

### **KANSAS HEALTH** FOUNDATION

# IMPACT AND CAPACITY GRANTS INITIATIVE

2018 Request for Proposals

# BACKGROUND

The Kansas Health Foundation (KHF), based in Wichita, is statewide in focus. With a mission to improve the health of all Kansans, KHF envisions a culture in which every Kansan can make healthy choices where they live, work and play. KHF defines health as a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity. In pursuit of this vision and mission, KHF utilizes a lens of equity and focuses its grantmaking on four key impact areas - *access to care, healthy behaviors, civic and community engagement, and educational attainment.* 

#### **ACCESS TO CARE**

It is important for all Kansans to have access to health care to prevent or reduce the severity of disease and illness. In Kansas today, however, one in six adults age 18 to 64 lack health care coverage. And, one in three do not have dental coverage. For others, the challenge is not having enough health and dental providers close to where they live. It is important for all Kansans to have access to quality health care services. We know significant barriers to access exist and take many forms- including cost, coverage by insurance and/or location of and proximity to providers. To address gaps in culturally-competent quality healthcare, oral health and behavioral health services, KHF supports efforts to address gaps or barriers to access care, to help improve the health of all Kansans.

### **HEALTHY BEHAVIORS**

Tobacco use and obesity remain the leading cause of preventable death and illness in Kansas. One of every three Kansans is obese (34%) and just under 20% of Kansans smoke.<sup>1</sup> When we start digging deeper into these issues, disparities emerge that are even more startling. For example, almost one in three (28.7%) Kansas adults with less than a high school education smoke compared to less than one in ten (7.3%) adults with a college degree. Compared to the general population, the proportion of Kansas adults who report participating in physical activity is lower among Latinos, African Americans and those with less than \$15K/year in income.<sup>2</sup> To make progress toward our vision of a culture where *every* Kansan can make healthy choices where they live, work and play, we are focusing on these types of disparities.

### **CIVIC AND COMMUNITY ENGAGEMENT**

While significant health improvements have been achieved through medicine and public health, KHF recognizes individuals' health and well-being are also influenced by where and how they live. The reality is tremendous differences in health outcomes remain for many underserved groups and communities. Disparities in voter registration, voter turnout, and community members contacting public officials and attending public meetings mirror the health disparities in Kansas. Increased health equity and improvement in health outcomes for all populations depend on a robust and vibrant democracy as health and civic disparities are intrisically linked.<sup>3</sup> The success of factors that contribue to improved health outcomes, such as

http://www.khi.org/news/article/kansas-stuck-in-the-middle-in-overall-health-even-as-obesity-rate-climbs and Kansas Health Policy Authority, "Tobacco User Fee Fact Sheet," http://www.kdheks.gov/hcf/legislative/download/2008Testimony/2-7-08TobaccoTaxTalkingPts.pdf.

<sup>&</sup>lt;sup>1</sup> Kansas Health Institute, "Kansas stuck in the middle in overall health even as obesity rate climbs," December 2016.

<sup>&</sup>lt;sup>2</sup> Source: 2015 Behavioral Risk Factor Surveillance System (BRFSS)

<sup>&</sup>lt;sup>3</sup> https://ncoc.org/wp-content/uploads/2015/04/2016KansasCHI.pdf

community-level prevention efforts, access to high quality health care, access to healthy food and safe physical environments is reliant on how policies are shaped and resources are allocated. KHF believes it is critical for all Kansans to be engaged, be part of the decision-making process and have their voices heard and their votes counted, especially those populations with the worst health outcomes and greatest barriers to accessing care.

### **EDUCATIONAL ATTAINMENT**

KHF recognizes the importance of tackling the root causes of health inequities. A large and growing body of research shows, "better educated individuals live longer, healthier lives than those with less education, and their children are more likely to thrive."<sup>4</sup> According to the U.S. Department of Health and Human Services, the health benefits of education "accrue at the individual level (e.g. skill development, personal access to resources), the community level (e.g. the health-related characteristics of the environments in which people live), and the larger social/cultural context (e.g. social policies, residential segregation, and community access to educational resources).<sup>5</sup> This is why it is important to KHF to invest in strategies aimed at increasing educational attainment for those most at risk in Kansas.

**Priority Populations:** In all four impact areas, KHF prioritizes serving populations experiencing the greatest disparities in health outcomes because of conditions in the environments in which they live, learn, work and play that affect quality-of-life. KHF uses education level, income, race, ethnicity and geography as the primary lenses to identify inequities and guide our work.

## INTRODUCTION

With the afore-mentioned impact areas in mind, KHF offers this *Impact and Capacity Grants (ICG) Initiative Request for Proposals (RFP)* funding mechanism in support of organizations whose missions align with KHF's strategic focus to reduce disparities in one or more of our four impact areas. All prospective applicants should carefully review KHF's mission and strategic focus, as well as the funding criteria, before applying.

