

# 2023 Hydration Station Competitive Grant Program Information and Materials

## GRANT REQUEST FOR PROPOSAL (RFP)

Minnesota Department of Health  
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[www.health.state.mn.us](http://www.health.state.mn.us)

September 2023

*To obtain this information in a different format, call: 651-201-4700.*

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# Part 1: Overview

## 1.1 General Information

- 2023 Hydration Station Competitive Grant Program
- [Drinking Water Protection Grant Information](https://www.health.state.mn.us/communities/environment/water/com/grants.html)  
(<https://www.health.state.mn.us/communities/environment/water/com/grants.html>)
- Application Deadline: **2:00pm Central Standard Time, Friday, October 27, 2023**

## 1.2 Program Description

The Minnesota Department of Health (MDH) is accepting applications for funding to provide water-bottle filling stations (hydration stations) to qualifying applicants. Local public health organizations, schools and community entities are encouraged to apply for this limited-funding opportunity.

Approved hydration stations:

- Provide drinking water containing an optimal level of fluoride to help protect teeth from tooth decay
- Do not remove fluoride from water
- Removes lead, when present, from drinking water
- Provide an additional safeguard to reduce potential lead exposure from drinking water
- Provide a healthy alternative to sugary drinks, especially in communities with limited access to healthy, affordable beverage choices
  - This document provides the forms and instruction you will need to complete the Hydration Station Grant application. These documents are available on [Drinking Water Protection Grant Information](https://www.health.state.mn.us/communities/environment/water/com/grants.html)  
(<https://www.health.state.mn.us/communities/environment/water/com/grants.html>)

The MDH will be available to provide consultation and guidance during the application process. For assistance, please contact Anita Smith, Grants Coordinator, at 651-201-4665 or [anita.smith@state.mn.us](mailto:anita.smith@state.mn.us). Please note that MDH staff will not be able to help with the actual writing of the application or critique drafts.

## Background

The MDH is committed to improving the health of Minnesotans by getting everyone to drink more water. Filtered water units, in the form of hydration stations, maintain optimal fluoride levels in drinking water and removes lead and other contaminants associated with plumbing systems. Water with the right amount of fluoride helps prevent tooth decay and cavities. They provide a healthy alternative to sugary drinks, such as juice and soda, especially in communities with limited access to healthy, affordable beverage choices. See Appendix E – Acceptable Hydration Stations)

## 1.3 Funding and Project Dates

Funding will be allocated through a competitive process.

The MDH Oral Health Unit and Drinking Water Protection Section are making available a total of \$30,000 in assistance. Oral Health funds are allocated through the U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, **Minnesota Actions to Improve Oral Health Outcomes** (CDC-RFA-DP18-1810) cooperative agreement.

Grant funds must be used for new hydration stations purchased within the grant project period.

Each applicant may request up to **\$2,400** for a hydration station.

Estimated Number of Awards: **15**

### Match Requirement

There is **no** matching funds requirement.

**Project Dates:** December 2023 through June 30, 2024.

## 1.4 Eligible Applicants

Any Minnesota organization such as schools, Head Start centers, community centers, non-profits, clinics etc. receiving water from a municipal community public water system (PWS) is eligible to apply.

The grantee must not begin work until the grant agreement is fully executed and the State's Authorized Representative has notified the grantee that work may commence.

## Part 2: Program Details

### 2.1 Health Equity Priorities

It is the policy of the State of Minnesota to ensure fairness, precision, equity and consistency in competitive grant awards. This includes implementing diversity and inclusion in grant-making.

The [Policy on Rating Criteria for Competitive Grant Review \(PDF\)](#)

([https://mn.gov/admin/assets/08-](https://mn.gov/admin/assets/08-02%20Grants%20Policy%20Revision%20September%202017%20final_tcm36-312046.pdf)

[02%20Grants%20Policy%20Revision%20September%202017%20final\\_tcm36-312046.pdf](https://mn.gov/admin/assets/08-02%20Grants%20Policy%20Revision%20September%202017%20final_tcm36-312046.pdf))

establishes the expectation that grant programs intentionally identify how the grant serves diverse populations, especially populations experiencing inequities and/or disparities.

Community water fluoridation is a low-cost, effective, and equitable approach to protecting and improving oral health outcomes for all Minnesotans. This competitive grant award seeks to make consumption of optimally fluoridated water easier and more accessible.

Hydration stations purchased through these funds must be in compliance with the Americans with Disabilities Act Standards for Accessible Design.

### 2.2 Hydration Station Grant Goal

The goal of the Hydration Station Grant is to promote health by making it easier for everyone to choose clean, safe tap water. The MDH seeks to assist organizations that do not have resources to update their infrastructure to maintain access to optimally fluoridated drinking water, while removing lead when present, within drinking water.

