



## Oportunidad de fondos para organizaciones comunitarias

El Oregon Health Authority (OHA, por sus siglas en inglés) quisiera extender una invitación para oportunidades de financiamiento a organizaciones comunitarias (CBOs, por sus siglas en inglés) en todo el Estado de Oregon. Las CBOs son fundamentales para el éxito de este trabajo para integrar métodos, tácticas y estrategias que respondan mejor a las necesidades de las personas de color, las personas con discapacidad, las comunidades de indocumentados y refugiados, las tribus, los trabajadores agrícolas migrantes de temporada y las comunidades LGBTQIA +. Las CBOs tienen la oportunidad de apoyar tres áreas de trabajo como parte de nuestra respuesta al COVID-19.

1. Participación comunitaria, educación y alcance a la comunidad
2. Rastreo de contacto
3. Servicios sociales y apoyos integrales

El Oregon Health Authority (OHA, por sus siglas en inglés) se compromete a colaborar con las organizaciones comunitarias y las comunidades a las que sirven para garantizar que todos los miembros de nuestra comunidad reciban información, servicios y recursos de la manera más responsable. Sabemos del temor actual y la información errónea sobre el coronavirus dentro de la comunidad. Nos gustaría tener la oportunidad de trabajar junto a usted para brindarle información pública y apoyo, para que se sientan preparados para tratar el coronavirus.

Para obtener más información sobre el proceso de solicitud, consulte la solicitud adjunta y el ámbito de trabajo. También ofreceremos sesiones de información:

### **Sesión 1 (en inglés) - 15 de junio, 10:00-11:00 am**

Únase a la reunión vía Zoom

<https://zoom.us/j/95279133704?pwd=RmpIV1dJWj92RkhnSTFCa0Y5cXJUUT09>

ID de la reunión: 952 7913 3704

Contraseña: 792171

Únase a la reunión vía móvil

+ 13462487799, 95279133704 # US (Houston)

+ 16699006833, 95279133704 # US (San Jose)

Marque de acuerdo su ubicación

+1 346 248 7799 US (Houston)

+1 669 900 6833 US (San José)

Subtítulos: ingles

<https://www.captionedtext.com/client/event.aspx?CustomerID=2697&EventID=4473863>

### **Sesión 2 (en inglés) - 17 de junio, 10:00-11:00 am**

Únase a la reunión vía Zoom

<https://zoom.us/j/97574715412?pwd=OW5Vamt6U2srMm9KLyubDEzT2wzZz09>

ID de la reunión: 975 7471 5412

Contraseña: 343909

Únase a la reunión vía móvil

+ 16699006833, 97574715412 # US (San75 Jose)

+ 12532158782, 97574715412 # US (Tacoma)

Marque de acuerdo su ubicación

+1 669 900 6833 US (San José)

+1 253 215 8782 US (Tacoma)

Subtítulos: ingles

<https://www.captionedtext.com/client/event.aspx?CustomerID=2697&EventID=4473864>

### **Sesión 3 (en español) - 18 de junio, 11:00-12:00 pm**

Únase a la reunión vía Zoom

<https://zoom.us/j/99673558668?pwd=cG1Wakhia0Q0M1A4Y3daMlpjQ09Edz09>

ID de la reunión: 996 7355 8668

Contraseña: 343805

Únase a la reunión vía móvil con

+12532158782, 99673558668# US (Tacoma)

+13462487799, 99673558668# US (Houston)

Marque de acuerdo su ubicación

+1 253 215 8782 US (Tacoma)

+1 346 248 7799 US (Houston)

Subtítulos:

español <https://www.captionedtext.com/client/event.aspx?CustomerID=2697&EventID=4473866>

Toda persona tiene derecho a conocer y usar los programas y servicios del Oregon Health Authority (OHA, por sus siglas en inglés). OHA brinda ayuda gratuita. Algunos ejemplos de la ayuda gratuita que OHA puede proporcionar son:

- intérpretes de lenguaje de señas y de lenguaje hablado
- Materiales escritos en otros idiomas
- Braille
- Letra grande

- Audio y otros formatos

Si necesita ayuda o tiene preguntas, comuníquese con Dolly England al 503-951-1760, 711 TTY, [Dolly.A.England@dhsoha.state.or.us](mailto:Dolly.A.England@dhsoha.state.or.us) al menos 48 horas antes de la reunión.

