Community Health Endowment of Lincoln

2016-17
Applicant Information
as of March 2016

Notes

These guidelines describe the Community Health Endowment of Lincoln's funding priorities and preferences for the Fall 2016 and Spring 2017 grant cycles and provide additional information to help organizations successfully complete a CHE grant application.

In 2015, The Community Health Endowment (CHE), in collaboration with the Lincoln-Lancaster County Health Department, the City of Lincoln Urban Development Department and NeighborWorks Lincoln, released **Place Matters**, a community mapping project undertaken to better understand the role of "place" in health status and behaviors. This information yielded startling, yet valuable, information and greatly influenced CHE's funding priorities.

Informed by that work and the "Time to Act: Investing in the Health of Our Children and Communities" report by the Robert Wood Johnson Foundation Commission to Build a Healthier America, CHE believes that the hope of a healthier community lies in "health beyond health care." Therefore, the CHE Board of Trustees established the following Funding Priorities and Preferences:

Funding Priorities and Preferences
Revised March 2016

Priorities
CHE has three funding priority areas for 2016-17. By inviting applications that address these priorities, CHE strives to tackle recognized community challenges, create lasting impact, and make Lincoln the healthiest community in the nation.

Health Innovation
- Helping adults and children stay healthy outside of a clinical setting
- Embracing bold ideas and community-based solutions that enhance traditional models of health care and/or behavioral health care

Early Childhood Investments
- Reducing or eliminating childhood toxic stress
- Reducing childhood obesity
- Improving maternal health and birth outcomes

Prevention
- Fostering healthy behaviors that lead to improved health outcomes

Preferences
CHE believes that grant requests in the three priority areas can have an improved chance of success when certain factors are also considered. While including these factors in a grant application does not guarantee funding from CHE, applicants are encouraged to consider the following Funding Preferences whenever possible:

Cross-Sector Collaboration
- The application creates intentional linkages between cross-sector partners in areas such as health, housing, neighborhoods, finance/banking, economic development, education, and others.

Impact on Poverty
- The application recognizes the role poverty plays in causing or addressing a community issue.

Use of Local Data

- The application uses local data to inform the need, target group, or geographic area to be addressed.

Evidence-Based Models

- The application uses evidence-based models or proven approaches to inform program design and delivery.

Funding Calendars 2016-2017

Fall 2016 Grant Cycle

March 30, 2016, 1:30 p.m.	Applicant Workshop, CHE, 250 North 21st St.
March 31, 2016, 10 a.m.	Applicant Workshop, CHE, 250 North 21st St.
June 3, 2016, 12 noon	Stage I Applications Due
By July 29, 2016	Invitations Extended to Submit Stage II Applications
September 2, 2016, 12 noon	Stage II Applications Due
October 28, 2016	Grantees Notified
January 1, 2017	Grant Period Begins

Spring 2017 Grant Cycle

Week of October 17, 2016	Applicant Workshop, CHE, 250 North 21st St.
January 13, 2017, 12 noon	Stage I Applications Due
By March 3, 2017	Invitations Extended to Submit Stage II Applications
March 31, 2017, 12 noon	Stage II Applications Due
May 26, 2017	Grantees Notified
July 1, 2017	Grant Period Begins

Fall 2017 Grant Cycle

Week of April 3, 2017	Applicant Workshop, CHE, 250 North 21st St.
June 2, 2017, 12 noon	Stage I Applications Due
By July 21, 2017	Invitations Extended to Submit Stage II Applications
September 1, 2017 12 noon	Stage II Applications Due
By October 27, 2017	Grantees Notified
January 1, 2018	Grant Period Begins

Funding Categories

Targeted

- Must address one or more funding priorities
- Requests for matching funds for capital construction, facility renovation, and equipment are eligible
- Up to 3 years of support
- Any amount

Spark!
- Must address one or more funding priorities
- Ignite, test, take a risk, innovate, transform
- One-time, one-year, non-renewable
- Up to $20,000

Eligible to Apply
- 501(c)3 organizations
- Government and public agencies
- Dollar-for-dollar matching funds for capital projects

Not Eligible to Apply
- Individuals through direct financial contributions
- Projects outside Lincoln and surrounding area
- Laboratory or clinical research
- Non tax-exempt organizations
- Endowments
- Fundraising efforts
- Lobbying
- Debt reduction

Application Process

CHE uses an online application for all applications. The application form is accessible on the CHE website here: http://www.chelincoln.org/grant_program/ready_to_apply.html. CHE recommends that applicants compose their application in a word processing document and copy and paste into the online application. Please be aware that character counts can vary between programs; you may need to edit the application after you paste the information into the online form.