The MDH Drinking Water Protection Section will administer federal grant funds to reimburse eligible organizations for costs to purchase new drinking fountains with hydration stations.

## 2.3 Eligible Project Purpose of Hydration Station Grant Funds

Grant awards will fund the purchase of new approved drinking fountains with hydration stations, mounting hardware, and replacement filters. **Note: See Appendix F for approved Hydration Stations.**

## 2.4 Ineligible Expenses

The grant awards may not be used for installation costs.

## 2.5 Scope of Work

Hydration Station Grant funding is to be used solely for the purchase of hydration station equipment, mounting hardware if necessary, and replacement filters. Funds may not be used for installation or other indirect costs.

A grant application must identify and include See **Appendix A**

- A description of the equipment that is to be purchased; and
- Vendor name and quote; and
- The entity responsible for installing the equipment; and
- The cost of purchasing the equipment; and
- The outcome or deliverable that will be achieved by purchasing the equipment; and
- An indication of readiness to proceed with using the grant.
- A description of efforts to educate the target audience on drinking tap water. Please list key messages that you would promote; and
- The organization must describe efforts to substitute water as a healthy alternative to sugar-sweetened beverage; and
- The organization must describe reasons why fluoride is important to the oral health of the served population; and
- A statement from the organization will be required to verify the condition of any existing hydration station(s) or drinking fountains, as well as the presence of lead in drinking water or plumbing materials.

Please note that no hydration station is to be purchased or installation is to take place until a grant agreement has been signed by the MDH. Please note that only approved hydration stations may be purchase using the grant.

## 2.6 Questions and Answers

### Open Call for Questions

- Open Call for Questions will be held via Microsoft Teams on Monday, October 2, 2023, at 9:00am CST. Send your request for an invitation to participate to, [anita.smith@state.mn.us](mailto:anita.smith@state.mn.us).

### Individual Questions and Answers

All questions regarding this RFP must be submitted by 2:00 p.m. Central Time, October 20, 2023, and submitted by email to:

- Anita Smith, Grant Coordinator at, [anita.smith@state.mn.us](mailto:anita.smith@state.mn.us)

All questions and answers will be posted on October 21, 2022 on the [Drinking Water Protection Grant Information](https://www.health.state.mn.us/communities/environment/water/com/grants.html) (<https://www.health.state.mn.us/communities/environment/water/com/grants.html>) webpage.

To ensure the proper and fair evaluation of all applications, other communications regarding this RFP including verbal, telephone, written or internet initiated by or on behalf of any applicant to any employee of the Department, other than questions submitted to as outlined above, are prohibited. **Any violation of this prohibition may result in the disqualification of the applicant.**

## Part 3: Grant Management Responsibilities

### 3.1 Grant Agreement

Sample MDH Grant Agreement can be viewed at [Drinking Water Protection Grant Information](https://www.health.state.mn.us/communities/environment/water/com/grants.html) (<https://www.health.state.mn.us/communities/environment/water/com/grants.html>) webpage.

Each grantee must formally enter into a grant agreement. The grant agreement will address the conditions of the award, including implementation for the project. Once the grant agreement is signed, the grantee is expected to read and comply with all conditions of the grant agreement.

No work on grant activities can begin until a fully executed grant agreement is in place.

The funded applicant will be legally responsible for assuring implementation of the work plan and compliance with all applicable state requirements including worker's compensation insurance, nondiscrimination, data privacy, budget compliance, and reporting.

### 3.2 Accountability and Reporting Requirements

An organization that receives a Hydration Station Grant must report the results of each work item that is funded by providing all of the following information:

- The results of performing the work that is described in the grant application

- The total amount of grant funds that were expended to perform each work item
- A summary of the costs that are attributed to performing each work item
- A photo (and photo release form) of the installed and functioning hydration station
- A copy of any article, announcement, or social media post acknowledging the MDH funding and stating its impact on people who use the hydration station
- Acknowledgement on all written materials: *Funding for this project has been made possible through the Minnesota Department of Health (MDH) and Centers for Disease Control and Prevention (CDC) cooperative agreement “Minnesota Actions to Improve Oral Health Outcomes.”*

Organizations receiving funds will also be asked to:

- Participate in evaluation activities such as interviews, surveys, sharing success stories etc.
- Support statewide drinking water campaigns through the dissemination of educational materials to relevant organization members
- Place communications materials that illustrate the importance and safety of community water fluoridation next to hydration station
- Attend a technical assistance seminar on the effects of fluoride in drinking water on dental health

### 3.3 Grant Payments

Per [State Policy on Grant Payments](#), reimbursement is the method for making grant payments. All grantee requests for reimbursement must correspond to the approved grant budget. The State shall review each request for reimbursement against the approved grant budget before approving payment.

