



# *We Choose Health*

**Request For Applications**

**Information for Applicants**

**Letter of Intent Deadline: Friday May 18, 2012**

**Application Deadline: Friday June 15, 2012**

*We Choose Health* is an initiative of the Illinois Department of Public Health, and supported by Community Transformation Grant funds from the U.S. Centers for Disease Control and Prevention.



Pat Quinn, Governor

525-535 West Jefferson Street • Springfield, Illinois 62761-0001 • [www.idph.state.il.us](http://www.idph.state.il.us)

May 4, 2012

Dear Applicant:

On behalf of the Illinois Department of Public Health, I am pleased to announce the availability of funds under the *We Choose Health* initiative. *We Choose Health* is a multi-year effort to encourage and to support population-based obesity and tobacco prevention in Illinois communities. We invite applications from eligible local government entities, school systems, community organizations, and coalitions ready to take on this important work for the health of our state and its residents.

*We Choose Health* is made possible by funds from a Community Transformation Grant awarded in 2011 to Illinois by the U.S. Centers for Disease Control and Prevention. These grants, awarded for a five-year period, provide sustained support for public health evidence and practice-based initiatives. While some of these activities will take place at the state level, the success of this initiative relies on the work done by coalitions at the local level. *We Choose Health* will provide financial and technical support for successful applicants to drive their efforts towards meeting the goals of this initiative.

Please review the attached Request for Application (RFA) carefully. To apply, you must first submit a completed letter of intent form (Appendix A) via e-mail by 5 p.m. on May 18. Your completed application (Appendix B) is due by email no later than 5 p.m. on June 15. You will find complete submission instructions on the forms.

To help you prepare your application, I urge you to participate in one of the RFA information sessions scheduled for May 10 and May 15, and to use the attached policy briefs to help you determine the strategies that best meet the needs of your community.

Thank you for your interest in *We Choose Health*, and for your commitment to the health of Illinois! For more information, visit the *We Choose Health* website at [wechoosehealth.illinois.gov](http://wechoosehealth.illinois.gov).

Sincerely,

A handwritten signature in black ink, appearing to read "LaMar Hasbrouck". The signature is fluid and cursive, with a large loop at the beginning.

LaMar Hasbrouck, MD, MPH  
Acting Director

*We Choose Health*  
**Information for Applicants**

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## RFA At-a-Glance

This RFA focuses on the implementation of sustainable strategic approaches to improve health for people where they live, work and play through evidence- and practice-based approaches. Unlike program-based approaches to public health designed to reach small groups of people, these types of strategies support transformational, sustainable change within a variety of community settings that impact a larger number of people.

### Eligibility

Proposed projects must take place and impact communities within Illinois **excluding** Cook, DuPage, Will, Lake, and Kane counties. Eligible applicants include:

- Local health departments
- Other government entities
  - County
  - Municipal
  - Other (e.g., park districts)
- Educational entities
  - Universities
  - Public schools and public school systems
  - Private schools and private school systems
- Health care entities
  - Hospitals
  - Health care foundations
  - Community health care centers
- Community-based organizations
  - Non-profits
  - Private associations
  - Faith-based organizations
  - Volunteer organizations
  - Organizations serving youth
  - Organizations serving underserved communities
  - Established community/government partnerships

The lead agency or fiscal agent **must** be a registered legal entity in Illinois and have the organizational capacity to do the work described in the application. In addition, applicants must provide a letter of support from **each** certified local health department within the geographic area covered by their proposals. Note that the Illinois Department of Public Health (IDPH) will not fund more than one application covering the same geographic area.

Due to the requirements of the federal grant supporting these efforts, IDPH cannot consider applications specifically targeting populations within Cook, DuPage, Will, Lake, or Kane counties. However, applications may involve sub-contractors or partners based in one of those counties, and applications may be led by organizations headquartered within one of those counties.

## Funding and Availability

Overall, the goals of this funding opportunity are to:

- Increase nutrition and physical activity in communities
- Increase opportunities for environments that support safe physical activity
- Increase access to smoke-free environments

You must choose at least two *We Choose Health* strategies for implementation, including at least one from Healthy Eating and Active Living, and at least one from Smoke-Free Living. See the menu of options under “Use and Availability of Funds.” IDPH will consider applications including up to all eight strategies. IDPH will not consider strategies outside this menu for funding.

