

# Community Building Initiative

*FY16 Request for Proposals*

**Implementation Grant**

**Proposals must be submitted online by  
12:00 noon on July 24, 2015**

# Contents

	DESCRIPTION	PAGE
<b>Grant Proposal Information</b>		
	Mission Statement	3
	The Community Building Initiative	3
	Community Building Initiative Model	5
	Relationship of CBI with Local SJH Hospitals	9
	SJH Community Benefit Lead Contact Information	10
	Funding and Expectations	11
	Eligibility Criteria	11
	Proposal Timeline	14
	Proposal Submission Requirements	15
	Online Application Instructions	16
<b>Sample Proposal Documents</b>		
	Community Problem Selection Process Form	19
	Plan for Implementation Form	20
	Proposal Narrative	21
	Budget Forms	22
	Other Funding Sources	24
	Budget Narrative	27
	Covenant of Collaboration Template	28

## **St. Joseph Health Community Partnership Fund Mission Statement**

*The Mission of the St. Joseph Health Community Partnership Fund, as an extension of Christ's healing ministry, is to provide funding and assistance for improving the health and wellbeing of the economically poor, and utilize the strengths and diversity of our neighbors to build vibrant communities.*

*This is accomplished by managing and allocating resources to communities and partners of goodwill engaged in innovative and effective initiatives to serve the common good.*

The Mission of the St. Joseph Health Community Partnership Fund directly supports the Mission of St. Joseph Health (SJH) which is *"to extend the healing ministry of Jesus in the tradition of the Sisters of St. Joseph of Orange by continually improving the health and quality of life of people in the communities we serve."*

In 1986, St. Joseph Health Community Partnership Fund (The Fund) created a plan and began an effort to further its commitment to neighbors in need. With a vision of reaching beyond the walls of its healthcare facilities and transcending traditional efforts of providing free care for those in need of acute services, SJH created the St. Joseph Health Community Partnership Fund to improve the health of low income individuals residing in local communities. Policy 13 in our foundational document, *A Vision of Values*, formalizes the process through which all system ministries return 10 percent of their net income to The Fund to support outreach efforts for the materially poor.

The Fund supports programs that exemplify the four core values of St. Joseph Health: Dignity, Service, Excellence and Justice. The Fund will not knowingly award grants to organizations that discriminate with respect to age, gender, race, creed, or color, or follow practices which may be contrary to the "Ethical and Religious Directives for Catholic Health Care Services" or the values of St. Joseph Health.

### **The Community Building Initiative**

#### **Background**

The Community Building Initiative (CBI) was created in 2000 as a major commitment to meeting the Community Partnership Fund's mission. The Fund's desired long-term vision for its Community Building Initiative *is the development of resident-based capacity to determine and implement positive change in low income communities.* This capacity is

developed through community-based work on one issue of concern to the community during the four years of funding (*1 year planning grant, 3 year implementation grant*).

### **Lessons Learned**

The Fund's Community Building Initiative model has been developed based on national evidence regarding effective community building approaches. In addition, the Fund's experience over the first 14 years of CBI has validated this model as appropriate for low income communities around SJH hospitals. This experience with the model has shown that specific factors contribute to the success of CBI initiatives:

- Lead organization expertise and commitment to community building and collaboration with other partners;
- Limited area of topic focus, to maximize progress on community capacity development;
- Development of multiple resident leaders, to ensure succession over time;
- Careful selection and application of appropriate approaches to community engagement and leadership development;
- Engagement of governing boards of participating agencies, to assist with bridge building and ensure continuity of organizational investment;
- Implementation of a comprehensive range of strategies designed to impact community-level problems.

### **Impact of CBI Projects**

During the planning year, projects selected a topic as the focus for the community building work based on a well-defined Community Problem Selection Process. The projects are in the process of establishing community and organizational collaboration structures and processes, and developing a three-year plan with measures. If funded for implementation, the projects will work on the four CBI Grant Pillars (see below) over the next three years to build measurable community capacity and develop a longer term sustainability plan.

Measurable impact by the CBI project on community indicators specific to this selected goal is a required result after four years of funding (*1 year planning and 3 years implementation*). During the planning phase, grantees will identify two types of community indicators, one Outcome Measure and intermediate Strategy Measures. Funded projects are expected to track and report on these results. The Fund realizes that measurable impact on the Outcome might require additional time beyond CBI funding. However, progress is expected on intermediate Strategy Measures during the three year implementation funding.

### **Required CBI Grant Pillars**

The following four interdependent Pillars must be included in the implementation years of CBI support:

1. **Engagement of community residents** in decision making, including identifying an issue of concern, mobilizing to take appropriate action, and providing support for ongoing involvement in their communities;
2. **Development of community leaders** who have the capacity to assume leadership roles in their communities and to represent their communities to external decision makers;
3. **Collaboration among community and organizational partners**, to work together and with community residents to develop and implement a work plan for the project;
4. **Bridge building with external decision makers** (such as city council members, school board members), to develop relationships and interest to support the community's approach to addressing the identified problem.

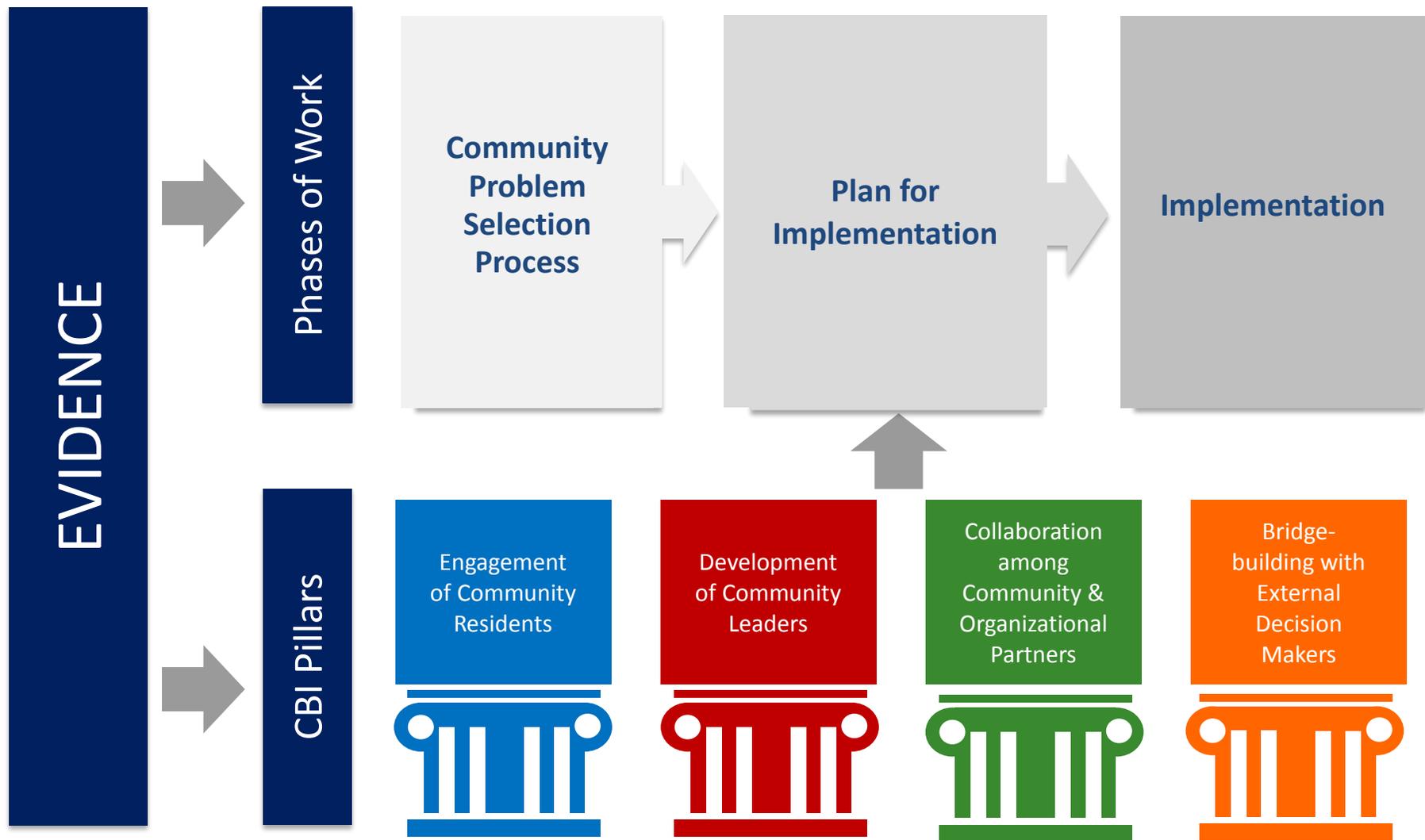
Every CBI grant is expected to address these four Pillars in its proposal and in its work.