The invoicing and payment schedule will be Invoices are to be submitted upon the installation of the Hydration Station and before June 30, 2024, using the MDH 2023 Hydration Station Competitive Grant Invoice that will be included in the grant agreement.

### 3.4 Conflicts of Interest

MDH will take steps to prevent individual and organizational conflicts of interest, both in reference to applicants and reviewers per [Minn. Stat. § 16B.98](#) and the Office of Grants Management’s Policy 08-01, “Conflict of Interest Policy for State Grant-Making.”

**Applicants must complete the Applicant Conflict of Disclosure form (Appendix D) and submit it as part of the completed application.** Failure to complete and submit this form will result in disqualification from the review process.

Organizational conflicts of interest occur when:

- a grantee or applicant is unable or potentially unable to render impartial assistance or advice
- a grantees or applicant’s objectivity in performing the grant work is or might be otherwise impaired

- a grantee or applicant has an unfair competitive advantage

Individual conflicts of interest occur when:

- an applicant, or any of its employees, uses their position to obtain special advantage, benefit, or access to MDH’s time, services, facilities, equipment, supplies, prestige, or influence
- An applicant, or any of its employees, receives or accepts money, or anything else of value, from another state grantee or grant applicant with respect to the specific project covered by this RFP/project.
- An applicant, or any of its employees, has equity or a financial interest in, or partial or whole ownership of, a competing grant applicant organization.
- An applicant, or any of its employees, is an employee of MDH or is a relative of an employee of MDH.

In cases where a conflict of interest is perceived, disclosed, or discovered, the applicants or grantees will be notified and actions may be pursued, including but not limited to disqualification from eligibility for the grant award or termination of the grant agreement.

### 3.5 Public Data and Trade Secret Materials

#### Public Data and Trade Secret Materials

All applications submitted in response to this RFP will become property of the State. In accordance with [Minn. Stat. § 13.599](#), all applications and their contents are private or nonpublic until the applications are opened.

Once the applications are opened, the name and address of each applicant and the amount requested is public. All other data in an application is private or nonpublic data until completion of the evaluation process, which is defined by statute as when MDH has completed negotiating the grant agreement with the selected applicant.

After MDH has completed the evaluation process, all remaining data in the applications is public with the exception of trade secret data as defined and classified in [Minn. Stat. § 13.37](#), subd. 1(b). A statement by an applicant that the application is copyrighted or otherwise protected does not prevent public access to the application or its contents. ([Minn. Stat. § 13.599](#), subd. 3(a)).

If an applicant submits any information in an application that it believes to be trade secret information, as defined by [Minn. Stat. § 13.37](#), the applicant must:

- Clearly mark all trade secret materials in its application at the time it is submitted,
- Include a statement attached to its application justifying the trade secret designation for each item, and
- Defend any action seeking release of the materials it believes to be trade secret, and indemnify and hold harmless MDH and the State of Minnesota, its agents and employees, from any judgments or damages awarded against the State in favor of the party requesting the materials, and any and all costs connected with that defense.
- This indemnification survives MDH’s award of a grant agreement. In submitting an application in response to this RFP, the applicant agrees that this indemnification survives



as long as the trade secret materials are in possession of MDH. The State will not consider the prices submitted by the responder to be proprietary or trade secret materials.

MDH reserves the right to reject a claim that any particular information in an application is trade secret information if it determines the applicant has not met the burden of establishing that the information constitutes a trade secret. MDH will not consider the budgets submitted by applicants to be proprietary or trade secret materials. Use of generic trade secret language encompassing substantial portions of the application or simple assertions of trade secret without substantial explanation of the basis for that designation will be insufficient to warrant a trade secret designation.

If a grant is awarded to an applicant, MDH may use or disclose the trade secret data to the extent provided by law. Any decision by the State to disclose information determined to be trade secret information will be made consistent with the Minnesota Government Data Practices Act ([Ch. 13 MN Statutes](#)) and other relevant laws and regulations.

If certain information is found to constitute trade secret information, the remainder of the application will become public; in the event a data request is received for application information, only the trade secret data will be removed and remain nonpublic.

## Audits

Per [Minn. Stat. §16B.98](#) Subdivision 8, the grantee's books, records, documents, and accounting procedures and practices of the grantee or other party that are relevant to the grant or transaction are subject to examination by the granting agency and either the legislative auditor or the state auditor, as appropriate. This requirement will last for a minimum of six years from the grant agreement end date, receipt, and approval of all final reports, or the required period of time to satisfy all state and program retention requirements, whichever is later.

