



Notice of Funding Availability (NOFA)  
**Housing Assistance to Reduce Infant Mortality**

Issuance Date: July 31, 2017

Proposals must be submitted no later than 5:00pm (EDT)  
November 1, 2017

Submit to:  
Housing Assistance to Reduce Infant Mortality

[HousingAssistanceIM@ohiohome.org](mailto:HousingAssistanceIM@ohiohome.org)

57 East Main Street | Columbus, OH 43215

## Section 1: Guidelines for Notice of Funding Availability

### 1.1 Overview

The Ohio Housing Finance Agency (OHFA) is seeking proposals to establish a time-limited housing assistance pilot program to expand housing opportunities and demonstrate the effectiveness of a time-limited rental subsidy targeted to households that include pregnant women, new mothers or infants within the first year of life. The pilot program must include rental assistance, access to maternal and child health care services, social service supports and activities to foster long-term housing stability. The goal of the pilot program is to assess the potential impact of a rental subsidy to reduce the risk factors for infant mortality and increase housing stability of low-income households with children.

Priority will be given to proposals that include a partnership with Ohio Equity Institute partner communities located in Butler, Cuyahoga, Franklin, Hamilton, Lucas, Mahoning, Montgomery, Stark and Summit Counties. Preference will be given to proposals with a fully integrated program that includes partnerships with the local continuum of care and public housing authority. Proposals must include a housing partner with documented experience administering a rental assistance program.

Preference will be given to proposals that include a robust outreach and marketing plan targeted toward households earning no more than 30 percent of area median income (AMI) as defined by the U.S. Department of Housing and Urban Development. A detailed description of how individuals and families will be identified and selected for time-limited rental assistance must be included in the proposal.

Evaluation is a required component of this project. Applicants must include an experienced research partner with a demonstrated record evaluating low-income housing, infant mortality, health care systems, maternal and child health care or related topic area(s). The principal investigator must have significant input on the structure of the pilot housing assistance proposal. Successful proposals will include a detailed evaluation plan, outcomes, and a final report.

Letters of commitment from all partners are required at the time of application. Any proposal that fails to have all team members committed will not be considered.

### 1.2 Geography Served

Proposals will be considered that address local, regional, or statewide housing assistance efforts intended to contribute to the reduction of infant mortality. Preference will be given to proposals serving one or more of the following

counties: Butler, Cuyahoga, Franklin, Hamilton, Lucas, Mahoning, Montgomery, Stark and Summit. All activities must take place within Ohio; proposals will not be considered if any rental assistance or health and social service activities are conducted outside of Ohio.

### **1.3 Fund Availability**

Up to \$1 million will be allocated to support a time-limited housing assistance project. Applicants are required to provide matching funds totaling at least 40 percent of the total project cost. In-kind match will be considered on a case-by-case basis, however, a cash match will receive priority consideration. No extensions of the pilot program will be considered as all activities are required to be completed on or before December 31, 2020.

### **1.4 Eligible Applicants**

- Public or non-profit organizations
- Public housing authorities

### **1.5 Ineligible Activities**

- Ongoing operating support
- Lobbying of any kind
- Experimental programmatic activity
- Research by itself
- Technical assistance or training activities

### **1.6 Proposal Evaluation**

Proposals will be evaluated based upon the following criteria:

- Implementation plan
- Evaluation plan
- Capacity and partnerships
- Budget
- Staffing and qualifications
- Timeline

### **1.7 Submission of Written Questions**

It is OHFA's policy to accept questions and inquiries from all potential applicants. All questions and inquiries shall be in writing; no verbal requests will be honored. Potential applicants may submit questions or inquiries by email to [HousingAssistanceM@ohiohome.org](mailto:HousingAssistanceM@ohiohome.org). Please include "Housing Assistance to Reduce Infant Mortality NOFA" in the subject line.

All written questions or inquiries are due by 5:00 pm (EDT) on Friday, September 1, 2017. OHFA expects to respond to all questions and inquiries by 5:00 pm (EDT) on Friday, September 15, 2017. OHFA reserves the right to decline to respond to any question or inquiry that will cause an undue burden or expense for OHFA or which

OHFA deems unnecessary for purposes of responding to this NOFA. OHFA will post all questions or inquiries with answers on its website at <http://www.ohiohome.org>. Any applicant that wishes to receive the questions and answers in any other manner must notify OHFA by email to [HousingAssistanceIM@ohiohome.org](mailto:HousingAssistanceIM@ohiohome.org) of their preferred method of delivery (i.e., email, fax or postal mail).

### **1.8 Verbal Communication regarding NOFA prohibited**

Verbal communication from any potential applicant regarding this NOFA to OHFA staff and/or OHFA Board members during the NOFA process is prohibited.