Puede obtener este documento en otros idiomas, letra grande, Braille o el formato que prefiera. Póngase en contacto con el Incident Management Team del Oregon Health Authority al correo electrónico: [Community.Covid19@dhsoha.state.or.us](mailto:Community.Covid19@dhsoha.state.or.us).

**El material de la solicitud final puede ser enviado a [Community.Covid19@dhsoha.state.or.us](mailto:Community.Covid19@dhsoha.state.or.us).**

**Community-Based Organizations – COVID-19 Response  
Grant Application**



**Posted Date:** June 10, 2020

**First Application Review Date:** June 24, 2020

**Introduction**

This grant asks community-based organizations to provide services to help the Oregon Health Authority to support the health of Oregonians, particularly Oregon inhabitants diagnosed with COVID-19 and their contacts through providing culturally and linguistically appropriate and accessible information to communities are at higher risk for COVID-19 and associated complications due to longstanding social and health inequities. These communities include but are not limited to: people of color, people with disabilities, people who are houseless, individuals with substance use disorder, immigrant and refugee communities, faith communities, undocumented communities and farm workers, people experiencing mental health issues, older adults and LGBTQIA+ communities. Organizations must be able to use outreach methods that adapt to changing information and effectively communicate and engage community members despite physical distance restrictions.

**Purpose**

- Oregon health regions and counties are developing plans to increase active COVID-19 monitoring. The Oregon Health Authority (OHA) is developing a pool of trained staff and uniform contact tracing tools for the regions and counties to access to help fill gaps and increase capacity to meet criteria for reopening and ensure a coordinated, equitable approach across the state. The staffing plan provides an operational framework for hiring, training, and deploying staff including Community Health Workers (CHWs) and those with similar skill sets within community-based organizations (CBOs) and faith-based organizations to help support regional and county contact tracing plans.
- CBOs, including advocacy groups, and faith-based organizations are central to the success of this plan to integrate methods, tactics and strategies that are most responsive to the needs of the grant’s priority populations: people

of color, people with disabilities, people who are houseless, individuals with substance use disorder, immigrant and refugee communities, faith communities, undocumented communities and farm workers, people experiencing mental health issues, older adults and LGBTQIA+ communities.

- Ensure that vulnerable Oregonians have access to accurate and timely information about COVID-19 in a language they understand and from a trusted source; receive in-language COVID-19 symptom monitoring; and have more robust access to testing and services to support their and their household's welfare in case of an exposure to an infected individual. Individuals with limited English can be supported through bilingual staff, Health Care Interpreters (HCIs) and through Language Link.
- Provide feedback to OHA Public Health Division (PHD) on educational materials, trainings, resources and process to better serve your community members.

### **Eligibility:**

- Any 501(c)(3) organization that provides culturally responsive services to communities in Oregon that are disproportionately impacted by COVID-19. Organizations with 501(c)(3) fiscal sponsors are eligible to apply. Organizations must hold commercial general liability insurance covering bodily injury and property damage of not less than \$1,000,000 per occurrence and annual aggregate limit not less than \$2,000,000.
- Organizations with an interest in health equity.
- All grantees must abide by [OHA's nondiscrimination policy](#), and state and federal civil rights laws, unless otherwise exempted by federal or state law. Specifically, people participating in OHA-sponsored activities or programs may not be treated unfairly because of age, color, disability, gender identity, marital status, national origin, race, religion, sex or sexual orientation. Organizations that are able to integrate methods, tactics and strategies that are most responsive to the needs of people of color, people with disabilities, people who are houseless, individuals with substance use disorder, immigrant and refugee communities, faith communities, undocumented communities and farm workers, people experiencing mental health issues, older adults and LGBTQIA+ communities in order to

ensure the success of community engagement, contact tracing and social services and wraparound supports. Ability to partner with the local public health authority(ies) in the organization's service area.

- Health systems and for-profit organizations are not eligible.

**Process and Timeline:**

- June 10: Grant announcement released
- June 24: Applications due for first round review
- June 30: Organizations notified of the status of their applications
- Budget due within 60 days of award

**Funding:**

The total grant period is June 1, 2020 – May 31, 2021. Each CBO will receive an initial three months of funding, including one-time start-up costs, up front at time of grant signature. Funds will continue to be paid up front quarterly (September 2020, December 2020, March 2021) and quarterly awards may be adjusted due to available budget and location of COVID-19 cases around the state. CBOs can also submit direct costs related to isolation and quarantine (e.g., food, cell phones, health care supplies (not covered by insurance), housing, child care) to OHA for reimbursement.

