



# Community Based Organization/ Preventative Health Grant Program Request for Application – FY 2020-21

## I. INTRODUCTION

**Purpose:** The Community Based Organization/Preventive Health Grant (CBO/PHG) programs provide funding for local programs/projects that support and complement (not duplicate) the efforts of the County's health and human services departments in promoting the health and well-being of the community, encouraging behaviors and activities that focus on enabling County residents to reach and maintain optimal health, stability, and independence.

**Source and Amount of Funding:** In fiscal year (FY) 2019-20, a total of \$2.0 million in grant requests were received.

The Community Based Organization Grant program receives its funding from the County General Fund. A total of \$1,118,500 was distributed to community based non-profit organizations in FY 2019-20.

The Preventive Health Grant program receives its funding from a lawsuit settled by the tobacco industry in 1998. In FY 2019-20, \$348,000 was awarded for preventive health grants.

The total amount of funds available for the FY 2020-21 CBO/PHG Grant Program has not been determined as of the release date of the Request for Application (RFA).

**Timeline and Process:** The RFA is being released on **March 2, 2020**. Completed applications (including the correct number of copies and electronic filings) will be accepted until **April 10, 2020 at 5:00 p.m.** (no postmarks accepted). **NOTE: Incomplete or late applications and/or electronic submittals will not be accepted.** The CBO/PHG Grant Committee will evaluate the applications and their subsequent recommendations will be considered by the Board of Supervisors during the County annual budget hearings in June 2020. Once the Board has approved funding, programs will be expected to begin on July 1, 2020.



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## II. ELIGIBILITY

Both public and private nonprofit organizations are eligible to apply. Organizations must either have a non-profit designation at the time of grant application submission or be a public agency such as a school district, County agency or department. Programs/projects must be carried out in San Luis Obispo County and serve only San Luis Obispo County residents.

Applicants must offer their services to all residents of San Luis Obispo County, regardless of political or religious opinions or affiliations, age, sex, race, color, national origin, marital status, disability, sexual orientation.

## III. REVIEW AND SELECTION CRITERIA

Local programs/projects must support and complement (not duplicate) the efforts of the County's health and human services departments in promoting the health and well-being of the community, encouraging behaviors and activities that focus on enabling County residents to reach and maintain optimal health stability and independence.

Programs/Projects will be reviewed and prioritized, among other things, on:

1. Local need;
2. Identified funding sources showing the ability to leverage the other funds;
3. Program/project goals, results, outputs/outcomes; if applicable, projected results from prior year;
5. Program cost compared with number of people served;
6. Geographic distribution of services;
7. Percentage of requested funding being used for direct services;
8. Program/project sustainability with funds granted;
9. Collaboration with other community-based agencies and County departments;
10. Organizational cultural competency.

**Program/project funding shall not be used to supplant other revenue sources.**

Please Note: sober living and recovery homes are not eligible to receive funding via this grant program. Funds for these types of programs are available through the Drug and Alcohol division of County Behavioral Health.



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## IV. REQUEST FOR APPLICATION REQUIRED COMPONENTS

Organizations that normally submit separate applications for various projects/programs carried out by their organization are encouraged to submit one application. The maximum number of pages for the grant proposal is **FIVE double sided pages including** the cover sheet, scope of work or work plan, budget, and budget narrative. Pages should be numbered consecutively.

**The application should be submitted in the following order:**

### Cover Sheet:

- A. Application must have a **COVER SHEET** which clearly identifies:
  1. Project Title
  2. Organization/Agency Name
  3. Executive Director and/or Program Contact Person
  4. Address
  5. Phone number
  6. E-mail address
  7. Amount of funds being requested
  8. If applicable, funds received in the prior year (or most recent fiscal year when funds were received)
  9. A brief (50 words or less) description of proposed project

### Program/Project Information:

The application must contain the following information:

1. Briefly describe your organization and its mission.
2. Summarize your program/project by providing a brief description.
3. How is the program or service beneficial to County residents?
  - A. How does it complement and collaborate with existing efforts?
  - B. Describe how the proposed program or service is different than health and human services programs provided by the County or other community-based organizations?