Grantees submit reports every six months on their progress in relation to these four Pillars.

### **Community Building Initiative Model**

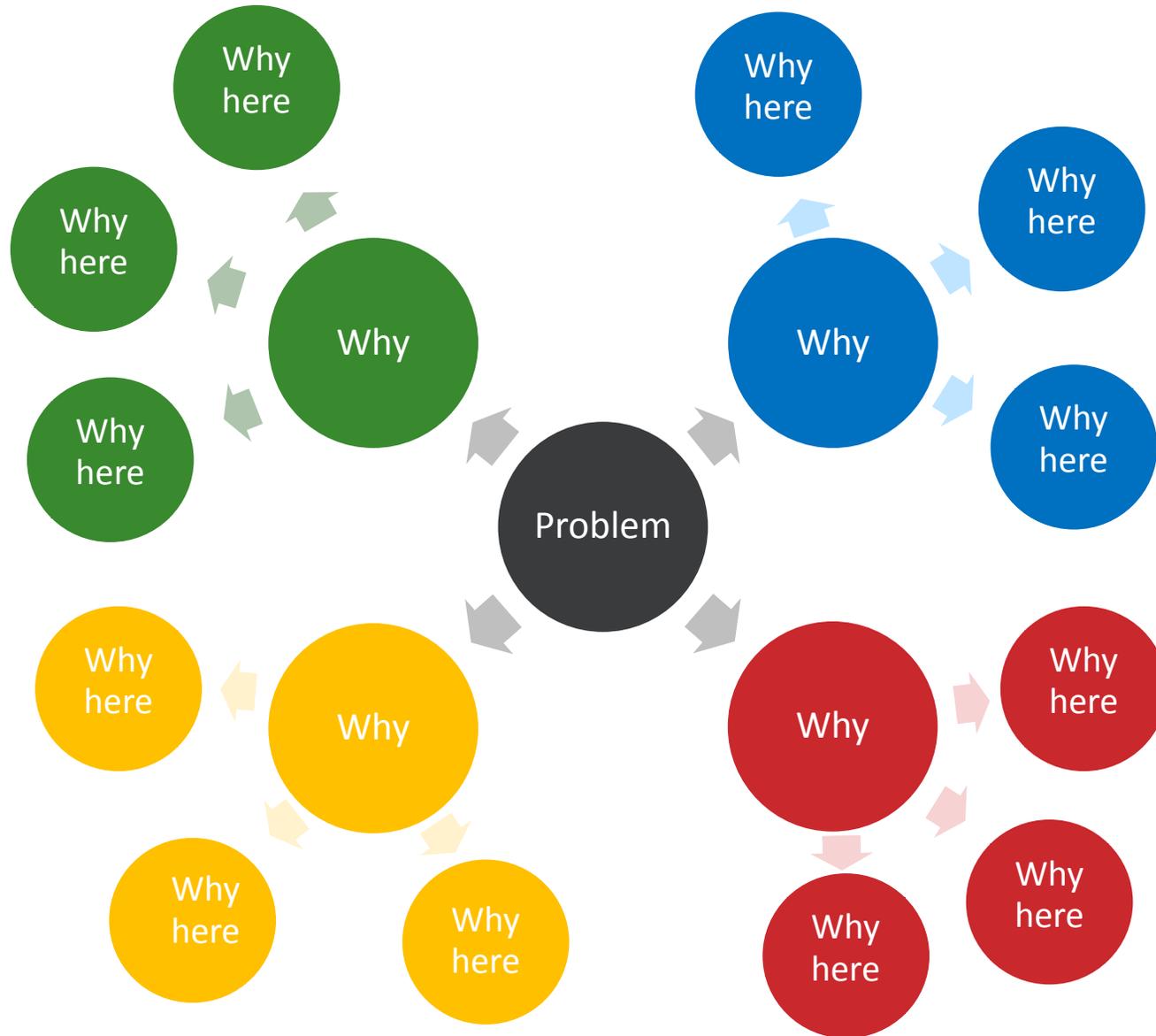
The following three pages provide a visual representation of the Community Building Initiative model. Projects will complete the Community Problem Selection Process and Plan for implementation templates as part of the RFP process. Specific elements related to the model were covered at the May 21-22, 2015 CBI Training on developing the Plan for Implementation.

