



# Community-Led Solutions for Healthy Food Access and Diabetes Prevention and Care

May 28, 2026

- Diabetes Funding Opportunity
- [Community-Led Solutions for Healthy Food Access and Diabetes Prevention and Care - MN Dept. of Health](#)
- Keep cameras off
- Stay on mute for the duration of the session
- Please add your questions to the chat throughout the presentation

## Community-Led Solutions for Healthy Food Access and Diabetes Prevention and Care

The Minnesota Department of Health requests proposals to support community-based solutions for healthy food access and diabetes prevention and management. This Request for Proposals (RFP) will fund projects to address barriers to accessing healthy foods or understanding and accessing nutrition information, education, or support services.

[Community-Led Solutions for Healthy Food Access and Diabetes Prevention and Care \(PDF\)](#)

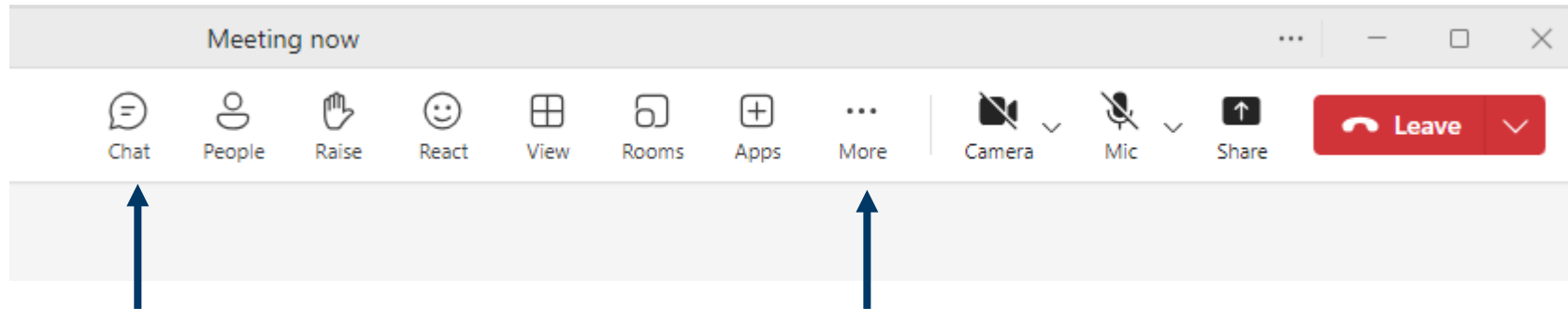
### Key dates

- **May 13, 2026:** Request for Proposals Released
- **May 28, 2026:** Informational Webinar Session
- **June 15, 2026:** Last day to submit RFP Questions
- **July 1, 2026:** Proposals due
- **Aug. 2026:** Award applicants
- **Oct. 1, 2026,** or when grant is fully executed: Grant begins
- **June 30, 2028:** Grant ends

### Eligibility

Eligible applicants may include, but are not limited to:

# Navigating Teams



- Live caption settings
  - On: Select More-> Language and speech->Turn on live captions
  - Off: Select More-> Language and speech->Turn off live captions
- Use the chat to submit questions

# Agenda

- 11:00 – 11:05 a.m. Welcome and staff introductions
- 11:05 – 11:15 a.m. Program history and overview
- 11:15 – 11:35 a.m. Grant Request for Proposal (RFP)
- 11:35 – 11:45 a.m. Application Process and Instructions
- 11:45 - 12:00 p.m. Question & Answer



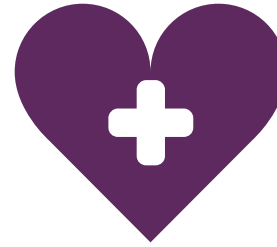
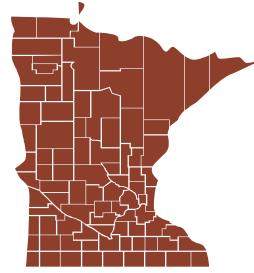
# Diabetes Program Overview and History

