



VIRGINIA
HEALTH CARE
FOUNDATION

GRANT GUIDELINES

UPDATED JUNE 2021

VHCF'S MISSION

“If you have your health, you have everything.” But what if you don’t?

That “what if” is an everyday reality for many Virginians and one the Virginia Health Care Foundation (VHCF) has helped address since 1992. The Foundation is guided by a mission to increase access to primary health care (*which includes behavioral and oral health care*) for uninsured and medically underserved Virginians.

We have seen the heartbreaking consequences many hardworking Virginians experience due to their inability to obtain needed health care. That’s why VHCF has invested a significant amount of its grants in expanding the services available to uninsured and underserved Virginians, and building the capacity of organizations to provide such care. This has enabled nearly 800,000 Virginians throughout the state to obtain needed primary care.

VHCF provides two funding opportunities each year that:

- support initiatives to grow and strengthen health safety net medical, dental, and behavioral health practices and
- provide funding to other capable organizations that work with uninsured or other underserved populations or in medically underserved parts of the state to establish or expand behavioral health services.

Many of those served via VHCF grants, especially people of color, have high rates of chronic disease. They have also been disproportionately impacted by COVID-19. VHCF is dedicated to helping address these disparities and health inequities.

The number and nature of community organizations that increase access to needed health and mental health services for uninsured and underserved Virginians vary from community to community. Their success and effectiveness also vary and depend on multiple factors. VHCF encourages and supports local collaborative efforts to create, enhance, or increase the availability of needed health and behavioral health services within a community.

FUNDING PRIORITIES

As the only statewide health foundation in the Commonwealth, VHCF is committed to meeting the diverse needs of communities and populations throughout Virginia. Barriers to healthcare access take many forms and can be caused by a variety of factors. Grant applicants are encouraged to develop initiatives in the following areas based on their local needs.

Developing or Expanding Capacity

This includes initiatives that establish new outlets of care for uninsured or medically underserved Virginians, as well as those which enable existing programs to serve a greater number of patients. Examples include proposals to add new primary care providers (*medical, mental health, dental, pharmacists*); undertake a strategic expansion of physical infrastructure; utilize technology to expand access (*e.g., telemedicine*); or seek to implement an innovative model of service delivery.

Establishing a Broader Scope of Services

Some organizations are interested in adding new services to those they currently offer. Proposals to add key primary care services, *e.g.* mental health, dental; institute programs to enhance care of uninsured, chronically ill patients; or utilize technology (*e.g. telehealth or tele-mental health*) to enhance and expand access to primary care in underserved areas fall within the parameters of this funding track.

Accelerating Licensure of Behavioral Health Professionals

There is a compelling shortage of behavioral health professionals throughout the state, particularly in the 77 localities that are federally designated as mental health professional shortage areas. There are many masters-prepared social workers and counselors who require oversight for a defined period of time by a licensed professional in their field, before they can become licensed. VHCF will consider proposals for funding to pay the salary and benefits of these masters-prepared therapists from local organizations that will provide the required oversight from a trained behavioral health professional.

Creating Local Coordinated Systems of Care

VHCF is interested in stimulating and supporting local initiatives that will result in a community-wide coordinated network of care for the uninsured and the medically underserved, and invites proposals designed to achieve this. This funding track is appropriate for communities where there are several organizations that have a vision of working more closely together to achieve greater synergies and efficiencies both for their patients/clients and for their operations by creating or enhancing interoperability among providers.

Conquering the Consequences of COVID-19

The COVID-19 pandemic has disrupted life on all fronts and created many economic and personal ripple effects that have significantly increased the number of Virginians reporting symptoms of depression, anxiety, and PTSD (*35% compared to 10% in 2019 – Kaiser Family Foundation data*). Many nonprofit organizations report a significant increase in these conditions among their patients. As a result, VHCF is interested in supporting services or initiatives that increase the availability of mental health services at this critical juncture and beyond. The Foundation has a special interest in receiving

proposals that will address the mental health needs of populations and individuals most impacted by the pandemic.

FOCUS ON SUSTAINABILITY

A focus on sustainability is a guiding principle of VHCF grantmaking. As a result, each proposal is scrutinized thoroughly to ensure strong leadership, a well-articulated vision, a solid operating plan, community support, and long-term financial viability.