CHE uses a two-stage application process. Stage I (LOI) is a short application that will give CHE a good understanding of the proposed project and the difference you hope to make through the project without requiring a full application. Stage II is open to invited applicants only and requires a full application, work plan, detailed budget and supporting documents.

Application Questions

The following questions are included in each stage of the CHE application process. The number in parentheses is the number of characters allowed for each answer.

Stage I (LOI)
- Project Name* (100)
- Project Summary* (350)
- Total Request from CHE* (20)

For Targeted Applications Only:
- *Amount Requested Year 1**
- *Amount Requested Year 2**
- *Amount Requested Year 3**
- Total Project Cost* (20)
- Funding Priority* (Select all that apply)
- Project Description (2500) – How does your project address the priorities you've checked and why is this approach effective? Who will be impacted and why? When and where will your project happen?)
- Healthier Community (1500) – How will Lincoln be healthier if this project is funded?
- Partnerships, Outcomes and Sustainability (1500) – Who will help you? How will you measure success? How will you continue to fund the project when CHE funding is not available?
- Preliminary Budget (Excel template downloadable from online application)

Stage II
- *Questions prefill from Stage I Application.
- Population(s) to Be Served (4000)
- Project Overview and Strategy (10,000)
- Expected Barriers/Challenges (4000)
- Project Outcomes (4000)
- Applicant's Qualifications (2400)
- Applicant Status and Explanation (1000)
- Project Work Plan (download template from online application)
- Other Sources of Support (2000)
- Budget (download template from online application). Stage II is different from Stage I. CHE's recently revised budget forms include separate tabs for support/revenue and expenses. Make sure you complete a support/revenue tab AND an expense tab for each year of your proposed project.
- Budget Justification (1000)
- Sustainability (1200)
- Rationale (1200)
- Supporting Documents
  - Agency's Operating Budget
  - Income/Expense Statement and Balance Sheet
  - Financial Statements
  - Board of Directors Roster – include an aggregate summary of the race, ethnicity and gender composition
  - Letters of **COMMITMENT** – Include **only** letters that show evidence of commitment of **actual resources** to the project: money, in-kind donations, etc. Up to 3 letters.

Best Practices for Healthy Living Grant Applications

Applicants who seek funding for wellness and fitness programs must address the following best practices in their application. Use the narrative portions of the grant application and, in Stage II, the work plan to describe how the proposed program and your organization will incorporate these practices.

- **Connection to Participant Priorities**
    - How does the program relate to the current life situation of the proposed participants? How have you measured the interest of proposed participants?
- **Plan to Attract Participants**
    - How will you attract or encourage individuals to participate in the program?
- **Sense of Community Among Participants**
    - How will the participants develop a sense of community and accountability with one another and the program leaders during the program?
- **Behavior Change**
    - What elements in the program will go beyond exposure and education and support long-term change in habits and behaviors?
- **Objective Assessment of Real Health Outcomes**
    - How will participants be assessed before, during and after the program?
- **Focus on Long-Term Results**
    - Describe how this healthy living program fits in with other programming offered by your organization.
- **Demonstrated Commitment to the Wellness of Your Organization's Staff**
    - What healthy living or wellness programming does your organization currently offer to staff?
- **Demonstrated Commitment to Wellness Programming by Organizational Leadership**
    - The signature of your organization's leader on the application verifies that your President, CEO or Executive Director and Board are committed to healthy living programming.

Work Plan

Download the work plan template from the online application. Complete the work plan and upload the completed document into your application. Your work plan must be submitted on this form.

Stage II Form C: Workplan
(See Workplan Worksheet for guidance.)

Project Name:
Agency:
(Please do not change the font theme or size in the table.)

Project Objective(s)	Project Activity/Activities	Timeline	Evaluation Plan

Work Plan Guidance

Stage II Applications are expected to provide a workplan based on the *preferred* example of a Project Objective, Project Activity, Timeline and Evaluation Plan shown on the sample work plan that follows this section.

PROJECT OBJECTIVES
All project objectives should be measurable. Each objective should address:
   ◆   Who is involved?
   ◆   What are the desired outcomes?
   ◆   What are the criteria for success?
   ◆   When will the outcome occur?

PROJECT ACTIVITIES
Project Activities are the individual, specific tasks needed to accomplish each Project Objective. There may be multiple Project Activities for each Project Objective.

TIMELINE
The timeline should describe the specific implementation schedule for *each* activity.