IDPH will award annual grants for a period of five years, including an initial grant covering a combined Year 1 and Year 2, and up to three renewal years:

Grant Year(s)	Maximum Award Amount
Year 1 and Year 2 (14 months from July 23, 2012 – September 30, 2013, covered under this RFA)	\$300,000
Year 3 (October 1, 2013 – September 30, 2014)	\$250,000
Year 4 (October 1, 2014 – September 30, 2015)	\$250,000
Year 5 (October 1, 2015 – September 30, 2016)	\$250,000

Successful applicants for the initial grant covering Years 1 and 2 will have to apply for renewal in subsequent years, demonstrating that they are meeting performance objectives and fulfilling other obligations of the grant. Note that plans for Years 3, 4, and 5 are contingent upon continued CDC funding.

## Information Sessions

IDPH and the MidAmerica Center for Public Health Practice will conduct RFA information sessions on **May 10**, and **May 15** via the web. We strongly encourage potential applicants to attend one of these sessions to learn more about this funding opportunity. Webinars will be recorded and archived for applicants unable to attend or who wish to review the information presented. You will find links to the archived webinars at the *We Choose Health* website, [wechoosehealth.illinois.gov](http://wechoosehealth.illinois.gov).

For more information about registration, please visit [wechoosehealth.illinois.gov](http://wechoosehealth.illinois.gov).

## Letter of Intent Deadline: May 18, 2012

You must submit the letter of intent (LOI) form, included in Appendix A, to express your intention (not obligation) to submit a proposal. We will use the contact information provided in your LOI to send addendums, updates, or other important information related to the RFA.

For your organization’s proposal to be considered, submit your LOI via e-mail to [DPH.WeChooseHealth@Illinois.gov](mailto:DPH.WeChooseHealth@Illinois.gov) no later than 5 p.m. CDT on May 18, 2012, using the instructions on the LOI form. LOIs submitted on paper or after the deadline will not be considered eligible.

As part of its effort to encourage broad-based, regional collaboration, IDPH will post information from submitted LOIs on the *We Choose Health* website, to help applicants find potential collaborators.

At its discretion, IDPH may reach out to potential applicants working in the same region to encourage them to consider joint applications.

### **Proposal Deadline: June 15, 2012**

Final, complete proposals (Appendix B) must be submitted via e-mail to [DPH.WeChooseHealth@illinois.gov](mailto:DPH.WeChooseHealth@illinois.gov) by Friday June 15, 2012 at 5 p.m. CDT to be considered for funding. You will find complete instructions in the proposal forms. Applications submitted after the deadline or by any method other than email will **NOT** be eligible for consideration.

### **Initial Award Date and Project Period**

Applicants will be notified in writing of funding status by Friday, July 13, 2012 (subject to change). The initial project period is for 14 months beginning July 23, 2012, with application for continued funding tentatively due September 29, 2013.

### **Questions**

You may ask questions about the *We Choose Health* RFA and application process by contacting [DPH.WeChooseHealth@illinois.gov](mailto:DPH.WeChooseHealth@illinois.gov). Responses will be added to a list of Frequently Asked Questions (FAQs) posted on the *We Choose Health* website. All questions must be received by June 11, 2012. You will receive a confirmation for your question. If you do not receive a confirmation, IDPH has not received your question.

For general information about the RFA and how to apply, and to find the latest updates, visit the *We Choose Health* website at [wechoosehealth.illinois.gov](http://wechoosehealth.illinois.gov).

## RFA Timeline

### Important Dates

Friday May 4, 2012	RFA release date
Thursday May 10, 2012, 1 p.m. – 3 p.m. Tuesday May 15, 2012, 3 p.m. – 5 p.m.	RFA information sessions
Friday May 18, 2012	Letter of Intent due by 5 p.m. CDT
Friday June 15, 2012	Proposals due by 5 p.m. CDT
Friday, July 13, 2012*	Notification of awards
Monday-Friday July 16-20, 2012*	Contract negotiations
Monday-Friday June 23-27, 2012*	Kickoff call with awardees
Monday July 23, 2012*	Initial project period begins

\* Subject to change.

## Background

### *Chronic Disease Prevention*

In America today, 7 out of 10 deaths are due to chronic diseases. Heart disease, cancer, and stroke account for more than half of all deaths every year. In 2005, 133 million Americans had at least one chronic illness, and about a quarter of people with chronic conditions have one or more daily activity limitations. Certain health conditions, such as obesity, place people at substantially higher risk for chronic disease.

