**CUMBERLAND COUNTY UNITED FUND**

**Request for Proposals (RFP) for 2025 Funding**

**For Outcome Based Programs**

To invest our limited resources in services that impact Cumberland County’s most pressing human service needs, in 2024 the United Fund began transitioning to an outcome-based funding model. For the 2025 funding cycle, nonprofits will once again be able to select whether they want to apply for funding that requires determining and measuring outcomes, or smaller grants that do not require outcome measurement.

Those nonprofits who wish to provide clear data and evidence to support their program’s impact are encouraged to complete this Outcome-Based RFP. Local services to individuals and families must align with the United Funds focused Impact Area Goals and funding Priorities**. (See Addendum 1 for complete Community Impact Areas with Funding Priorities).**

**Health & Wellness**

**\*Goal:** Children and adults in Cumberland County are physically, mentally, and emotionally healthy.

**Education**

**\*Goal:** Youth achieve academic goals and demonstrate life skills necessary to become positive, contributing members of the community.

**Financial Stability**

**\*Goal:** Individuals and families are stable, self-sufficient and no one lives in poverty.

**Organizations who are providing services that address one of United Funds Funding Priorities (as defined in Addendum I) and are committed to measuring the difference their services are making in the lives of people are encouraged to apply.**

**This is a competitive application process**.

Workshops on completing this grant application and measuring outcomes will be held on June 11 from 1:30 – 3:00 pm (CST) at the United Fund, 348 Taylor Street, Crossville TN 38555. The workshop will be repeated on June 25 from 3:30 – 5:00 pm (CST) at the United Fund, 348 Taylor Street, Crossville TN 38555. You must register at [hollyneal@cumberlandunitedfund.org](mailto:hollyneal@cumberlandunitedfund.org). Attending one of these workshop is **not** mandatory but encouraged.

**All applications are due by NOON on Thursday, AUGUST 22, 2024. No late proposals will be accepted**.

**Please email completed proposal to:**

[hollyneal@cumberlandunitedfund.org](mailto:hollyneal@cumberlandunitedfund.org)

Review Team visitations **will** be conducted for proposals in this category (outcome-based proposals).

**Completing the Proposal:**

1. Please read the complete RFP before beginning.
2. Answer each question by **typing on the document**. All proposals should be typed in Times New Roman with a 12-point font and 1.15 line spacing.
3. Addendum I includes the United Fund’s three Impact Areas with Goals and Funding Priorities for each to use when crafting proposal answers.
4. Addendum II includes the SCORING CRITERIA for each question that will be used by the reviewers when scoring each proposal. Grant writers should be sure to include all information in their answers that address the Criteria listed.
5. Please number the pages and include your non-profit name at the top of each page.

**Cumberland County United Fund**

**Request for Proposals (RFP) for 2025 Funding**

**Outcome Focused Proposals**

**Cover Sheet**

|  |
| --- |
| Agency Name:  Website: |
| Mailing Address:  City: State: Zip: |
| Physical Address:  City: State: Zip: |
| Agency Director:  Email: Phone: |
| Grant Writer:  Email: |
| Agency/Proposal Contact for Review Meeting:  Title:  Email: Phone: |
| **Amount of this request**: $ |

We certify that the information provided in this proposal is accurate and complete. We agree to comply with any required visits by the Review Team for the allocation process.

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**SECTION I Program Information**

1. **What is the mission of your organization?**
2. **How are resources for Cumberland County allocated? (i.e. All funds remain in CC. or X % remains in CC, etc. )**
3. **Is your organization registered and up-to-date as a 501c3? Yes No**

(Please provide a copy of your 501c3 determination letter if not already on file with the United Fund.)

1. ***Program Summary*** – Provide a brief (1800 character maximum) summary description of the program services you provide in Cumberland County. Include the specific target population and key program/activity features. (Your summary will be used by CCUF for marketing and fundraising purposes, should your program be selected for funding.)
2. ***Impact Focus Area*** – Select ONE United Fund **Impact Area (See Addendum I)** listed below for which you are requesting funds. Be sure your program will show a measurable impact on an outcome for the focus area you select. If you received UF funding in 2024, you should measure the same outcome for a minimum of three (3) years. (underline your choice below)

**Health & Wellness Education Financial Stability**

1. **Funding Priorities** – Please select the Funding Priority from the Impact Focus Area you selected in #5 above that your services will impact during the duration of the grant. (**See Addendum I for listing**.)
2. **Program Narrative** – Describe the **specific program for which you are applying for funding**. Include each of the following and how each **specifically addresses** the Impact Area selected in question #5: 1) program goal(s), 2) target population, 3) core services and, 4) strategies.
3. ***Need***- From your research, what is the **need** for your program in Cumberland County? Please provide local, state, and national data relevant to the issue(s) your program addresses. How many individuals in Cumberland County **could Directly** benefit from your services if the resources were available?
4. ***Target Population*** – Include a specific profile of the target population you are serving, including demographics, geographic reach, socioeconomics, and ethnicity. Please expand your #7 answer regarding target population.
5. ***Program Service Criteria*** – Describe the criteria used to determine whether an individual or family is eligible to receive services from your program. Include information about any specific intake procedures or assessments completed by program staff and whether there is a fee for participation in your services.
6. ***Program Outreach*** – Describe your outreach and how you proactively locate individuals or families to participate in your program.
7. ***Feedback*** - Discuss how you gather and use **program participant feedback** to improve your program.
8. ***Number Served*** – How many unduplicated individuals did your agency serve in 2023? If your impact program is only one of many services you provide, how many unduplicated individuals did that program serve in 2023? How many do you anticipate it serving in calendar years 2024 and 2025?
9. ***Collaborations*** – Is this a collaborative effort? If so, explain the roles of each collaborative agency.

