

# STRATEGIC INITIATIVES GRANTEE APPLICATION GUIDANCE

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ECONOMIC SECURITY

EDUCATIONAL SUCCESS

HEALTHY LIVES

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*Lead, Transform, Inspire*

June 2017

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## SECTION I: COMPLETING THE NARRATIVE QUESTIONS

This section provides instructions for completing the narrative portion of the application.

### QUESTION 1

Select the sector and strategy that you are seeking funding under as part of this application. You can select only one sector strategy area. We recognize some proposals cross over multiple sectors and strategies so please choose the one that is the best fit.

### QUESTIONS 2, 3 AND 4

Questions 2-4 provide an opportunity for you to describe the critical need or challenge that your proposal addresses, your organization's proposed response and goals, and alignment with the sector strategy that you selected in Question 1. Your responses here represent the starting point from which the staff of the Foundation will begin to form a funding decision on your proposal. Please concisely answer all components of each question. Use bullets where appropriate.

### QUESTION 5

Referring to the completed budget template, provide a brief written explanation about how you expect to use grant funds. Identify any funds you have or expect to leverage as we would like to understand how our funds may work with other sources. For anticipated funds, we would like you to differentiate between those that have been requested and are pending approval, versus those that you have yet to raise. If awarded, you will be expected to use the funds as presented in the budget.

Section II of this document provides guidance on completing the budget template.

### QUESTION 6

This question is intended to capture the major **activities** that you will implement as part of your proposed project. For each major activity include the anticipated **timeframe** during which the activity will occur and the resulting **outputs** from the activity. You may include up to four major activities.

**Outputs** describe what activities are being provided and to whom, and are often defined in terms of the size or scope of services provided. If selected for funding you will report on each of the activity areas you include. In identifying your outputs, include those that best define the goods, services, events, products, or other deliverables that result from your major activities.

Review the examples below for guidance.

#### ECONOMIC SECURITY

*This example is for a fictitious organization providing technical support to small businesses seeking to grow*

**Activity:** Provide 45 hours of tailored technical assistance to participating businesses

**Timeframe:** Jan - Sep 2017

Outputs: 30 businesses will each receive 45 hours of tailored TA from five business development specialists over 9 months. On average businesses will receive 5-8 hours of TA monthly.

#### EDUCATIONAL SUCCESS

*This example is for a fictitious project providing services and training to parents/primary caregivers to help them support their middle school-aged children through engagement with the local schools.*

Activity: Recruit 50 parents/primary caregivers of middle school students attending select schools

Timeframe: Aug-Oct 2017

Outputs: Attend back-to-school night programs at each of the three middle schools, set up information table, and distribute materials to families; conduct follow-up phone calls with 100% of families that express interest at back-to-school night; send home flyers with all 6-8 grade students at the three schools (approx. 1,650 children; 1,430 households)

#### HEALTHY LIVES

*This example is for a fictitious organization that is reducing emergency room visits through work with a Nurse Care Manager at a local clinic.*

Activity: Nurse Care Manager will conduct follow up with all identified patients

Timeframe: Second and third quarters of project (anticipated October 2017-March 2018)

Outputs: Nurse Care Manager will meet in person with at least 75% of patients in clinical setting for scheduled office visits; will make phone calls to 100% of patients who access ER services for poorly managed chronic illness; will provide home visits to 40% of poorly managed patients with opportunity for greatest progress

## QUESTION 7

This question provides the opportunity to define the **outcomes** that will result from your funded activities. **Outcomes** are the changes in attitudes, knowledge, skills, behaviors, status, or level of functioning among participants, populations, or systems.<sup>1</sup>

Please include up to four outcomes that you expect to result from your activities. If selected for funding you will report on each outcome that you include. All applicants must identify at least one outcome and we encourage all applicants – especially those seeking larger award amounts – to consider if there are other meaningful outcomes that you may affect through your activities.

For each outcome, begin by providing: i) a statement that summarizes the outcome your proposal seeks to affect, ii) the measure you will use to identify progress towards the outcome, iii) the data source, and iv) your plan to collect data.

i) The **outcome statement** describes the direction and type of change anticipated in a specific population or a system. A strong outcome statement includes:

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<sup>1</sup> For further reading about evaluation and outcomes development, please consult:

LFA Group. *Evaluation for Organizational Learning: Basic Concepts and Practical Tools*.

