

CITY OF NEW ORLEANS
LaToya Cantrell, Mayor

New Orleans Health Department

Notice of Funding Availability
for Programs Addressing Swimming Pool Safety in New Orleans

NOFA Application Packet

CITY OF NEW ORLEANS
New Orleans Health Department
1300 Perdido St
New Orleans, Louisiana 70112

NOFA Application Packet

Summary: The New Orleans Health Department (NOHD) is seeking highly qualified organizations to deliver programs and services that improve pool safety by providing free or reduced rates swimming lessons and pool safety education for Orleans Parish children under the age of 18, who can demonstrate financial need. NOHD seeks organizations with an established history of providing swimming lessons and providing water safety education to these community members. This Notice of Funding Availability (NOFA) is made available through The Notice of Award (NOA) issued by the U.S. Consumer Product Safety Commission (CPSC) and is subject to the terms and conditions.

Due Date: An electronic copy of a completed application must be submitted to the City of New Orleans Health Department via email to william.johnson@NOLA.gov by **March 1, 2025**.

Format: When replying to prompts, please use Times New Roman, 12-point font size to facilitate reading by scorers.

Proposals must be complete at the time of submission. No addenda will be accepted after the deadline date for submission of proposals. Under no circumstance should an applicant leave a proposal at or mail a proposal to the City of New Orleans Health Department.

Application: The following must be included with the proposal for consideration:

1. Application Packet (see below)
 - A. Project Narrative
 - B. Budget & Budget Narrative
 - C. Evaluation Plan
2. Organization's Most Recent Financial Audit
3. Detailed Program Budget in Excel Document

Application and Funding Details

# of Awards	1-4
Award Duration	18 Months
Award Range	\$50,000 - \$200,000
Project Start Date	July 1st, 2025

NOFA Proposal Timeline:

Tasks	Description	Dates
1	NOFA Announced	2/1/2025
2	NOFA Informational Session for Applicants	2/15/2025
3	NOFA Applications Due	3/1/2025
4	Selected Subrecipients Announced	4/1/2025
5	Prepare and Route Scope of Work and Subrecipient Agreements for Awardees	5/1/2025
6	Subrecipient Agreements Executed and Work Begins	7/1/2025
7	Quarterly Subrecipient Data Collection and Reporting Begins	9/1/2025 (ongoing)
9	Final Report From Grantees Due	9/1/2026
10	Dissemination of Findings from Subrecipient Projects	10/1/2026
11	Prepare Final Report	11/1/2026



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Application Packet
Applicant Organization:
Applicant Address:
Form of Business: <input type="checkbox"/> Nonprofit <input type="checkbox"/> For-Profit <input type="checkbox"/> Other: _____
Zip Code(s) where your project serves:
Program Summary: Provide a summary of the program or project: (250 words maximum)
Total Amount of Funding Requested:
Length of Proposed Project:

SECTION 1: PROJECT NARRATIVE

Please respond to the prompts below regarding your agency's experience delivering programs that improve swimming lessons and providing swimming pool safety education to community members in New Orleans

SECTION 1A: ORGANIZATIONAL EXPERIENCE

Word Limit: 1000 Words

1. Detail your organization's experience in delivering swimming lessons and providing swimming pool safety education. Please include any instances in which your organization has specifically worked in areas of the City that lack access to these types of programs.
2. Outline any experience your organization has in providing services to low-income community members

SECTION 1B: PROGRAM IMPLEMENTATION AND STAFFING

Word Limit: 1000 Words

1. Detail the program or services that your organization will deliver using the funds available through this NOFA, including whether that program is an existing program that will be expanded or a new program that will be implemented.
2. Describe your organization's plan on how you will ensure this program will be focused on working with children in Orleans Parish who have historically experienced economic barriers to services such as these.
 - a. Please outline your plan on how you will verify participants meet residency requirement, age requirement (<18 y.o.), and financial need (i.e. confirmed by Medicaid or SNAP eligibility, or other income verification process established by organization)
3. Describe your organization's current or new staff positions that will oversee and implement the programming functions outlined in the prior section.
4. Include a timeline for the project development and implementation.

