



**STATE OF RHODE ISLAND AND PROVIDENCE PLANTATIONS**  
**DEPARTMENT OF ENVIRONMENTAL MANAGEMENT**  
235 Promenade Street  
Providence, Rhode Island 02908

---

## **2020 Hospital Idle Reduction Grant Program**

### **Announcement of Request for Proposals (RFP)**

July 29<sup>th</sup>, 2020

All proposals due by close of business on November 13<sup>th</sup>, 2020

Submit proposals to: Rhode Island Department of Environmental Management  
Office of Air Resources, 3<sup>rd</sup> Floor  
c/o Owen Jackson  
235 Promenade Street  
Providence, RI 02908  
[Owen.Jackson@dem.ri.gov](mailto:Owen.Jackson@dem.ri.gov)

---

The Rhode Island Department of Environmental Management (the Department) is pleased to announce the availability of grant funding for hospitals to reduce ambulance idling emissions using idle reduction technology.

### **1. Purpose of Available Grants**

The Hospital Idle Reduction Grant Program provides support for projects that protect human health by reducing harmful emissions and noise pollution from idling ambulances and emergency vehicles. This program includes grants funded under the VW Emissions Settlement. Grants from the VW Emissions Settlement are funded by the Attorney General's Office.

### **2. Applicant Eligibility & Location Requirements**

Applicants eligible to apply for the above grant include hospitals and others that meet the program requirements.

Hospitals eligible for grant funding shall meet the following requirements:

- Priority will be given to hospitals located within the Providence metro area.
- Preference will be given to hospitals located in disadvantaged communities that share an unfair burden of air pollution.
- A two (2) year reporting commitment to the Rhode Island Department of Environmental Management to assess idle reduction equipment usage.

Applicant must have evidence of ownership of the location identified in the application or evidence that the installation is allowed on the property (i.e., written permission of owner and/or pertinent language in a lease, license agreement, or easement, etc.) and provide such evidence upon request.

Applicants must demonstrate administrative capacity to manage their grant funds and comply with applicable state fiscal requirements including, but not limited to, accounting, recordkeeping, procurement, and reporting procedures. Grants are administered on a **reimbursement** basis. Applicants must also demonstrate the ability to manage their project, document funds, and report on progress of deliverables specified in a Grant Agreement.

It is the Department's policy that financial assistance shall neither directly or indirectly benefit parties whose willful action or inaction has resulted in damage to the environment. At the Director's discretion, the Department may restrict, delay, or limit funding due to the occurrence of criminal, civil enforcement actions, or compliance matters. To be eligible for grants, applicants must disclose any existing violations and compliance actions. This includes the issuance of any Notice of Intent to Enforce.

### 3. Project Eligibility

Costs related to the Hospital Idle Reduction Grant Program must not exceed \$17,500.00. The following types of costs are eligible to receive grant monies from the Hospital Idle Reduction Grant Program this year:

- The installation and purchase of full service, freestanding docking stations which provides stationary power for onboard batteries and medical equipment and HVAC to regulate the temperature inside the cab;
- Electrical upgrades and maintenance to provide adequate power to the idle reduction docking station only;
- Permitting;
- Design;
- Signage and striping necessary to indicate that idle reduction equipment is present;
- Protective devices – (e.g. bollards); and/or
- Shipping/Freight.

Examples of types of costs that are ineligible to receive grant monies from the Hospital Idle Reduction Grant Program include:

- a. Any costs incurred before a fully executed Grant Agreement is in place;
- b. Administrative costs including clerical support, monthly utility expenses, the purchase of office equipment, personnel costs associated with fundraising for the entity, etc.;
- c. Real estate costs, such as purchase or rent;
- d. Capital costs not directly related to a docking station, such as the construction of buildings or support parking facilities, etc.
- e. State or Federal lobbying costs, penalties, fines, or regulatory fees including, but not limited to RIDEM permit fees, or any municipal fees. Response costs for emergency response actions caused or exacerbated solely by the applicant or their agents or assigns; and/or

- f. Proposed projects associated with unresolved litigation (administrative or judicial) with the Department or conditions or activities that have violated or are violating statutes or regulations administered by the Department shall be ineligible to receive Fund monies without the express written consent of the Director and the resolution of said litigation or violation(s).

Please be aware that the Department and the State of Rhode Island take no responsibility for project work done outside the term or scope of a valid Grant Agreement or prior to full approval of an agreement. Grant Agreements are not valid until the Rhode Island Department of Administration issues the appropriate encumbrance (i.e. purchase order (PO) or PO release). All Grant Agreements must be signed and dated by an authorized agent of the applicant and the Department.

