



Community Based Organization/ Preventative Health Grant Program Notice of Funding Availability – FY 2023-24

I. INTRODUCTION

Purpose

The Community Based Organization/Preventative 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

The Community Based Organization Grant program receives its funding from the County General Fund. A total of \$1,088,118 was distributed to community based non-profit organizations in FY 2022-23.

The Preventive Health Grant program receives its funding from a lawsuit settled by the tobacco industry in 1998. In FY 2022-23, \$390,000 was awarded for preventive health grants.

The total amount of funds available for the FY 2023-24 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 **February 22, 2023**. Completed **electronic** applications will be accepted until **April 3, 2023, at 5 p.m.** **NOTE:**

- Grant applications should be one complete PDF document.

Application Naming Convention:

your organization CBO-PHG grant 23-24, e.g., CAPSLO CBO-PHG grant 23-24

- No paper copies of the grant application will be accepted.
- Incomplete electronic submittals will not be accepted.

The CBO/PHG Grant Committee will evaluate the applications shortly after receipt. The Board of Supervisors will adopt the budgets for both the Community Based Organizations and Preventative Health Grants in June 2023 (subject to change), and individual organization allocations will be adopted at the start of the fiscal year.



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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:

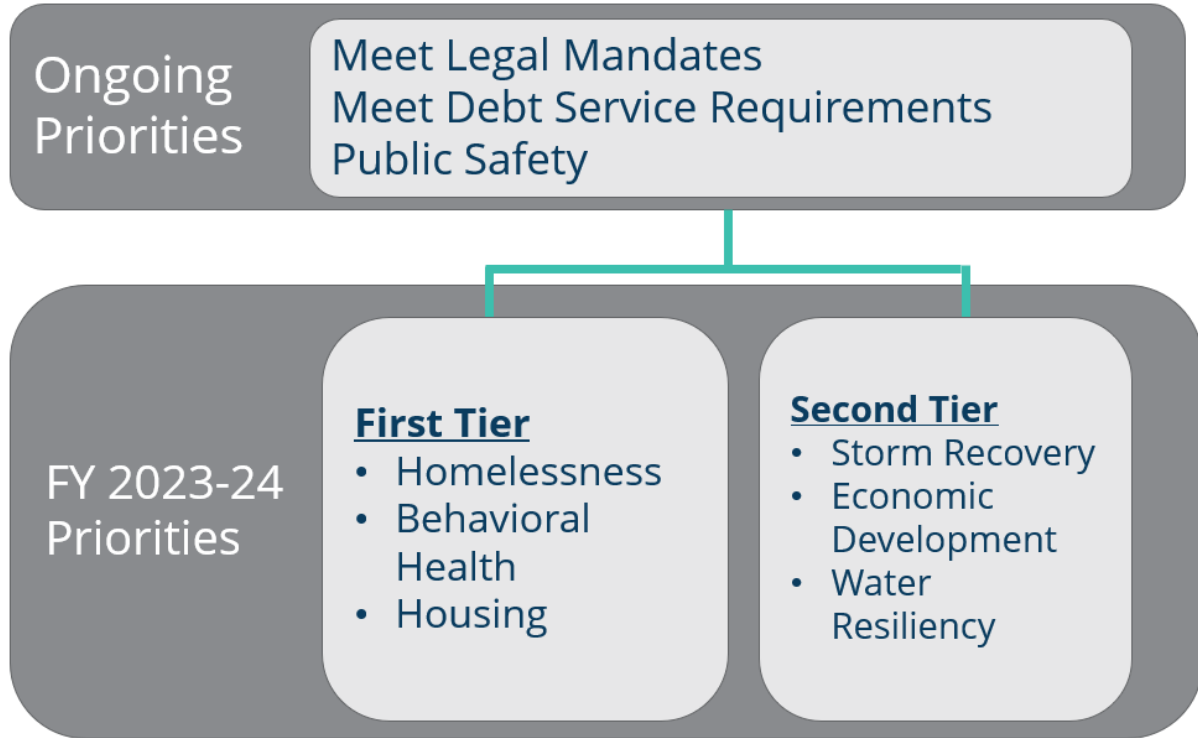
1. Local need.
2. Identified funding sources showing the ability to leverage the other funds.
3. Program/project goals, results, outputs/outcomes; if applicable, projected results from prior year.
5. Program cost compared with number of people served.
6. Geographic distribution of services.
7. Percentage 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.