## 3.6 Affirmative Action and Non-Discrimination Requirements for all Grantees

The grantee agrees not to discriminate against any employee or applicant for employment because of race, color, creed, religion, national origin, sex, marital status, status in regard to public assistance, membership or activity in a local commission, disability, sexual orientation, or age in regard to any position for which the employee or applicant for employment is qualified. [Minn. Stat. §363A.02](#). The grantee agrees to take affirmative steps to employ, advance in employment, upgrade, train, and recruit minority persons, women, and persons with disabilities.

The grantee must not discriminate against any employee or applicant for employment because of physical or mental disability in regard to any position for which the employee or applicant for employment is qualified. The grantee agrees to take affirmative action to employ, advance in employment, and otherwise treat qualified disabled persons without discrimination based upon their physical or mental disability in all employment practices such as the following: employment, upgrading, demotion or transfer, recruitment, advertising, layoff or termination, rates of pay or other forms of compensation, and selection for training, including apprenticeship. Minnesota Rules, part [5000.3500](#)

The grantee agrees to comply with the rules and relevant orders of the Minnesota Department of Human Rights issued pursuant to the Minnesota Human Rights Act.

## Part 4: Review and Selection Process

### 4.1 Selection Criteria and Weight

The Hydration Station Grant application is a competitive grant application. Only complete applications received or mailed on or before the deadline will be reviewed competitively. The MDH determines the priority of each hydration station measure that is included in a grant application using an internal grant application review team. Reviewers will determine which applications best meet the selection criteria. Reviewers will be required to identify any conflicts of interest and will not review a proposal if they have a direct relationship with the applicant. Staff from the Environmental Health Division of the MDH will develop final funding recommendations based on the scores and comments from reviewers. These funding recommendations will be forwarded to the Commissioner of Health for final approval. The MDH uses the following methodology to score a Community Fluoridation Grant application:

Proposals will be reviewed and scored according to a 100-point system listed below. A Community Fluoridation Grant application must have a minimum score of 60 points in order to be awarded. Grant requests that achieve the minimum score to qualify will be awarded funds based upon the 1) score, 2) date placed upon the list, and 3) availability of grant funds.

#### Applicant Information (10 Points)

- Is the application attached, completed, and readable? (**Appendix A**) (5 Points)
- Is the applicant receiving drinking water from a Minnesota municipal community PWS? (5 Points)

#### Project Need (80 Points)

- Is the installation site located within either a geographic or low-income Dental Health Professional Shortage Area (HPSA)? (10 Points) MDH will determine points for installation site's location in a Dental Health Professional Shortage Area. (**Appendix E**)
- Is the applicant a non-profit organization? (10 Points)
- Does the installation site serve children? (5 Points)
  - Is over 50% of children serviced under 6 years of age (5 Points)
- What is the estimated daily number of persons served by the installation site? (1 Point per 10 persons; maximum 10 Points)
- Is the installation site a school or daycare facility attended by children? (10 Points)
- Provide documentations of populations reliance for significant portion of drinking-water needs. (5 points)
- Was your facility built before 1986 (more likely to contain lead plumbing)
  - Provide documentation plumbing was installed prior to 1986 (10 Points)

- Does the application include a lead analysis result from the installation site? (Points for highest result at installation site: 0-5 ppb: 1 Points; 6-15 ppb: 5 Points; 16-20 ppb: 10 Points; >20 ppb; maximum 15 Points)

### **Work Scope (5 Points)**

- Does the request for award does not exceed \$2,400? (5 Points)

### **Budget (5 Points)**

- Does the application include an identified vendor and an attached vendor quote of hydration station equipment costs? (Appendix C) (5 Points)

## **4.3 Notification Process**

The MDH will provide written notification to grant applicants of the scoring results by November 13, 2023.

# **Part 5: Application and Submission Instructions**

## **5.1 Application Form**

You may obtain a copy of the Hydration Station Grant application form by:

- Downloading the form that is included with this announcement or found at [Drinking Water Protection Grant Information](https://www.health.state.mn.us/communities/environment/water/com/grants.html) (<https://www.health.state.mn.us/communities/environment/water/com/grants.html>) webpage.
- Downloading the form from the Health Promotion and Chronic Disease Division, Center for Health Promotion Section, [Oral Health](https://www.health.state.mn.us/people/oralhealth/index.html) (<https://www.health.state.mn.us/people/oralhealth/index.html>) webpage.

## **5.2 Required Application Components**

Each application must contain the following items in the order listed:

- Signed Hydration Station Grant Application – Appendix A
- Signed Hydration Station Costs Estimates – Appendix C
- Vendor Quote
- Any narrative or supplemental portions of the application must be written in 12-point font, single spaced with one-inch margins. Any supplemental pages must be numbered consecutively.
- Signed Applicant Conflict of Interest Disclosure form – Appendix D

### 5.3 Grant Application Submittal

An eligible organization may submit only one application. Should an organization submit multiple applications, only the last application received before the application deadline will be considered eligible for evaluation.