#### **4. Project Time Periods**

All projects that receive grants must be completed by December 31<sup>st</sup>, 2021. Any project that finishes after this deadline will not be funded. The Department encourages applicants to take into consideration and to plan adequate time for procurement and installation of materials in their project schedule.

#### **5. Updated RFP Information**

During the application period, as the need arises, the Department may post additional information concerning this RFP and funding opportunity on its website. This may include clarification of commonly asked questions. Potential applicants are advised to periodically check the Department's website.

#### **6. Proposal Evaluation Criteria**

To be awarded a grant, applicants must possess adequate fiscal and project management capabilities. Past performance on prior Department grants will be taken into account when assessing organizational capacity to effectively manage a project. Eligible proposals will be referred to an internal review by the Program Manager. The Program Manager will evaluate the eligible proposals consistent with the scoring criteria and applicable state requirements.

Scoring criteria:

- Communities that receive a disproportionate quantity of pollution from diesel vehicles (50%)
- Located central to the Providence metro area (30%)
- Cost-effectiveness of emission reductions (20%)

## 7. How to Apply – Final Submission Deadline – November 13<sup>th</sup>, 2020

Final proposals must be received by the Department no later than 4:00 p.m. on Friday, November 13, 2020. The proposal must include the mandatory application forms, and all other supporting materials as appropriate; e.g. site location, photographs, etc. (Refer to Appendix A for the application).

## 8. Preparing the Proposal for Final Approval

For projects that are selected, the Department may request the applicant modify the project proposal based on comments identified during the project review and selection process. The applicant must submit a revised project proposal to the Department prior to final approval. The Department will conduct a final review of the proposal and, if satisfied that all comments have been adequately addressed, the final proposal or scope of work will become the basis for the Grant Agreement that will be executed to formalize the grant award.

## 9. Project Administration

### 9.1 Grant Agreements

Grants will be awarded on a competitive basis until the total available funds are exhausted. Successful applicants will receive a grant offer specifying the amount, duration and conditions of the award. The grant offer will be in the form of a binding contract, the Grant Agreement. Other requirements to secure funding shall be the following:

- Recipients will be required to sign, accept, and return the original signed Grant Agreement to the Department within forty-five (45) days of the date of approval. Failure to execute the agreement within the forty-five (45) days may result in the cancellation of the grant award and may result in these funds being awarded to the next highest-rated project;

All grant payments will be paid in the form of **reimbursement** payments for eligible expenses incurred in accordance with an approved project. Refer to Section 3 above for examples of eligible and ineligible costs. Requests for reimbursement must include an invoice, and documentation of the incurred, eligible costs. The type of documentation required to receive reimbursement will be detailed in the grant offer and/or grant agreement. Grant recipients must enter into an agreement with the Department to establish mutually agreeable terms for completing the project. Items in the agreement include, *but are not limited to*:

- Scope of the project, including schedule;
- Interim and final reporting requirements;
- Statement of the project's total budget;
- Project payment schedule; and/or
- Record-keeping and reporting.

**Payments will be made on a reimbursement basis** in accordance with the payment schedule and terms contained in the Grant Agreement.

Grant recipients may be required to provide progress reports to the Department. Projects are expected to be completed in the timeframe of the Grant Agreement. All projects must be completed by December 31<sup>st</sup>, 2021.

- 9.2 Pre-project and Pre-contract Costs** – The Department and the State of Rhode Island take no responsibility for project work done outside the term or scope of the Grant Agreement or prior to full approval of a Grant Agreement. Applicants should NOT anticipate any funding for work that is done before approval of a Grant Agreement. Grant Agreements are not valid until the Rhode Island Department of Administration issues the appropriate encumbrance (i.e., purchase order). All Grant Agreements must be signed and dated by the Department.
- 9.3 Procurement** - The expenditure of funds pursuant to these grants is subject to state law governing procurement, including requirements for competitive bidding and goals for participation by minority or woman business enterprises (MBE/WBE). The Department reserves the right to review and approve the award of any contract or subcontract.
- 9.4 Suspension, modification or revocation** - The Director may suspend, modify or revoke any awards granted in the event that subsequent examination reveals any data included in an application form, submittal, reimbursement request, plan or sketch to be incorrect or not in compliance with applicable state requirements.
- 9.5 Stop Payment** - The Director may take appropriate action to stop payment of and/or seek the return of grant funds expended for any project where: (1) the applicant has obtained said grant based upon incomplete, false, misleading or erroneous information; or (2) the applicant has not completed the work approved under the grant in accordance with any and all conditions of approval issued by the Director in the grant award.

## **10. Docking Station Suggested Requirements**

Upon execution of a formalized Grant Agreement, the applicant assumes responsibility to conduct its due diligence on identifying a viable site location for the docking station equipment and to select a qualified vendor (Pursuant to Section 9.3) to design the project, procure equipment, install, and make operational the hospital idle docking station equipment. The Department is not liable and takes no responsibility for recommending/selecting qualified vendors; procuring necessary equipment; installation; or post-operational operations; maintenance, and/or warranty.

