

Cross-Jurisdictional Sharing (CJS): Implementation and Impact Measurement Program

Frequently Asked Questions

Last updated: September 18, 2015

This document will be updated as new questions are asked.

New questions are listed first within each subsection.

Definitions

- 1) For purposes of the CJS grant, does “deliberate exercise of public authority to enable collaboration across jurisdictional boundaries to deliver essential public health services” include administrative infrastructure such as shared finance/accounting, purchasing and IT functions?

Answer

Yes. See Appendix A for a full list of public health programs, services or functions (as well as definitions of each) that may serve as the basis of impact measurement activities.

- 2) What do you mean by the term “policymaker?” Do “policymakers” include state legislators?

Answer

For the purpose of this program, “policymakers” refers to senior government administrators, elected officials or governing body members involved in the decision process to enter into a CJS agreement among multiple local jurisdictions. To the extent that state legislators meet this definition (which will vary from state to state) they can be considered as policymakers.

- 3) What do you mean by the “public health programs, services and functions?”

Answer

A detailed definition of these terms is provided at page 5 of the Call for Proposals (CFP).

- 4) What is meant by “jurisdiction?”

Answer

For the purpose of this program, jurisdictions are the geopolitical entities served by public health departments. Most often these are counties, cities, townships, states, districts or tribal governments but it also may include a multi-jurisdictional public health entity with its own governing body or board of health if that entity is engaging in a CJS arrangement with other jurisdictions.

General Questions

- 1) Will the Cross-Jurisdictional Sharing Implementation and Impact Measurement Program be offering additional funding rounds after the October 20, 2015 deadline or is this a one-time grant opportunity?

Answer

At this time we do not anticipate another round of funding for these purposes.

- 2) We have an informal agreement and letters of support for our combined efforts, but we do not yet have a formal agreement in place. In order to submit a proposal for this, does there have to be a CJS already in place?

Answer

Yes. A formal agreement must be in place in order to be eligible for funding, signed by the governing bodies with the authority to enter into such an agreement. The agreement must 1) be signed between January 1, 2015, and December 31, 2015, or 2) indicate that the sharing activities will begin during that time period.

- 3) Can there be other parties involved in the CJS agreement besides the health departments, such as local hospitals?

Answer

The purpose of this grant project is to assess the effects of cross-jurisdictional sharing arrangements on the involved health departments' ability to perform the public health functions and services as described in the CFP. Other organizations such as hospitals may be involved in a sharing arrangement so long as the measurement plan proposed specifically examines the health departments' performance as a result of the cross-jurisdictional sharing arrangement.

- 4) Are you more interested in cross-county (DOHs) or cross-organizational (hospitals, CBOs, etc.)-or both?

Answer

The CJS arrangements must include a minimum of three contiguous jurisdictions of any size, or two jurisdictions if the combined population is 50,000 or greater. Other organizations such as hospitals may be involved in a sharing arrangement so long as the measurement plan proposed specifically examines the health departments' performance as a result of the cross-jurisdictional sharing arrangement.

- 5) I work at a local health department, does the work need to be done between two health departments or would our work with two cities in one county work?

Answer

The purpose of this grant project is to assess the effects of cross-jurisdictional sharing arrangements on the involved health departments' ability to perform the public health functions and services as described in the CFP. If the cities in question have a statutory responsibility to provide public health services within their jurisdictions then a cross-jurisdictional sharing arrangement between the cities and with the county health department would likely be appropriate for consideration under this grant program. However, if the cities are not statutorily responsible for the provision of public health services and the work with those cities is a voluntary agreement to address a particular health issue it would not be eligible under this grant program.

- 6) What type of outcomes do you expect from grantees after the 16 to 20 month grant period?

Answer

The main expected outcomes are: a) The CJS initiative is implemented; and b) baseline and follow-up measures are collected as planned.

- 7) Where will the two in-person meetings take place?