Total six-month available funds: \$25 million. Initial three-month up-front award amount: \$12.5 million. Isolation and quarantine-related expenses submitted are *in addition to* the \$12.5 million paid by reimbursement and are not included in the CBO budget.

The next three-month budget available is \$12.5 million. The revenue and expenditure report will be reviewed, and the budget may be adjusted based on need and use. If a CBO did not spend all the funds allotted, funding may be reduced or if a CBO is in an area with a high COVID rate, funding may need to be increased.

Estimated available funding by COVID-19 region for initial three months:

Region 1 – Clatsop, Columbia, Clackamas, Multnomah, Tillamook, Washington: \$4,893,715

Region 2 – Benton, Lincoln, Linn, Marion, Polk, Yamhill: \$2,581,051

Region 3 – Coos, Curry, Douglas, Lane: \$1,647,519

Region 5 – Jackson, Josephine: \$934,041

Region 6 – Hood River, Gilliam, Sherman, Wasco: \$390,521

Region 7 – Crook, Deschutes, Grant, Harney, Jefferson, Lake, Klamath, Wheeler:  
\$1,219,833

Region 9 – Baker, Malheur, Morrow, Umatilla, Union, Wallowa: \$901,520

The second six months of funding will be determined based on available funds. Funding will continue for core staff support and deliverables will be adjusted based on total available funds and the course of the COVID-19 response.

Estimated total number of grants: 120 statewide

Ranges: The ranges below are suggested based on the number of individuals served. If a CBO covers multiple regions or works statewide, please note this in your application as your proposed budget may be adjusted to accommodate number of people proposed to be served. Listed below are the ranges for each option:

Community engagement: \$11,783 - \$47,131

Contract tracing: \$6,546 - \$26,184

Social services and wraparound supports: \$7,855-\$31,421

Start-up costs: one-time funding \$5,265. These funds can be used to purchase equipment for employees or any start-up costs to implement this new work.

Reimbursement for isolation and quarantine-related costs: CBOs can submit direct costs related to isolation and quarantine (e.g., food, cell phones, health care supplies (not covered by insurance), housing, child care) to OHA directly for reimbursement. Reimbursable costs *do not include*: car payments, credit card payment, or student and personal loans. Reasonable efforts should be made to utilize other benefits such as SNAP and WIC before seeking reimbursement for costs related to isolation and quarantine.

**Information requested – Part One**

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**Please fill in the following information for your organization:**

**Organization name:**

**Organization name DBA (if different from above):**

**Fiscal sponsor organization name (if applicable):**

**Organization Address:**

**Tax ID, EIN or FIN:**

**Contact name:**

**Contact email and phone:**

**Authorized signature name:**

**Authorized signature email:**

**Area(s) served:**

**Population(s) served:**

**Language capabilities:**

**Which activity category or categories will you intend on working in:**

Community Engagement Outreach \_\_\_\_\_

Contact Tracing \_\_\_\_\_

Social Services and Wraparound Supports \_\_\_\_\_

Is your organization being funded by any Local Public Health Authority for any of the above work? If so, please list which categories and the counties you will be working in.

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**Estimated total budget per category:**

Start-up costs \$5,265 (provided to all grantees)

Community Engagement Outreach \_\_\_\_\_



Contact Tracing \_\_\_\_\_

Social Services and Wraparound Supports \_\_\_\_\_

Note: CBOs will be asked to submit a detailed budget within 60 days of award.

**Positions (or monthly hours) to support these activities:**

Community Engagement and Outreach

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Contact Tracing

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Social Services and Wraparound Supports

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**Estimated number of people who could be served per month:**

Community Engagement Outreach \_\_\_\_\_

Contact Tracing \_\_\_\_\_

(Please note it is not possible to project contact tracing needs within the organization's service area, based on the number of COVID-19 cases. This question is designed to help understand the number of people who could be served.)