While **VHCF grants are typically for no more than a two to three-year period**, the Foundation targets its funds to organizations that are in it for the long-haul. VHCF's emphasis is on *sustainable* efforts that become an integral part of local health and mental health service delivery. To help organizations achieve this goal, VHCF funding in the second and third years is typically 25% less than in each previous year. This requires organizations to make up the difference and assists them in reaching financial sustainability by the time VHCF funding ends. Overall, 89% of VHCF funded initiatives have continued at or above their prior level of performance for at least 3 years after they've graduated from VHCF funding.

As a public/private partnership, VHCF understands and values the synergies and efficiencies that can occur when organizations work together. Applicants are encouraged to work with other local organizations providing or needing health and mental health services and other concerned organizations when formulating an initiative and preparing a proposal. This can help facilitate the transition to sustainability.

GRANT ELIGIBILITY

The following entities may apply for a grant from the Virginia Health Care Foundation:

- Any public agency or private non-profit holding a 501(c)(3) tax-exemption*;
- Any organization with a 501(c)(3) tax-exempt fiscal sponsor; or
- An applicant for federal tax-exemption under 501(c)(3).

**If the applicant is a free clinic or a community health center, it must be a member in good standing with either the Virginia Association of Free and Charitable Clinics or the Virginia Community Healthcare Association.*

GRANT CRITERIA

The Foundation looks for several key elements in every concept paper and proposal it reviews. A successful proposal will:

- Target a clearly-defined need and/or underserved population;
- Reflect strong organizational and initiative leadership;

- Provide evidence that all necessary logistics have been thought through and that agreements have been established with any collaborating agencies;
- Display broad-based community commitment and collaboration;
- Demonstrate that at least 25% of the initiative's costs are underwritten by the community (*including both cash and in-kind support*);
- Present a viable plan to sustain funding after Foundation funds are depleted;
- Present evidence of how the initiative fits within the applicant's strategic plan or vision for the future; and
- Agree to participate in the Foundation's evaluation of the initiative.

Overall, a successful proposal must demonstrate that all the necessary strategic and initiative planning has taken place, and the organization's management is thoroughly prepared and ready to implement the initiative. You may find the *Predictors of a Successful Initiative*, which follow to be helpful.

The Foundation will not:

- replace funding from a previously-existing source, either public or private, which has been reduced or eliminated;
- fund research initiatives that lack a direct primary care service component; or
- fund portions of existing operations.

If you are not sure if your concept meets VHCF guidelines, please contact VHCF's Program Officers: Andrea Lancaster at andrea@vhcf.org or Cat Hulburt at cat@vhcf.org or via phone at 804-828-5804.

GRANT APPLICATION PROCESS

The Foundation has two formal grant cycles each year, beginning in the winter and the summer. The Foundation's grant application process starts with the submission of a concept paper. While these are accepted throughout the year, they are officially reviewed in the winter and the summer.

Step One – Submission of a Concept Paper

Please visit VHCF's website, www.vhcf.org for submission forms and deadlines.

If you have an initiative that meets the Foundation's criteria, we encourage you to submit a concept paper. A concept paper must contain:

1. A completed [Concept Paper Cover Sheet](#) as supplied by the Foundation.
2. A concise description of each of the following:
 - The problem or community need that the initiative will address.
 - The initiative name and a description of what is proposed, how it addresses the community's needs and how it relates to the funding priorities of the Foundation.

- The anticipated results or impact of the initiative on the community.
- A timeframe of activities.
- A description of the applicant organization, its mission, and the services it provides.
- A summary of the organization's strategic plan and how the proposed initiative fits into the plan. If the applicant does not have a strategic plan, indicate how the proposed initiative fits with the organization's mission and future priorities.
- The local leadership and community support for the initiative.
- Plans for sustaining the initiative after Foundation funding ends.
- Estimated total costs for the initiative and the amount you are seeking from the Foundation for the first grant year. (*The concept paper must indicate that a minimum of 25% of total initiative costs will come from the community or other sources through cash and/or in-kind contributions.*)

3. Required formatting:

- Must be no longer than three (3) typewritten, double-spaced pages.
- Concept papers must use standard font size (12 point), letter-sized paper (8"x11"), 1" margins, and page numbers.
- For mailed proposals, the Foundation ***requires an original and five (5) copies of the concept paper (including the cover sheet)***. *Note: Due to the impact of COVID-19, VHCF is offering the option to submit Concept Papers via email. Submissions should be sent to Kari Parkhurst at kari@vhcf.org and must be received by 5 PM on the due date.*

The Foundation staff will review concept papers and correspond with applicants regarding requests for full proposals within two weeks of the deadline for submitting concept papers.