<http://learningforaction.com/our-tools-resources/>

W.K. Kellogg Foundation. *Evaluation Handbook*. Updated 2004.

<https://www.wkcf.org/resource-directory>

<u>Verb Indicating Change</u>	+	<u>What Changes</u>	+	<u>Who Changes</u>	+	<u>Additional Specificity</u> (if feasible)
"Increased"		Behavior		Communities		Change where? (geography)
"Reduced"		Knowledge		Individuals		Change by when? (date)
"Integrated"		Policies		Institutions		How much change? (target)

ii) The **outcome measure** is the specific data that you will analyze to inform whether your project is achieving or has achieved the desired outcomes.

iii) The **data source** is the name of a data collection tool, instrument, or source, depending upon what type of data are required to track the outcome measure. Data may be those that are collected by your organization or available from an outside source. For example, sources include formal assessment data (PARCC 3<sup>rd</sup> grade reading scores), or data collected through administrative procedures (emergency room admissions). As possible, please include data sources that allow for comparison between your activities and a baseline, such as pre-post or against a local, state, or national average (e.g. PARCC reading scores for 3<sup>rd</sup> graders in your project versus all 3<sup>rd</sup> graders assessed in 2016).

iv) The **collection plan** will identify in general terms the method, timeframe, or other pertinent detail on how and when the data will be collected. The timing of data collection should align with RI Foundation-funded activities. Please note here if follow-up data will be collected outside of the funding time period.

Review the examples below for guidance.

#### ECONOMIC SECURITY

*Organization providing technical support to small businesses seeking to grow*

**Outcome:** Increased profit among 75% of participating businesses by Dec 2019

**Outcome measure:** Percentage change in business revenue and profit

**Data Source:** Business financial report of participating businesses

**Collection Plan:** Participating businesses provide baseline financial information at application to the program. We will conduct a follow up financial review with business owners twice annually for two years after program completion.

#### EDUCATIONAL SUCCESS

*Project providing services and training to parents/primary caregivers to help them support their middle school-aged children through engagement with the local schools.*

**Outcome:** Increased engagement of parents/caregivers in their child's education at three public middle schools in the select urban communities

**Outcome measure:** Percentage of parents indicating increased involvement in their child's education

**Data Source:** Pre-post implementation of select sections of the Parent Involvement in Education Survey (National Center for Education Statistics)

**Data Collection Plan:** Participants will complete the same survey at the first session and final (10<sup>th</sup>) session

## HEALTHY LIVES

*Organization that is reducing emergency room visits through work with a Nurse Care Manager at a local clinic.*

Outcome: 50% reduction in emergency room use among patients with chronic disease living in Providence County by Dec 2019

Outcome measure: Number of ER visits during program year compared with comparable period in previous year

Data Source: ER hospital data and insurance claims

Collection Plan: Data are collected routinely through administrative processes by hospital and insurer

***Please note:*** We recognize that many funders now request similar levels of detail around data collection and reporting for evaluation and outcomes measurement. We encourage applicants for Rhode Island Foundation funding to carefully consider outcomes across other funders as a way to align and streamline their data activities and outcomes tracking, as appropriate.

### **QUESTION 8**

In addition to understanding how our investments are addressing community needs and challenges, the Rhode Island Foundation wants to know how investments influence learning for grantee organizations and for the sector. Briefly explain the knowledge you expect to gain and how it will help to strengthen your organization or assist in delivering services more effectively. Since the Foundation is in a position to help facilitate learning between grantees, please also identify how your experience might be useful to others working in the sector. This is also a space for you to acknowledge open questions that may be answered as a result of proposed activities.

### **QUESTION 9**

Identify any anticipated challenges or barriers to achieving your goals during the award period. While not all challenges can be predicted, planning for the unexpected can help keep the project on track when such situations arise. We want to understand your planning considerations. For example, if your project depends on early successful recruitment of participants and those efforts fall short, how else would you seek to recruit participants?

### **QUESTION 10**

Please identify any current or anticipated changes in your organization in the coming year related to leadership, planning, financials and around the business model. For example, please identify any anticipated changes in staff and/or board leadership, succession planning that you may engage in, staff and board strategic planning opportunities, or the addition or loss of other key funders.