EVALUATION PLAN
Evaluation is a necessary and practical activity that assesses whether the program's objectives are being met and provides evidence that you are making a difference. **Applicants who include a strong**

evaluation component in their work plan will be best positioned to compete for funding. Provide an evaluation plan for *each* Project Activity.

Stage II Form C: Work Plan
(See Work plan Worksheet for guidance.)

Project Name: Healthy Babies through Prenatal Care
Agency: Community Cares
(Please do not change the font theme or size in the table below.)

Project Objective(s)	Project Activity/Activities	Timeline	Evaluation Plan
Incomplete To improve prenatal care to Native American women.	Provide health services to Native American women.	7/1-16 – 6/30/17	Clinics held.
Marginal To increase the percentage of Native American who receive first trimester care.	Provide three prenatal clinics to a total of at least 60 Native American women.	Three clinics will be held by April 1, 2017.	Three clinics held for 60 Native American women.
Preferred By June 30, 2017, increase the percentage of Native American mothers in Lancaster County who receive first trimester prenatal care by 10% from 47.2% (Lancaster County Vital Statistics 2013) to 52% as reported by birth certificate data.	Provide at least three prenatal clinics which include a medical exam, nutrition education, breastfeeding education and well-baby teaching to a total of at least 60 Native American women who are pregnant and have not received first trimester prenatal care. (Responsible person: Susan La Flesche Picotte)	• Clinics will be held in September 2016 and January and March 2017. • Data will be analyzed in the final quarter of the year.	• Pre- and post-tests will be administered after each clinic to measure learning about prenatal care, nutrition, breastfeeding and well-baby care. • Birth certificate data will be collected and analyzed for all Native American births during the project year in Lancaster County to assess the impact of project services on overall access to prenatal care services by Native American women. (Responsible person: John Smith)

Budget Forms

CHE's recently revised budget forms allow applicants to more clearly identify sources of support and revenue. Support/Revenue and Expenses are on separate tabs on the budget form you will download from the online application. Please be sure to complete both tabs for each year of funding included in your application. Samples of the new budget forms follow this section.

	A	B	C	D	E	F
1	Agency Name:	-				
2						
3	Project Name:	-				
4						
5	Stage II					
6	Year Three Budget					
7	EXPENSES			Total		
8				Expenses	Requested from CHE	
9	Personnel		FTE			
10	Salaries (list postions and FTE)					
11				$0	$0	
12				$0	$0	
13				$0	$0	
14				$0	$0	
15				$0	$0	
16	Payroll Taxes/Benefits (specify)					
17				$0	$0	
18				$0	$0	
19				$0	$0	
20				$0	$0	
21				$0	$0	
22	Subtotal Personnel			$0	$0	
23	Operating					
24	Office Operations			$0	$0	
25	Telephone			$0	$0	
26	Postage			$0	$0	
27	Office Supplies/Equipment			$0	$0	
28	Printing			$0	$0	
29	Mileage			$0	$0	
30						
31	Training & Education			$0	$0	
32	Professional Development			$0	$0	
33	Travel			$0	$0	
34	Educational Materials			$0	$0	
35						
36						
37	Medical Supplies			$0	$0	
38						
39	Equipment			$0	$0	
40	Grant-Related Equipment			$0	$0	
41	Grant-Related Technology			$0	$0	
42						
43	Facility			$0	$0	
44	Rent			$0	$0	
45	Utilities			$0	$0	

Year One Support.Revenue / Year One Expenses / Year Two Support.Revenue / Year Two Expen

Agency Name:	-
Project Name:	-

Stage I
Year One Budget

SUPPORT/ REVENUE	Total Support/Revenue
Amount requested from CHE	*$0*
Cash Committed from Other Sources	
(Identify source(s) on separate lines below)	
	$0
	$0
	$0
Cash Anticipated from Other Sources	
(Identify source(s) on separate lines below)	
	$0
	$0
	$0
Project-Related Income/Revenue	
(Identify source(s) on separate lines below)	
	$0
	$0
	$0
Project-Related In-Kind Support	
(Identify source(s) on separate lines below)	
	$0
	$0
	$0
Other Support	
(Identify source(s) on separate lines below)	
	$0
	$0
	$0
Total Support/Revenue	**$0**
Click on Expenses Tab to complete your proposed budget.	
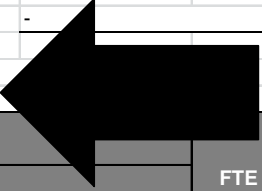
The Support/Revenue budget form is the same for Stage I and Stage II.