It is important to mention that while it is not a requirement, those programs/projects that align with the approved FY 2023-24 San Luis Obispo County Budget Goals, adopted by the Board of Supervisors on January 24, 2023, will be prioritized for the Community Based Organization Grant Program.



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FY 2023-24 Board of Supervisors Priorities



Those programs/projects that align with the SLO County Community Health Improvement Plan (CHIP) Critical Health Impact Areas will be prioritized for the Prevention Health Grant Program. You can find additional information at [SLO Health Counts](#).

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.
- Funding for homeless and housing programs are no longer available via this grant. Funds for these types of programs are available through the Homeless Services Division of the Department of Social Services.

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 program/project information (#1-#5 below) is **FIVE pages**. The submittal should also include a



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cover sheet, scope of work or work plan, budget, and budget narrative. Pages should be numbered consecutively.

The application should be submitted, [as one electronic PDF \(see Exhibit 2\), in the following order:](#)

COVER SHEET

Application must have a **COVER SHEET** which clearly identifies:

1. RFA applying for: CBO-PHG Grant 23-24
2. Project Title
2. Organization/Agency Name
3. Executive Director and/or Program Contact Person
4. Current Mailing Address
5. Phone number
6. E-mail address
7. Amount of grant funding 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?
 - 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, how will the program continue?

SCOPE OF WORK OR WORK PLAN

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



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1. **FY 2023-24 Scope of Work or Work Plan**

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

- a) What is 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 2022-23 Program Results**

All requests from agencies that received Preventive Health or Community Based Organization grant funds in FY 2022-23 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 2023-24

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 2022-23 (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 methodology (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. Here are some examples:

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

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

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



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PROGRAM BUDGET REQUEST FORM

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

*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 5:00 P.M. **April 3, 2023**, deadline unless specifically requested by the County.
2. All applications should be **one complete PDF electronic submittal**, including the information requested in #3 below. There should not be any separate attachments as part of the grant submittal. **Postmarks and hand delivered applications will not be accepted.**

Application Naming Convention:

your organization CBO-PHG grant 23-24, e.g., CAPSLO CBO-PHG grant 23-24

3. All applications should also include the following:
 - 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 at [Secretary of State](#) and [Attorney General's Office](#)

See **Exhibit 1** for examples of these status reports. Do not send your organization's **Statement of Information** in lieu of the documents **requested in #f**.

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

4. Please DO NOT include electronic attachments such as letters of references, brochures, or flyers. If necessary, this information will be requested later.
5. All costs associated with the preparation and submission of this application will be borne by the applicant.



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6. All applications become the property of the County of San Luis Obispo and will become public information after the submission deadline.
7. Applications should be SUBMITTED ELECTRONICALLY ONLY to the following address:
ad_admin_grants@co.slo.ca.us

Any questions regarding the RFA or process should be directed to Olena Nagorna of the County Administrative Office at (805) 781-5496.



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Exhibit 1

SECRETARY OF STATE EXAMPLE

Please include your organization’s information in your electronic submittal.

Search Screen:

Business Entities (BE)

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	CAMBRIA CHAMBER OF COMMERCE	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:

DDA:

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



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Exhibit 2

ELECTRONIC APPLICATION PDF should contain the following:

1. Cover sheet
2. Program/project information – maximum 5 pages
3. Scope of work using format shown in the RFA
 - a. FY 2023-24
 - b. FY 2022-23 results to date
4. Program/Project budget using format shown in RFA
5. Organizational operational budget
6. Key program personnel
7. Board of Directors
8. Adopted organization policy or statement on inclusion, diversity, or affirmative action
9. Tax-exemption status documentation, e.g., IRS determination letter
10. Status of non-profit from both the California Secretary of State and Attorney's General Office