While some chronic diseases have origins out of our control, much of the risk is attributable to modifiable personal health behavior around healthy eating, physical activity, and tobacco use. Unfortunately, many Americans experience greatly increased risk due to their choices in these areas. Illinois residents are no exception. Within the 97 counties that make up the target area for this sub-award:

- Nearly two-thirds of adults and more than half of adolescents do not meet recommended physical activity guidelines.
- Less than a quarter of adults and less than a fifth of high school students report eating five or more servings of fresh fruit and vegetables a day.
- 22 percent of adults and 19.2 percent of adolescents smoke.

Chronic disease prevention starts with modifying these key behaviors. But the communities in which we live, work, and play can have a profound impact on our ability to make needed changes. Some communities are designed to emphasize automobile travel, leaving little accommodation for pedestrians and cyclists. Some people live in housing where they experience regular exposure to tobacco smoke, whether or not they themselves choose to smoke. Some mothers who might choose to breastfeed may not receive support where they give birth, or a welcoming environment in the workplace.

For people in these communities and environments, changing behavior requires more than simply issuing advice; it requires using sustainable, transformational strategies to help transform communities into healthy supportive environments.

### *Community Transformation Grants and We Choose Health*

As part of the Affordable Care Act, Congress made funds available for ongoing chronic disease prevention efforts in the form of Community Transformation Grants (CTG), administered by the U.S. Centers for Disease Control and Prevention (CDC). As part of this program, Illinois received nearly \$4.8 million dollars to implement proven evidence- and practice-based approaches to improve health and wellness among its communities, at least 35 percent of which will go specifically to rural populations.

As part of its CTG grant, IDPH has developed *We Choose Health*, a sub-award program to fund organizations and coalitions working on chronic disease prevention at the local level. IDPH is making \$3.3 million dollars available for *We Choose Health* awardees.

*We Choose Health* specifically supports efforts that:

- Reduce exposure to secondhand smoke in public places and in multi-unit housing
- Make healthy foods more available and unhealthy foods less available
- Create more safe and convenient places for walking, biking, and other physical activities



- Increase opportunities for healthy eating and physical activity in schools and workplaces
- Support children in walking and/or biking to and from school
- Promote breastfeeding
- Support social and emotional wellness in school

The *We Choose Health* initiative offers applicants the opportunity to mix and match among a variety of strategies covering these target areas.

#### *Coalitions and Collaborations*

IDPH's CTG grant is specifically for *implementation* of these initiatives. While we hope these awards will help forge new alliances among partners, the funds themselves are designated for existing organizations and coalitions ready to begin work at the outset of the project period.

#### *Health Equity*

A further goal of CTG and *We Choose Health* is to reduce health inequity in the United States and in Illinois. To that end, applicants are encouraged to address one or more health disparities related to the social determinants of health, including rural health issues, socioeconomic health issues, minority health issues, migrant worker health issues, and access to health services within the selection of *We Choose Health* strategies.

## Availability and Use of Funds

### Total Funding and Award Amounts

IDPH will award annual grants for a period of five years, including an initial grant covering a combined Year 1 and Year 2, and up to three renewal years:

Grant Year(s)	Maximum Award Amount
Year 1 and Year 2 (14 months from July 23, 2012 – September 30, 2013, covered under this RFA)	\$300,000
Year 3 (October 1, 2013 – September 30, 2014)	\$250,000
Year 4 (October 1, 2014 – September 30, 2015)	\$250,000
Year 5 (October 1, 2015 – September 30, 2016)	\$250,000

Each year a total of \$3.3 million dollars is available.

Award size may vary based on a number of factors including, but not limited to:

- Demonstrated need in the defined project area
- Scope of work
- Total population impacted by the proposed activities

The general suggestion is to develop a budget that represents approximately \$0.50-\$1.00 for every person residing in your target area.

### Use of Funds

Funding may be used for:

- Personnel, including fringe benefits
- Consultant costs
- Supplies
- Travel
- Contractual costs
- Equipment (must be integral to a selected strategy and detailed information should be included in the budget and is subject to review and approval)
- Other costs associated with your activities to advance the strategies proposed not covered in other categories (must be detailed thoroughly in the proposed budget and is subject to review and approval).

Note: IDPH will separately contract with a group of technical assistance (TA) agencies to provide award recipients with specialized expertise to successfully implement their strategies. This TA will be provided free of charge to award recipients, and does not need to be accounted for within your budget.