Please Note: The Foundation will respond to concept paper inquiries only. It will not respond to unsolicited formal proposals or to general requests for funds. Do not send attachments of any kind with the concept paper. They will not be reviewed, acknowledged, or returned.

An invitation to submit a concept paper or proposal does not guarantee funding for an initiative. Grant awards are only assured after the application/review process is complete; the Foundation's Board of Trustees has made final determinations regarding awards; and a satisfactory letter of agreement has been signed by all appropriate parties.

Step Two – Formal Proposal

If your concept paper meets the Foundation's criteria, you will be invited to submit a formal proposal. A formal proposal must contain:

1. A completed Executive Summary Cover Sheet as supplied by the Foundation.
2. A concise initiative narrative that describes each of the following:
 - **The need** – Document the specific health need that your proposed initiative will address, using local or internal data (*e.g. wait list, length of time before an appointment can be scheduled, or number of individuals turned away*). Additional supporting data may come from secondary sources such as a local Community Health Needs Assessment conducted by your local health department or nonprofit hospital, county health rankings, or the Health Resources and Services Administration (*HRSA*).
 - **Initiative description** – Include specifics about the impact of proposed funding on factors such as staffing levels, patients/clients and patient/client visits, hours of operation, or other indicators; give a “snapshot” of the operation before and after grant funding, showing the difference that the proposed initiative will make;
 - **Funding Priorities** – Describe how the proposed initiative aligns with VHCF’s funding priorities (*see pages 2-3*);
 - **Community commitment and collaboration** – Include sources of financial and in-kind support and identify your community partner organizations. Cooperative efforts, shared service provision and attempts to better integrate services within a community are all encouraged;
 - **Initiative management** – Indicate how the individuals who will implement and oversee the initiative are qualified to manage what is proposed and include their resumes or other relevant information about them;
 - **Cost-based and outcome-oriented evaluation plan and criteria** – Include administrative process measures (*e.g., increasing the number of individuals served from 2,000 per year to 4,000 per year*); patient-level process measures (*e.g., 100% of patients will be screened for behavioral health needs*); and health outcome measures (*e.g., 50% of patients/clients treated for depression or anxiety by a VHCF-funded provider will show meaningful improvement on a PHQ-9 screening*).
 - **Sustainability Plan** – Include a specific, detailed fundraising or revenue generation plan that identifies exact sources of other funding for the proposed initiative and when it will be available to replace VHCF grant monies to sustain the initiative for the long-term; and,
 - **Strategic Plan/Vision Statement and Organization Leadership** – Detail how this proposed initiative relates to your organization’s strategic plan. Also describe the leaders in your organization and the role they will play in planning for the future of the proposed initiative within your organization.

3. A **Proposed Budget with Rationale** should represent all of the revenue and expenses associated with the specific initiative to be funded. If the initiative will be a part of a larger organization, please provide the latest annual budget for the organization as an attachment. Include local public and/or private cash and in-kind contributions equivalent to a minimum match of 25% for funding requested.

You must use the budget format supplied by the Foundation, and the budget must be accompanied by an itemized rationale. Foundation funds may not be used to pay indirect costs, administrative assessments, or fees of universities or other institutions with which a VHCF initiative is affiliated. *Please note: The Foundation will most favorably review proposals showing the greatest local support.*

Required attachments include, but are not limited to:

- Sustainability Plan for proposed initiative (*please use format supplied by Foundation*).
- Support letters from community partners evidencing the monetary/in-kind resource commitment identified in the proposal and budget. Letters of Support from key collaborators should be included as well.
- Names and affiliations of the initiative management team and evidence of prior successful grant awards and leadership within the community.
- A list of the applicant organization's Board of Directors with their business titles or an indication of the special talents they bring to the Board.
- The resume(s) of the individual(s) who will serve as fiscal agent and supervisor of the proposed initiative.
- Evidence of the applicant's tax-exempt status.
- A copy of the applicant's most recent strategic plan.
- Organization budget
- Copies of most recent audit and financial statements (*P&L and Balance Sheet*)

Additional attachments, as applicable:

- Job descriptions for new positions
- Organizational chart
- Marketing plan
- Copies of relevant Memoranda of Agreement or contracts

Required formatting:

- The narrative of the formal proposal should be **no longer than 10 typewritten, double-spaced pages**. The Executive Summary, Budget, and Attachments are **not** included in the ten-page limit.
- Proposals must be presented in standard font size (*12 point*) on letter-sized paper (*8"x11"*).
- Use 1" margins and include page numbers on the narrative.