This initiative provides grants up to \$25,000 for two categories of awards: *impact grants* or *organizational capacity-building grants* (further defined below). A limited pool of funds is available **starting June 1, 2018 and is open through September 17, 2018.** This responsive RFP is designed to make funds available to mission-aligned organizations actively working within one or more of KHF's four areas of focus to reduce health disparities and promote health equity through capacity building or impact-specific grant support.

As it relates to proposals for *impact grants*, preference is given to proposals describing a health policy, systems or environmentally-focused effort which demonstrates the opportunity to address health disparities in one or more of KHF's four impact areas described in the *Background* section (pg. 2) which affect those who have systematically experienced greater obstacles to health.

<sup>&</sup>lt;sup>4</sup> County Health Rankings, http://countyhealthrankings.org/our-approach/health-factors/education

<sup>&</sup>lt;sup>5</sup> US Department of Health and Human Services, Agency for Healthcare Research and Quality. Zimmerman, Emily and Steven H. Woolf and Amber Haley. "Population Health: Behavioral and Social Science Insights, Understanding the Relationship Between Education and Health."

### Available funding is designed to support:

- New effort(s), referring to a *new* project, initiative or other work in which the organization has not previously engaged, or
- **Expansion effort(s)**, where the organization has identified a sustainable way to serve new populations or additional geographic areas, for example, through a previously-established program or initiative.

Grants are not awarded in instances where applicant is applying for funds to support ongoing, "business-asusual" programming or efforts.

As it relates to proposals for *capacity building grants*, **preference is given to** *non-recurring* **internal capacity building needs** of organizations addressing health disparities which adversely affect groups of people who have systematically experienced greater obstacles to health based on their education level, income, race, ethnicity or geography.

# WHO SHOULD APPLY

Eligible organizations are Kansas nonprofits classified as:

- Tax-exempt under Section 501(c)(3) of the Internal Revenue Code sub-sections 509(a)(1) or 501(a)(2).
- Government entity with a Federal Employer Identification number
- Church with a Group Ruling Letter

Eligible applicants are qualifying Kansas organizations whose missions align with KHF's, and whose efforts complement KHF's funding strategies and have the potential to contribute to measurable impact within one or more of KHF's impact areas. One proposal from each organization is accepted per year; those organizations with multiple branches/programs/locations across the state may submit only one proposal per location per year.

Consideration is given to the following:

- Mission alignment between applicant organization and KHF, applicant organization's goals and how they align with KHF's agenda.
- Extent to which applicant organization effectively articulates a strategy for meeting its mission and goals, clarity about what applicant organization wants to accomplish and indicators for success.
- Extent to which applicant organization, if it executes its strategy, is likely to meet the impact it seeks.
- The degree to which the proposed work could support improved health outcomes for KHF's priority populations within the four impact areas.
- Leadership of applicant organization.
- Governance and financial stability of applicant organization.

Please note, if an applicant has an active grant from KHF, the organization *is* eligible to apply for an *Impact or Capacity Building Grant* provided what is being proposed is different than the work funded through the active grant.

## WHAT WE FUND

Requests for this funding opportunity are being accepted June 1 through September 17, 2018. The maximum grant size is \$25,000, and the maximum grant term is two years.

These funds are designed to support KHF's strategic efforts to make progress in one or more KHF impact areas through flexible, time-sensitive support for project, policy-specific or capacity building requests from mission-aligned applicant organizations targeting Kansans with the greatest need and least access/economic opportunity. Applicants should consider the following criteria when deciding whether to submit a *KHF ICG Grant Proposal*:

### When to Apply

Applications accepted between June 1<sup>st</sup> and September 17<sup>th</sup>, 2018

Maximum Grant Amount \$25,000

### Maximum Grant Term Two years\*

### Where to Apply

kansashealth.org

Refer to the <u>Frequently</u> <u>Asked Questions</u> section of the website before applying

\*Organizations can not have more than one active ICG grant open in the same track (impact or capacity building) at the same time.

