

**STATE OF TENNESSEE  
DEPARTMENT OF HEALTH**

**REQUEST FOR APPLICATION**

**FOR**

**HEALTHY BUILT ENVIRONMENT**

**RFA # 34301-17623**

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**STATE OF TENNESSEE**  
**DEPARTMENT OF HEALTH**

**I. Background Information**

The places where we live, learn, work, play, and worship influence how we view and understand our communities, ourselves, and each other. A well-designed built environment can decrease obesity, heart disease, and diabetes rates while increasing physical, mental, and social health. The Tennessee Department of Health (TDH) recognizes the link between the built environment and public health. TDH supports the creation of healthy built environments to protect, promote, and improve the health and prosperity of all Tennesseans.

In 2015, TDH created the Office of Primary Prevention (OPP), to help Tennessee communities build a culture of health. In 2018, OPP launched a competitive built environment grant program and awarded over \$1,800,000 to 34 government and non-government grantees across Tennessee. The program was continued in 2021, awarding over \$860,000 to fund 14 projects. TDH funded grants for convening, programming, planning, and construction projects. These built environment projects created and enhanced playgrounds, walking tracks, outdoor fitness stations, greenways, trails, and other publicly accessible spaces to promote physical activity, access to healthy food and social interaction. Many of the grant-funded projects benefited economically distressed or at-risk counties.

**A. Funding**

TDH has appropriated \$900,000 to fund approximately 18 projects that advance health equity by creating or supporting a healthy built environment. The goal of this grant is to serve historically underserved populations, engage the target community, and work to promote inclusivity of individuals of all abilities and backgrounds. Both government and non-profit entities are eligible to apply. Only one application per entity is allowed.

Applicants must identify a target community where built environment improvements can advance health equity. TDH has pre-identified census tracts that are in the 60<sup>th</sup> percentile of the 2018 Social Vulnerability Index (SVI) as defined by the Centers for Disease Control and Prevention (CDC). A map with this data can be accessed at [tn.gov/SVImap](https://tn.gov/SVImap). Target communities of built environment projects must be in one of the hi-lighted census tracts on the map.

These grants are awarded through reimbursement of completed work only. TDH is unable to provide advanced payment. Though matching funds are not required, TDH encourages applicants to include commitments of cash or in-kind services to demonstrate support for their project. Funds cannot be spent on

salaries for government employees, subsidies for individuals, lobbying activities, or for existing services.

TDH has put effort into simplifying this application process to make it easier and quicker for you to apply. The LOI and application process will be completed online.

## B. Types of Projects

TDH will fund built environment projects at varying stages of development. Phase A projects include convening, assessment, and/or planning and have a maximum award of \$50,000. Phase B projects include infrastructure design and construction and have a maximum award of \$80,000. Projects must be completed within 22 months.

Applicants must propose a project in either Phase A or Phase B, not both.

### 1. **Phase A – Convening, Assessment, and/or Planning** **(Maximum Amount \$50,000)**

If the proposed project is in this phase, the application can include any combination of convening, assessment, and/or planning.

- a. **Convening (Maximum Amount - \$2,000):** Convening phase projects will identify and engage partners, elected officials, and other stakeholders, especially in communities where public health has not been considered in built environment decision making. Partnerships could be with local health leaders, county health council, and/or vulnerable or underserved populations. Funds can be used to compensate community members of the target population for their time (excluding state or local government employees). Funds can also be used for childcare to encourage participation from members of the target population.
- b. **Assessment (Maximum Amount - \$20,000):** Assessment phase projects will develop and share the results of either a needs assessment or an active living policy assessment with their community. A needs assessment would identify gaps where facilities that promote physical activity do not exist and identify populations in need of these facilities. The needs assessment may include a density or proximity analysis of:
  - parks;
  - open spaces;
  - public schools;
  - community centers;
  - recreational centers;
  - sidewalks;
  - bikeways;

- greenways;
- playgrounds; or
- other community amenities the public could use for physical activity.

An active living policy assessment would analyze or propose plans or regulations to improve opportunities for physical activity. An active living policy assessment could be about:

- zoning codes;
- subdivision regulations;
- comprehensive plans;
- neighborhood plans;
- subarea plans;
- planned unit developments;
- school siting policies;
- joint use agreements;
- bicycle and pedestrian plans;
- greenways and parks master plans; or
- other related plans.

- c. Planning (Maximum Amount - \$50,000): Planning phase projects will engage with the target community to develop a written plan to promote public health in built environment decision making. Written plans would advance policy change or design infrastructure for a community. All plans must include measurable goals, projected timelines, and potential funding sources for future construction. Plans should demonstrate compliance with all requirements from applicable agencies that require a completed plan to apply for construction funding. Plans should document any steps the community has taken that demonstrate interest and support for built environment projects to increase physical activity. Planning phase projects can include site visits to learn from successes in other communities. TDH will consider Phase A planning projects such as:

- small-area plan focused on increasing physical activity;
- greenways, parks, sidewalks, bikeways, or multi-modal transportation master plan;
- complete streets plan;
- arts in placemaking plan;
- public spaces plan; or
- other plan focused on promoting health.