- Please do **not** staple or permanently bind your proposal (*binder clips and paper clips are fine*), or use special covers.
- The Foundation **requires an original and five (5) copies of the entire proposal (including attachments)**.

SPECIAL INSTRUCTIONS, POLICIES & INFORMATION

The Foundation will not review incomplete proposals or those which do not follow VHCF's specifications. Please examine your proposal carefully before submission to ensure you have provided all the information requested by the Foundation and that your concept paper or proposal meets all the specifications outlined in the guidelines.

The Foundation will not accept any materials, including Letters of Support, received under separate cover. All attachments and additional materials should be submitted with the formal proposal.

Applicants are responsible for verifying the receipt of a concept paper or proposal in the Foundation's office by the deadline. The Foundation will not acknowledge receipt of concept papers and proposals. Applications that are received after the deadline will be held for consideration in the next full grant cycle.

Following the submission of a formal proposal, applicants will be expected to participate in a one to two-hour follow-up call/interview with a VHCF Program Officer. Applicants should be prepared to answer specific questions about their proposal on that call and to provide additional information, if requested, in a timely manner.

If a full proposal is rejected, the applicant must wait a minimum of 12 months before resubmitting it. When feasible, the Foundation may offer some form of technical assistance to increase the likelihood of success for resubmitted proposals.

CONDITIONS FOR GRANT ACCEPTANCE

Each grantee must sign a letter of agreement with the Virginia Health Care Foundation that delineates the terms and specific objectives of the initiative. To view a sample letter of agreement click [here](#).

Each grantee must agree to participate in and assist with an evaluation of its funded initiative, and to submit requested data and reports on a timely basis. An evaluation will be appropriate to the initiative funded. It could measure the number of individuals served; the cost-per-individual; explore patient health status outcomes; and determine the grantee's success in achieving its stated goals and objectives.

Please Note: During the course of the grant, in the event of any substantive change in the proposed initiative or the management team of the organization or those responsible for managing the initiative, or other findings that could materially alter the nature or

successful achievement of the initiative's goals or objectives, VHCF reserves the right to reassess its support of the initiative.

PREDICTORS OF A SUCCESSFUL INITIATIVE

“Homework” Has Been Completed:

1. Mission is clearly defined and the purpose is reasonably limited in scope.
2. Need for the initiative is well-documented and baseline indicators of health status prior to implementation have been collected.
3. The local community is invested in the initiative. Cash and in-kind support has been pledged from the community.
4. The proposed service appears to be cost-effective, even in the first few years of delivery.

Infrastructure Is in Place:

5. Protocols for quality assurance have been established for the provision of any funded health, mental health, or dental services.
6. Community outreach activities have been identified to connect the target population with the new service(s).
7. Plan to communicate initiative highlights has been developed to keep community supporters invested and involved.
8. Transportation to the new service is readily available to the target population.
9. The proposed budget is comprehensive (*includes line items for personnel and benefits, rent, utilities, medications, lab and diagnostic services, medical supplies, office supplies, travel, insurance, etc.*) and demonstrates sound fiscal planning.
10. The need to provide prescription medicines or specialty referrals to patients who cannot afford them has been addressed and necessary supports have been allocated or established.

Management Capacity Is Strong:

11. Management for the initiative has a demonstrated record of success.
12. Association with an umbrella agency, if it exists, is well defined and all involved parties understand their respective roles.
13. Collaboration with other community programs exists and a conscious effort to avoid duplication of services has been made.
14. The value of data as a management tool and as a fund raising/public relations tool is recognized and data collection systems are in place.
15. The value of public relations as a means of generating financial support and attracting new patients is understood and media events are regularly scheduled.
16. An evaluation plan and capacity exist and are well targeted to answer specific questions about the initiative. Selected indicators reflect the quality and quantity of service provided, as well as measure the short and long-term impacts of the initiative.

Vision for the Future Exists:

17. A long-term plan to sustain the initiative has been developed and appears viable.

18. A strong and committed Board of Directors is in place and understands its role.
19. Continuation of the initiative is not dependent on a single factor that is likely to change, such as an initiative director who is working around the clock to keep the initiative afloat, a limited pool of volunteer providers who cannot meet the tremendous demand for services, or a significant donor whose only connection to the initiative is financial.