Social Services and Wraparound Supports

Please note the types of services you provide, including but not limited to housing assistance, food assistance, childcare, transportation, utility assistance, services for older individuals or people with disabilities; and the number of people and household members your organization can serve:

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**Additional qualifications:**

## Information Requested – Part Two

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Please describe:

- 1) Your experience serving the grant's priority populations. Your present staff who are community health workers (CHWs) and health care interpreters (HCIs) and your anticipated hires with this expertise.
  
- 2) How you will apply your experience serving the grant's priority populations to carry out the grant activities.
  
- 3) Your organization's established relationships with key community partners/sectors in your region (please list) that serve the grant's priority populations.
  
- 4) Your organization's ability to partner with the local public health authority(ies) in your service area.
  
- 5) How will you meet the community where they are, ensuring you deliver services in a culturally and linguistically responsive manner.
  
- 6) What kind of support would your organization need to carry out this work?

## Technical and financial assistance

OHA will provide:

- Funding for telephone, computer, financial equipment, purchase of new commercial general liability insurance (if applicable) needed for the work. This funding is included in start-up costs noted above.
- Orientation
- Contact tracing and ARIAS database training for CBOs providing contract tracing
- Budget and reporting template
- Technical Assistance by OHA Community Engagement Team

## Reporting

- Reports are due quarterly.
- Reporting for contract tracing in ARIAS for CBOs providing contract tracing.

For questions or more information, contact

[Community.Covid19@dhsoha.state.or.us](mailto:Community.Covid19@dhsoha.state.or.us)

Everyone has a right to know about and use Oregon Health Authority (OHA) programs and services. OHA provides free help. Some examples of the free help OHA can provide are:

- Sign language and spoke language interpreters
- Written materials in other languages
- Braille
- Large print
- Audio and other formats

If you need help or have questions, please contact Dolly England at 503-951-1760, 711 TTY or [dolly.a.England@dhsoha.state.or.us](mailto:dolly.a.England@dhsoha.state.or.us).

## **Attachment 1: Scope of Work for Community-Based Organizations – COVID-19 Response**

This Scope of Work applies to community-based organizations. The Oregon Health Authority (OHA) will work with community-based organizations to conduct any of the following three activities related to the COVID-19 response:

1. Community engagement, education and outreach
2. Contact tracing
3. Social services and wraparound supports

### **1. Community engagement, education and outreach**

Background: A trusted connection to individuals, families and communities is a critical way to share accurate information about COVID-19. Information about COVID-19 must be culturally and linguistically responsive to meet the needs of communities most impacted by racism and oppression or other circumstances caused or exacerbated by toxic stress, trauma, intergenerational trauma and the social determinants of equity like mental health, substance use, job loss, housing and food and nutrition. Communities may also be experiencing stigma related to misinformation about the source and spread of COVID-19.

Community engagement, education and outreach may include:

- Regular communication with community members in their primary or preferred language, including alternate format, about COVID-19 and how to prevent the spread of disease (newsletters, social media, group classes, emails, texting or WhatsApp or other methods of engagement). This may include use of health care interpreters and existing language access contracts.
- Create and share culturally relevant information;
- Amplify OHA information by re-posting social media posts;
- Educate community about safe practices to prevent the spread of COVID-19, answer questions, and act as liaison between the community and public health;
- Inform the community about where to go for services like testing, health care and social services;

- Regular coordination with the local public health authority (LPHA) about where the community can access services like testing, health care and social services.

## **2. Contact Tracing**

Background: Part of Oregon’s framework for Reopening Oregon is to actively suppress the transmission of SARS-CoV-2, the virus that causes COVID-19. To suppress disease transmission in the State of Oregon, it is critical to identify as many people who have been exposed to the virus as possible and then conduct broad contact tracing to identify all contacts that may have been exposed to a case during their infectious period.

Community Health Workers, Traditional Health Workers and individuals who have similar training or skill sets are trusted community members who can effectively build relationships and make contact tracing successful.

The Contact Tracer works directly with their community-based organization to receive information about contacts needing to be traced in coordination with the local public health authority (LPHA) and OHA. Contact tracing includes:

1. Calling all identified contacts of COVID-19 cases to document a symptom check;
2. Referring contacts for testing according to established protocols;
3. Providing contacts with quarantine instructions; and
4. Documenting their work in the OHA ARIAS system.

OHA will support community-based organizations and LPHAs with data sharing agreements to allow sharing of protected health information between organizations.

