



SIERRA HEALTH FOUNDATION
An Endowment for Northern California

Sierra Health Foundation is a private philanthropy investing in and serving as a catalyst for ideas, partnerships and programs that improve health and quality of life in Northern California through convening, educating and strategic grantmaking. For information about Sierra Health, visit www.sierrahealth.org.

Capacity Building/Leadership Development Funding for Minority-Led Organizations

Application Instructions and Criteria

READ ALL INSTRUCTIONS AND CRITERIA CAREFULLY

The Funding Opportunity

In partnership with The California Endowment (The Endowment), Sierra Health Foundation will award a total of \$75,000 to support organizational capacity building and leadership development activities for minority-led nonprofit organizations serving Northern California.

Background

California's future depends on all of its residents enjoying meaningful opportunities to improve their quality of life. And, as one of the most diverse states in the nation, it depends significantly on the success of the communities of color that together comprise a majority of its population. Yet many African-Americans, Latinos, Asian-Americans, Native Americans and other Californians lack access to basic needs and the opportunities for better lives – health care, quality education, safe neighborhoods and clean environments.

Nonprofit organizations are essential to the flourishing of communities, and a vibrant and diverse civil society requires both effective community-based organizations and strong, diverse leadership throughout the nonprofit sector. The goal of this funding opportunity is to strengthen the capacity of Northern California's minority-led organizations serving communities of color, and to support the development of leaders of color.

Eligibility Criteria

Organization

This capacity building/leadership development funding opportunity is open to minority-led nonprofit organizations that are tax-exempt under Section 501(c)(3) of the Internal Revenue Code and are designated a 509(a)(1) or 509(a)(2) organization.

A minority-led organization is defined as one:

- that has an explicit mission to serve racial and ethnic minority populations, and
- in which key executive staff with policy- and decision-making authority, and at least half of its board of directors, represent racial and ethnic minority populations.

Organizations that have already received grants from the Community Leadership Project or from the Liberty Hill Foundation for capacity building activities are not eligible for these funds.

Geography

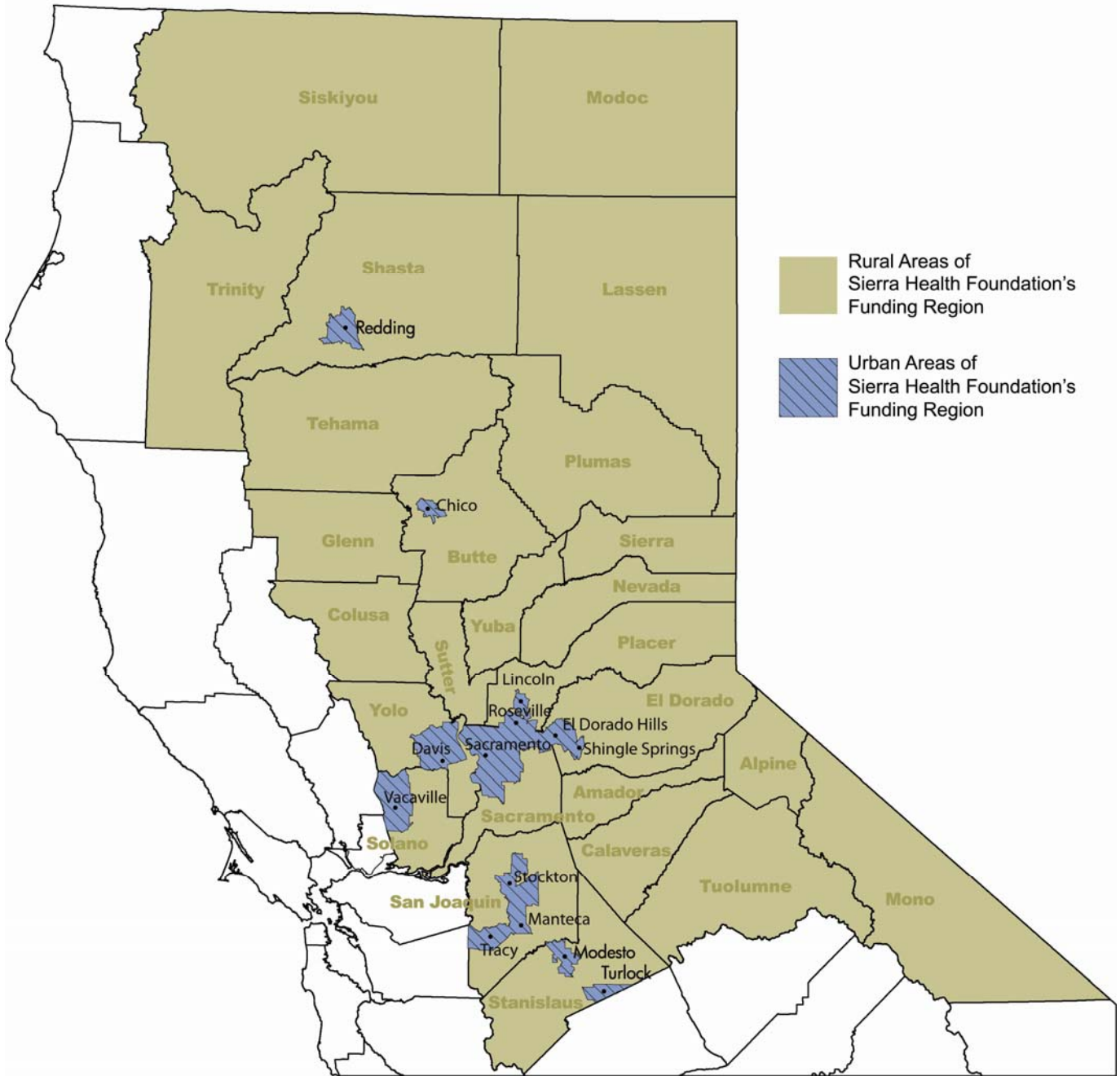
Applicant organizations must serve residents living in one or more of the 26 counties of Sierra Health's funding region. These counties are Alpine, Amador, Butte, Calaveras, Colusa, El Dorado, Glenn, Lassen, Modoc, Mono, Nevada, Placer, Plumas, Sacramento, San Joaquin, Shasta, Sierra, Siskiyou, Solano (eastern portion), Stanislaus, Sutter, Tehama, Trinity, Tuolumne, Yolo and Yuba.