# Community Building Initiative Model



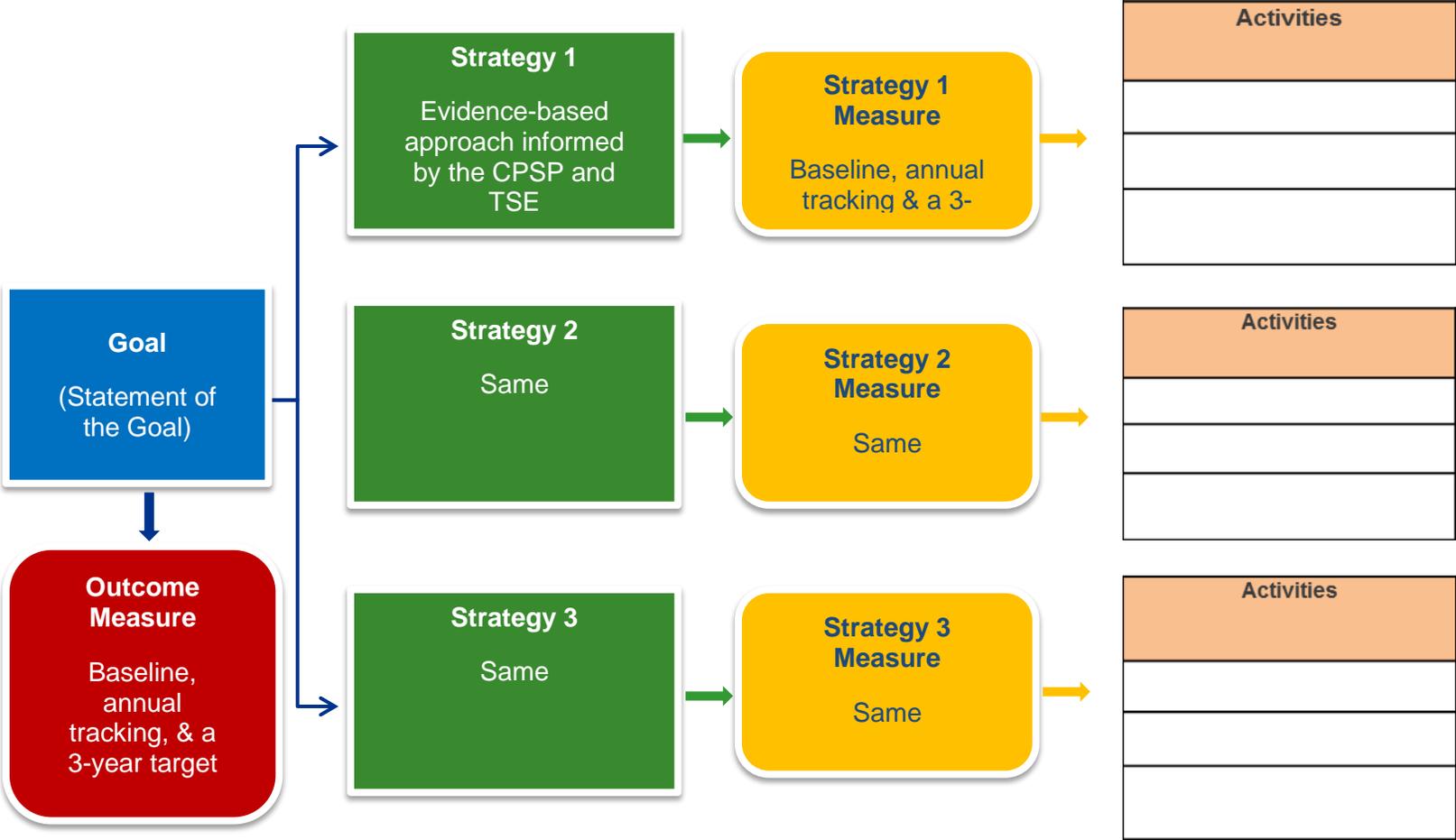
The model highlights components that each potential grantee must engage in the development of projects in their local community. The elements ensure that the community and collaborative have gone through a thoughtful and informed process in selecting the area of focus and have referenced evidence-based research and data during the Community Problem Selection Process to create a 3-year plan. The CBI Pillars serve as the foundation of the model and demonstrate the breadth and vision of the St. Joseph Health Community Building Initiative.

# Community Problem Selection Process



The Community Problem Selection Process template must be completed as part of the grant proposal process. This template, along with the proposal narrative, will allow the Fund and reviewers to have a better understanding of your selected problem and how it is manifesting in your local community.

# Plan for Implementation



The Plan for Implementation must be completed as part of the grant proposal process. Communities that have received a planning grant will work with their identified coach to define a goal and develop a local plan, based on the selected Problem that they have identified and using Topic Specific Evidence to be provided by their coach. Applicants will be asked to identify a Goal, long-term Outcome Measure, Strategies and Strategy Measures as part of the implementation RFP grant process. The Activity portion of the Plan for Implementation will be completed after Implementation grants are awarded.

## Relationship of CBI with Local SJH Hospitals

The Community Building Initiative provides an excellent opportunity for collaboration between individual community building initiatives and the local SJH hospitals' Community Benefit plans. The financial resources for the CBI grants have been provided to The Fund by the California hospitals, and therefore their involvement in selecting and implementing the local CBI project is highly appropriate. In addition, the local SJH hospitals have conducted community needs assessments and developed Community Benefit Plans for the service area. Thus, there are many opportunities for shared learning and possible synergy between the CBI projects and the hospitals' Community Benefit work.

The following steps will ensure that opportunities for successful partnership between CBI projects and the local SJH hospitals are identified and implemented:

1. The Fund and hospital Community Benefit (CB) leadership will agree on selected communities and lead agencies from which to invite proposals for CBI.
2. Agencies responding to the invitation must confer with the hospital CB leadership before the implementation proposal is submitted to identify the hospital's desired level of involvement in the project.
3. Agencies responding to the invitation must agree on an approach to update SJH hospital Community Benefit leadership on an ongoing basis.
4. The hospital Vice President of Mission Integration must sign the Proposal Endorsement form and SJH hospital Covenant of Collaboration before submittal.
5. Hospital CB leadership will be involved in the proposal review process.

## **SJH Community Benefit Lead Contact Information**

Please be sure to contact the Community Benefit Lead identified in your area (listed below) to inform them of your intent to apply and schedule time to discuss your project. Your proposed CBI project must include a clear and mutually agreed upon partnership with your local SJH Hospital. **You will also need to coordinate with the Community Benefit Lead at your local SJH hospital to obtain the required approval signature from the SJH Hospital's Vice President of Mission Integration for the *Covenant of Collaboration* (see page 29).**

Please note that it is the applicant's responsibility to obtain the VP of Mission Integration's signature for the Covenant of Collaboration – SJH Hospital and Community Partnership Fund staff will **not** obtain signatures for applicants after the application has been submitted.

### **Contact Information for SJH Hospitals and Community Benefit Leads:**

#### **South Orange County**

Mission Hospital (Mission Viejo & Laguna Beach)  
Contact: Christy Cornwall  
Director Community Benefit  
[Christy.Cornwall@stjoe.org](mailto:Christy.Cornwall@stjoe.org)  
949.364.1400, x4778

#### **North Orange County**

St. Jude Medical Center  
Contact: Barry Ross  
VP, Healthy Communities  
[Barry.Ross@stjoe.org](mailto:Barry.Ross@stjoe.org)  
714.992.3000, x3996

#### **Sonoma County**

St. Joseph Health System, Sonoma County  
Contact: Matthew Ingram  
Director, Healthy Communities  
[Matthew.Ingram@stjoe.org](mailto:Matthew.Ingram@stjoe.org)  
707.522.1552

#### **Humboldt, Trinity, Lake and Mendocino Counties**

St. Joseph Health System, Humboldt County  
Contact : Martha Shanahan  
Director, Community Benefit and Advocacy  
[Martha.Shanahan@stjoe.org](mailto:Martha.Shanahan@stjoe.org)  
707.445.8121, x7450

#### **Central Orange County**

St. Joseph Hospital, Orange  
Contact: Cecilia Bustamante-Pixa  
Director, Community Benefit  
[Cecilia.Bustamante-Pixa@stjoe.org](mailto:Cecilia.Bustamante-Pixa@stjoe.org)  
714.771.8000, x17535

#### **San Bernardino County**

St. Mary Medical Center  
Contact: Kevin Mahany  
Director, Healthy Communities  
[Kevin.Mahany@stjoe.org](mailto:Kevin.Mahany@stjoe.org)  
760.946.8120

#### **Napa County**

Queen of the Valley Medical Center  
Contact: Dana Codron  
Executive Director, Community Outreach  
[Dana.Codron@stjoe.org](mailto:Dana.Codron@stjoe.org)  
707.251.2013

## Funding and Expectations

Eligible applicants are grantees that were awarded a planning grant in FY2015. The implementation grant may provide up to **\$300,000** over three years (up to \$100,000 per year), assuming adequate progress is made during each year of implementation. The lead organization for the project serves as the fiscal agent for the project, and is also responsible for facilitating the work to complete the expectations outlined below.