Applications must be emailed to:  
Hydration Station Grant Coordinator  
[health.drinkingwater@state.mn.us](mailto:health.drinkingwater@state.mn.us)

Applications must be received by

**2:00 PM CST, October 27, 2023.** Applications must be emailed to:  
[health.drinkingwater@state.mn.us](mailto:health.drinkingwater@state.mn.us)

The MDH is not responsible for grant applications that are lost in electronic transmission. Late applications will not be considered for review. Incomplete applications will not be considered for review.

Upon receipt, a grant application will be assigned a time and date which will be used to prioritize applications having equivalent scores. Proposals will then be reviewed and scored. This is a competitive grant application. Funds will be awarded to applicants whose proposals receive the highest scores.

## **RFP Part 6: Attachments**

- Appendix A – 2023 Hydration Station Competitive Grant Application
- Appendix B – Definitions
- Appendix C – Estimates for Hydration Station Costs
- Appendix D - Applicant Conflict of Interest Disclosure
- Appendix E – MN Dental Health Professional Shortage Areas
- Appendix F - Hydration Station (Acceptable Examples)



# Appendix A - 2023 Hydration Station Competitive Grant Application

**Notice:** This application must be completed in order to score your grant request.

Applicant/Organization (name of primary applicant): \_\_\_\_\_

Grant Contact Name: \_\_\_\_\_

Grant Contact Phone No. and Extension: \_\_\_\_\_

Grant Contact E-mail address: \_\_\_\_\_

Mailing Address: \_\_\_\_\_

County: \_\_\_\_\_

Federal Tax ID #: \_\_\_\_\_

Will the Hydration Station unit be installed at the above location? (Yes/No) \_\_\_\_\_

If no, Name of Location: \_\_\_\_\_

Installation Mailing Address: \_\_\_\_\_

**Person Authorized to Sign Grant Agreement on Behalf of the Organization:**

Name: \_\_\_\_\_ Title: \_\_\_\_\_

**TOTAL COST OF PROJECT** (Amount Requested + Applicant Cost): \$ \_\_\_\_\_

Total Grant Amount Being Requested (**\$2,400 maximum**): \$ \_\_\_\_\_

**Work Item (s) to be performed under this grant**

For each work item to be funded under the grant, please provide the following information (use an additional page if necessary).

1. **Work Item 1** – describe the work that will be performed: \_\_\_\_\_

1a. Applicant is ready and able to complete project by June 28, 2024: Yes \_\_\_ No \_\_\_

1b. Applicant is a non-profit organization: Yes \_\_\_ No \_\_\_

1c. Hydration station type: New \_\_\_ Replacement \_\_\_

1d. Installation site includes: Daycare \_\_\_ School attended by children \_\_\_

1e. Is over 50% of children serviced under 6 years of age: Yes \_\_\_\_\_ No \_\_\_\_\_

1f. Installation site estimated daily persons served: \_\_\_\_\_

1g. Installation site municipal community public water system source: \_\_\_\_\_

1h. Was your facility built before 1986 (lead plumbing): Yes \_\_\_\_\_ No \_\_\_\_\_

Provide documentation plumbing was installed prior to 1986.

1i. Installation site most recent drinking-water lead test result:

Date: \_\_\_\_\_ Tap Location: \_\_\_\_\_ Lead (ppm or mg/L): \_\_\_\_\_

**\*NOTE\* 1 mg/L (ppm) = 1,000 ug/L (ppb)**

1j. Anticipated **outcomes** of performing this work item: \_\_\_\_\_

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### **Certification**

I certify that the information herein is true and accurate to the best of my knowledge and I submit this application on behalf of the applicant organization.

Signature: \_\_\_\_\_ Title: \_\_\_\_\_ Date: \_\_\_\_\_

**NOTE:** If you are awarded a grant, NO work should begin until all required signatures have been obtained on the grant agreement and grantee receives a signed copy of the grant agreement.

Minnesota Department of Health  
Environmental Health Division  
Drinking Water Protection Program  
651-201-4700  
[health.drinkingwater@state.mn.us](mailto:health.drinkingwater@state.mn.us)  
[www.health.state.mn.us](http://www.health.state.mn.us)

09/2023

*To obtain this information in a different format, call: 651-201-4700.*

## **Appendix A - Instructions**

Complete the application and submit to the Minnesota Department of Health.

### **E-mail Application to:**

Hydration Station Grant Coordinator

[health.drinkingwater@state.mn.us](mailto:health.drinkingwater@state.mn.us)

## Appendix B - Definitions

**Community Public Water System** means the name of the utility that provides drinking water to the installation site.

**Name of the Grant Contact** means the name of the individual who will be responsible for managing the grant.

**Telephone Number** means the telephone number of the contact person that the Minnesota Department of Health can call during its regular business hours (M-F from 8:00 a.m. to 4:30 p.m.).