To better track the geographic areas where we fund, we ask you to tell us if your organization serves in an urban or rural area. We define rural as a Medical Service Study Area (MSSA) that has a population density of 250 persons or less per square mile and has no incorporated area greater than 50,000 people.¹

To determine if the geographic area to be served by your proposed activities is urban or rural, see the map on page 3, which shows the urban and rural MSSAs in Sierra Health's funding region. If you need further clarification on your service area's rural/urban designation, contact Sierra Health by sending an e-mail to grants@sierrahealth.org.

¹ As a general rule, MSSAs are deemed to be "rational service areas" for purposes of designating health professional shortage areas, medically underserved areas or medically underserved populations. An MSSA is composed of one or more complete census tracts. Sierra Health combines rural and frontier communities into its rural category. Source: California Health Manpower Policy Commission, California Rural Health Policy Council, a program of the California Office of Statewide Health Planning and Development.

Sierra Health Foundation Funding Region



Selection Criteria

The most competitive applications will:

- make the case for your organization's need and readiness to engage in organizational capacity building or leadership development;
- indicate that the applicant organization has been established for at least one year;
- demonstrate the anticipated positive impact, e.g., how your organization will be affected, how capacity building work will affect the people your organization serves, etc., as proposed in the performance measures framework included in the application; and
- include a reasonable scope and budget, based on this funding opportunity's parameters.

Additionally, the geographic and demographic diversity of the region will be considered in the final selection process in order to distribute funds equitably.

Funding Information

- The maximum award amount is \$10,000.
- These are one-time awards.
- The award term may be up to one year.
- Only one proposal per organization will be considered.
- Those receiving awards will be required to submit a final report at the end of the funding period, reporting on the performance measures detailed by the applicant on the Performance Measures table.
- Examples of what Sierra Health will consider funding (proposals are not limited to these examples):
 - Strategic planning
 - Board development
 - Fund development
 - Leadership development/coaching
 - Organizational assessments/evaluation
 - Succession planning
 - Staff training/retreats
 - Strategic organizational restructuring/mergers
- Examples of what funds may be used for (proposals are not limited to these examples):
 - Training materials
 - Consultants
 - Meeting space
 - Stipends
 - Travel

What We Do Not Fund

Funds may not be used for debt retirement or operational deficits. In addition, Sierra Health does not fund requests to support individuals, activities that exclusively benefit the members of sectarian or religious organizations, or 509(a)(3) supporting organizations.

Proposal Timeline

PROPOSAL DEADLINE: February 18, 2010, by noon
APPROXIMATE AWARD ANNOUNCEMENT: March 31, 2010

Proposals must be e-mailed to Sierra Health Foundation by noon on February 18. Proposals received after the due date/time will not be reviewed.

Proposers' Conferences

Two proposers' conferences will be held in early February:

- An in-person proposers' conference and capacity building discussion will be held February 3, 9:30 a.m. to noon, at Sierra Health Foundation in Sacramento.
- A proposer's teleconference will be held February 5, 1:30 p.m. to 3:30 p.m.