### **Expectations for 3-Year Implementation Grant:**

1. Identification and support of a key staff person to lead and implement the CBI;
2. Continued development of a group of resident-based community leaders;
3. Continued engagement of community residents;
4. Continued collaboration with other partners and SJH hospital;
5. Contact with key external decision-makers, to communicate and develop support for the topic and for the community building work;
6. Development of a plan using the CBI Plan for Implementation;
7. Target setting, and tracking of a long term measurable Outcome and Strategy Measures on selected topic;
8. Partnership with coaches for CBI support and technical assistance;
9. Development and initiation of sustainability plan to continue project beyond grant support from Community Partnership Fund;
10. Submittal of progress reports every 6 months;
11. Participation in cross-site learning opportunities with The Fund.

### **Sustainability**

Given the long-term vision of this initiative, grantees will be expected to work on approaches toward sustainability of the community building work during grant funding, to ensure continuity and longevity of the initiative. The technical assistance coaches will provide support to funded projects to ensure a strategic sustainability plan.

## **Eligibility Criteria**

**Applicant organizations must receive an invitation from The Fund to apply for the FY2016 implementation grant cycle.** The invitation will be to serve as the lead organization for a collaborative Community Building Initiative project for a specified community within the service area of a California SJH hospital. Progress in the planning year determines whether the lead organization is asked to apply for a three year implementation grant. Additional eligibility criteria include:

### Community Fit

1. Proposed projects must serve a geographically identifiable low income community in the service areas of SJH California hospitals, with the majority of the community at or below 200% of the federal poverty level.

Size of Family Unit	200% of Federal Poverty Level
1	\$23,540
2	\$31,860
3	\$40,180
4	\$48,500
5	\$56,820
6	\$65,140
7	\$73,460
8	\$81,780

*Source: Federal Register, January 2015*

2. There must be active community participation in the Community Problem Selection Process and in the creation of the Plan for Implementation.
3. There must be some interest among external decision-makers to engage with this community.

### Lead Organization Capacity

1. Must be a 501(c)3 status nonprofit organization with appropriate experience in developing community capacity with low income communities;
2. Readiness to work within the St. Joseph Health mission, vision, and values (provided on page 13);
3. Practices that are not contrary to the Ethical and Religious Directives for Catholic Health Care Services. This document can be found at: <http://www.usccb.org/issues-and-action/human-life-and-dignity/health-care/upload/Ethical-Religious-Directives-Catholic-Health-Care-Services-fifth-edition-2009.pdf> );
4. Readiness to work within The Fund's CBI model;
5. Organizational mission and staff expertise with strong community building background;
6. Experience with diverse, low income communities, including bilingual skills if needed;
7. Experience implementing community-level system change strategies;
8. Current connections with selected community;
9. Effective collaborator with other organizations;
10. Effective collaborator with SJH hospital Community Benefit leadership;
11. Solid governance structure, with linkage to selected community;
12. Financially viable organization;
13. Solid administrative and financial systems.

# St. Joseph Health Directional Statement

All funded Community Building Initiative projects must exhibit readiness to work within the St. Joseph Health mission, vision, and values, provided below.

ST. JOSEPH HEALTH SYSTEM			
Mission	Values	Vision	Strategic Outcome Goals
<p><b>Why we exist</b></p> <p>To extend the healing ministry of Jesus in the tradition of the Sisters of St. Joseph of Orange by continually improving the health and quality of life of people in the communities we serve.</p>	<p><b>What we believe in</b></p> <p><b>DIGNITY</b> We respect each person as an inherently valuable member of the human community and as a unique expression of life.</p> <p><b>EXCELLENCE</b> We foster personal and professional development, accountability, innovation, teamwork, and commitment to quality.</p> <p><b>SERVICE</b> We bring together people who recognize that every interaction is a unique opportunity to serve one another, the community, and society.</p> <p><b>JUSTICE</b> We advocate for systems and structures that are attuned to the needs of the vulnerable and disadvantaged and that promote a sense of community among all persons.</p>	<p><b>What we are striving to become in the next ten years</b></p> <p>To bring people together to provide compassionate care, promote health improvement, and create healthy communities.</p>	<p><b>Transformational statements</b></p> <p>We will transition our business model to a balance of great hospitals and great community care.</p> <p>We will embrace both an illness and a wellness model.</p> <p><b>Major priorities spanning the next ten years</b></p> <p><b>SACRED ENCOUNTERS</b> Every interaction will be experienced as a sacred encounter.</p> <p><b>PERFECT CARE</b> All patients will receive perfect care.</p> <p><b>HEALTHIEST COMMUNITIES</b> One hundred percent of the communities we serve will be in the top decile for healthiest communities.</p>

## Proposal Timeline

The proposal timeline is provided below. **Grant proposals will be due on July 24, 2015 by 12:00 noon.**

<b>June 1, 2015</b>	Invitations for implementation grant proposals issued and RFP released.
<b>By June 19, 2015</b>	Applicants must schedule a phone call with Community Partnership Fund staff, to take place by June 19 <sup>th</sup> , regarding their intent to apply and any application questions. Contact the Fund at <a href="mailto:communitypartnershipfund@stjoe.org">communitypartnershipfund@stjoe.org</a> or 949.381.4816 to schedule the call.
<b>July 24, 2015</b>	<b>Implementation grant proposals due online by 12:00 noon.</b>
<b>By September 18, 2015</b>	Announcement of funded implementation grants.
<b>October 1, 2015</b>	Implementation grant funding begins.

## Proposal Submission Requirements

Applicants are required to submit their proposals using the St. Joseph Health Community Partnership Fund's online system. Invitations to apply online were sent directly to the lead organizations via email.

**Proposals are due online no later than 12:00 pm (noon) on July 24, 2015.** The online application questions must be completed and the required documents uploaded by the deadline for the proposal to be considered complete. Applicants are encouraged to become familiar with the online system prior to submitting proposals. **It is strongly recommended that applicants complete their online applications prior to the deadline** in case of any technical difficulties.

### Submission Requirements

**Online proposals must include the following:**

1. Completion of application information on online system
2. Required Proposal Documents
3. Required Organizational Documents

If any of the elements required for your application are missing or incomplete, the proposal will not be considered for funding.