Answer

A decision about the date and location for the two meetings has not been made. The Center for Sharing Public Health Services will cover the travel expenses of two members from each CJS funded project. Applicants do not need to include these costs in their budgets.

Eligibility Questions

- 1) Are non-profit organizations eligible to apply for this funding if they have projects that cross jurisdictional boundaries?

Answer

Non-profit organizations are eligible if they are tax-exempt under Section 501(c)(3) of the Internal Revenue Service Code and they apply on behalf of multiple jurisdictions and health departments to which they deliver public health programs, services or functions. Please note also that the purpose of this grant is to assess the effects of cross-jurisdictional sharing arrangements on the involved health departments' ability to perform the public health functions and services as described in the CFP. Other organizations may be involved in a sharing arrangement so long as the measurement plan proposed specifically examines the health departments' performance as a result of the cross-jurisdictional sharing arrangement.

- 2) Are tax-exempt 501(c)(4) organizations eligible for the award?

Answer

No. The applicant organization must be a state or local government agency, a tribal group recognized by the U.S. federal government, or a nonprofit organization that is tax-exempt under Section 501(c)(3) of the Internal Revenue Service Code. However, for interested parties who may not meet eligibility requirements, partnership is encouraged and subcontractors are allowed.

- 3) The last paragraph on the grant information page seems to indicate that preference will be given to applicants that are 501(c)(3) organizations. Is this the case?

Answer

If the applicant is a nonprofit organization that is tax-exempt under Section 501(c)(3) of the Internal Revenue Service Code, then preference will be given to Section 501(c)(3) organizations that are not classified as a private foundation or Type III supporting organization. Eligible organizations include also state or local government agencies and tribal groups recognized by the U.S. federal government.

- 4) Are teams that were funded with the first CJS round still eligible to apply for this second CJS round?

Answer

Yes. Nothing would preclude phase one teams from applying for this funding.

- 5) We have just completed a community assessment. In doing that process, we discovered that mental health services were needed in the community, especially for children, adolescence, and the uninsured. The agencies involved in the community assessment are now coming together to discuss how best to meet these needs. The County Health Department does not provide mental health services, but often refers out. Would we be eligible to write for the CJS grant on behalf of our community partners?

Answer

No, mental health services are not included in this program's impact measurement domains. See Appendix A for a full list of public health programs, services or functions (as well as definitions of each) that may serve as the basis of impact measurement activities. Furthermore, the CJS arrangements studied under this grant must include a minimum of three contiguous jurisdictions of any size, or two jurisdictions if the combined population is 50,000 or greater.

- 6) Our organization has been approved for non-profit status through the state, but does not have federal 501 c 3 status. Do we need to have the paper work back or do we just need to have it submitted?

Answer

In order to be eligible to apply, the applicant organization needs to be a state or local government agency, a tribal group recognized by the U.S. federal government, or a nonprofit organization that is tax-exempt under Section 501(c)(3) of the Internal Revenue Service Code. If your organization will be the applicant, you will need to have confirmed federal 501(c)(3) status to be eligible. Otherwise, you might consider partnering with an organization that does meet the eligibility criteria and having that organization serve as the applicant.

- 7) Although our CJS fully integrated agency was implemented on Jan 1, 2015, the official legal document authorizing its creation was signed during the latter part of 2014. Can I assume that our initiative would still be an eligible applicant?

Answer

Yes. The CJS activity being implemented and for which measuring activities are proposed must be based on a sharing agreement that 1) is approved between January and December 31 2015, or 2) indicates that the sharing activities will begin during that period.

- 8) Our CJS arrangement was formalized in October 2014. We're just starting a major (may be 26 counties) CHA/CHIP with hospital systems. Do we need a new, separate MOU?

Answer

Yes. The CJS activity being implemented and for which measuring activities are proposed must be based on a sharing agreement that 1) is approved between January and December 31 2015, or 2) indicates that the sharing activities will begin during that period. Other organizations such as hospitals may be involved in a sharing arrangement so long as the measurement plan proposed specifically examines the health departments' performance as a result of the cross-jurisdictional sharing arrangement.