Participation in one of the proposers' conferences is recommended, though not required. Registration information for both conferences is posted on Sierra Health's Web site, www.sierrahealth.org

How to Apply

Review all instructions and criteria carefully, and follow all instructions. Incomplete proposals will not be reviewed. Refer to the Application Materials Checklist on Page 6 for all items required.

All applications must be submitted via e-mail.

Submit the application by e-mail, including all supporting documentation, no later than **noon on Thursday, February 18, 2010**. We encourage early application submission to alleviate a possible e-mail backlog that could delay our receipt of your application. If application e-mail attachment files are large, we will accept your application files in consecutive e-mails.

Submit all materials listed on Page 6 under "Application Materials Checklist." Materials should be submitted in Microsoft Word or PDF format as attachments to the e-mail. Do not put the application information in the body of your e-mail message. Do not include any materials not requested, such as letters of support.

**Send to grants@sierrahealth.org
Subject line: Capacity Building Funding Application.**

**Questions about this funding opportunity and the application process may be sent to
grants@sierrahealth.org**

Application Materials Checklist

The Capacity Building/Leadership Development Funding Application form can be downloaded from Sierra Health’s Web site, www.sierrahealth.org.

- Completed Capacity Building/Leadership Development Funding Application form, which includes:
 - Application Cover Sheet form (see the sample with instructions on page 8)
 - Proposal Narrative (limit to 3 pages)
 - Proposed Budget and Budget Explanation
 - Performance Measures table (See the example Performance Measures tables below and on Sierra Health’s Web site.)
- Most recent annual financial statement that shows revenue and expenses for a full year
- 501(c)(3) determination letter

Example Performance Measures Tables

Example 1:

Purpose of Project: To improve the capacity of Organization ABC to deliver effective, efficient and relevant services.

Proposed Project Design	Performance Measures	How will the information be collected?
<p><i>What will you do? (list major activities specific to the Sierra Health Foundation-funded project)</i></p> <p>Develop a five-year strategic action plan to guide the organization.</p>	<p><i>For each activity in each section, indicate how you will measure your work.</i></p> <p><i>How much will you do? (list QUANTITY measures for planned activities here, e.g., how many staff trainings, number of staff surveyed, etc.)</i></p> <ul style="list-style-type: none"> - Identify and hire an organizational consultant - Hold three day-long planning sessions - Develop a final written report 	<p><i>Include who, what resources, what methods, etc., as applicable, for each activity and each type of measure</i></p> <p>Designated individual will collect detailed notes from each planning session and team will produce final written strategy plan.</p>
<p><i>How well will you do it? (list how you will know if services are delivered or activities are accomplished)</i></p> <p>The strategic action plan will identify key organizational goals and put forward a timeline of specific steps toward the implementation of those goals; the plan will contain input from all members of the organization and will receive board approval.</p>	<p><i>List QUALITY measures for each of your planned activities here as a percent, e.g., the percent of staff trainings with full participation, staff who completed an assessment survey, etc.</i></p> <ul style="list-style-type: none"> - 100% participation of staff and board at planning sessions - Staff and board will provide feedback to a draft of the written plan before it is finalized - Final plan will receive board approval 	<p>Collected notes will record participation at each planning session; board will deliver final approval of written report.</p>
<p><i>What change will you produce? (list the ways people or circumstances will be different) This change may occur after the grant ends.</i></p> <p>Organization ABC will cohesively move forward with specific, focused initiatives over the next five years.</p>	<p><i>List measures for the impact you expect to have through each of your planned activities.</i></p> <p>Organization will meet at least 80% of the goals outlined in the strategic plan.</p>	<p>Organization leadership and board members will assess progress every six months and update the strategic plan to ensure continued relevancy.</p>

Example 2:


Purpose of Project: To improve the capacity of Organization ABC to monitor and evaluate projects.

