) **Can my organization submit two applications?**
 - a) If the applications are for different programs, then IDOH will accept more than one application
 - b) If the program is the same but serving different regions, please only submit one application.
- 2) **Does the Goals, Objectives, Activities, and Timeline need to span 2026-2028?**
 - a) Yes, please create these utilizing the full October 2026- September 2028 year span.
- 3) **Does this require a match?**
 - a) No, the funding opportunity does not require a match.
- 4) **Is there a cap on the amount of funding my organization can apply for?**
 - a) There is no cap of requests at this time. IDOH asks that each application ask for an appropriate amount of funding for the proposed program to be successful.
- 5) **Is there a specific way to write the application and budget?**
 - a) Yes, please follow the application sections, budget templates, workplan template, and funding synopsis to ensure all requirements are fulfilled.
- 6) **Am I able to continue to use funds past my contract date, especially if not given a performance award?**

- a) No, funds must be spent before the contract end date, or they will be reverted back to IDOH.
- 7) **If my organization is a national organization and not based in Indiana, am I still eligible to apply?**
 - a) You may only apply if there is a local Indiana branch that can apply and keep funds in the state.
- 8) **How many awards will be awarded?**
 - a) This will depend on the amount of applications received and chosen to be awarded. There is no set number at this time.
- 9) **If awarded, can I share funds and resources with current partners?**
 - a) Yes, this must be reflected in the application narrative, budget, and quarterly reports as subrecipients.
- 10) **Can there be collaboration of efforts between organizations within a region for this funding opportunity?**
 - a) Yes, local collaboration is highly encouraged to improve health outcomes for Hoosiers.
- 11) **Do I have to pick a program to implement that is specified in the RFA Examples such as safe sleep or Home Visiting?**
 - a) No, all innovative ideas are welcome to apply for funding.
- 12) **Are indirect costs allowable on this grant? And if so, do we use our federally negotiated rate or does IDOH have a restricted rate we should use?**
 - a) IDOH does not allow indirect, "in-kind", or lump sum costs. Applications are allowed to request specific line items, such as rent and utilities.
- 13) **Would a county coroner's office qualify as a direct applicant under 'other healthcare related entity'?**
 - a) A county coroner office would be eligible to apply for this opportunity. IDOH is able to have coroners and other local government agency as subrecipients.
- 14) **Is there a required number of goals or just one goal with 3 objectives?**
 - a) There is not a required number of goals. We are asking for the goals section to include however many goals the proposed program will need to be success.
 - b) One goal should be specifically about the improvement of the proposed MCH outcome measure(s).
- 15) **Would it be okay if we used this funding to help defray costs associated with expenses such as contractor costs and medical supplies.**
 - a) MCH does not cover direct clinic costs, but things like salary/people's time and medical supplies are not considered a direct clinic service. Supplies and time would be an allowable cost.
- 16) **If we are not funded by the State, would the Other Funding Synopsis attachment still be required?**
 - a) If you have no other state or federal funds for this program, it will be required to provide a pdf document stating that there are no funds to report.
- 17) **Are there geographical restrictions for this funding, or can it be for any/multiple counties in IN?**

- a) It can be in any/multiple counties in the state of Indiana. Please keep in mind that when reviewing applications, we are looking for programs that provide services in areas of the state with the highest need.

18) **Do you have the average grant award per entity, or a range of award from the last round of funding?**

- a) In a previous cycle there were 29 awards. *This will be subject to change.* Average costs varied from projects from \$10,000 to \$300,000 annually. This will not necessarily be the same this round.

19) **Can local FIMR data be used?**

- a) Yes, local data can be used.

20) **Does having more partners/bigger reach make it a more attractive project to fund?**

- a) No, not necessarily.

21) **What is the scoring process?**

- a) The selection committee utilizes a comprehensive approach when reviewing applications and applications scores are only one component. Other considerations include reviewing existing services in the catchment area for duplication, current health outcome gaps data, and infant mortality rates.

22) **Can you describe the allowable expenses that can be covered by this grant and is there any sort of allowable administrative costs percentage?**

- a) Administrative or indirect costs in a lump sum are not allowed.
- b) Please see the list below for unallowable costs.

Grant funds and program income shall NOT be expended for the following:

1. To supplant or replace current public or private funding
2. To supplant ongoing or usual activities of any organization involved in the project
3. To purchase or improve land or to purchase, construct, or make permanent improvements to any building
4. Depreciation of existing buildings or equipment
5. Reimbursement of pre-award costs
6. To support planning efforts and other activities associated with the program or application
7. Contributions, gifts, donations
8. Entertainment, food
9. Automobile purchase
10. Interest and other financial costs
11. Costs for in-hospital patient care
12. Fines and penalties
13. Fees for health services
14. Accounting expenses for government agencies
15. Bad debts
16. Contingency funds
17. Executive expenses (car rental, car phone, entertainment)
18. Fundraising expenses
19. Legal fees
20. Legislative lobbying or political education
21. Equipment (over \$5,000 per unit) unless special approval is received
22. Dues to societies, organizations, or federations
23. Incentives (does not include program supplies like diaper bags, gift cards, sleep sacks, etc.)
24. More than \$30 a month per cell phone
25. Out-of-state training that is also being held in state
26. Out-of-state travel, flights, car rental, hotel, per diem
27. Liability or similar Insurances
28. De minimis rate or indirect costs
29. Electronic medical records
30. Exceed 10% administrative costs