- 9) Our work plans were due and submitted to the state in 2014, but the state didn't provide a letter approving the agreement/work plan until 2015. Would that timing of legal paperwork fall within the parameters?

Answer

The answer depends on the starting date of the agreement/work plan. The CJS activity being implemented and for which measuring activities are proposed must be based on a sharing agreement that 1) is approved between January and December 31 2015, or 2) indicates that the sharing activities will begin during that period.

10) How loose - or tight – is the jurisdiction definition? Would a public district hospital working with a local health department be eligible to apply?

Answer

For the purpose of this program a jurisdiction is a unit of government, such as a town, city, county, district or tribe. The CJS arrangements must include a minimum of three contiguous jurisdictions of any size, or two jurisdictions if the combined population is 50,000 or greater. Furthermore, other organizations such as hospitals may be involved in a sharing arrangement so long as the measurement plan proposed specifically examines the health departments' performance as a result of the cross-jurisdictional sharing arrangement.

11) Are other institutions besides public health agencies eligible to apply on behalf of CJS teams?

Answer

Any institutions can apply on behalf of a CJS team if they are nonprofit organizations that are tax-exempt under Section 501(c)(3) of the Internal Revenue Service Code.

12) Will you accept two applications from the same jurisdiction?

Answer

While multiple applications from the same jurisdiction can be submitted, the Center for Sharing Public Health Services' goal is to fund a diversity of sites in order to maximize the learning from the sites' experience.

13) Is there a maximum or minimum number of health departments that may participate in the CJS initiative that is the basis of the impact measurement project?

Answer

There is no maximum number; however, there is a minimum of three contiguous jurisdictions of any size, or two contiguous jurisdictions if the combined population is 50,000 or greater.

14) Can the project be considered for this grant award if the formal vote to approve the work will not be held until after the beginning of the grant period?

Answer

No. The last possible date that a CJS initiative and the agreement that is governing it can be formally approved, and hence formally begin its implementation phase, is December 31, 2015. Even if the governing bodies involved in the CJS effort have indicated their support for the initiative, or if implementation efforts have begun, this Call for Proposals (CFP) requires a formal agreement.

15) Will you fund an informal sharing arrangement projected to yield significant cost savings and result in some significant service improvements?

Answer

No. Only CJS arrangements that are formal in nature, i.e., are governed by a legal agreement, are eligible for this grant funding. Examples of legal agreements include inter-local agreements, contracts, creation of a regional entity (e.g., Council of Governments or multijurisdictional district) or other formal documents that require approval from each jurisdiction's governing body (e.g., Board of County Commissioners, Board of Health, etc.).

16) Will you fund sharing arrangements within a single jurisdiction?

Answer

No. Efforts solely within a single jurisdiction to enhance efficiencies and capacity are not eligible to apply for this grant funding (e.g., the creation of an umbrella governmental agency or collaboration between a health department and other entities such as hospital districts, rural hospitals and federally-qualified health centers).

17) Can state health departments be a part of the sharing arrangement?

Answer

Yes. Although it is important to understand that arrangements including only a delegation of authority from a state agency to one local agency or vice versa, or the sharing of assets between a state agency and one local health department, will not be considered for funding (i.e., the arrangement must include more than one local jurisdiction).

Programmatic Questions

1) My understanding is that the applicant does not have to begin collecting baseline data until a formal agreement between municipalities is in place. Further, that the agreement must be in place by, at the latest, 12/31/15. Is this correct?

Answer

Baseline data collection should occur from six months before to three months after the beginning of implementation. Baseline measurement can be *conducted* later if based on data collected up to three months after CJS implementation (e.g., administrative records). Follow-up data collection should occur not earlier than six months after the beginning of implementation, AND not earlier than six months after baseline, AND no later than two months before the grant ends. The CJS arrangement must be formal and ongoing and teams must have begun

implementation during the 2015 calendar year, i.e., agreements must have been signed between January 1, 2015 – December 31, 2015.