Bridget Ideker, Diabetes and Health Behavior Unit Manager

Georgie Kinsman, Diabetes and Arthritis Evaluator

Julie Dalton, Diabetes Principal Planner

**We work to advance health equity and reduce health disparities in Minnesota.**



**We develop, implement, and support culturally respectful programs designed to reduce the burden of chronic diseases & disability.**

**Center for Health Promotion**

**We collect, share, and use data and best practices to inform actions at the community, state, and national levels.**

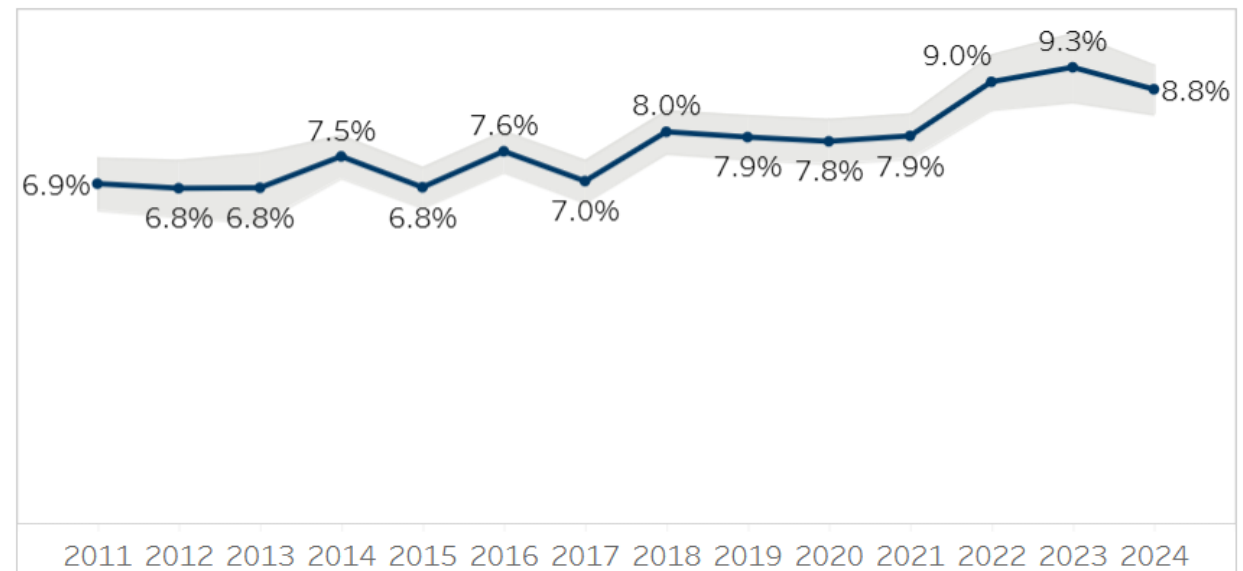


**We address social determinants of health in our work and collaborate with diverse partners to strengthen impact.**

# Diabetes Trends

- Overall prevalence of diabetes has increased in Minnesota over the past few decades (around 9%)
- Type 2 diabetes cases **nearly doubled** among US youth between 2001 and 2017
- One in three adults and adolescents 12-17 have prediabetes
- Diabetes disproportionately impacts some communities more than others
- Visit our webpage to find interactive dashboards for diabetes prevalence, hospitalizations, and mortality: <https://www.health.state.mn.us/diseases/chronic/data/index.html>