Funding may **not** be used for:

- Research
- Construction (e.g., sidewalks, roads)
- Delivery of direct services to clients, or for clinical care (e.g., case management services; provision of medical or health services)
- Lobbying (any activity designed to influence action in regard to a particular piece of pending legislation)
- General management or administration costs that do not directly contribute to the initiative
- Direct fundraising, such as special events, direct mail campaigns or solicitation of donors
- Activities for inherently religious purposes
- Reimbursement for pre-award costs
- Litigation or legal costs related to the consequences of participating in CTG
- Food
- Furniture

**We Choose Health Strategies – Menu of Funding Options**

All *We Choose Health* strategies are evidenced-based. Each menu option applies to one strategic direction: Healthy Eating and Active Living; Smoke-free Living; Healthy and Safe Built Environments; and Social and Emotional Wellness. **Applicants must choose at least one strategy addressing Healthy Eating and Active Living and at least one strategy addressing Smoke-free Living.**

<b>Strategic Direction: Healthy Eating and Active Living</b>	
<b>Strategy</b>	<b>Description</b>
1. Coordinated School Health (District-wide)	Commit to implementing the Coordinated School Health (CSH) model on the district level. CSH offers an integrated model for school wellness, bringing together programs like health education, physical education, nutrition, and counseling services under a unified approach. Note that CSH also incorporates the <b>Social and Emotional Wellness</b> strategic direction.
2. Baby Friendly Hospitals	Commit to pursuing implementation of the 10-step Baby Friendly Hospital program as defined by the World Health Organization.
3. Worksite Wellness	Commit to implementing a menu of worksite wellness policies, including those that encourage healthy eating and greater physical activity. (Note that worksite wellness may incorporate breastfeeding-supportive environments, healthy vending, and smoke-free policies.)
<b>Strategic Direction: Smoke-free Living</b>	
<b>Strategy</b>	<b>Description</b>
4. Smoke-free Multi-Unit Housing	Commit to pursuing strategies and programs to encourage public and private multi-unit housing facilities to develop and implement smoke-free policies.
5. Smoke-free Public Places	Commit to pursuing strategies and programs that support public places to go smoke-free.
<b>Strategic Direction: Healthy and Safe Built Environments</b>	
<b>Strategy</b>	<b>Description</b>
6. Safe Routes to School	Commit to implementing Safe Routes to School, a program establishing designated pedestrian- and bike-friendly routes for children and others to use when traveling to and from community schools.
7. Complete Streets	Commit to pursuing and implementing Complete Street policies. Complete Streets is a planning model that ensures new and reconstructed streets are designed to accommodate bicycle and pedestrian traffic in addition to automobiles and public transportation.
8. Joint Use Agreements	Commit to pursuing joint use agreements to maximize use of existing facilities for physical activity among greater numbers of people.

You will find more detailed descriptions of each option in Appendix C: Policy Briefs.

**Work that is not eligible**

The following types of activities are not eligible for funding under this RFA:

- Epidemiological projects
- Research studies
- Capital projects
- Construction projects
- Direct client services
- Provision of health care services
- Evaluation of **existing** programs

## Deliverables and Obligations of Award Recipients

### Project Activities

Recipients of the *We Choose Health* award will be expected to conduct the following project-specific activities.

- a. Prepare an action plan based on the pre-set menu of evidence-based *We Choose Health* strategies outlining specific implementation steps. The action plan should contain strategies for continuing to sustain operations beyond the funding period.
- b. Applicants must choose at least one strategy addressing Healthy Eating and Active Living and at least one strategy addressing Smoke-Free Living.
- c. Measure progress towards your specific project during and after the grant period, as well as disseminate information describing outcomes, lessons learned, and best practices identified during the project.
- d. Submit monthly expense reports and quarterly progress reports.
- e. Submit other regular progress reports as required by the IDPH grant agreement.
- f. Revise work plans on an as-needed basis as directed by IDPH.
- g. Develop and submit logic models supporting the selected strategy implementation.

### Other related activities

Grant recipients also will be required to participate in these related activities:

- h. Actively participate in *We Choose Health* evaluation activities — including possible participation in small scale, site-specific evaluation studies — and ensure the participation of partner agencies through the designation of a dedicated staff person to coordinate these efforts. (Applicants should budget a minimum of 10% time of the designated staff person for these evaluation and performance monitoring activities.)
- i. Participate in required meetings and conference calls. (Applicants should budget for two annual meetings, including two days of overnight in-state travel for two persons. Likely locations include Springfield and Bloomington.)

## Proposal Requirements and Review Process

### Eligibility

Proposed projects must impact communities within Illinois, **excluding Cook, Will, DuPage, Lake, and Kane counties.**

Due to the requirements of the federal grant supporting these efforts, IDPH cannot consider applications specifically targeting populations within Cook, DuPage, Will, Lake, or Kane counties. However, applications may involve sub-contractors or partners based in one of those counties, and applications may be led by organizations headquartered within one of those counties.