**E-mail** means an internet address for the contact person that the Minnesota Department of Health can use to electronically transmit information related to the grant.

**Mailing Address** means the official mailing address of the applicant that shall be used for correspondence with MDH.

**Name and Title of the Person Authorized to Sign the Grant Agreement on Behalf of the Organization** means a person who has authority to administer a financial agreement between the applicant organization and the Minnesota Department of Health.

**Total Grant Amount Being Requested** means the sum of the costs of the work items that are identified in the grant application.

**Work Item** is the hydration station equipment that is to be purchased under this part of the grant application.

**Product(s) produced or anticipated outcomes of performing this work** means the tangible results of performing the work that is funded by this grant.

**Unit Conversion 1 mg/L (ppm) = 1,000 ug/L (ppb)**



## Appendix C - Estimates for Hydration Station Costs

This form is to be completed and provided with the vendor quote. It is helpful to estimate and detail the expected costs associated with a hydration station.

Hydration station equipment will include, but will not be limited to (not all items may be applicable or necessary):

Equipment	Costs
Drinking fountain with bottle filling station (hydration station)	\$
Mounting hardware (if applicable)	\$
Replacement filter(s)	\$
Plumbing costs	\$
Miscellaneous costs	\$
<b>Total Estimated Costs</b>	\$

### Contact information of applicant (please print)

Name: \_\_\_\_\_

Phone number: \_\_\_\_\_

E-mail address: \_\_\_\_\_

Signature: \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_

## Appendix D - Applicant Conflict of Interest Disclosure

The purpose of this form is to provide grant applicants a mechanism to disclose any actual, perceived or potential individual or organizational conflicts of interest that exist, as required by [Minn. Stat. § 16B.98](#), subd 2-3; Minnesota Office of Grants Management (OGM) [Policy 08-01, “Conflict of Interest Policy for State Grant-Making”](#); and federal regulation [2 Code of Federal Regulation \(CFR\) § 200.112, “Conflict of Interest.”](#) It is helpful if the applicant explains the reason for the conflict, but it is not required.

**A disclosure will not automatically result in removal of the applicant, or grant application, from the review process.**

### Instructions

Please read the descriptions below and mark the appropriate boxes that pertain to you and your organization as it relates to this specific Request for Proposal (RFP).

### Conflicts of Interest

Conflicts of interest may be actual, potential, or perceived. An actual conflict of interest occurs when a person uses or attempts to use their official position to secure benefits, privileges, exemptions or advantages for self, relatives, or organization with which the person is associated which are different from those available to the general public (Minn. Stat. § 43A.38). A potential conflict of interest may exist if an applicant has relationships, affiliations, or other interests that could create an inappropriate influence if the person is called on to make a decision or recommendation that would affect one or more of those relationships, affiliations, or interests. A perceived conflict of interest is any situation in which a reasonable person would conclude that conflicting duties or loyalties exists. A conflict of interest may exist even if no unethical, improper or illegal act results from it.

MDH recognizes that applicants must maintain relationships with other public and private sector entities in order to continue as a viable organization. MDH will take this into account as it evaluates the appropriateness of proposed measures to mitigate actual, potential, and perceived conflicts of interest. It is not MDH’s intent to disqualify applicants based merely on the existence of a relationships with another entity, but rather only when such relationships cause a conflict that cannot be mitigated. Nevertheless, MDH must follow statutory guidance on conflicts of interest.

#### I. **Organizational Conflict of Interest:**

Organizational conflict of interest means that because of other activities or relationships with other persons, a person is unable or potentially unable to render impartial assistance or advice, or the person’s objectivity in performing the contract work is or might be otherwise impaired, or a person has an unfair competitive advantage.

Example of organizational conflict of interest include, but are not limited to:

Unequal Access to Information. Access to information that is classified as nonpublic data or is otherwise unavailable to the public could provide a vendor a competitive advantage in a later competition for another grant. For example, a nonprofit entity, in the course of conducting grant work for the State, may be given access to information that is not available to the public such as government plans, opinions, interpretations or positions. This nonprofit entity cannot use this information to its advantage in securing a subsequent grant, and measures must be put into place to assure this. Such an advantage could be perceived as unfair by a competing vendor who is not given similar access to the relevant information.

## **II. Individual Conflict of Interest**

An individual conflict of interest occurs when any of the following conditions is present:

- a. An applicant, or any of its employees, uses their position to obtain special advantage, benefit, or access to the Minnesota Department of Health's (MDH) time, services, facilities, equipment, supplied, prestige, or influence.
- b. An applicant, or any of its employees, receives or accepts money, or anything else of value, from another state grantee or grant applicant with respect to the specific project covered by this RFP/project.
- c. An applicant, or any of its employees, has equity or a financial interest in or partial or whole ownership of a competing grant applicant organization.
- d. An applicant, or any of its employees, is an employee of the MDH or is a relative of an employee of the MDH.

