WIC Online Shopping

Sub-grant Project

**Proposal Template for Implementation and Scaling of Existing Online Shopping Solutions**

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| Proposal Template Instructions **Please follow these instructions when drafting and submitting your proposal:**   * Use the guidelines below to prepare your proposal using the section headings provided (e.g., Project Summary, Purpose and Scope of Project, etc.). * Use 11-point font and black type. * The proposal must be **no more than 15 pages with 1.5 line spacing** **and one-inch margins** on the top, bottom, and sides of the page. * All applicants are required to complete all sections of the proposal unless otherwise specified. * Attachments do not count towards the page limit. * Before submitting your proposal, delete the instructions in this box and the guidelines in blue under each section heading.Please leave the section headings (in bold black font). * Save your final proposal in PDF format. * **Please email completed proposals in a single (combined) PDF file to** [**wic@centerfornutrition.org**](mailto:wic@centerfornutrition.org) **with the subject line “WIC Online Shopping Sub-grant Project Proposal.”** To be considered for review, complete proposals must be submitted **by 5PM CT on Thursday, May 9, 2024.** The Center for Nutrition and Health Impact (formerly the Gretchen Swanson Center for Nutrition) will confirm receipt of proposals within one business day of receiving the proposal. |

## Project Summary

## In one paragraph, please provide the following:

* A title for the WIC Online Shopping Sub-grant Project
* The lead WIC State agency and other WIC State agencies (if applicable), WIC-authorized vendors, and EBT processors on the project
* A brief (3-5 sentences) overview of the proposed project
* The total amount of funding requested for the project

(your response goes here in black type)

## Primary Contact

Please provide the information below for the person who will serve as this sub-grant's primary contact, if awarded. This person will be the main contact for all sub-grant activities.

* Applicant Contact Name (for questions about the proposal)
* Title/Position
* Mailing Address
* Physical Address (if different than mailing address)
* Email
* Phone Number

(your response goes here in black type)

## Budget Manager Contact

Please provide the information below for the person who will serve as this sub-grant's budget manager, if awarded. This person will receive funds and be responsible for fiscal aspects of the sub-grant project.

* Budget Manager Name
* Title/Position
* Mailing Address
* Physical Address (if different than mailing address)
* Email
* Phone Number

(your response goes here in black type)

## Project Team

Assembling a project team is a crucial step to ensure project goals can be accomplished. Applicants are expected to build a project team to accomplish intended goals prior to applying; however, the Center for Nutrition and Health Impact understands that key personnel may be identified *during* the project period, not beforehand. To the best of your ability, please describe the main roles and responsibilities of each member of the project team using the specifications listed below:

* **WIC Staff:** Describe their experience collaborating with external partners to implement initiatives.
* **External Partners:** Describe their experience with WIC initiatives.
* **Key Personnel Experience:** Describe any relevant experience with implementing an online shopping or other similar project. This may include experience with online shopping and/or experience with projects that may impart some overlapping experience, such as WIC vendor initiatives, web-based application development projects, and WIC participant outreach to promote a technological innovation.

Please note the Center for Nutrition and Health Impact requires applicants to attach key personnel resumes for dedicated project personnel as part of your proposal package (see [Attachments](#_Staff_Resumes) section for instructions). For vacant positions to be filled during the project period, please attach job descriptions for open positions that will be hired upon award as part of your proposal package. When developing proposals, project teams should consider, but are not limited to, recommended project team members as described in the WIC Online Shopping Blueprint (<https://www.wicshopplus.org/the-blueprint>). Examples of appropriate project team members to consider include State WIC Director(s), WIC Vendor Manager(s), IT Project Manager, WIC Subject Matter Expert(s), Vendor Representative(s), IT Project Manager, WIC Online Shopping Project Manager, MIS Developers and EBT Processors, and/or Payment Processor(s).

(your response goes here in black type)

## Project Management

Describe your organization’s project management plan for the sub-grant project. This plan must describe how your organization will oversee the operational aspects of the project to ensure successful completion of all milestones and deliverables, manage the budget, and develop a clear and detailed communication plan across all implementation partners.

(your response goes here in black type)

## Previous Experience & Readiness to Implement Project

Please explain the following:

* Your experience with WIC online shopping projects or innovations.
* Your ability to implement, scale out, or advance a current WIC online shopping project, if awarded.
* Any activities you have undertaken to understand any successes or identified barriers associated with your proposed plan to implement, scale, or enhance an existing WIC online shopping solution.
* The WIC-authorized vendor’s experience with WIC online shopping projects.
* The EBT processor’s experience with WIC online shopping projects.

(your response goes here in black type)

## Purpose & Scope of Project

Please incorporate the following when describing the purpose and scope of your project, as appropriate for your application:

* **If implementing an existing WIC online shopping solution,** explain the existing WIC online shopping solution, the reach of the solution for WIC participants in your State, and the planning/preparation underway to support implementing the existing solution.
* **If scaling an existing WIC online shopping solution,** explain the geographic plan for scaling your WIC online shopping solution. Explain the rationale for the WIC online shopping solution selected and the planning/preparation underway to support scaling this solution.
* **If enhancing or innovating a current WIC online shopping solution,** explain the existing WIC online shopping solution and the rationale for the proposed enhancements or innovations to the solution. Please describe how the proposed innovations will enhance current WIC online shopping initiatives. Please describe the planning/preparation underway to support your project.