Eligible applicants include:

- Local health departments
- Other government entities
  - County
  - Municipal
  - Other (e.g., park districts)
- Educational entities
  - Universities
  - Public schools and public school systems
  - Private schools and private school systems
- Health care entities
  - Hospitals
  - Health care foundations
  - Community health care centers
- Community-based organizations
  - Non-profits
  - Private associations
  - Faith-based organizations
  - Volunteer organizations
  - Organizations serving youth
  - Organizations serving underserved communities
  - Established community/government partnerships

The lead agency or fiscal agent **must** be a registered legal entity in Illinois and have the organizational capacity to do the work described in the application. In addition, applicants must provide a letter of support from **each** certified local health department within the geographic area covered by their proposals.

Note that in an effort to encourage broad-based regional collaboration, IDPH will not fund more than one application covering the same geographic area. For example:

**Example 1:** If the city of Whoville (located in Who County) and Who County both submit applications for strategies taking place in Whoville, IDPH could fund a *maximum* of one of those two applications.

**Example 2:** If the city of Whoville (located in Who County) submits an application for strategies taking in Whoville, and Who County submits an application for strategies taking place only in areas outside of Whoville, IDPH could potentially fund both applications.

**Example 3:** If the Greater Who Health Coalition (including Who County, part of What County, and part of Where County) submits an application, and the Where County School District also submits an application, IDPH could fund a *maximum* of one of these applications.

**Example 4:** If the Who River Health System submits an application affecting facilities in Whoville, Whereville, and Whatville, and the Who County, Where County, and What County local health departments each also submit individual applications, IDPH could potentially fund any one applicant, or up to all three health department applicants if the Who River Health System is not funded. (IDPH might also fund none of these applicants.)

**Example 5:** If *Unicycle Now!*, a unicycling advocacy group submits one application for a project in Who County, and another application for a project in Why County, IDPH could potentially fund one or both of these applications.

**Example 6:** If Who County, Where County, and What County submit a joint application proposing to implement one strategy in all counties, and another strategy only in Where County, IDPH could fund this application.

IDPH strongly encourages potential applicants to identify collaborative partners for joint applications within a geographic area. In some cases, IDPH may reach out to potential applicants to recommend joint applications based on the information provided in submitted letters of intent. IDPH will also make letter of intent information available on the *We Choose Health* website for applicants to better collaborate.

### **Proposal Submission**

Final and complete proposals (Appendix B) must be submitted via e-mail to [DPH.WeChooseHealth@Illinois.gov](mailto:DPH.WeChooseHealth@Illinois.gov) by June 15, 2012 at 5 p.m. CDT to be considered for funding. You will find complete instructions in the proposal forms. **No applications submitted after the deadline or on paper will be eligible for consideration.**

You will receive a confirmation via email within 48 hours of submitting your proposal. If you do not receive a confirmation, IDPH has not received your proposal. IDPH cannot be responsible for proposals sent to the wrong e-mail address, or for the technical failure of the submitter's e-mail provider. For this reason, IDPH encourages applicants to submit proposals two days before the deadline to ensure adequate time to address technical difficulties.



## **Review Process**

The review process will consist of the following steps:

1. IDPH staff will screen proposals for basic eligibility, completeness, and technical requirements, such as page limits.
2. Independent panels of experts will review proposals, score them based on quality, and recommend them for full, partial, or no funding. Experts may also recommend proposal modifications or funding conditions.
3. IDPH will select proposals for funding based on scoring, as well as other factors including population reach, geographic diversity, health equity issues and other requirements set forth by CDC and IDPH.
4. IDPH will authorize grants to successful applicants.
5. IDPH will notify every applicant of the decision about its proposal by Friday, July 13, 2012 (subject to change).

IDPH staff and outside reviewers with potential conflicts of interest will not participate in scoring or selecting the affected proposals. In the event that approved proposals do not fully address the goals of *We Choose Health*, IDPH may request changes.

## Questions

You may ask questions about the *We Choose Health* RFA and application process by contacting [DPH.WeChooseHealth@illinois.gov](mailto:DPH.WeChooseHealth@illinois.gov). Responses will be added to a list of Frequently Asked Questions (FAQs) posted on the *We Choose Health* website. All questions must be received by June 11, 2012. You will receive a confirmation for your question. If you do not receive a confirmation, IDPH has not received your question.

For general information about the RFA and how to apply, and to find the latest updates, visit the *We Choose Health* website at [wechoosehealth.illinois.gov](http://wechoosehealth.illinois.gov).