### Required Proposal Documents

Samples of the Required Proposal Documents are included with this RFP as a reference only. The actual forms to be used were included with the email invitation to apply, and are also located on the online application website. The Required Proposal Documents are in a format that can be saved to your computer, filled out, and then uploaded to the online application system. **Please do not change the original title of the documents when saving them onto your computer.** The required documents include the following:

- Community Problem Selection Process Form (provide form completed at May 21-22, 2015 Plan for Implementation training)
- Plan for Implementation Form (provide form completed at May 21-22, 2015 Plan for Implementation training)
- Proposal Narrative
- Budget Documents:
  - Budget Forms for Years 1-3
  - Other Funding Sources Form
  - Budget Narrative Form
- At least **two** Covenants of Collaboration are required as part of the application (scanned together as one document):
  - One covenant with SJH Hospital (signed by Executive Director of lead organization and VP of Mission Integration of local SJH Hospital)
  - At least one covenant with another major CBI project partner (signed by Executive Director of lead organization and Executive Director/CEO of partner organization)

### **Required Organizational Documents**

The following documents are required if the lead organization is **not** an entity of St. Joseph Health. Please upload each as a separate document to the online system. Documents can be in Microsoft Word, Microsoft Excel, or scanned as a .pdf document. Please provide the most recent version of each document.

- IRS Form 990
- Most recent Audited Financial Statements (required if lead organization's overall budget is at least \$2 million)
- Lead Organization Budget for current fiscal year
- Balance Sheet (most recent)
- Income Statement (most recent)
- Statement of Cash Flows (most recent)
- Staff Resumes – Include resumes of lead organization CEO, CBI Lead (or potential candidates for the role) and any supervisory staff who will be involved with the CBI and provide direction to the CBI lead. If a new position will be created to support the CBI, please include job description(s). *Please note that the Fund will need to be involved in the final selection of the lead CBI staff.*
- List of Board members – Include information on any connections to targeted community (residence, job, etc.)

**NOTE: If any required documents are missing from the proposal submitted online, the submission will be considered incomplete and will not be considered for funding. Also, proposals submitted online are time stamped, and those received after the deadline will not be considered for funding.**

## **Online Application Instructions**

1. To apply online with your proposal, please use the following website link : [www.stjhs.org/CBI-Implementation](http://www.stjhs.org/CBI-Implementation). This will lead you to the Community Partnership Fund website page that contains the link to the online application.
2. **Before beginning the online application, please open and save the Required Proposal Documents. These documents were included with the email invitation to submit a proposal and are also located at the bottom of the online application website.** These forms include the following:
  - Community Problem Selection Process Form
  - Plan for Implementation Form
  - Proposal Narrative
  - Budget Documents:
    - Budget Forms for Years 1-3
    - Other Funding Sources Form
    - Budget Narrative Form
  - Covenant of Collaboration Template
3. To start a new application, click on the button labeled **“Start New Application”** on the website. You will be directed to the online application page.

4. Once inside the online application, you will be asked to create an account using your email address and a personal password, or use an existing account. When creating a new account, **please keep a record of your account's email address and password for future use.** You will receive a confirmation email with your email address and password, and a link to your application. If you previously created an account to apply for a Community Partnership Fund grant initiative, please use the same email and password associated with that account. If you have forgotten your password, click on "Forgot your password? Click here."
5. After you create your account, or enter your existing account information, you will be taken to a screen with questions regarding the lead organization and the proposed program. Please answer these questions. Please note that you will not be able to submit your application if any questions marked with a red asterisk (\*) are not answered.
6. On page 4 of the online application, you will be asked to attach the required documents to your application.
  - a. **Required Proposal Documents** – these forms were included with the email invitation to apply, and on the online application website. Please save these forms onto your computer, complete, and then upload them to the online application system. For each document, click "Browse" to search through your computer's files to find the document, as you would an attachment for an email. Double click on the identified document's name. Click "Upload" to attach the document to your application. (The list of Required Proposal Documents is listed on page 15.)
  - b. **Required Organizational Documents** – **required if the lead organization is not an entity of the St. Joseph Health.** For each document, click "Browse" to search through your computer's files to find the document, as you would an attachment for an email. Double click on the identified document's name. Click "Upload" to attach the document to your application. (The list of Required Organizational Documents is listed on page 16.)
7. You may stop working on your application, save it, and return to finish it at any time before the submission deadline. To return to your application, go to the website address provided and click on the button labeled "**Return to Application.**" After saving your application, you can click on the "Exit" link at the top of the application page, or simply close your web browser to exit.
8. **To submit your application, click on "Review and Submit."** If your application is incomplete, the online system will inform you what needs to be completed. To go back and complete any part of the online application, click on page 1, 2, 3, or 4 at the top of the screen, and complete the required items. Please be sure to give yourself plenty of time to complete the application and upload required documents, as **applications will not be accepted after 12:00 pm (noon) on July 24, 2015.**

**If you have any questions about the online application submission process, please contact us at [communitypartnershipfund@stjoe.org](mailto:communitypartnershipfund@stjoe.org) or 949.381.4816.**

## Online Application Checklist

Following is a checklist of the steps that must be completed for the online application. Please check off each item before submitting your application to ensure it is complete and will be reviewed for funding.

- Online application information completed  
(website link: [www.stjhs.org/CBI-Implementation](http://www.stjhs.org/CBI-Implementation))
- Community Problem Selection Process Form completed and uploaded to online system
- Plan for Implementation Form completed and uploaded to online system
- Proposal Narrative completed and uploaded to online system
- Budget Documents (Budget Forms Years 1-3, Other Funding Sources Form, and Budget Narrative Form) completed and uploaded to online system (include all forms as one document)
- At least two Covenants of Collaboration (one with the SJH Hospital and at least one with another major CBI project partner), completed, signed, scanned into one document, and uploaded to online system
- Required Organizational Documents uploaded to online system (required if the lead organization is not an entity of St. Joseph Health):
  - IRS Form 990
  - Most recent Audited Financial Statements (required if lead organization's overall budget is at least \$2 million)
  - Lead Organization Budget for current fiscal year
  - Balance Sheet (most recent)
  - Income Statement (most recent)
  - Statement of Cash Flows (most recent)
  - Staff resumes for lead organization
  - List of Board members

**NOTE: IF ANY REQUIRED DOCUMENTS ARE MISSING IN THE PROPOSAL PACKAGE, SUBMISSION WILL BE CONSIDERED INCOMPLETE AND WILL BE DISQUALIFIED.**

## Sample Proposal Forms

The sample proposal forms on the following pages are provided as a **reference only** so that applicants can familiarize themselves with the proposal questions. The original forms to be completed were included with the email invitation to apply, and are included on the online application website ([www.stjhs.org/CBI-Implementation](http://www.stjhs.org/CBI-Implementation)). Please save the forms to your computer, complete them, and upload them onto the online application system.