**SECTION II Program Impact**

1. **Outcome Report** – If you are currently funded by the UF, you must report on any outcome data you have collected over the first 7 months of the grant related to your outcome statement in your 2024 proposal. Include the data source(s) used. Applicants currently not funded by the UF may skip this question.
2. **Outcomes** – The same outcome(s) should be measured for a minimum of three consecutive years in order to give an actuate picture of the impact your program is making. If you are currently supported by the UF, please use your outcome from your 2024 proposal to answer the following questions. If you are not currently funded by the UF, you must select an anticipated outcome from your program to answer the following three questions. **EVERYONE MUST ANSWER THE FOLLOWING**:
   1. What one change or improvement do you expect in your participants as a result from participating in your program? (*i.e. People in crisis obtain job skills. Older adults at risk of entering a nursing home will continue living in the community.)*
   2. What number and percent of your participants do you anticipate making the above change or improvement?
   3. What information will you collect to track the program’s success related to the above change or improvement? (*i.e. # of participants who gained job skills and found employment within 6 months. % of older adult participants that remained living at home as a result of home care services.)*

**The Budget Information Section follows. Please complete and email to hollyneal@cumberlandunitedfund.org it in a separate file from the above narrative section.**

**Cumberland County United Fund Request for Proposals (RFP) for 2025 Funding**

**Outcome Focused Proposals**

**BUDGET INFORMATION**

**\*Instructions: This information should be emailed and submitted in a separate file from the proposal narrative but is due at the same time. (Noon, Thursday, August 22, 2024) \***

**Agency Name:**

**Total Agency Budget: $**

**Total Budget for this Program in Cumberland County: $**

**How many individuals will you serve through this budget?**

**Anticipated amount of dollars from agency fundraisers in 2025 (please list):**



**Please list the top 3 revenue sources for this program during the last budget year:**



**Amount requesting from the United Fund: $**

**Does your agency conduct an annual audit? Yes No No**

**Please scan and attach a copy of your IRS Form 990 for your most recent fiscal year end. If your organization is not required to file a 990, please complete an IRS Form 990-EZ and email with the above budget information.**

**Cumberland County United Fund Request for Proposals (RFP) for 20252 Funding Outcome Based Programs**

**Addendum I**

**Community Impact Areas**

HEALTH AND WELLNESS

**Goal I:** Children and adults in Cumberland County are physically, mentally, and emotionally healthy.

**Funding Priorities**

* Reducing rates of substance abuse through prevention, education, and treatment.
* Increasing awareness and access to mental health services.
* Removing barriers to ensure vulnerable individuals have access to services that support their basic needs.
* Supporting access for aging adults to physical, medical, and social support.

EDUCATION

**Goal II:** Youth achieve academic goals and demonstrate life skills necessary to become positive, contributing members of the community.

**Funding Priorities**

**Services supporting:**

* School readiness
* Early grade reading
* Middle school success
* High school graduation

FINANCIAL STABILITY

**Goal III**: Individuals and families are stable, self-sufficient and no one lives in poverty.

**Funding Priorities**

* Supporting family-sustaining employment and financial stability
* Supporting household stability

**Cumberland County United Fund**

**Request for Proposals (RFP) for 2025 Funding Outcome Focused Proposals**

**Addendum II Scoring Criteria**

The following provides information that will be used by proposal reviewers for scoring each question of the RFP. To receive the top score for each question, proposal writers should ensure their answers address the content indicated below.

**Section I.-Program Information**

**Question I.1 - Mission** The mission is clear and serves people in need.

**Question I.2 - Resources** Resource allocation is clearly explained.

**Question I.3** **- 501©3** Organization is a 501©3 and up-to date.

**Question I. 4 – Program Summary** There is a clear and concise description of the program, issues it will address, and who it serves. No more than 1800 characters.

**Question I. 5 – Focus Area** One Impact Focus area was selected.

**Question I.6 – Funding Priority** One Funding Priority from Addendum I was written.

**Question 1.7 – Program Narrative** Program goals, target population, core services and strategies are each explained as to how they address Impact Area.

**Question I. 8 – Need** There is numerous documented information that the need the program is addressing is critical and the number of local individuals who could directly benefit from the program is included.

**Question I. 9 – Target Population** There is a concise and thorough description of the target population that includes demographics, geographic reach, socioeconomics and needs.

The program is designed to target a UF priority Focus Area population.

There is information on trends associated with the target population as it relates to the issue being addressed.

**Question I. 10 – Program Service Criteria**

Eligibility criteria is specific, well-defined and allows for easydetermination of eligibility. The criteria does not discriminate within the target population and is inclusive.

Intake procedures completed by program staff are clearly explained.

**Question I. 11 – Program Outreach** There is a clear plan for identifying and increasing participation levels of the target population into the program.

**Question I. 12 – Feedback** Program participant feedback is collected and utilized to improve program services.

**Question I. 13 – Number Served** An unduplicated count was provided for 2023 and there is confidence that the numbers were arrived at correctly. A reasonable anticipated number was provided for 2024 and 2025.

**Question I. 14 – Collaborations** The program collaborates with other support services to improve service delivery, sustainability, efficiency and/or effectiveness. The roles of each are described.

**Section II Program Impact**

**Question II. 15 – Outcome Repot** Agencies funded in 2024 MUST report any outcome data collected during the first 7 months, January – July, 2024. Data source should be included.

**Question II. 16 – Outcomes a.** A minimum of one expected change or improvementin program participants is listed.

**b.** The number and % of participants anticipated to make change in Question 16 a is included.

**c.** There is a list of the information that will be tracked and recorded for use in determining whether or not number and % of participants made expected change or improvement.

**END**