2. **Phase B – Infrastructure Design and Construction**  
**(Maximum Amount \$80,000)**

Phase B projects design or build amenities to provide opportunities for physical activity and/or access to healthy foods for a community or target population with a need for these types of amenities. These projects may include playgrounds, greenways, sidewalks, bikeways, crosswalks, or walking tracks, or active transportation rest areas. Amenities like signage, benches, shade, bicycle repair stations, water fountains, lighting, restrooms, or other infrastructure that helps increase the use of facilities that promote physical activity and/or access to healthy foods are eligible project costs.

All proposed Phase B projects must be on publicly accessible property and available for use by all community members free of charge. Applicants must provide details for long-term maintenance. Grantees may use Phase B funding alone or as state-level matching funds. All infrastructure projects must include the community in the decision-making process and documentation of community involvement through committees, reports, and master plans.

#### C. Additional Grantee Requirements

In addition to completing your built environment project by the deadline, there are some additional required actions. Grantees will be required to:

1. Attend a mandatory Grants Management and Evaluation webinar.
2. Complete a minimum of quarterly check-ins with the TDH grant manager. The check-ins will include written summaries of progress, pictures, site visits, and budget and spending updates as necessary. The TDH grant manager can request more check-ins if deemed necessary.
3. Complete a final report including evaluation results upon completion of the contract.
4. Submit monthly invoices per the contract.
5. Inform the TDH grant manager of any progress, delays, or issues.
6. Comply with all of the requirements outlined in the contract with TDH.

## II. Process

#### A. Letters of Intent

The Letter of Intent (LOI) provides a “first look” at the proposed project for funding. LOIs must be submitted online by the deadline specified in Section IV, Schedule of Events in the form and detail specified in this RFA. A team of Evaluators will score the LOIs based on the following criteria:

1. **Need** – Proposed activities in project narrative address a defined need (including health disparities) in a defined community. TDH highly encourages applicants to include applicable data specific to their targeted community. Projects will be prioritized that advance health equity in historically underserved communities.

2. **Cost Effectiveness** – The budget narrative exhibits thoughtful and appropriate use of dollars and answers these three main questions:
  - What project actions and materials will cost money?
  - How much will the project cost?
  - How was this estimate compiled?
3. **Impact** – Proposed activities have the potential to produce changes in health outcomes for the target population.
4. **Collaboration and Community Engagement** – Proposed activities do not duplicate or supplant existing services. The activities involve a genuine collaboration with stakeholders. Activities consider what the community members want and have public appeal.

B. Applications

TDH will email the highest ranked LOI applicants an invitation to submit a full application. The link for application submission will be added to the Funding Opportunities website.

The full application will require more detailed information about the applicant, proposed project, and community. A TDH team of evaluators will rank full applications on the following:

The Application will include the following sections:

1. **Project Abstract and Problem Statement** - 20 Points Maximum (300 word-limit) - Briefly explain what health need has been defined in the community and how the proposed built environment project will meet that need. Be sure that a hi-lighted census tract on the [SVI Map](#) is included in the target population that will directly benefit from the project.
2. **Project Narrative** – 20 Points Maximum (750 word-limit and attached Work and Evaluation Plan) - Provide a project narrative detailing how the work will achieve the goal(s) and objectives while collaborating with partners and engaging the community. This should complement the Work and Evaluation plan attachment. If the project includes construction, please indicate how it will be ensured that the project follows appropriate regulations.
3. **Project Management** – 20 Points Maximum (500 word-limit) Please provide a narrative describing the applicant's qualifications and ability to manage the project successfully.
4. **Evaluation** – 20 Points Maximum (500 word-limit and two attachments: Grant Project Flow Chart (Exhibit 1) and Work and Evaluation Plan (Exhibit 2)) - Please describe how the applicant will evaluate the impact and success of the project. Include metrics, a plan for data collection, and a plan to disseminate findings.

5. **Budget** – 20 Points Maximum  
(500 word-limit plus Attachment 2 completed on the provided budget template) – Please complete the 2 budget pages for each fiscal year of the project using Attachment 2. Include a detailed budget and budget narrative, describing anticipated revenue and expenses, additional grant funding, and other sources (including in-kind, if applicable). Address sustainability and maintenance beyond the grant period. If the applicant has received other TDH funds, please give a brief history.
  
6. **Additional Attachments**  
Supplemental attachments may be submitted. This section will not be scored individually, but it can support and complement other sections of the grant. It should be submitted as a single PDF file that does not exceed 10 pages total. Some attachments that may be included are:
  - Letters of Support and Letters of Commitment;
  - Documents that demonstrate public support;
  - Pictures;
  - Plans; and
  - Convening meeting minutes.