<p>Proposed Project Design</p>	<p>Performance Measures</p> <p><i>For each activity in each section, indicate how you will measure your work.</i></p>	<p>How will the information be collected?</p> <p><i>Include who, what resources, what methods, etc., as applicable, for each activity and each type of measure</i></p>
<p><i>What will you do? (list major activities specific to the Sierra Health Foundation-funded project)</i></p> <p>Develop the capacity of staff to monitor and evaluate projects.</p>	<p><i>How much will you do? (list QUANTITY measures for planned activities here, e.g., how many staff trainings, number of staff surveyed, etc.)</i></p> <ul style="list-style-type: none"> - Identify and hire evaluation consultant - Train staff members in two full-day sessions with a focus on how to incorporate monitoring and evaluation into daily practices. 	<p>Staff member participation will be recorded at each training session.</p>
<p><i>How well will you do it? (list how you will know if services are delivered or activities are accomplished)</i></p> <ul style="list-style-type: none"> - Staff members will participate in a survey to determine skills learned. - Staff will incorporate monitoring and evaluation into current and future projects. 	<p><i>List QUALITY measures for each of your planned activities here as a percent, e.g., the percent of staff trainings with full participation, staff who completed an assessment survey, etc.</i></p> <ul style="list-style-type: none"> - 100% of staff who participate in training will take a pre and post survey to measure skills learned. - Within 12 months, 50% of organization's projects will include a plan for monitoring and evaluation. 	<ul style="list-style-type: none"> - Pre and post surveys will be collected for each participating staff member. - Program officer will track number of projects with evaluation and monitoring component.
<p><i>What change will you produce? (list the ways people or circumstances will be different) This change may occur after the grant ends.</i></p> <p>Staff will collect, analyze and utilize data for project monitoring and evaluation.</p>	<p><i>List measures for the impact you expect to have through each of your planned activities.</i></p> <p>At least 50% of individual projects will be evaluated on an ongoing basis.</p>	<p>Project staff will collect data as required by specific evaluation plans and produce periodic reports.</p>



INSTRUCTIONS ONLY
Do not type on this form

Capacity Building/Leadership Development Funding Application Application Cover Sheet

To complete this form, save it as a Microsoft Word document or click on the Word icon  on the left of your screen. Then type into each shaded field. Use the TAB key to move from field to field, or click in each field. Limit your responses to the space provided.

Applicant Information

Organization	Name of 501(c)(3) organization (as it appears on IRS determination letter)			
Address	Address of the above			
City		State		Zip Code
Phone	Director's phone	Ext		E-mail Director's e-mail address
Director	Director of 501(c)(3)	Title	Director's title	
Tax Exempt ID#	of 501(c)(3)			
Web site	Web address of 501(c)(3)			

Application Contact	Name of primary contact at 501(c)(3)	Title	Title of primary contact	
Address	Address of primary contact			
City		State		Zip Code
Phone	Primary contact's phone	Ext		E-mail Primary contact's e-mail address

Proposed Activities Summary Information

Organization's Target Age Group (Select One)

- General/All Ages Adults (19-54) Seniors (55+) Young Children (0-5) Youth (6-18)

Racial/Ethnic Population(s) Organization Serves (Select All That Apply)

- African-American/Black; Specify (optional): _____
- Asian-American/API; Specify (optional): _____
- Latino/Hispanic; Specify (optional): _____
- Native American; Specify (optional): _____
- Other (Specify) _____

Brief Description of Proposed Activities (limited to 190 characters). Funding will be used:

To

Start Date Between Apr. 1 and May 31, 2010

End Date Not more than 12 months after start date

Amount Requested Dollar amount, not more than \$10,000, requested from Sierra Health for the proposed activities

Primary Use of Funds (Select One)

- Board Development
- Fund Development
- Leadership Development/ Coaching
- Staff Training/Retreats
- Strategic Planning
- Succession Planning
- Organizational Assessment/Evaluation
- Strategic Organizational Restructuring/ Mergers
- Other

Geography That Will be Affected

Organization serves in all 26 counties of Sierra Health’s funding region:

- Yes No

If no, indicate in the space next to the county’s name the percentage of the organization’s services that take place there (best estimate).

Alpine	_____%	Glenn	_____%	Sacramento	_____%	Stanislaus	_____%
Amador	_____%	Lassen	_____%	San Joaquin	_____%	Sutter	_____%
Butte	_____%	Modoc	_____%	Shasta	_____%	Tehama	_____%
Calaveras	_____%	Mono	_____%	Sierra	_____%	Trinity	_____%
Colusa	_____%	Nevada	_____%	Siskiyou	_____%	Tuolumne	_____%
El Dorado	_____%	Placer	_____%	Solano (eastern part including Fairfield)	_____%	Yolo	_____%
		Plumas	_____%			Yuba	_____%

Indicate if the organization serves an urban or rural area, or both (see page 2 of the Application Instructions and Criteria for instructions on determining this).

- Serves only an urban area Serves only a rural area Serves both urban and rural areas

What percent of people served by the organization’s activities live in a rural area? (Best estimate; see page 2 of the Application Instructions and Criteria for instructions on determining rural areas.) _____ %

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 - Completed Performance Measures table
- 501(c)(3) determination letter
- Most recent annual financial statement that shows revenue and expenses for a full year

Name of authorized 501(c)(3) officer _____

Title _____