



## **Community Grants Program** **Policy and Procedures**

**Policy:** Peninsula Health Care District budgets and invests a designated portion of the annual tax revenues into the community for the purpose of addressing the health status of its residents through its Community Grants Program (CGP). The Community Grants Program guides investments in non-profit and other government agencies, health-focused programs, services, and interventions that serve to improve the health and well-being of district residents. The CGP supports the District’s vision that all residents enjoy optimal health through education, prevention, and access to needed health care. The District uses a comprehensive definition of health to include those behaviors, programs, activities, and supports that promote and protect the physical, psychological, and social well-being of an individual, a family, and a community.

**District Vision:** All residents achieve their optimal health through health education & health literacy, prevention, and access to needed services.

### **2021 Priority Health Needs:**

1. Access to basic health services: physical, mental, and dental with a focus on health disparities and health equity.
2. Targeted prevention (by population, geography, or other risk factor) to reduce adverse health outcomes.

The District Board supports organizations with demonstrated competencies in achieving measurable improvements in the health status of District residents.

### **Community Health Investment Committee**

The Board’s **Community Health Investment Committee** is the working group that carries out the activities involved in evaluating grant requests. Each year, at the start of the grant cycle, the Committee reviews the health needs and priorities of the community within the District’s boundaries and makes recommendations to the Board.

Committee members are appointed by the Board Chair and serve 3-year terms. Membership includes:

- Two (2) directors from the District Board; one serving as committee chair
- Three (3) community healthcare providers and leaders

- Two (2)- Three (3) District community members-at-large
- District Chief Executive Officer (Ex Officio, non-voting) or her designee

Members advise on health priorities, review all Letters of Intent, and determine which agencies will be asked to submit Full Proposals, review all submissions, participate in site visits and interviews, and make recommendations for funding to the Board at its December meeting.

**Eligibility:**

CGP will support programs and services which directly serve residents of the District and address one or more of the District’s established health priorities through direct care/service, preventative care, wellness programs and education and outreach Non-profit organizations with tax exempt status 501(c)(3) of the Internal Revenue Code and other government agencies are eligible to apply for District grants.

Non-profit foundations are eligible to apply for CGP funds. Foundations that are sponsored, controlled by, or associated with a recipient shall be considered the same entity as the recipient itself.

**Grant Making Policies and Guidelines:**

Grants will generally be made in the range of \$10,000 – \$50,000 annually. Agencies that demonstrate large numbers served and have a track record of improved access and/or health status may apply for larger grants.

Grants will be awarded on a single- year basis. Previous grant recipients are eligible to apply for new grant funds and are required to follow the process outlined below.

Proposals, which expand capacity, and are specific with respect to outcomes, programmatic milestones, interventions, timeframes, funding sources, sustainability, evaluation methods, and accountability, are of highest interest to the District.

The District is supportive of programs which will use CGP funds to leverage additional funds or other support to amplify the impact of the District’s resources.

The District encourages results-based community collaborations among agencies, local government, and the private sector to improve the health of District residents. In addition, the District is interested in working collaboratively in effective, program-focused efforts with other local funders and with local, regional, and national healthcare initiatives.

CGP will support the services, programs, and agencies with strong, successful track records and the highest probability of meeting their defined goals and objectives. Agencies that provide services to a geographic area beyond the District boundaries must be able to demonstrate grant funds were used to serve District residents.

CGP funding will be distributed throughout the geographic boundaries of the District to the extent the population and need dictate. Accordingly, in evaluating proposals and allocating

funds, consideration will be given to organizations that meet the needs of underserved individuals and communities.

The District will generally not consider requests for basic operating support, requests to cover budget deficits, or requests to support research projects. Regarding indirect costs, we require most grant funds be used for direct support of the program and/or services to be funded and indirect costs be kept at 12% or less of the grant.

Recipients are required to provide regular financial and operational reports and periodically may be requested to make presentations to the Community Health Investment Committee and/or the Board of Directors at a public meeting.

### **Application Process**

- Letters of Intent (LOI) are submitted for review by the Board's Community Health Investment Committee. The Committee will determine if the grant request addresses:
  - an identified health priority
  - conforms to the Board's principles and guidelines
  - serves District resident
  - is achievable based on the organization's history and track record
- Each organization submitting a LOI will be notified within 2 days following the Committee's deliberations in early October and will be asked to submit a full proposal or be informed that it will not be considered for funding this grant cycle.
- Full Proposals are due by the date noted below. Each organization will be notified within two weeks following the submission deadline if further information is needed.
- During October and November, grant requestors may be asked to present to the Committee and/or allow for a site visit.
- In the first week of December, the Committee finalizes its recommendations and submits them to the Board for action at its December meeting.
- Each organization will be notified within two business days about the Board's action relative to the status of their grant request.

**Guidelines for Letter of Intent:** Non-profit and government agencies interested in applying for funding should submit a Letter of Intent (LOI) by the deadline noted below. A District LOI Form and submittal guidelines are provided on the website. The Form can be submitted by email to [Ashley.mcdevitt@peninsulahealthcaredistrict.org](mailto:Ashley.mcdevitt@peninsulahealthcaredistrict.org) . You will receive a confirmation email that your submission has been received.

### **Guidelines for Full Proposal**

Organizations invited to submit a Full Proposal should submit a Full Proposal Form by the deadline noted below. The District Full Proposal Form and submittal guidelines are provided on the website. Full Proposal forms and all accompanying documentation should be submitted by email to [Ashley.mcdevitt@peninsulahealthcaredistrict.org](mailto:Ashley.mcdevitt@peninsulahealthcaredistrict.org) AND sent to the

District office: 1819 Trousdale Drive, Burlingame, 94010.

**2020-2021 Community Grants Program Timetable**

<b>September 25, 2020</b>	<b>Letter of Intent are due in District Office by 2pm</b>
<b>November 02, 2020</b>	<b>Full Proposals are due in District Office by 2pm</b>
<b>December 10, 2020</b>	<b>Board takes action on grant recommendations</b>

Board Approved Revisions on 8/23/2018

Board Approved Revisions on 7/25/2019

Board Approved Updates on 8/27/2020