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- C. How was the local need for this program/project determined?
- D. Is there a fee associated with service?
- 4. Describe your organizational capacity to successfully carry out the proposed activities (i.e. past performance and history of the organization will be considered to assess the agency's prospects for achieving its goals and objectives).
- 5. If the program is not fully funded, will the program still continue?

## Scope of Work or Work Plan:

The following information should be provided in the format as shown below.

### 1. **FY 2020-21 Scope of Work or Work Plan:**

Your scope of work or work plan should answer these questions:

- A. What are the program/project goals?
- B. How will those goals be achieved including time frame?
- C. What is your evaluation methodology for measuring results?

### 2. **FY 2019-20 Program Results:**

All requests from agencies that received Preventive Health or Community Based Organization grant funds in FY 2019-20 must specify actual program results attained to date as well as projected results for the balance of the fiscal year. Results must be described in meaningful, measurable terms.



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## EXHIBIT A SCOPE OF WORK/WORK PLAN FORMAT

### Requested Grant Funds in Fiscal Year 2020-21

Program/Project Summary: \_\_\_\_\_

Goal/Objective (refer to 1.A above)	Major Tasks (in order to achieve goal) (refer to 1.B above)	Timeline	Evaluation methodology (refer to 1.C above)
Program/Project OUTPUTS			
Program/Project OUTCOMES			

### Grant Funds Received in Fiscal Year 2019-20 (if applicable)

Program/Project Summary: \_\_\_\_\_

Goal/Objective (refer to 1.A above)	Major Tasks (in order to achieve goal) (refer to 1.B above)	Timeline	Evaluation Mythology (refer to 1.C above)
Program/Project OUTPUTS			
Program/Project OUTCOMES			



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## SCOPE OF WORK/WORK PLAN

### **Results:**

A meaningful, measurable result will demonstrate the difference the proposed project makes, or is intended to make, in the lives of the people receiving the service.

**OUTPUT** results show the amount of work performed or services received - e.g. number of patients treated, number of meals served, number of childcare slots created, etc.

Output Measures: 500 people will participate in health screening clinics and receive referrals for follow-up when indicated.

75 people will be enrolled in Healthy Families MediCal program to improve utilization of health services.

XX number of meals will be served to seniors during the year.

**OUTCOMES** show the quality of performance and answer the question: who is better off by doing this project? Here are some examples:

Outcome Measures: At least XX% of smokers who participate in services will successfully quit using tobacco.

XX% of clients that receive substance abuse treatment services and are drug and alcohol free one year later.

XX% of program participants in the prevention program will demonstrate their commitment to an alcohol and drug-free lifestyle.



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## Program/Project Budget:

### 7. PROGRAM/PROJECT BUDGET:

The following information should be provided in the format as shown below.

- A. A one (1) page budget narrative is required that:
  - 1. Describes each line item;
  - 2. Explains changes in funding requests;
  - 3. If these funds will be used for a **community** match required by other funding sources, please list the other funding source, and the amount of the match required;
- B. Provide a budget that includes the following information:
  - 1. A description of all sources of funding for the proposed program/project, including funding received from County sources or those not secured;
  - 2. Identifies the part of the proposed program/project the requested funds will be used for.
- C. If your organization is submitting one application for multi-programs/projects, please submit a separate budget for each program/project request.
- D. A current year organizational budget. If the applicant is a County department, please submit your current fiscal year line item actuals.



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## Request for Application - FY 2020-21 PROGRAM BUDGET REQUEST FORM

	Project Expense	Grant Budget Requested	Other Funding Available* Amount & source
<b>I. PERSONNEL EXPENSES</b> (associated with the proposed project)			
<b>Subtotal – Personnel Expenses</b>			
<b>II. OPERATING EXPENSES</b> (associated with the proposed project)			
<b>Subtotal – Operating Expenses</b>			
<b>III. INDIRECT @ _____ OF PERSONNEL</b>			
<b>Total Grant Project Expenses</b>			

\*List in this column all agency funds available to support the project. Indicate with a “@” next to the amount that are in-kind and a “NS” for those not yet secured.





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## General Application Information

1. All applications should be clear, concise and complete. No additional information will be accepted past the **April 10, 2020** deadline unless specifically requested by the County.
2. Application must be submitted
  - **Stapled** on 8.5 x 11 plain white paper.
  - **Your grant application should be no more than five (5) doubled sided pages (e.g. ten pages = 5 double sided pages).** All pages in the application should be numbered consecutively.