Agency Name:	-			
Project Name:	-			

Stage I
Year One Budget

EXPENSES			Total Expenses	Requested from CHE
Personnel		FTE		
Salaries (list positions and FTE)				
			$0	$0
			$0	$0
			$0	$0
			$0	$0
			$0	$0
Payroll Taxes/Benefits (specify)				
			$0	$0
			$0	$0
			$0	$0
			$0	$0
			$0	$0
Subtotal Personnel			$0	$0
Operating				
Office Operations			$0	$0
(Telephone, postage, office				
supplies/equipment, printing, mileage)				
Training & Education			$0	$0
(Professional development, travel,				
educational materials)				
Medical Supplies			$0	$0
Equipment			$0	$0
(Equipment, technology)				
Facility			$0	$0
(Rent/Utilities)				
Facility Improvement				
Construction			$0	$0
Facility-Related Equipment			$0	$0
Professional Services (Architect, etc.)			$0	$0
Other (Identify)				
			$0	$0
			$0	$0
			$0	$0
			$0	$0
Subtotal Operating			$0	$0
Indirect (*Not to exceed 10% of request from CHE*)			$0	$0
Total Expenses			**$0**	**$0**
DIFFERENCE				
TOTAL SUPPORT/REVENUE			**$0**	**$0**
(TOTAL EXPENSES)			**$0**	**$0**
DIFFERENCE			**$0**	**$0**

Explain difference in the Budget Narrative.

The Expenses budget form for Stage II asks for more detail than the form submitted in Stage I.

Agency Name:	-			
Project Name:	-			
Stage II **Year One Budget**				
EXPENSES			**Total Expenses**	**Requested from CHE**
Personnel		**FTE**		
Salaries (list postions and FTE)				
			$0	$0
			$0	$0
			$0	$0
			$0	$0
			$0	$0
Payroll Taxes/Benefits (specify)				
			$0	$0
			$0	$0
			$0	$0
			$0	$0
			$0	$0
Subtotal Personnel			$0	$0
Operating				
Office Operations			$0	$0
Telephone			$0	$0
Postage			$0	$0
Office Supplies/Equipment			$0	$0
Printing			$0	$0
Mileage			$0	$0
Training & Education			$0	$0
Professional Development			$0	$0
Travel			$0	$0
Educational Materials			$0	$0
Medical Supplies			$0	$0
Equipment			$0	$0
Grant-Related Equipment			$0	$0
Grant-Related Technology			$0	$0
Facility			$0	$0
Rent			$0	$0
Utilities			$0	$0
Facility Improvement			$0	$0
Construction			$0	$0
Facility-Related Equipment			$0	$0
Professional Services (Architect, etc.)			$0	$0
Other (Identify)			$0	$0
			$0	$0
			$0	$0
			$0	$0
			$0	$0
Subtotal Operating			$0	$0
Indirect (Not to exceed 10% of request from CHE)			$0	$0
Total Expenses			**$0**	**$0**
DIFFERENCE				
TOTAL SUPPORT/REVENUE			$0	$0
(TOTAL EXPENSES)			$0	$0
DIFFERENCE			$0	$0
Explain difference in the Budget Narrative.				

Frequently Asked Budget Questions

The Stage I Application requires a less detailed budget than the Stage II Application. Make sure to download the appropriate template from the online application form. Here are answers to some frequently asked budget questions:

Do you want to see the total project cost or just the funding we are requesting from CHE?
Please include the TOTAL cost of the project.

Should we count in-kind contributions in the total project cost?
Yes. Include equipment, supplies, staffing, rent, volunteers or other non-monetary support that is a direct benefit to the project. In-kind contributions can be provided by the requesting organization or project partners. In-kind contributions cover costs that are necessary for the project to happen.

How do we show in-kind contributions?
The budget template for both Stage I and II Applications includes a column for recording in-kind contributions. In Stage II, if resources – in-kind or otherwise – are being provided by project partners, make sure you include a letter of commitment from the partner organization.

Does CHE fund operating costs?
Yes.

Does CHE fund indirect costs?
Yes. CHE considers indirect costs to be costs associated with administrative overhead, fiscal/accounting services, and other general, operational and agency support that are not readily assignable to a specific project or program. The amount you request for indirect costs should not exceed 10% of your total request from CHE.

Does CHE require matching funds?
CHE requires a match only for capital, renovation or equipment grants. A match is not required for Spark! grants. Cash or donated goods or services contributed by a third party count as matching funds. General operating funds or in-kind contributions by the applicant do NOT count as matching funds. Donated goods and services received prior to the grant period may be considered match if the goods and services are fully dedicated to the project funded by CHE.

Application Assistance

CHE staff are available to answer questions about the funding priorities and preferences and the application process. Additional information is also available on the CHE website, www.chelincoln.org.

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