Contact Tracers will utilize community health worker practice and methodology to establish trust with contacts, assess and collect information required by OHA, and will follow scripts, policies and procedures provided by OHA and comply with all state and federal HIPAA and other privacy/confidentiality requirements and current investigative guidelines.

The Contract Tracer shall:

- Call identified contacts of COVID-19 cases assigned by the LPHA or OHA Case Investigator;
- Communicate with contacts in a professional and empathetic manner;

- Provide contacts with quarantine procedures, and if appropriate, refer them to local testing locations according to protocol;
- Monitor asymptomatic case contacts daily per OHA investigative guidelines for development of symptoms;
- Collect and record symptom check data in the OHA ARIAS system;
- Utilize the OHA ARIAS system as instructed for official purposes only;
- Immediately report any breaches or potential breaches of private or confidential information to the LPHA or OHA;
- If contacts become symptomatic, refer to LPHA or OHA Case Investigator team for additional information;
- If needed, refer to 211, Aging and Disability Resource Center (ADRC) and/or case management staff for community resources to support their quarantine;
- Contact Tracers will need to follow the script to inform contacts about the importance of quarantine and what to do if symptoms develop;
- Contact Tracers are required to use the telephone, computer and electronic equipment provided by the community-based organization (CBOs may use OHA funds to purchase needed supplies);
- Maintain daily contact with LPHA or OHA and their community-based organization when assigned contacts for tracing.

#### *Qualifications*

- Ability to handle confidential information with discretion and professionalism and in compliance with federal HIPAA requirements

### **3. Social Services and Wraparound Supports**

Background: Individuals impacted by COVID-19 may need supports for daily living in order to comply with quarantine (staying away from others when an individual has been within close contact of someone with confirmed COVID-19) or isolation (staying away from all other people after testing positive for COVID-19 until illness has met the definition of resolved). Quarantine and isolation have a serious impact on low income and communities most impacted by racism and oppression that may not have worker protections that guarantee payment for the duration of the time the individual may not be able to work. Social services and wraparound supports refer to the individual, culturally and linguistically responsive services that Traditional and Community Health Workers provide to ensure that individuals have access to health care, behavioral health, housing, food and other needs.

Social services and wraparound supports provided to individuals during their isolation or quarantine period may include the following activities:

- Health care: assist individuals and families with accessing health providers, including referrals and setting appointments.
- Grocery shopping: gather information from clients on their grocery needs, shopping and delivering food OR connecting with other organizations who can deploy volunteers to shop and deliver food. CBO staff would be the point of contact for any hubs or other organizations, so families would not be negotiating between multiple organizations. Food resources must be provided within the same day that they are requested. Work with local providers to connect eligible clients to food security resources such as SNAP.
- Housing support: identify housing needs and work with individuals and families and community organizations to fill them. Assist families with securing other community resources for support beyond isolation/quarantine.
- Utilities and telecommunication support: identify needs related to utilities, water, garbage, phone, internet, and cable and work with individuals and families and community organizations to access existing benefit programs.
- Connecting to community resources: some individuals and families may need more complex and ongoing case management services and may need to be connected to behavioral health resources, anti-discrimination resources, domestic violence resources, Department of Human Services or others.

CBOs can submit direct costs related to isolation and quarantine (e.g., food, cell phones, health care supplies (not covered by insurance), housing, child care) to OHA directly for reimbursement. Reimbursable costs do not include: car payments, credit card payment, or student and personal loans. Reasonable efforts should be made to utilize other benefits such as SNAP and WIC before seeking reimbursement for costs related to isolation and quarantine.



## Estimated Funding by Category and Individuals Served

<b>Community Engagement &amp; Outreach</b>	
<b>Range of people served per month</b>	<b>3 Month Cost</b>
100-200	\$11,783
201-500	\$23,565
501+	\$47,131
<b>Social services/wraparound support</b>	
<b>Range of people served per month</b>	<b>3 Month Cost</b>
0-50	\$7,855
51-100	\$15,710
100+	\$31,421
<b>Contact Tracing</b>	
<b>Range of people served per month</b>	<b>3 Month Cost</b>
0-50	\$6,546
51-100	\$13,092
100+	\$26,184
Subtotal	\$104,735
Start up Costs	\$5,265
<b>Total</b>	<b>\$110,000</b>