Age-Adjusted Percent of People with Diabetes by Year

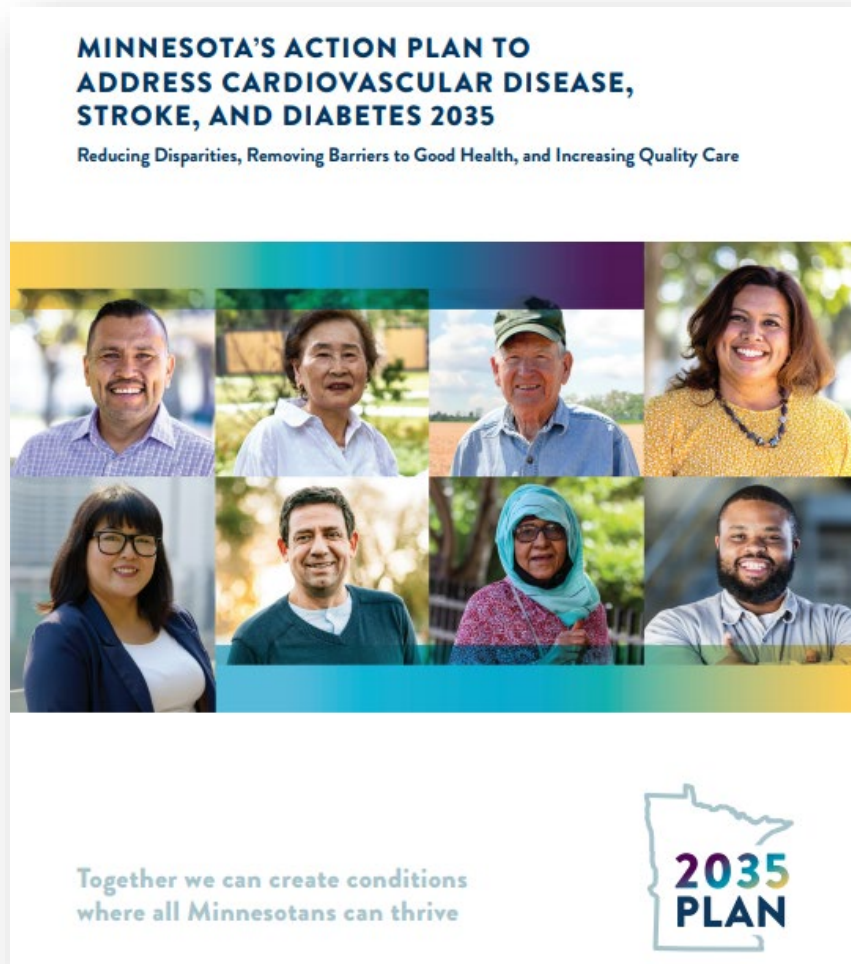


# Minnesota Department of Health (MDH) Diabetes Program

## CDC Funded Approaches to Advance Health Equity:

- Prevent diabetes in children and adults
- Improve diabetes care
- Increase screening for prediabetes, diabetes, chronic kidney disease and diabetic retinopathy
- Increase access to culturally appropriate education and resources
- Address social determinants of health (SDOH)





This plan is intended for all Minnesotans.

Any organization can identify areas of focus and work towards outcomes independently, or in partnership with others.

## Document

A PDF document with outcomes, strategies, and imbedded video success stories.



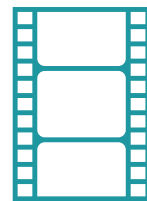
## Website

[Minnesota 2035 Plan - MN Dept. of Health](#)



## Success Stories

Series of videos and written stories highlighting existing work that aligns with the MN 2035 Plan. Found in document, on website, and on a YouTube playlist.



## Resources

A toolkit for communities to disseminate information about the MN 2035 Plan.

A communications toolkit to assist in communicating and promoting the MN 2035 Plan.



Reducing disparities, removing barriers to good health, and increasing quality care.





# Grant Request for Proposal

# RFP Timeline

Date	Event
May 13, 2026	RFP released
June 15, 2026	Last day to submit RFP questions
July 1, 2026 11:59 pm	Proposals due
August 2026	Notice of funding decisions
October 1, 2026 (estimated)	Grant begins
June 30, 2028	Grant ends

<b>Funding through June 30, 2028</b>	<b>Estimate</b>
Estimated amount to grant	\$75,000 annually
Estimated number of awards	2-3
Estimated range of award amounts	\$25,000-\$37,500 annually

## **Eligible applicants may include, but are not limited to:**

- Community-based organizations
- Nonprofit organizations
- Faith-based organizations
- Tribal governments
- Social service organizations
- Clinics or health care organizations
- Local government agencies

# Priority Applicants

This grant will serve people who experience food and nutrition insecurity, with an emphasis on reaching populations at higher risk of prediabetes or diabetes, including:

- U.S. born and other African American/Black communities
- American Indian communities
- Asian/Pacific Islander communities
- Hispanic/Latino/Latina/Latine communities
- People living with disabilities
- Rural communities: all areas of Minnesota outside the nine-county Twin Cities metropolitan area, encompassing rural communities, small towns, and regional economic centers.