**An original plus eight (8), for a total of nine (9) copies, stapled doubled sided copies of the grant application should be submitted by 5:00 p.m. on April 10, 2020. POSTMARKS WILL NOT BE ACCEPTED.**

3. Each copy of the application should also include the following (stapled to the application and double sided) :
  - a. Organizational operating budget
  - b. Key program personnel (include a short description of their background)
  - c. Board of Directors of your organization and relevant advisory boards (please include member affiliations.)
  - d. Adopted organization policy or statement on inclusion, diversity, or affirmative action.
  - e. Tax-exempt status documentation, e.g. IRS determination letter.
  - f. A copy (each) of the current status of non-profit organization from Secretary of State and Attorney General Office. These documents can be accessed at the specific agency's web site (Secretary of State: <https://businesssearch.sos.ca.gov/> and Attorney General's Office: <http://rct.doj.ca.gov/Verification/Web/Search.aspx?facility=Y>)

See **Attachment 1** for examples of these status reports. Please do not send your organization's Statement of Information.

Grant applications from organizations that do not include this documentation or whose non-profit status is "**inactive**" or "**delinquent**" will not be accepted. This requirement does not apply to grant applications



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from public agency such as a school district, County agency or department.

4. In addition to the nine (9) required “paper” copies, the complete grant application (the cover sheet, scope of work or work plan, budget, budget narrative, and the requested information in #3 above), should be submitted in electronic ([WORD](#) format) to [cpene@co.slo.ca.us](mailto:cpene@co.slo.ca.us) by **5:00 p.m. on April 10 2020**.
5. Proposals should be stapled only without binding, binders or folders.
6. Please DO NOT include letters of references, brochures or flyers. If necessary, this information will be requested at a later date.
7. All costs associated with the preparation and submission of this application will be borne by the applicant.
8. All applications become the property of the County of San Luis Obispo and will become public information after the submission deadline.
9. Applications should be submitted to the address delineated below. At the time the application is received by the County, it will be date and time stamped and recorded.

**County Administrative Office  
ATTN: Courtney Pene  
Room D430, County Government Center  
1055 Monterey Street  
San Luis Obispo, CA 93408**

**Any questions regarding the RFA or process should be directed to Courtney Pene of the County Administrative Office at 805/788-2642.**



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## ATTACHMENT #1

### Secretary of State example:

Search Screen:

**Business Entities (BE)**

- Online Services
  - File LLC Statement of Information
  - File Corporation Statement of Information
  - Business Search
  - Current Processing Dates
  - Disclosure Search
- Service Options
- Name Availability
- Forms, Samples & Fees
- Statements of Information (annual/biennial reports)
- Filing Tips
- Information Requests (certificates, copies & status reports)
- Service of Process

**Business Search**

This search provides access to available information for corporations, limited liability companies and limited partnerships of record with the California Secretary of State, including **free PDF copies** of imaged business entity documents, including the most recent imaged Statements of Information filed for corporations and limited liability companies. Please note: This search is not intended to serve as a name availability search. For information on checking or reserving a name, refer to [Name Availability](#).

To conduct a search:

- Select the applicable search type.
- In the "Search Criteria" box, enter the entity name or number you wish to search. Note: If entering the entity number of a corporation, the number must begin with the letter C.
- Select the search filter you wish to use to locate the entity if searching for an entity name.
- Select the Search button.
- For help with searching an entity name or number, refer to [Search Tips](#).

All fields marked with an asterisk (\*) are required.

Search Type \*  Corporation Name  LP/LLC Name  Entity Number

Search Criteria \*  Search Filter

### Provide a copy of either page:

Show  entities per page

Narrow search results:

Entity Number	Registration Date	Status	Entity Name	Jurisdiction	Agent for Service of Process
C0198740	07/17/1945	ACTIVE	<a href="#">CAMBRIA CHAMBER OF COMMERCE</a>	CALIFORNIA	MEL MCCOLLOCH

or





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## C0198740 CAMBRIA CHAMBER OF COMMERCE

**Registration Date:** 07/17/1945  
**Jurisdiction:** CALIFORNIA  
**Entity Type:** DOMESTIC NONPROFIT  
**Status:** ACTIVE  
**Agent for Service of Process:** MEL MCCOLLOCH  
2760 MARLBOROUGH  
CAMBRIA CA 93428  
**Entity Address:** 767 MAIN ST.  
CAMBRIA CA 93428  
**Entity Mailing Address:** 767 MAIN ST.  
CAMBRIA CA 93428

A Statement of Information is due EVERY ODD-NUMBERED year beginning five months before and through the end of July.