- a. Location provides the minimum source voltage of 40 amp feed, Single Phase 3-Wire;
  - a. If necessary, the applicant must demonstrate coordination with the local utility to ensure that there is enough capacity on the local circuit.
- b. Location provides adequate space for a docking station measuring a minimum 90”H x 3”W x 18”D;
- c. Location provides adequate parking space or cement pad to safely hold a minimum of 470 pounds;

- d. Equipment must be qualified to withstand extreme weather conditions, including temperature extremes, flooding, heavy rains, and high winds and is protected from malfunctions due to condensation;
- e. Equipment must be installed by a Rhode Island licensed electrician in accordance with all National Electric Codes and the Rhode Island State Building Code- State Electrical Code

## Appendix A – Hospital Idle Reduction Grant Application

### FORM 1: SIGNATURES AND CONTACTS Part 1: Signature Page

Applicant/Hospital Name:

**Identification Number (nine digit # as given by the Secretary of State Office)**

--	--	--	--	--	--	--	--	--

**Certifications**

I have read the Application and Grant Eligibility Requirements and agree to **ALL** the following terms and conditions by initialing each of the following sections:

Initial \_\_\_\_\_

Applicant fully understands that the RIDEM Hospital Idle Reduction Grant Program requires a two (2) year reporting commitment.

Initial \_\_\_\_\_

Priority will be given to hospitals in the Providence metro area.

Initial \_\_\_\_\_

Hospital idle reduction equipment is approved by property owner and allowed on property.

Initial \_\_\_\_\_

Applicant fully understands that the Hospital Idle Reduction Grant Program will only cover up to \$17,500 in related costs and it is the applicant's responsibility to cover any remaining balance after the grant amount has been applied.

**AUTHORIZED OFFICIAL: APPLICANT OR EMPLOYEE OF THE APPLICANT AUTHORIZED TO APPLY**

I hereby certify that to the best of my knowledge and belief all information provided in this application and any attachments is true and correct. If the application was prepared by a third party, I certify that I have read the complete application after all forms and information were completed. I agree with the information provided, and the date provided below is the date I signed the form. I further understand that prior to incorporating these forms and information into a rebate Grant Agreement, the data and information may be revised by RIDEM Project Manager for accuracy and that our acceptance of a Grant Agreement will constitute agreement with those revisions. Failure to sign the application or signing it with a false statement may make the submitted offer or any resulting Grant Agreements voidable. Intentional falsification of these forms will be prosecuted to the extent allowed under law and may be used as an adverse factor in future awards.

Signature of Authorized Official:

Print Name of Authorized Official:

Date:

# FORM 1: SIGNATURES AND CONTACTS

## Part 2: Designation of Officials and Access to Records Location

### AUTHORIZED OFFICIAL: The person signing this application

Name:	
Title:	
Mailing address:	
Physical address:	
Main Phone Number:	Secondary Number:
Fax Number:	Email Address:

### DESIGNATED PROJECT REPRESENTATIVE:

The applicant or an employee of the applicant who will serve as the project manager and will be responsible for receiving and submitting the funding participant agreement documents, including usage reports.

<input type="checkbox"/> Same as authorized	
Name:	
Title:	
Mailing address:	
Physical address:	
Main Phone Number:	Secondary Number:
Fax Number:	Email Address:

### FINANCIAL OFFICER (IF APPLICABLE)

<input type="checkbox"/> Same as authorized	
Name:	
Title:	
Mailing address:	
Physical address:	
Main Phone Number:	Secondary Number:
Fax Number:	Email Address:

### DESIGNATED LOCATION FOR RECORDS ACCESS AND REVIEW BY RIDEM OR ITS REPRESENTATIVE

Physical Address:		Phone:
City:	State:	ZIP Code:



## FORM 2: APPLICATION COVER SHEET

### 1. TYPE OF APPLICATION

Only hospital idle reduction projects qualify for funding.

### DESCRIPTION OF WORK

Insert a brief paragraph that summarizes your implementation strategy and timeframe for the installation of hospital idle reduction equipment. Please identify the project site using a picture or map.

Estimated Equipment Costs:

Estimated Labor Costs:

Frequency of Ambulance Idling Outside of Hospital:

Rarely ☐  
(<1 hour idling daily)

Frequently ☐  
(1 – 2 hours idling daily)

Very Common ☐  
(>2 hours idling daily)

Please submit all applications to [Owen Jackson](#) by 4:00 p.m. on Friday, November 13<sup>th</sup>, 2020.