SECTION 1C: PROGRAM LOCATION AND SERVICE DELIVERY**Word Limit: 500 Words**

1. Provide the current location of your organization and the areas and populations that your organization currently serves. List the city wards and specific locations in which your organization will deliver the program or services for which funding is requested and detail the number of eligible individuals in each ward that your proposed program aims to serve.

SECTION 1D: PROGRAM IMPACT**Word Limit: 750 Words**

1. Describe the plan for monitoring and evaluating the impact of the funded program or services.
2. Describe the projected impact that your program or service would have, using quantitative metrics, where possible, including but not limited to:
 - A. Number of wards in which services are planned to be offered
 - B. Number of individuals that your organization plans to enroll for swimming lessons
 - C. Number of individual lessons you plan to provide to enrolled community members
 - D. Number of planned water safety events

SECTION 2: BUDGET AND BUDGET NARRATIVE

Word Limit: 100 words + Excel Document

Please provide a description of project costs below in a narrative format. Please also include an **attached Excel document** that breaks down costs across allowable categories. All such costs should be limited to the amounts that are necessary and reasonable to accomplish the program activities and must meet applicable federal eligibility restrictions. Any awarded project will be subject to NOHD'S feasibility and cost reasonableness analyses.

Allowable costs include, but are not limited to:

- A. Planning and development
- B. Swimming lesson implementation
- C. Water safety education plan
- D. Personnel cost
- E. Materials and supplies
- F. Program evaluation

Restrictions on use of funds include, but are not limited to:

- A. Organizations must operate within the geographic boundary of the City of New Orleans
- B. Program recipients or project participants must be City of New Orleans residents.

SECTION 3: EVALUATION PLAN

Word Limit: 500 Words

Describe the method(s) of evaluating the success of the proposed project. Define the metrics that will be used to evaluate the program impact described in the project narrative. Include outcomes that align with the strategic aim of this NOFA.

Acknowledgements

The undersigned certifies and makes assurance of the Applicant's compliance with:

- Applicant organization has met audit requirements to be considered for funding, including submission of organization's most recent completed audit, and all audits of previously funded organizations are clear of ineligible/disallowed costs related to all funding provided by the City of New Orleans.

- No contractor principal, member, or officer has, within the preceding five years, been convicted of, or pled guilty to, a felony under state or federal statutes for embezzlement, theft of public funds, bribery, or falsification or destruction of public records.
- Proposals are in compliance with City funding commitments and do not have unresolved compliance issues.
- Title VI of the federal Civil Rights Act of 1964 <https://www.hhs.gov/civil-rights/for-individuals/special-topics/needy-families/civil-rights-requirements/index.html>;
- Title IX of the federal Education Amendments Act of 1972 <https://www.justice.gov/crt/title-ix-education-amendments-1972>
- The Equal Employment Opportunity Act and the regulations issued thereunder by the federal government <https://www.eeoc.gov/statutes/laws-enforced-eeoc>
- The Americans with Disabilities Act of 1990 and the regulations issued thereunder by the federal government <http://www.ada.gov/pubs/ada.html>;
- All contract employees performing services and/or work as a result of this solicitation must have documented legal authority to work in the United States of America;
- The condition that the submitted Application was independently arrived at, without collusion, under penalty of perjury; and
- The condition that no amount shall be paid directly or indirectly to an employee or official of the City of New Orleans as wages, compensation, or gifts in exchange for acting as an officer, agent, employee, subcontractor, or consultant to the Applicant in connection with the Procurement under this NOFA.

☐ Yes ☐ No

ORGANIZATION

FED EMPLOYER ID NO.

APPLICANT SIGNATURE

DATE

PRINTED NAME

TITLE

PERSON RESPONSIBLE FOR PREPARATION OF APPLICATION	
_____ NAME	_____ TITLE
_____ ADDRESS	
_____ CITY STATE ZIPCODE	
_____ PHONE NUMBER	_____ EMAIL ADDRESS
PERSON RESPONSIBLE FOR PROGRAM AND CONTRACT MANAGEMENT	
_____ NAME	_____ TITLE
_____ ADDRESS	
_____ CITY STATE ZIPCODE	
_____ PHONE NUMBER	_____ EMAIL ADDRESS