Examples of individual conflict of interest include, but are not limited to:

- i. Entity A offers Entity B money to not apply to an RFP that Entity A is applying to because of tight competition and limited funding.
- ii. An individual owns Entity C and also sits on the board of Entity D and both entities are applying to the same RFP.
- iii. An individual of the applicant has, in previous work for MDH, helped create the "ground rules" for this solicitation by performing work such as: writing this solicitation, or preparing evaluation criteria or evaluation guides for this solicitation.
- iv. An individual of the applicant is compensated for serving on the board of a non-profit that may benefit from this work.

Instances in which an individual or applicant worked in a volunteer capacity for the MDH should be evaluated on a case-by-case basis. Volunteer status has the potential to, but does not necessarily create a conflict of interest, depending on the nature of the relationship between the two parties. Volunteer is defined as "(a) an individual who performs hours of service for a public agency for civic, charitable, or humanitarian reasons, without promise, expectation or receipt of compensation for services rendered, is considered to be a volunteer during such hours" ([29 CFR § 553.101\(a\)](#)).

## Certification and Signature Required

### III. Certification

<b>Applicant Name</b>	
<b>RFP Title</b>	2023 Hydration Station Competitive Grant Program
<b>MDH Grant Program</b>	Oral Health and Drinking Water Protection

**Select ONE of the following responses below:**

1.  To the best of Applicant's knowledge and belief, and except as otherwise disclosed, there are no relevant facts or circumstances that could give rise to individual or organizational conflicts of interest.
2.  Applicant, or employees of applicant, have an actual, potential, or perceived conflict(s) of interest which are listed below.

To the best of your knowledge, write the names of entities/individuals with which you have an actual, potential, or perceived conflict:

Name of entity/individual: \_\_\_\_\_

Relationship (e.g., Volunteer, Employee, Contractor, Family Relation): \_\_\_\_\_

Description of conflict (optional): \_\_\_\_\_

*\*Add additional names on separate sheet as necessary.*

**By signing in the space provided below, Applicant certifies the following:**

- If a conflict of interest is discovered at any time after submission of this form, Applicant will immediately provide full disclosure in writing to MDH. If a conflict of interest is determined to exist, MDH may, at its discretion, take action.
- Applicant will obtain, and keep record of, conflict of interest disclosure forms from any subgrantees or subcontractors and keep them on file.

**Applicant's Authorized Representative**

Printed Name \_\_\_\_\_ Title \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

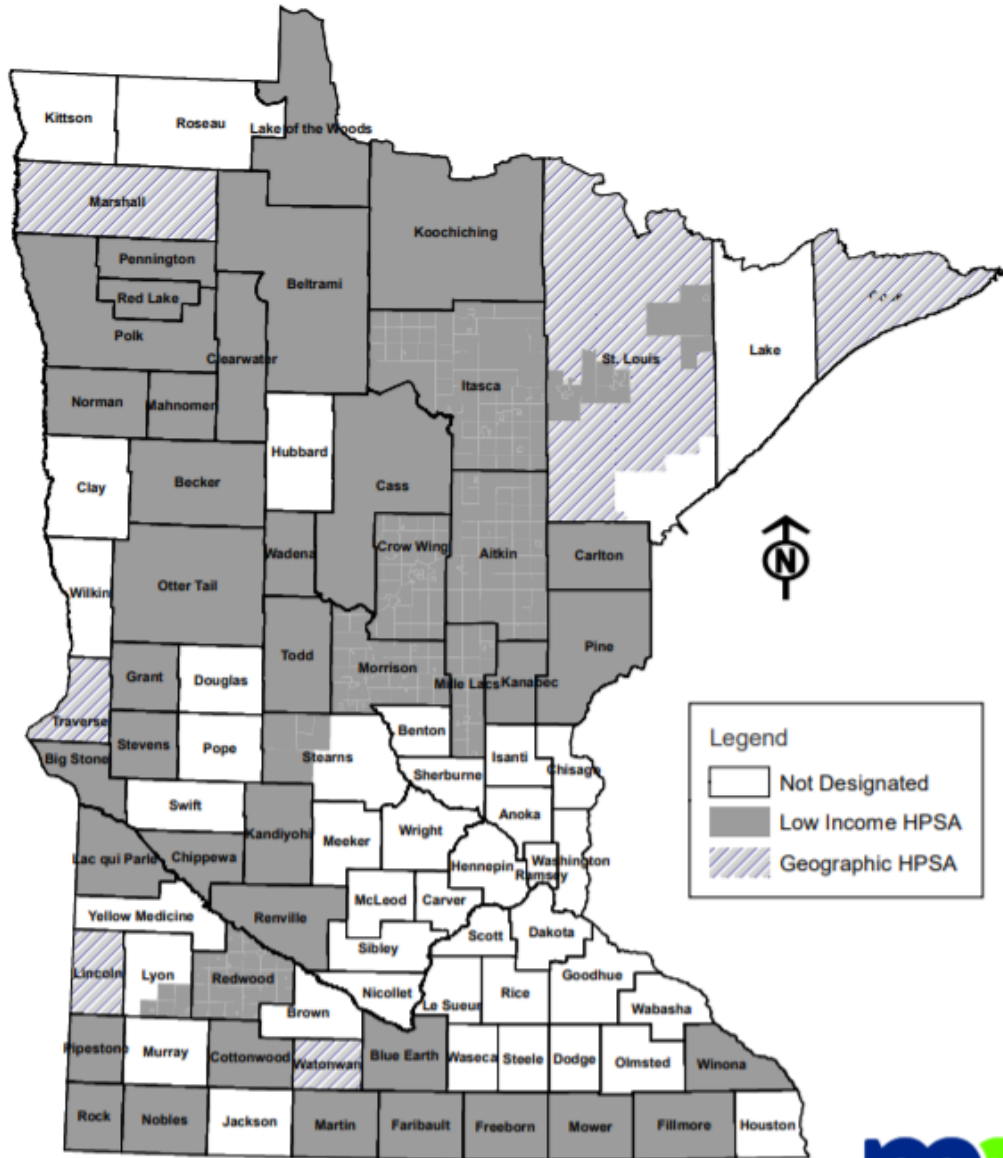
**This form is required from every grant applicant.**