### Community Building Initiative Model Templates

There are two CBI model templates to be included with your grant proposal: the “Community Problem Selection Process” and the “Plan for Implementation”. You may use the forms provided with your invitation email, or use the forms already completed through the May 21-22, 2015 Plan for Implementation training. When completing these forms, please provide brief descriptions – you will have the opportunity to provide more detail in the Proposal Narrative form. Please note that you do not need to complete the activity sections of the “Plan for Implementation”. Work on the activity sections of the plan will start once implementation grants have been awarded.

### Covenants of Collaboration

Applicants must collaborate with **at least two** organizations in implementing their proposed projects. One of the organizations **must** be an SJH hospital. Applicants must include signed Covenants of Collaboration reflecting the roles, responsibilities and specific activities to which each participating organization is committed to help support the implementation grant. Please print the Covenants of Collaboration on the lead organization’s letterhead.

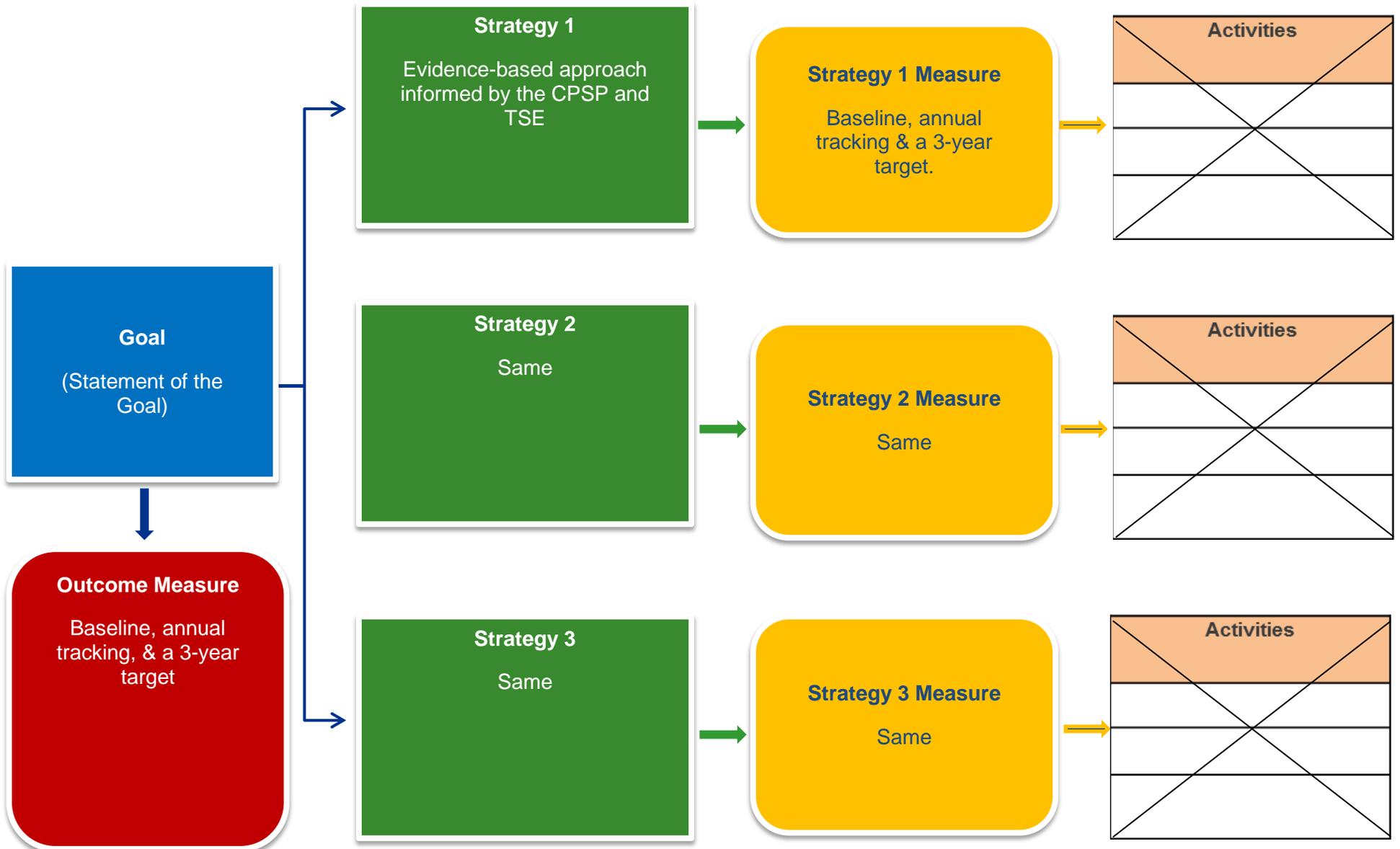
- The Covenant of Collaboration with the **SJH hospital** must be signed by the hospital’s Vice President of Mission Integration.
- Covenants of Collaboration with **organizational partners** must be signed by the corresponding CEO’s or Executive Directors.

# Community Problem Selection Process



\*\* Sample Form \*\*

# Plan for Implementation



**FY16 Community Building Initiative – Implementation Grant  
Proposal Narrative**

**Lead Organization:** \_\_\_\_\_

**Please answer the following questions keeping to the page limits, one-inch margins and a 12-point font.** Include a title of “Proposal Narrative” at the top of the first page and the lead organization’s name, as shown above. Please also label your answers with the number and bolded subheading for each question so that reviewers will know which questions you are answering. The page limits refer to the space taken by your answers only.

The responses in this section correspond to the elements included in the “Community Problem Selection Process” and “Plan for Implementation” templates that you will also complete as part of the application process. Please be sure to answer each question - incomplete responses will not be reviewed further.

**Progress During Planning Year**

- 1. Definition of Community** *(one page or less)*
  - a. What is the community that you plan to work with in the next three years (neighborhood, city, etc.)?
  - b. What are the boundaries of your community?
  
- 2. Community Problem Selection Process (Bubble Diagram)** *(3 pages or less)*
  - a. What is the problem that your collaborative has selected for your next three years of work with CBI funding?
  - b. How was this problem chosen?
  - c. What data about local, state, or national conditions was used? What was the source of the information?
  - d. What evidence about the causes of this problem was used? What was the source of the information?
  - e. Are there other groups or organizations working on this problem in the community? If so how are they connected to your collaborative?
  
- 3. Integration of CBI Pillars in Planning Year** *(2 pages or less)*
  - a. How have you engaged community residents?
  - b. How have you identified and started to develop community leaders?
  - c. How have you built collaboration among the different groups/organizations involved in your collaborative?
  - d. How have you started to build bridges with external decision makers?

## **Plan for Implementation**

4. **Definition of Collaborative** *(2 pages or less)*
  - a. What groups or organizations are involved in your collaboration?
  - b. How is your organization uniquely poised to lead this collaborative initiative?
  - c. What groups or organizations will be involved in your collaboration?
  
5. **Goal Statement and Outcome Measure** *(2 pages or less)*
  - a. What is your Goal Statement?
  - b. What Outcome Measure will you use to track progress on the goal?
  - c. Where will you get the data to track the Outcome Measure?
  
6. **Strategies** *(3 pages or less)*
  - a. Please state each Strategy and how it was informed by the Community Problem Selection Process and the topic-specific evidence.
  - b. What Strategy Measures will you use to track progress on each Strategy?
  - c. Where will you get the data to track the Strategy Measures?
  