## SECTION II: COMPLETING THE BUDGET TEMPLATE

The budget is an important part of your proposal. Beyond explaining to us how you would use Rhode Island Foundation funding, it helps us understand how you are planning for and resourcing your work. We encourage you to prepare a thorough budget that would allow you to deliver on the proposal you describe in your application. In question 5 of the narrative you are required to describe the budget in greater detail.

### EXPENSES

In this table please include all anticipated expenses, whether they will be supported by external funding, through in-kind support, or self-funding.

**Personnel**: List all personnel involved in the proposal by position and for each include the percentage (%) of time that will be spent on the work and total wages. Summarize fringe benefits and payroll taxes for all personnel.

**Consultation and professional expertise**: List anticipated consultant or professional fees in this space.

**Other**: Itemize all other expenses here. Be as specific as possible.

**Fiscal sponsor fee**: In circumstances where an applicant has a fiscal sponsor, include fee as applicable. Please note, this is not for overhead or indirect expenses, which should be itemized in the budget.

Upon completing the budget form, please confirm that Total Income matches Total Expenses.

### INCOME

The budget should include all income that is in-hand, committed, and anticipated for the proposal. For anticipated income, we ask grantees to differentiate between funds that have been requested with a decision pending versus those that have not yet been requested. Please be as specific as possible in identifying and describing the source.

**Philanthropic**: Foundation support should include those being requested from the Rhode Island Foundation and any other private, community, or corporate foundation funds, or individual contributions that have been committed or are anticipated. Include decision date (or your estimation of the decision date) as necessary.

**Government**: Include local, state, and/or federal income. Include decision date as appropriate.

**Earned**: This may include client fees, membership dues, contract services, publications, products, ticket sales, etc.

**Other**: Itemize all other income here, for example, income paid or donated by your organization.

## SECTION III: ADDITIONAL REQUIRED DOCUMENTATION

In addition to the narrative and 12-month budget proposal, before submitting your complete application you will be required to attach the following:

### **ORGANIZATIONAL BUDGET**

Please include your organization's budget for the current fiscal year with year-to-date actuals (not required for public schools and hospitals).

### **AUDITED FINANCIALS**

Please include your organization's financials for the two most recent years (not required for public schools and hospitals).

### **BOARD LIST**

Please attach a copy of your organization's board list.

### **FIRST-TIME APPLICANTS: IRS 501 (c) TAX DETERMINATION LETTER** (not a tax-exempt certificate)

This letter is required only if your organization has never applied to the Rhode Island Foundation for funding. If an organization is serving as the fiscal sponsor for this project, please submit the IRS 501 (c) tax determination letter for the fiscal sponsor.

### **APPLICANTS WITH A FISCAL SPONSOR: FISCAL SPONSOR AGREEMENT**

If you are using a fiscal sponsor, please attach a copy of the signed agreement outlining the terms and conditions of the sponsorship.

## SECTION IV: SUBMISSION INSTRUCTIONS

For correspondence and documents generated by a source that is not electronic/digital, such as the tax determination letter, create an electronic/digital file by scanning the document into the computer. It is suggested that you store these documents either on your computer or on an electronic/digital alternative to which you have access, to assist in answering any additional questions related to your request.

To assure that the correct documents are being uploaded, please make note of the folder or location of the files that will be submitted to the Rhode Island Foundation.

Please only submit the requested attachments and do not include evaluation/report forms with this grant application.

Please submit your application online only. Do not send a paper copy of the application or e-mail a copy of the application to foundation staff.

### DIRECTIONS FOR UPLOADING ATTACHMENTS

1. For each type of attachment (Organization Budget, Board List, etc.) click the *Browse* button to search for the file you wish to upload. Navigate to the files you want to attach, select it, and then click the *Open* button.
2. Click the *Upload* button to attach the file to this application.
3. Move on to the next attachment type and repeat Steps 1-2 for each document.

Select *Review & Submit* if you are ready to submit your application, or select *Save & Finish Later* to return to the application at a later time. When your application is saved or submitted, you will receive a confirmation email that contains a link to your application account page.