# Definition of Terms

- Food and nutrition security:
  - Having reliable access to enough high-quality food to avoid hunger and stay healthy
- Food sovereignty:
  - The ability of communities to determine the quantity and quality of the food that they consume by controlling how their food is produced and distributed.

- **Population / system level** versus individual level
  - Develop a policy for food box distribution versus providing a food box
- Increase awareness, enrollment and retention for **DPP and DSMES**
  - [About the Diabetes Prevention Program](#)
  - [Diabetes Education](#)
- Address **food security** issues and barriers

# Program Background

- American Indian Minnesotans report having diabetes at the highest rate among all racial and ethnic groups. More than 21% of American Indian Minnesotans report having diabetes, compared to around 9% of all Minnesota adults.
- In 2024, a statewide survey found that 40% of households of color are food insecure.
- In Minnesota, 1 in 5 households can't afford the food they need.
- Nationwide, adults who experience food or nutrition insecurity are 2-3 times more likely to have diabetes.

# Eligible Projects

- Improve access and availability of appealing, affordable, safe, healthy, culturally appropriate foods and beverages
- Decrease access and intake of unhealthy foods and beverages
- Focus on improving health in populations (children and/or adults) disproportionately impacted by prediabetes and diabetes
- Utilize sustainable approaches such as establishing systems to connect people to food and nutrition information, education and support services.

# Previously Funded Projects

- A community-based organization is working at the systems and community levels to increase healthy food access among American Indians and work to prevent and manage diabetes by supporting cross-sector collaboration for nutrition and wellbeing education from an indigenous lens.
- A Local Public Health department developed a food shelf project incorporating Spanish language signage, culturally relevant foods and diabetes education
- A community-based organization built capacity for food and nutrition security assessment within the community and has developed partnerships with Local Public Health social workers to implement food, nutrition, and wellbeing screening and referral to community resources.

# Food Environment

- Higher access to healthy foods is associated with lower rates of type 2 diabetes
  - Grocery stores
  - Full-service restaurants
- Higher access to unhealthy foods is associated with higher rates of type 2 diabetes
  - Convenience stores
  - Fast-food restaurants



# Eligible Activities

Activities including, but not limited to those that:

- Build organizational capacity to support food and nutrition security among organizations serving populations disproportionately impacted by prediabetes and diabetes. (e.g. systems to connect people to food supports, food Rx)
- Increase understanding of how nutrition, and food access and security can help prevent type 2 diabetes and support diabetes management.
  - Provide informational brochure about the DPP in English and Spanish at food shelf location
- Establish and implement organizational policies to create healthier food environments.

# Mandatory Project Requirements

## Applicants must:

- Link activities to at least one outcome from Minnesota's Action Plan to Address Cardiovascular Disease, Stroke and Diabetes (MN 2035 Plan)
- Demonstrate a commitment to community engagement in the proposed project

## Minnesota's Action Plan to Address Cardiovascular Disease, Stroke, and Diabetes 2035

*Reducing disparities, removing barriers to good health, and increasing quality care*

### Cardiovascular Disease and Diabetes in Minnesota

Cardiovascular disease, stroke, and diabetes have big impacts on Minnesotans and Minnesota's communities. In Minnesota, not everyone has the same opportunity to be healthy. Due to systemic barriers, many communities are hit harder by these conditions.

Created with the support and input of the communities and organizations most impacted by these diseases, Minnesota's Action Plan to Address Cardiovascular Disease, Stroke, and Diabetes 2035 (MN 2035 Plan) is a road map and call to action for communities, health care organizations, community and organizational leaders, and individuals to collaborate to prevent, treat, and manage cardiovascular disease, stroke, and diabetes through 2035.