- 2) The self-assessment asks about intra-partnership agreements (e.g., service provision, responsibility-sharing, facilities and other resources). Does the maturity of these agreements influence an applicant's chance of being awarded a grant?

Answer

No, not necessarily. The self-assessment is designed to reflect a team's progression through phases 1 and 2 of the Roadmap, and capture the degree to which the partners feel various aspects of their CJS agreement have been discussed, addressed, or are present. Your self-assessment results will help us assess the selection criterion that the exploration and planning phases (phase one and phase two of the Roadmap) of the applicant's CJS initiative were completed in a systematic and comprehensive manner. (Please note that if some key areas from an earlier phases were overlooked, it is important to go back and resolve them before moving forward.)

- 3) Who should submit letters of commitment? What should the letters include?

Answer

Applicants should provide at least two letters of commitment from each jurisdiction involved in the project. One of the two letters must come from the governing body in each jurisdiction with the authority to enter into whatever form of CJS agreement is being implemented. The second of the two letters must come from the chief executive officer of each public health agency. Each letter should demonstrate their commitment to the implementation of the CJS arrangement and the impact measurement activities, include a description of why they are supportive of the CJS arrangement, and note their objectives for the CJS arrangement, including both efficiency and effectiveness. Please note that form letters will not be accepted.

- 4) What types of activities will be funded?

Answer

Funds can be used for impact measurement activities, including project staff salaries, meetings, supplies, project-related travel, and other direct project expenses, including a limited amount of equipment essential to the project. Funds cannot be used to cover the costs of implementing the CJS agreement, except for activities that are necessary to assure proper collection and analysis of data to measure the impact of the CJS project.

- 5) Is there a program officer or other program official available to speak with interested applicants to see if their idea is indeed a good fit for the Implementation and Impact Measurement Program?

Answer

In the interest of fairness to all of the applicants, we cannot connect you to a program officer to assess fit. We would encourage you to read through the selection criteria and eligibility and contact us about any clarification questions. You also may find it helpful and informative to listen to the September 8, 2015 applicant webinar to be held at 1:30 p.m. ET, or watch the recording if you cannot attend in person. The webinar recording will be posted on the Center's website within a week.

- 6) What is the duration of the CJS project period?

Answer

Impact measurement plans funded through this grant may be for a duration of 16 months to 20 months, and activities must be conducted between February 16, 2016 and October 15, 2017.

- 7) What happens if none of the measures that have been suggested fit our implementation project plans but we have other measures we would like to propose?

Answer

Applicants wishing to utilize different measures may propose alternatives, as long as they provide a rationale for their proposed measures. The Center for Sharing Public Health Services will examine the proposed alternatives and assess their value in regard to feasibility, relevance, validity and reliability. Whether applicants propose measures from the Center suggested list or not, they are strongly recommended to include at least one efficiency and one effectiveness measure.

- 8) If it is determined that the CJS project is very likely to be successful but the proposed measures are not satisfactory, will the applicant have an opportunity to modify their impact measurement plan?

Answer

Yes. We will work with the finalist applicants to assure that the measures that are ultimately selected for each funded project are appropriate and relevant, and may recommend variations from those originally proposed.

- 9) I am confused about the timeline for the collection of baseline and follow-up measures. Can you clarify that?