7. **Integration of CBI Pillars in Implementation** *(2 pages or less)*
  - a. How will you engage community residents?
  - b. How will you identify and start to develop community leaders?
  - c. How will you build collaboration among the different groups/organizations involved in your collaborative?
  - d. How will you build bridges with external decision makers?

## FY16 Community Building Initiative – Implementation Grant Budget – Year 1

**Lead Organization:** \_\_\_\_\_

Please use the form below to identify all costs involved with your project, up to a total of \$100,000 for year 1. Enter in the appropriate columns the costs that are included in your Community Partnership Fund request and the costs that will be funded through other funding sources. For each line item, the Total Budget amount should equal the Community Partnership Fund Request amount plus the Other Funding Sources amount. Please note that a percentage allocated towards indirect costs will not be funded. Also, the Fund does not provide direct support to individuals or fundraising events.

For each position under Personnel, please provide the title and % FTE (Full Time Employment). When calculating FTE, please note the following examples:

- 40 hours = 100% FTE, or 1.0 FTE
- 20 hours = 50% FTE, or 0.5 FTE

**There should be at least 1.0 FTE that is fully dedicated to coordinating all aspects of the CBI project.** If the position(s) are provided Fringe Benefits, please include the % of the fringe benefits in relation to the salaries.

Budget Line Items	CPF Request	*Other Funding Sources	Total Budget
<b>PERSONNEL/SALARIES</b>			
(Position Title) ___ FTE	\$	\$	\$
(Position Title) ___ FTE	\$	\$	\$
(Position Title) ___ FTE	\$	\$	\$
Fringe Benefits @ ___%	\$	\$	\$
<b>TOTAL PERSONNEL (a)</b>	\$	\$	\$
<b>OPERATING COSTS</b>			
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
<b>TOTAL OPERATING COSTS (b)</b>	\$	\$	\$
<b>OTHER</b>			
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
<b>TOTAL OTHER (c)</b>	\$	\$	\$
<b>TOTAL EXPENSES (a+b+c)</b>			

\*Year 1 "Total Expenses" for the "Other Funding Sources" column should match the "Total Other Funding" amount on the Other Funding Sources form (see pg. 27).

\*\* Sample Form \*\*

**FY16 Community Building Initiative – Implementation Grant  
Budget – Year 2**

**Lead Organization:** \_\_\_\_\_

Please use the form below to identify all costs involved with your project, up to a total of \$100,000 for year 2. Enter in the appropriate columns the costs that are included in your Community Partnership Fund request and the costs that will be funded through other funding sources. For each line item, the Total Budget amount should equal the Community Partnership Fund Request amount plus the Other Funding Sources amount. Please note that a percentage allocated towards indirect costs will not be funded. Also, the Fund does not provide direct support to individuals or fundraising events.

For each position under Personnel, please provide the title and % FTE (Full Time Employment). When calculating FTE, please note the following examples:

- 40 hours = 100% FTE, or 1.0 FTE
- 20 hours = 50% FTE, or 0.5 FTE

**There should be at least 1.0 FTE that is fully dedicated to coordinating all aspects of the CBI project.** If the position(s) are provided Fringe Benefits, please include the % of the fringe benefits in relation to the salaries.

Budget Line Items	CPF Request	Other Funding Sources	Total Budget
<b>PERSONNEL/SALARIES</b>			
(Position Title) ___ FTE	\$	\$	\$
(Position Title) ___ FTE	\$	\$	\$
(Position Title) ___ FTE	\$	\$	\$
Fringe Benefits @ ___%	\$	\$	\$
<b>TOTAL PERSONNEL (a)</b>	\$	\$	\$
<b>OPERATING COSTS</b>			
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
<b>TOTAL OPERATING COSTS (b)</b>	\$	\$	\$
<b>OTHER</b>			
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
<b>TOTAL OTHER (c)</b>	\$	\$	\$
<b>TOTAL EXPENSES (a+b+c)</b>			

## FY16 Community Building Initiative – Implementation Grant Budget – Year 3

**Lead Organization:** \_\_\_\_\_

Please use the form below to identify all costs involved with your project, up to a total of \$100,000 for year 3. Enter in the appropriate columns the costs that are included in your Community Partnership Fund request and the costs that will be funded through other funding sources. For each line item, the Total Budget amount should equal the Community Partnership Fund Request amount plus the Other Funding Sources amount. Please note that a percentage allocated towards indirect costs will not be funded. Also, the Fund does not provide direct support to individuals or fundraising events.

For each position under Personnel, please provide the title and % FTE (Full Time Employment). When calculating FTE, please note the following examples:

- 40 hours = 100% FTE, or 1.0 FTE
- 20 hours = 50% FTE, or 0.5 FTE

**There should be at least 1.0 FTE that is fully dedicated to coordinating all aspects of the CBI project.** If the position(s) are provided Fringe Benefits, please include the % of the fringe benefits in relation to the salaries.

Budget Line Items	CPF Request	Other Funding Sources	Total Budget
<b>PERSONNEL/SALARIES</b>			
(Position Title) ___ FTE	\$	\$	\$
(Position Title) ___ FTE	\$	\$	\$
(Position Title) ___ FTE	\$	\$	\$
Fringe Benefits @ ___%	\$	\$	\$
<b>TOTAL PERSONNEL (a)</b>	\$	\$	\$
<b>OPERATING COSTS</b>			
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
<b>TOTAL OPERATING COSTS (b)</b>	\$	\$	\$
<b>OTHER</b>			
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
<b>TOTAL OTHER (c)</b>	\$	\$	\$
<b>TOTAL EXPENSES (a+b+c)</b>			

\*\* Sample Form \*\*

**FY16 Community Building Initiative – Implementation Grant  
Other Funding Sources – Year 1**

**Lead Organization:** \_\_\_\_\_

Use the worksheet below to identify additional resources and/or funds available for year 1 of the proposed program.

1. Use the column titled “Amount Committed” to list funding that has been awarded or designated specifically for your program. Include the date funding will be received.
2. Use the column titled “Amount Pending” to list funds that are being sought for your program, but have not been awarded yet. Include the date that you will be notified of the funding decision.
3. Provide the total amount for Other Funding Sources at the bottom of the form.

SOURCE	AMOUNT COMMITTED & Date Funding Will be Received	AMOUNT PENDING & Date of Notification
<b>SJH Hospital Care for the Poor Funds</b>		
<b>Other Foundations</b>		
<b>Government Grants &amp; Contracts</b>		
<b>Corporations</b>		
<b>Earned Income</b>		
<b>United Way/Other Federated Campaigns</b>		
<b>Individual Contributions</b>		
<b>Fundraising Events and Products</b>		
<b>In-kind Support</b>		
<b>Other Sources</b>		
<b>Totals</b>	\$	\$
<b>*TOTAL OTHER FUNDING</b>	\$ (AMOUNT COMMITTED + AMOUNT PENDING)	

\* “Total Other Funding Amount” should equal “Other Funding Sources” Total on Year 1 Budget form on pg. 24.