### **1.9 Submission of Proposals**

Please respond to all items listed in Section 2 of this NOFA. Applications should be typed on standard 8.5X11 inch paper, single-spaced, with one inch margins and a 12-point font. Applicants must follow the application format provided in this NOFA. The project narrative (Part 3, Sections 1-8) cannot exceed 25 pages. OHFA reserves the right to request additional information. Proposals must be submitted electronically as one .pdf attachment. Multiple attachments will not be accepted.

Proposals received after the specified date and time will not be eligible for consideration. Any applicant who wishes to confirm receipt of its proposal may contact OHFA by email to [HousingAssistanceIM@ohiohome.org](mailto:HousingAssistanceIM@ohiohome.org) (Subject: Housing Assistance to Reduce Infant Mortality NOFA). OHFA will respond by email with confirmation of receipt of the proposal.

### **1.10 Deadlines**

All proposals must be received by 5pm (EDT) November 1, 2017.

### **1.11 Right to Request Additional Information**

OHFA reserves the right to request any additional information to assist in the review process, including requiring oral presentations of proposals to one or more OHFA staff members.

### **1.12 Right to Reject Proposals and Cancel NOFA**

OHFA reserves the right to reject any and all proposals at any time. OHFA reserves the right to cancel, withdraw, modify or reissue this NOFA at any time for any reason.

### **1.13 Errors and Omissions**

In connection with this NOFA, OHFA reserves the right to waive any technicalities, make corrections to any errors or omission in this NOFA, and make any award(s) that is determined to be in the Agency's best interest.

### **1.14 Awards**

The NOFA will be awarded to the firm(s) that submits a complete application to OHFA demonstrating the most effective combination of qualifications, demonstration of the ability to administer rental assistance, services, and conduct research, assurances and availability of key personnel, and costs. Following formal approval by the OHFA Board on December 20, 2017, OHFA will post on its website the firm(s) selected.

### **1.15 Grant Agreement**

The firm(s) selected to provide the services described in this NOFA would be expected to complete and submit an agreed upon Grant Agreement covering the Scope and Terms of this NOFA. The Grant Agreement will begin on January 1, 2018.

## Section 2: Application

### Part 1: Organization and Contact Information

Primary Applicant:		
Executive Director/CEO:		
Email:		
Contact Person/Title (if different from Executive Director):		
Mailing Address:		
Telephone:	Fax:	Website:
Co-Applicant:		
Email:		
Mailing Address:		
Telephone:	Fax:	Website:
Applicant Federal Tax ID Number:		
Project Name:		
Amount Requested: \$		
Total Project Cost: \$		
Beginning and Ending Dates of the Project:		
Geographic Area to be Served:		
Is your organization an IRS 501(c)(3) nonprofit? <input type="checkbox"/> Yes (Please attach IRS designation letter) <input type="checkbox"/> No		



## AGREEMENT

*I certify, to the best of my knowledge, that all information included in this proposal is correct. The tax-exempt status of this organization is still in effect. If a grant is awarded to this organization, the proceeds of that grant will not be distributed or used to benefit any organization or individual supporting or engaged in unlawful activities.*

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Signature of Executive Director or equivalent

Date

**Part 2: Project Summary**

**PROJECT SUMMARY (NO MORE THAN 500 WORDS)**



## Part 3: Project Narrative

### **Section 1 ORGANIZATIONAL BACKGROUND AND INFORMATION**

- Provide a brief summary of your organization's history, current programs, and activities.
- What makes your organization well situated to do this work? What previous experience, if any, do the applicant and partner organizations have providing this type of program? If none, describe prior experience in the areas of prenatal and neonatal health care. Describe your organization's experience, within the last five years, administering functions and processes related to providing a rent subsidy program.

### **Section 2 PROJECT OVERVIEW**

- Provide a general description of the time-limited housing assistance program your organization would provide.
- What are the outcomes you hope to achieve with the proposed program? List the goals and objectives in detail.

### **Section 3 IMPLEMENTATION PLAN**

- Provide a brief summary describing the proposed pilot time-limited rental assistance program.
- Rental assistance administration
  - Describe, in detail, how the rental assistance program will be administered, including, but not limited to, general policies and procedures, processing of monthly payments, processing and managing of contracts, response to health and safety issues and program oversight and monitoring.
  - Describe the service area covered by the rental assistance program.
  - Will the rental assistance be project-based or tenant-based?
  - Describe how rents will be calculated and the amount of subsidy per person.
  - How many units or persons will be covered by the proposed rental subsidy program?
  - How will units or projects be selected? Describe the minimum project standards.
  - Will the program provide access to smoke-free housing units?
  - Describe, in detail, the transition plan for tenants once the time-limited rental subsidy ends.
- Health care and social service provision
  - Describe, in detail, how your organization will provide access to, or otherwise ensure, culturally competent maternal and child health care services, other supportive services and

housing stability services to clients. Applicants should include specific information about services that will be provided and the availability and frequency of the voluntary services. Applicants should identify the process for offering services to clients. Describe the partnerships with existing programs or initiatives such as care coordination, case management, home visiting, support for healthy birth spacing, parenting and education support programs, etc. Applicants should also include a detailed description of the tenancy support services that will be provided.