Answer Baseline measurement must be collected one time, not earlier than six months but not later than three months from the date of approval of your CJS agreement. Baseline measurement can be based on pre-existing administrative records, as long as the records reflect the status of the measure within the

appropriate timeframe (i.e., between six months before and three months after the approval of the CJS agreement). For example, if your CJS agreement was executed on January 1, 2015, your baseline measurement can be based on information collected between July 1, 2014 (six months before) and March 31, 2015 (three months after). In this example, your follow-up measures must meet all of the following criteria:

- a) It must be collected at least six months after baseline measurement (a date that in this case would fall between January 1, 2015 and September 30, 2015, depending on when the baseline measurement was collected).
- b) It must be collected at least six months from date of implementation (in this case after July 1, 2015).
- c) It must be collected before two months from the end date of your approved grant. The end date will fall between August 15, 2017 (for projects funded for 18 months) and October 15, 2017 (for project funded for 20 months).

Budget Questions

- 1) If we have a team of 3 health agencies applying for the CJS grant, if awarded, would each agency receive \$75,000?

Answer

No. The \$75,000 grant funding available is for the entire applicant project and is not per jurisdiction or agency involved in the project.

- 2) What can the \$75,000 be used for? Can it be used to implement a CJS arrangement or can it only be used to evaluate the impact of an already made CJS arrangement?

Answer

The \$75,000 grant funding **cannot** be used to implement CJS services. It can be used solely to support impact measurement activities.

- 3) Are there any restrictions on what the grant funds can support?

Answer

Yes. The Implementation and Impact Measurement Program grant funds will not support existing operational expenses or deficits, research studies or substitutions for funds currently supporting similar services. The Program also will not support CJS implementation activities. In keeping with the funder's policy, grant funds may not be used to subsidize individuals for the costs of their health care, to support clinical trials of unapproved drugs or devices, to construct or renovate facilities, for lobbying, or as a substitute for funds currently being used to support similar activities. No capital renovations or facility expansion will be supported through this project. Additionally, funds may not be used for lobbying activities.

4) Can we use grant funds to pay for equipment?

Answer

Purchase of a limited amount of equipment may be allowable if required to support the measuring activities for the CJS project. Adequate justification must be provided. The funder generally does not support the purchase of cell phones or tablets.

5) What are indirect costs? How do I calculate them, and what can they be used for?

Answer

Indirect costs are overhead expenses incurred by the applicant organization as a result of the project but that are not easily identifiable with a specific project. These are administrative expenses that are related to overall operations and are shared among projects and/or functions. Examples include executive oversight, accounting, grants management, legal expenses, utilities, and facility maintenance.

The approved rate for the Implementation and Impact Measurement Program is 12% of all costs (Personnel, Other Direct Costs, and Purchased Services) funded by the grant. However, if the Purchased Services category equals more than 33% of the total of Personnel, Other Direct Costs and Purchased Services, the Program allows a 12% indirect rate on Personnel and Other Direct Costs and a 4% indirect rate on Purchased Services. If indirect costs are requested they should be included in the total grant amount, i.e., no award will be over \$75,000.

6) Will we be required to submit audited financial reports?

Answer

Audited financial reports are not required for awards of this size and duration.

7) The CFP notes that the grants will be up to \$75,000. Is this per year or total award?

Answer

The \$75,000 amount is the total award. A funded organization can request up to \$75,000 over the course of the entire grant period.

8) How many awards is the Center for Sharing Public Health Services expecting to make under the Implementation and Impact Measurement Program?

Answer

We anticipate making seven awards.

9) We have not secured all of the funds needed to implement our new CJS initiative. Can the grant funds be used, in part, to support implementation activities?

Answer

No. The awards are intended solely for the purpose of impact measurement activities.

Finalist Interview Questions

1) Will the applicant interviews be conducted in person?

No. Applicant interviews will be conducted via conference calls.

2) Why are applicants required to select three time options for a finalist interview?

Answer

The selection process includes a single 1.5 hour phone interview with finalists. Three time options are requested in order to facilitate the scheduling process once the finalists have been selected.

3) How many applicants will be selected for the finalist interviews?

Answer

There is not a pre-set number of finalists.

4) Who should participate in the finalist interview?

Answer

The applicant's project director is required to participate in the finalist interview. The Center for Sharing Public Health Services encourages the project director to also invite other key partners and project members to participate.