# Community Engagement & Collaboration

- Co-creation of materials, health education, or initiatives
- Actively seeking feedback or guidance from the community that the project aims to serve
- Gathering community members for listening sessions, forums, or planning purposes
- Engaging community members as leadership or guides for project scope
- Supporting outreach events or activities to excite, engage, or connect with community members
- Using community health assessments, surveys, or other existing community-developed resources to guide work

## Project outcomes could include but are not limited to:

- Improved food and nutrition security among populations greatly affected by prediabetes and diabetes.
- Decreased access of unhealthy foods and/or beverages.
- Increased collaboration to support healthy food and nutrition access.
- Increased awareness of nutrition for health and well-being, including for diabetes management or prevention, including awareness of DPP and/or DSMES programs.
- Improved policies or infrastructure to support nutrition and food security.
- Increased capacity to support food and nutrition security among populations disproportionately affected by prediabetes and diabetes.

With support and technical assistance from MDH, all awarded grantees will be required to:

- Develop relevant and meaningful evaluation measures
- Report on activities and measures on given timeline:

Due Date	Report Type
June 30, 2027	Year 1 Annual Report
January 31, 2028	Year 2 Progress Report
June 30, 2028	Year 2 Annual Report/Final Report





# Application Process and Instructions

# Application Requirements

You must submit all the following for your application to be considered complete:

1. Application Form
2. Work Plan
3. Budget
4. Due Diligence Review Form
5. Conflict of Interest Disclosure Form

# Application Instructions

- Submit via email to [health.diabetes@state.mn.us](mailto:health.diabetes@state.mn.us)
- Subject line: “RFP Application – [lead organization name]”
- Received no later than July 1, 2026 by 11:59 p.m. CT
- Plan ahead. Please do not wait! MDH cannot make exceptions for technical issues, illness, etc.

# Once you submit your application

MDH will send all applicants an email to inform them the application was received.

- NOTE: This email will not indicate whether the application is complete or incomplete; it will only acknowledge receipt of materials.

All applicants will be contacted by August with their award status, and if funded, the amount of funding.

# Application Review and Selection Process

MDH will make final decisions on all applications and will balance the recommendations by the review team with other factors, including but not limited to:

- Review committee scores
- Range of projects covering geographic areas
- Range of projects reaching different communities in Minnesota
- Total funding available

# Application Scoring

Numerical scoring system out of 100 possible points (**see: Attachment B: Scoring criteria**)

- Demographics (5 points)
- Organizational Capacity & Values (25 points)
- Project Narrative (20 points)
- Community Engagement & Collaboration (15 points)
- Evaluation & Impact (15 points)
- Work Plan (10 pts)
- Budget (10 pts)



The image shows a document titled "Attachment B: Grant Application Scoring Criteria" from the Minnesota Department of Health. It includes an overview of the numerical scoring system and a rating table with columns for "Rating or Score" and "Description".

Rating or Score	Description
Excellent or 5	Outstanding level of quality, significantly exceeds all aspects of the minimum requirements, high probability of success, no significant weaknesses
Very Good or 4	Substantial <u>exceeds</u> , meets in all aspects and in some cases exceeds, the minimum requirements, good probability of success, no significant weaknesses
Good or 3	<u>Satisfies</u> meets minimum requirements, probability of success, significant weaknesses, but correctable
Marginal or 2	Lack of essential information, low probability for success, significant weaknesses, but correctable
Unsatisfactory or 1	Fails to meet minimum requirements, little likelihood of success, needs major revision to make it acceptable
Blank/did not answer or 0	Did not answer the question or offered no response

Applicants are *strongly encouraged* to score their own application prior to submitting

# Submitting Questions to MDH

Future questions must be submitted in writing to [health.diabetes@state.mn.us](mailto:health.diabetes@state.mn.us); subject line “RFP Question”.

Questions and answers will be posted on the RFP webpage within 7 business days. Please submit questions **no later** than 4:30 p.m. Central Standard Time on June 15, 2026.

# Thank You!

**MDH Diabetes and Health Behavior Unit**

*health.diabetes@state.mn.us*