- Outreach and marketing
  - How would your organization conduct outreach to market the rental assistance program to your intended audience?
  - Describe how you will identify potentially eligible households at or below 30 percent of area median income and communities most at risk for infant mortality (e.g. African-Americans, hot spot zip codes, victims and survivors of intimate partner violence, homelessness, etc.).
- What plans, if any, does your organization have for maintaining or continuing the program beyond the grant term?

#### **Section 4 EVALUATION PLAN – RESEARCH METHODS**

- Summary
  - Provide a brief summary of the methodology used to evaluate the proposed program. Include a brief discussion of the theoretical and/or conceptual framework, data sources, sampling methods and empirical analysis methodologies that will be used to answer the research questions. Be sure to include a discussion, including citations from relevant peer-reviewed academic literature, demonstrating the efficacy of the protocol that will be used for this grant.
- Detailed research narrative
  - The detailed research narrative should include a discussion of proposed research questions, research design, methodology, and limitations. The methodology section must describe proposed data collection and sample selection, variable selection (provide a list of variables to be used) and analytic techniques. This should include a discussion about the sufficiency of the proposed sample size (including control and comparison groups) and any potential biases associated with the sample selection strategy. Applicants should consider any anticipated delays that may be associated with data collection and, if appropriate, discuss how these delays will be mitigated. The statistical model(s) to be used should be

discussed in sufficient detail. Applicants should describe the full range of outcomes that will be tracked as part of this project. Preference will be given to proposals that focus on core metrics and the contributing factors associated with infant mortality. The following core metrics should be included: preterm birth, low birth weight, neonatal infant mortality and post-neonatal infant mortality. Additional information about contributing factors can be found in the State Health Improvement Plan and the Ohio Commission on Infant Mortality Committee Report, Recommendations, and Data Inventory. Lastly, applicants must discuss limitations of the proposed research design.

- The narrative should include four sections as below:
  - Research questions and specific aims
  - Power analysis
  - Research design and methods
  - Human subjects

**Section 5 BUDGET**

- Provide a detailed budget (using the provided template) and a narrative for each line item. Note that administrative expenses may not exceed 10% of total project cost.
- This budget should include the means for calculating rental assistance (using the provided template).

**Section 6 TIMELINE**

- Provide a detailed timeline. Clearly identify the relevant phases of program implementation, administration, and research.

**Section 7 STAFFING**

- Briefly identify the people who will be responsible for the proposed program and their qualifications. Please attach resumes and/or CVs for the people on the core project team, including principal investigators of the evaluation.

**Section 8 PARTNERSHIPS**

- Applicants must provide a description about the role of the following types of organizations in the proposed program:
  - Housing provider and/or rental assistance administrator
  - Ohio Equity Institute partner community organization(s)
  - Maternal and child health care partner(s)
  - Social service partner(s)
  - Evaluation and research partner(s)

**Section 9 ATTACHMENTS** (does not count against the 25-page limit)

- Organizational structure
- 501(c)(3) designation letter
- Audited financial information for the lead organization and contract administrator for the rental assistance
- Resumes or CVs (limited to two pages per person)
- Letters of commitment from all partners included in this application
- Supplemental materials (e.g. manuals, fliers, etc.)

## Budget Template

<i>Project Expenses</i>	OHFA Request, year 1	OHFA Request, year 2	Other non-OHFA Funds	Total
Salaries and wages:				
Name each principal who would receive funding and nature of support (10% of time; summer salary, etc.)				-
				-
Administrative salaries and wages:				
List job titles and nature of support				-
				-
Student Support:				
Identify whether graduate or undergraduate and nature of support				-
				-
Consultant/Contract services:				
Identify, and provide separate breakdown of budget detail				-
				-
Employee fringe benefits:				-
Rental Assistance				
Other Direct Costs:				
Travel (provide assumptions separately)				-
Supplies and materials				-

Printing, publications, copying				-
Postage, shipping				-
Computer support, telecommunications				-
Equipment (specify)				-
Other (specify):				-
				-
<b>Total Direct Expenses</b>	\$ -		\$ -	\$ -
Overhead/indirect ( %)				-
				-
<b>Total Project Cost</b>	\$ -		\$ -	\$ -

**Rental Assistance Budget**

		Year 1	Year 2	Total
<b>Number of units/persons</b>				
	This Period			
	Cumulative			
<b>Rent</b>				
	Contract Rent			
	xx% AMI			
	Tenant Portion			
	Rental Assistance			
<b>Estimated Rental Assistance Amount</b>				