**FY16 Community Building Initiative – Implementation Grant  
Budget Narrative**

**Lead Organization:** \_\_\_\_\_

**Please answer the following questions related to the Program Budget directly onto this form, keeping to one-inch margins and a 12-point font.**

1. Explain how the funds will be spent for each line item on the Budget forms. For each salary/personnel line item, list what is included in Fringe Benefits, and explain your policy on providing fringe benefits to employees.
2. What organization(s) will receive grant funds, and how will funds be used by each organization?
3. Explain why a grant from the Community Partnership Fund is necessary for the project's success. Also describe the potential impact of a grant from The Fund in your community.
4. Describe the sustainability plan for this program. How will the program be continued after The Fund grant ends?
5. Provide a **brief** summary of the expertise of key program staff.
6. Past experience has shown that projects are most successful when there is 1.0 full time employee (FTE) coordinating all aspects of the Community Building Initiative work. It is the expectation of the Community Partnership Fund that each funded organization will dedicate 1.0 FTE to this project. Please ensure that the Budget forms reflect this dedicated 1.0 FTE. Please also explain below how the lead organization will fulfill this expectation.

# \*\* Sample Form \*\*

[PLACE ON LEAD ORGANIZATION'S LETTER HEAD]

## **Covenant of Collaboration**

This **Covenant of Collaboration** ("Covenant") is entered into by **[INSERT LEAD ORGANIZATION NAME]** ("Lead Organization") and **[INSERT COLLABORATOR NAME]** ("Collaborator") to delineate responsibilities of each party with regard to the St. Joseph Health Community Partnership Fund Community Building Initiative project ("The Project") in the community of \_\_\_\_\_ . The Project seeks to address the following specific community problem or issue: \_\_\_\_\_

Should the partnership be successful in obtaining Community Building Initiative grant funding, the parties agree to make the following contributions:

Lead Organization agrees to participate in the Project during the course of the 3-year implementation grant period beginning October 1, 2015.

Lead Organization will:

*[For example:*

- 1) Dedicate staff and resident leaders to participate in the steering committee.*
- 2) Recruit and maintain resident participation in the proposed workshops and activities.*
- 3) Support any committees, task forces or other groups to emerge from these efforts.*
- 4) Provide all logistical support for meetings and workshops.*
- 5) Provide meeting space for at least one meeting per month.]*

Collaborator agrees to participate in the Project during the course of the 3-year implementation grant period beginning October 1, 2015.

Collaborator will:

*[For example:*

- 1) Provide a designated staff person to act as a liaison to the project and serve as a steering committee member, attending monthly meetings and participating in all key events of the initiative.*
- 2) Facilitate initial communication with the school district and provide ongoing facilitation support for community forums.*
- 3) Contribute space for leadership trainings, and educational workshops for residents.*
- 4) Lead a six part workshop (2 hours per topic for a total of 12 hours of instruction/ discussion) on school district policies and processes.*

- 5) *Provide training on how to coordinate and prepare an effective delegation to meet with elected officials.*
- 6) *Will participate in all activities related to the evaluation and assessment of the project's progress.]*

Independent Contractors. This Covenant is not intended and will not be construed to create the relationship of principal-agent, employer-employee, or partners among or between the parties. The parties are independent contractors to each other and each is responsible to the other for completing the services required of each of them hereunder.

Insurance. Each party shall maintain insurance coverage covering itself for its responsibilities under this Covenant. Each party shall provide the other with a certificate of insurance evidencing such coverage upon request. Each party's insurance coverage shall contain an endorsement which provides that no coverage shall be canceled except upon the provision of thirty (30) days prior written notice to the other party.

Employees. The parties acknowledge and agree that the Project is not a legal entity and as such, no employees shall be employees of the Project. Each party shall be solely responsible for compensating and providing benefits for whichever employees such party utilizes to fulfill its obligations hereunder. No party shall have any rights or responsibilities with respect to the other party's employees, agents or contractors.

Term and Termination. This Covenant shall remain in full force and effect from October 1, 2015, through September 30, 2018, unless terminated sooner as provided for herein. This Covenant may be terminated upon mutual agreement of the parties at any time. In addition, in the event that either party desires to withdraw from participation in this Covenant such party may do so upon giving not less than thirty (30) days prior written notice to the other party.

Licenses and Standards. Each party warrants to the other that it has all necessary licenses and permits required by the laws of the United States, the State of California and the County of Orange and all other appropriate governmental agencies, and agrees to maintain these licenses and permits in effect during the term of this Covenant.

Indemnification. Lead Organization agrees to indemnify, save, hold harmless, and at Collaborator's request(s) defend Collaborator and its agents from and against the payment of any and all costs and expenses, claims, suits, and liability for bodily and personal injury to, or death of any person, and for death or injury or loss of any property resulting from or arising out of or in any way connected with any negligence or wrongful acts or omissions of the Lead Organization, its officers and employees, in performing or failing to perform any work, services,

or functions for or referred to or in any way connected with any work, services, or functions to be performed under this Covenant.

Amendment. This Covenant may be amended, but only in writing, dated and executed by the parties and attached hereto.

Assignment/Subcontracting. No party to this Covenant shall assign its rights nor delegate or subcontract its duties under this Covenant without the prior written consent of the other party.

Entire Covenant. This Covenant contains the complete and full agreement between the parties with respect to the subject matter hereof and supersedes all prior agreements whether verbal or written between the parties and no modification of, or agreement to modify, any of the said terms and conditions shall be binding upon either party unless made in writing and signed by the parties' authorized representatives.

Severability. Any term or provision of this Covenant which is invalid or unenforceable by virtue of any statute, ordinance, court order, final administrative action or otherwise, shall be ineffective to the extent of such invalidity or unenforceability without rendering invalid or unenforceable the remaining terms and provisions of this Covenant.

State Law. This Covenant shall be governed by and interpreted in accordance with the laws of the State of California. Any action arising out of this Covenant shall be instituted and prosecuted only in a court of proper jurisdiction in Orange County, California.

Waiver. Any waiver of any terms, covenants and/or conditions hereof must be in writing and signed by the parties hereto. A waiver of any of the terms, covenants and/or conditions hereof shall not be construed as a waiver of any other terms, covenants and/or conditions hereof nor shall any waiver constitute a continuing waiver.

Confidentiality. All information related to the other party's business including the contents of this Covenant shall be treated as confidential by the other party and each of its employees, agents and contractors and except for disclosures to the Lead Organization's grantor, shall not be disclosed to any third party without the prior written consent of the disclosing party unless otherwise required by law. This provision shall survive the expiration or termination of this Covenant.

This Covenant is effective upon receipt of grant funding by the collaborative partners.

**LEAD ORGANIZATION INFORMATION AND SIGNATURE**

<b>Lead Organization Name:</b>	<b>Date:</b>
<b>Executive Director Name:</b>	<b>Executive Director Signature:</b>

**COLLABORATOR INFORMATION AND SIGNATURE**

<b>Collaborator Name:</b>	<b>Date:</b>
<b>Authorized Signatory Name &amp; Title: (e.g., Executive Director/VP Mission)</b>	<b>Authorized Signatory Signature:</b>