### III. **Sample Grant Contracts**

Following the State’s evaluation, one of the Sample Grant Contracts included on the TDH Funding Opportunities page for this RFA will be prepared. There are three different Sample Grant Contracts, and only one would apply for a grantee’s agency or organization. The types of contracts are as follows:

**GG – Governmental Grant Contract** (Cost reimbursement grant contract with a federal or Tennessee local governmental entity or their agents and instrumentalities)

**GR – Grant Contract** (Cost reimbursement grant contract with an individual, business, non-profit, or governmental entity of another state or country)

**IG – Interagency Grant Agreement** (Cost reimbursement grant agreement between two Tennessee state agencies, University of Tennessee, or Board of Regents colleges and universities)

If a grant is awarded to a governmental entity established pursuant to Tennessee Code Annotated (such as a human resource agency, developmental district, state college or university, or Board of Regents school), TDH will revise standard terms and conditions of the grant; however, TDH will not revise significant performance requirements.

It is imperative that each applicant review the entire Sample Contract with their legal counsel prior to submitting an application for a Healthy Built Environment grant award and notify the State *in advance* if it cannot accept any terms or conditions. Please submit any exceptions to contract language with the Application for Healthy Built

Environment. **Taking any exceptions to State contract language may result in the Application being deemed non-responsive and rejected. Any later requests for contract changes will not be considered.**

#### **IV. Schedule of Events**

The following is the anticipated schedule for awarding Healthy Built Environment grants. TDH reserves the right to adjust the schedule as deemed necessary.

<b>EVENT</b>	<b>CENTRAL TIME</b>	<b>DATE</b>
1. RFA Issued		March 7, 2023
2. Letter of Intent Teleconference	1:00 p.m.	March 13, 2023
3. Written "Questions & Comments" Deadline	2:00 p.m.	March 15, 2023
4. State Response to Written "Questions and Comments"		March 22, 2023
5. Deadline for Letters of Intent	2:00 p.m.	May 10, 2023
6. Invitations to Apply Emailed		June 9, 2023
7. Application Teleconference	10:00 a.m.	June 15, 2023
8. Written "Questions and Comments" Deadline	2:00 p.m.	June 20, 2023
9. State Response to Written "Questions and Comments"		June 27, 2023
10. Deadline for Applications	2:00 p.m.	July 10, 2023
11. Evaluation Notice Released		July 31, 2023
12. Effective Start Date of Contract		September 1, 2023

A Teleconference will be held prior to submission deadlines for both Letters of Intent and Applications. The information for the Letter of Intent teleconference is as follows:

Meeting Name: RFA #34301-17623 Teleconference  
 Meeting number (access code): 2308 086 3438  
 Meeting password: nsHBN3xMt63  
 Meeting Link:  
<https://tn.webex.com/tn/j.php?MTID=m562b4fd62a308c9b67e9b9fcb9225bdf>  
 Join by phone: +1-415-655-0003 US TOLL

**Deadlines stated above are critical.** If documents are submitted late, they will be deemed to be late and cannot be accepted. The clock-in time will be determined by the time of the online submission. No other clock or watch will have any bearing on the time of application receipt.

TDH will not pay any costs associated with the preparation, submittal, or presentation of a letter of intent or application.



## V. Submission of Letter of Intent

Please submit Letters of Intent and all attachments online via the following link no later than the deadline in Section IV of this RFA.

Web Link: <https://www.tn.gov/health/funding-opportunities.html>

The Competitive Procurement Coordinator at the address shown below is the sole point of contact for this competitive process:

Melissa Painter  
Competitive Procurement Coordinator  
Service Procurement Program  
Division of Administrative Services  
Andrew Johnson Tower, 5<sup>th</sup> Floor  
710 James Robertson Parkway  
Nashville, TN 37243  
Phone: (615) 741-0285  
Fax: (615) 741-3840  
Email: Competitive.Health@tn.gov

## **Resources for Applicants**

- [TDH Office of Primary Prevention website](#)
- [Built Environment Evaluation Guide](#)
- [The Rural Active Living Assessment Tool Codebook and Scoring](#)
- [Rural Active Living Perceived Environmental Support Scale \(RALPESS\)](#)
- [Promoting Active Living in Rural Communities Research Brief](#)
- [Urban Land Institute – Building Healthy Places Toolkit](#)
- [CDC – Healthy Community Design Checklist](#)
- [CDC Transportation and Health Tool](#)
- [AARP – Livability Index](#)
- [Assembly: Civic Design Guidelines](#)
- County Health Data Packages (email [strategy.health@tn.gov](mailto:strategy.health@tn.gov))
- [Vital Signs](#)
- [TDH “Healthy Places” website.](#)
- Your Development District