(your response goes here in black type)

## Project Timeline, Goals, Activities, & Partners

Please include the following regarding your proposed project’s timeline, goals, activities, and partners:

* Describe the goals of your project, the activities you anticipate doing to meet those goals, and the partners who will work on each goal.
* Identify anticipated challenges you may face during project implementation and potential solutions to mitigate these challenges.
* Describe how your project will work to enhance equity and access among WIC participants.
* Reference the Blueprint (<https://www.wicshopplus.org/the-blueprint>) and how you will use the document to implement your project.
* State any waivers or changes in the Federal WIC requirements your team will seek to implement your project (e.g., the cashier presence requirement). Please see [Table 2-1 in the Blueprint](https://static1.squarespace.com/static/64e2aca3571b9219dec2d20f/t/65b6ccf81878582ed1ce21f6/1706478844353/WIC%2BOnline%2BShopping%2BBlueprint_2024.pdf) for additional requirements where regulatory flexibility from FNS may be needed.
* Describe your implementation team as noted below. The project team must include at least one WIC-authorized vendor partner and an EBT processor partner. **Please note that Letters of Support from anticipated key partners will be included as part of your proposal package** (see [Attachments](#_State_Agency_Letter) section for instructions)**.** For each partner describe:
* The title of the organizations/groups involved (specific personnel will be described under [Project Team](#_Project_Team))
* The organization’s distinct role/s on the WIC Online Shopping Sub-grant Project
* Your organization’s experience working with the partner.

(your response goes here in black type)

## Proposed Online Shopping Experience

Please describe the proposed process for the WIC online shopping order. Please incorporate the following as they apply:[[1]](#footnote-2)

* If implementing:
* Describe the process for how a WIC participant will shop for and purchase WIC items online. Will the WIC-authorized vendor offer delivery or curbside pickup?
* Describe how transactions are authenticated.
* How will the solution handle substitutions and returns (void and replace, or itemized returns)? See Blueprint (<https://www.wicshopplus.org/the-blueprint>) for more information on this technical topic.
* If scaling:
* Describe the solution you wish to scale, including scope and expected impact.
* For implementing, scaling, or enhancing/innovating:
* Explain any innovations in the project, if applicable.
* Describe how your proposed project will optimize the shopping experience for the WIC shopper.

(your response goes here in black type)

## Evaluation

All sub-grantees will be required to participate in an overarching WIC Online Shopping Sub-grant project evaluation conducted by the Center for Nutrition and Health Impact as described under [Requirement 2.](https://www.wicshopplus.org/s/rfp_2024.pdf) Please review the evaluation metrics listed under [Requirement 2](https://www.wicshopplus.org/s/rfp_2024.pdf). Examples of such activities include, but are not limited to, data sharing, retrospective cost tracking data through quarterly financial reports, WIC participant generated data, and staff participation in interviews with the Center for Nutrition and Health Impact. Please include the following statement in your proposal: *[WIC STATE AGENCY NAME] and our project partners will participate in the Center for Nutrition and Health Impact’s required evaluation activities.*

(your response goes here in black type)

# Attachments

### Project Budget Documents

Please complete and submit the [SF-424 form](https://static1.squarespace.com/static/64e2aca3571b9219dec2d20f/t/65d7b40312e0041f6d8ea326/1708635139329/VT_NH_RBDG_SF424+Application+for+Federal+Assistance.pdf) (see [instructions](https://static1.squarespace.com/static/64e2aca3571b9219dec2d20f/t/65d7b3e2f1e68e49505de151/1708635106421/SF-424-Instructions.pdf)). Also, please provide a detailed itemized budget for requested funds using your own budget template and a budget narrative for each project year. When preparing your budget, ensure the following information is included:

* Key personnel, including partner organizations, proposed to be paid by this sub-grant and the percentage of time they will devote to the project in full-time equivalents (FTEs).
* Your organization’s fringe benefit rate and amount, as well as the basis for computation.
* The type of fringe benefits to be covered with Federal funds.
* Itemized travel expenses (including type of travel), travel justifications, and basis for lodging estimates.
* Types of equipment and supplies, including justifications and cost estimates, ensuring that the budget is in line with the project description; equipment depreciation must be reflected.
* Information for all contracts and justification for any sole-source contracts.
* Indirect cost information (either a copy of a Negotiated Indirect Cost Rate Agreement [NICRA] or, if no agreement exists and the applicant has never been approved for a NICRA, the applicant may charge up to 10% de minimis). If applicant is requesting the de minimis rate or indirect costs are not requested, please indicate this in the budget narrative.
* Other sources of funding including other WIC funds or other non-WIC funds that will supplement this grant, including itemized dollar amounts and proposed use.
* Other applicable costs not covered above.

WIC State agencies that received funding from the WIC Modernization Grant with the intent to plan or implement an online shopping project, please provide the following information:

* Amount of funding received,
* Project description,
* Amount of additional funds needed, and
* Intended purpose for these additional funds to support online shopping efforts.

### Staff Resumes

* Attach key personnel resumes for dedicated project personnel identified in this application.
* For vacant positions to be filled during the project period, please attach job descriptions for open positions that will be hired upon award.

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### State Agency Letter of Support

* A letter of support from all WIC State agencies partnering on the submitted application is required. The letter must include the WIC State agency’s support for the application and a statement agreeing to coordinate with the Center for Nutrition and Health Impact to provide data necessary for the project evaluation and implementation.

### Letters of Support from Partners

* Letters of support attesting to the ability of the applicant to carry out the project are required from key partners if those partners are applying as part of the Applicant Team. All applicants must partner with and include a Letters of Support from an eligible WIC-authorized vendor and their EBT processor.

1. Please note that the answers provided in response to this section are not binding and may change as the project progresses. [↑](#footnote-ref-2)