**Please include this form with your RFP application materials.**

*(This form is considered public data under Minn. Stat. § 13.599)*

## Appendix E - MN Dental Health Professional Shortage Areas

Dental HPSA designations are shown in the map below.



Source: Minnesota Department of Health  
Office of Rural Health and Primary Care  
State DD HPSA 2018 January

Source:  
[Health Professional Shortage Areas \(PDF\)](https://www.health.state.mn.us/facilities/underserved/docs/2018hpsadental.pdf)  
(<https://www.health.state.mn.us/facilities/underserved/docs/2018hpsadental.pdf>)

## Appendix F - Hydration Station (Acceptable Examples)

### *Example 1*

**Elkay ezH2O Bottle Filling Station with Single ADA Cooler, Filtered Refrigerated Stainless**

Model: LZS8WSSK

Cost: \$2,330.00

[Elkay](https://www.elkay.com/products/lzs8wssk.html)

[\(https://www.elkay.com/products/lzs8wssk.html\)](https://www.elkay.com/products/lzs8wssk.html)



### *Example 2*

**Elkay ezH2O Bottle Filling Station with Single ADA Vandal-Resistant Cooler, Filtered Refrigerated Light Gray**

Model: LZS8WSVRLK

Cost: \$2,318.00

[Elkay](https://www.elkay.com/products/lzs8wsvrlk.html)

[\(https://www.elkay.com/products/lzs8wsvrlk.html\)](https://www.elkay.com/products/lzs8wsvrlk.html)



### **Features are the same for both Hydration Stations**

Touchless, sensor activation (bottle filler) designed for easy use; easy-to-operate push-bar activation (bubbler). Hermetically sealed refrigeration system provides chilled water to satisfy thirst.

Fill rate is 1.1 GPM. Laminar flow provides clean fill with minimal splash. Visual filter monitor with LED filter status indicator for when filter change is necessary.

The 3,000-gallon filter is certified to NSF 42 and 53 for lead, Class 1 particulate, chlorine, taste and odor reduction. Green Ticker™ informs user of number of 20 oz. plastic water bottles saved from waste.

Silver ion antimicrobial protection on key plastic components to inhibit the growth of mold and mildew. Real drain system eliminates standing water.

Flexi-Guard bubbler provides a flexible antimicrobial mouth guard to protect against injury and microorganisms. Rated for indoor use.

## MDH Program Use Only

This section to be completed by appropriate Grant Program Staff.

- Applicant has no conflicts of interest(s).
- Applicant has disclosed conflict of interest(s) and appropriate MDH Program staff have reviewed the conflict(s) in accordance with MDH Policy. MDH Program has determined the conflict(s) can be mitigated in the following way(s):

Describe how conflict(s) will be eliminated.

*(Example: Applicant's application will not be reviewed by External Partners with which they have a conflict.)*

I certify that the conflict(s) has/have been discussed with this Applicant and the actions above have been taken.

Printed Name	Title
Anita Smith	Grant Coordinator
Signature	Date