# **KHF ICG FUNDING CATEGORIES / CRITERIA**

	DEFINITION	CRITERIA FOR CONSIDERATION Includes, but is not limited to:	ELIGIBLE ACTIVITIES Includes, but is not limited to:
IMPACT GRANTS	<ul> <li>Externally-focused efforts designed to make progress on:</li> <li>Access to care;</li> <li>Healthy behaviors (physical activity, tobacco use, healthy food access and consumption);</li> <li>Educational attainment; and/or</li> <li>Community and civic engagement.</li> <li>These efforts should focus on making improvements in one or more of the four areas above, with a special focus on at least one of KHF's priority populations listed in the "Background" section (pg. 2).</li> </ul>	<ul> <li>Degree to which applicant organization's mission and vision align with KHF's</li> <li>Extent to which effort addresses a community need experienced as a barrier to health</li> <li>Efforts target a KHF priority population and make the case for the health disparity at issue</li> <li>Extent of experience with similar efforts</li> <li>Strength of organization's connection to the community(ies) served</li> <li>Extent to which board is engaged</li> <li>Stability of the leadership team / organization</li> <li>Goals of the work (what will be different because of this project?)</li> </ul>	<ul> <li>Externally-focused efforts designed to improve the health of one or more of KHF's identified priority populations in one or more of the impact areas listed under "Definition," such as:</li> <li>Policy and systems change advocacy work, including grassroots organizing</li> <li>Time-limited projects that build on evidence of what works or that seek to test an innovative or promising approach</li> <li>Initiative planning (e.g. needs assessments, feasibility studies, ROI assessments, cost avoidance studies, etc.), initiative implementation and/or evaluation</li> <li>Requests for dollars to match initiative/project-committed funds</li> <li>Requests of up to \$5,000 for *convenings of at least 50 invitees designed to increase awareness/support for an issue, build/strengthen networks, etc. (Fund- raising events are ineligible)</li> <li>Please note: requests to fund ongoing projects that do not propose any new elements, i.e. expanding to a new area, population, etc., are ineligible.</li> </ul>
ORGANIZATIONAL CAPACITY BUILDING GRANTS For organizations with a focus on one or more of the priority populations within one or more KHF impact areas.	<ul> <li>Internally-focused efforts</li> <li>designed to help the</li> <li>organization fulfill its mission.</li> <li>Includes organizational</li> <li>capacity-building efforts to</li> <li>enhance:</li> <li>Leadership;</li> <li>Management;</li> <li>Funding/Financial</li> <li>management;</li> <li>Relationships/Collaboration;</li> <li>Communication/Marketing;</li> <li>Programs/Services; and/or</li> <li>Evaluation/Learning.</li> </ul>	<ul> <li>Degree to which applicant organization's mission and vision align with KHF's impact areas</li> <li>Extent to which the proposal describes how grant funding would help develop stronger organizational capacity to make progress toward applicant organization's vision/mission</li> <li>Organization's connection to stakeholders/partners</li> <li>Extent to which board is engaged</li> <li>Stability of the leadership team/organization</li> <li>Objectives/goals of this work (what will be different because of improved capacity?)</li> </ul>	<ul> <li>Internally-focused activities designed to build organizational capacity in one or more categories listed under "Definition," such as:</li> <li>Network building, building up of membership base, collaboration or grassroots organizing</li> <li>Strengthening evaluation, data and measurement systems</li> <li>Organizational planning (e.g. leadership transitions, strategic planning, etc.)</li> <li>Enhancing operations capabilities (e.g. financial stability, governance, finance administration, etc.)</li> <li>Professional development/continuing education (e.g. association memberships, training for board, staff or volunteers, etc.)</li> <li>Requests for dollars to match committed capacity-building funds</li> </ul>

### \*CONVENINGS

KHF sees value in bringing people together to explore, build and strengthen networks and drive progress. We support opportunities to help organizations working in our impact areas leverage each other and share learning to accelerate change. To that end, KHF will consider requests of up to \$5,000 for Impact Grants for convenings related to one of KHF's four impact areas planned for *a minimum of 50 attendees*. In the proposal, applicants will describe anticipated participants and how the convening connects to a larger policy, systems and/or environmental change.

# **FUNDING EXCLUSIONS**

Grant funds may not be used for any of the following activities:

- Medical research
- Contributions to capital campaigns
- Operating deficits or retirement of debt
- Construction projects, real estate acquisitions, or endowments, not part of a Foundation-initiated program
- Vehicles, such as vans or busses
- Medical equipment
- Direct mental health services
- Direct medical services
- Grants to individuals
- Annual fund drives
- Fundraising events

## WHEN TO APPLY

Requests for this funding opportunity are being accepted June 1 through September 17, 2018 by 5:00PM CST. Funding recommendations are finalized and announced by December 1.

## WHERE TO APPLY

Applicants may visit kansashealth.org/impactandcapacity to learn more, or call 316-262-7676.

## **GRANT AWARDS**

Funding recommendations are finalized and announced no later than December 1.

### FUNDING DISPERSED

Grant funds are issued to awarded organizations upon KHF's receipt of the signed grant agreement and authorization agreement for direct deposits.

# REPORTING

By accepting a grant award, recipients agree to submit **one brief report** within 30 days of the conclusion of the grant describing the extent to which grant objectives were met and accounting for use of grant funds during the grant term.