Document Type	File Date	PDF
SI-COMPLETE	05/24/2017	
SI-COMPLETE	06/29/2016	
REGISTRATION	07/17/1945	Image unavailable. Please request paper copy.



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## Department of Justice/Office of Attorney General example:

Search Screen:



### Registry Verification Search

The Registry Verification Search allows you to search and verify whether a charitable organization or fundraiser has complied with the Attorney General's registration and reporting requirements. You can also review records and other public filing that a charitable organization or fundraiser has submitted to the Attorney General's Registry of Charitable Trusts. The Registry's database contains copies of most public filings required to be filed by charitable organizations, charitable trustees and fundraising professionals. This tool allows you to download copies of annual registration renewal forms (RRF-1), copies of IRS Forms 990, raffle reports and other fundraising reports that are in the Registry's database.

We recommend the following search tips when searching for a charity or fundraiser by name:

- For Organization Name searches, a full name of the organization is not necessary. For example, a search using the words "KIDS FOR" will show registrations for organizations whose names start with "KIDS FOR" (e.g., KIDS FOR SACRAMENTO and KIDS FOR DOLPHINS).
- An asterisk (\*) may be used as a wildcard. For example, a search using a wildcard \*kids\* will show registration for organizations whose names contain "KIDS".

Also available is a [list of charities in good standing](#) with the Registry. A charity is in "good standing" with the Registry when it is current in all its reporting requirements with the Registry. The [downloadable text file](#), generated monthly, is a snapshot of the charities in good standing at the time it is created. Much of the data, including the Registration Status of charitable organizations, may change at any time based on the processing of new filings or other reasons. To download the file, right-click [here](#) and select "Save link as" or "Save target as" (depends on your browser) to save it to your device.

To confirm data or status for a given organization, use the query tool below.

[Registry Verification Search Tips & Registry and Filing Status Definitions](#)

State Charity Registration Number:

SOS/FTB Corporate/Organization Number (numbers only):

FEIN (numbers only):

Organization Name:

DBA:

Program Type: All

Registration Type: All

Registration Status: All



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Provide a copy of either page:

Search Again

Organization Name	Registration Type	Registration Status	Registration Number	Applicant Number	FEIN	City	State
<a href="#">SOUTH COUNTY VISITOR SERVICES</a>	Charity Registration	Current	CT0193692	1461783	462180142	NIPOMO	CA
1							

or

Entity Type is either the Corporate Class as registered with the Secretary of State or based on founding and registration documents submitted to the Registry.			
<b>Organization Name:</b>	SOUTH COUNTY VISITOR SERVICES	<b>IRS FEIN:</b>	462180142
<b>Entity Type:</b>	Public Benefit	<b>SOS/FTB Corporate/Organization Number:</b>	3500439
<b>RCT Registration Number:</b>	CT0193692	<b>Registration Type:</b>	Charity Registration
<b>Program Type:</b>	Charity	<b>Renewal Due Date:</b>	5/15/2018
<b>Issue Date:</b>	3/29/2013	<b>Date This Status:</b>	3/29/2013
<b>Registry Status:</b>	Current		
<b>Date of Last Renewal:</b>	2/27/2017		
<b>Mailing Address</b>			
<b>Street:</b>	180 S MARY AVENUE		
<b>Street Line 2:</b>			
<b>City, State Zip:</b>	NIPOMO CA 93444		
<b>Annual Renewal Data Reported to the Registry</b>			
<b>Status of Filing:</b>	Accepted		
<b>Accounting Period Begin Date:</b>	1/1/2013		
<b>Accounting Period End Date:</b>	12/31/2013		
<b>Total Assets:</b>	\$0.00		
<b>Total Revenue:</b>	\$0.00		