

Welcome to Yamhill Community Care's 2024 Joint RFP Application

YCCO Technical Assistance Webinar - March 26th, 2024

Use link below to register for the webinar

 $\frac{https://us06web.zoom.us/meeting/register/tZMrdOChrT4pGNx8XWmr2Dc19NgcQoRx-Mog}{-Mog}$

Applications DUE - May 3, 2024 by 11:59pm



Organization Details

organization zo	J4110		
1. Please enter the	information below:		
Legal business name and any DBAs:			
Business address:			
EIN:			



Program Contacts

2. Main point of co	ntact information:
Name and title:	
Email address:	
Phone number:	
3. Project lead con	tact information:
Name and Title:	
Email:	
Phone:	
4. Board of Directo	ors or secondary staff information
Name:	
Email:	
Phone:	



Project Alignment

To inform your answers to the questions in this section, you may reference any of the following documents:

- Community Health Improvement Plan,
- Early Learning Strategic Plan,
- Community Prevention and Wellness Strategic Plan, and/or the
- Health Equity Plan.

You can access these documents on YCCO's website: https://yamhillcco.org/about-us/measuring-health/

5. Please share a summary of your project. (up to 75 words)
6. Which proposal topic does your project most closely align with?
Resource/foster care prevention
School readiness and kindergarten transition
O Social determinants of health and equity (SDOH-E): Housing, neighbor hood and built environment
SDOH-E: Economic Security
SDOH-E: Education
SDOH-E: Social and community health
Trauma and resilience
Access to healthcare
Mental health and substance use
Community health education
Evidence or research based primary prevention

YCCO's Vision and Mission

Our vision

A unified healthy community that celebrates physical, mental, emotional, spiritual, and social well-being. Our mission

Working together to improve the quality of life and health of the communities we serve by coordinating effective care.

to 500 words)		



Project Details

To be good stewards of our grant dollars, YCCO must collect information about the projects it funds to prove positive outcomes in the community.

8.	OUT	COME	MEAS	URES
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- 1. How do you plan to measure your program's success?
- 2. What resources do you have to monitor success and report according to grant reporting deadlines?
- 3. What barriers do you have or what support might you need from us?

 4. If using an evidence-based program, can you implement this program to fidelity? (up to 500 words)

 9. OUTCOME MEASURES

 Please list at least 3 outcomes you plan to track. Include goals that have a baseline (where you are starting from) and a measurable goal.

 10. SUSTAINABILITY PLAN

 How do you intend to continue the work or mission of your project, including strategies for future funding, if any, after the award has been spent? (up to 250 words)

 11. IMPLEMENTATION AND TIMELINE

Please include a timeline of events and milestones require to complete your project. (up to 250 words)



Funding Tier Alignment

Please refer to the information included in the RFP under the "FUNDING" heading to answer the questions below.
12. Please identify the tier and funding priorities your project most closely aligns with.
(If your project does not align with the tier selected, application will be reviewed for fit with other tiers.)
Tier 1
Tier 2
Tier 3
13. Please provide an example of how your project will meet the stated priorities and goals of the tier you selected.
BUDGET See link to budgeting template: https://yamhillcco.org/wp-content/uploads/Attachment-Budget-Template-RFP2023.xlsx Awards require a 25% match. Match funds can be in-kind, cash, or cash equivalent. Please limit administrative expenses to 10% or below. If you have concerns about your agency's ability to provide a 25% match or limit your admin costs, please contact YCCO staff at funding@yamhillcco.org.
Budget must include fees to background check employees if project includes elements where employees will have unsupervised contact with children and agency does not have documentation of background checks for staff.
14. Total Amount Requested:
15. Please attach your budget. (See attached budgeting template: Choose File Choose File No file chosen



16. DATA COLLECTION AND REPORTING CAPACITY
What is your agency's ability to collect and evaluate data? (up to 250 words)
47. If
17. If personal health information (PHI) or individual-level data may be shared, agency may be required to sign a Business Associate Agreement (BAA).
My agency can sign a BAA.
I would need more information first.
18. TECHNICAL ASSISTANCE
List any support needs you anticipate in implementing, monitoring, or evaluating the
proposed project. (up to 100 words)
19. <u>DISCLOSURES</u>
13. <u>DISCLOSURES</u>
List any conflicts of interest you may have if you receive funds from YCCO. This may include any professional or personal relationship between members of your organization and YCCO,
including staff or committee members.
<u>ATTACHMENTS</u>
20. An updated W9 for the agency is required.
Choose File Choose File No file chosen
21. Other attachments are optional and may include letters of support or other organizational
information.
Choose File Choose File No file chosen



State Requirements

Indicate whether your agency meets the listed requirements. If your agency is awarded, you will be required to submit documentation of these requirements being met. Contact funding@yamhillcco.org with concerns or questions about these requirements.

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* 22. Insurance liability must include at least \$1,000,000 per occurrence and at least \$3,000,000 annually in commercial general liability. Automobile insurance for business use must be at least \$3,000,000 for bodily injury and property damage. Professional liability mus cover any damages at least \$1,000,000 per occurrence and \$3,000,000 aggregate annually. For complete insurance requirements, see Exhibit B attached. Include proof of insurance in application.
○ Yes
○ No
* 23. All providers who will have unsupervised contact with children must be subject to a background check, including FBI fingerprinting. Prior enrollment in the Office of Child Care, Central Background Registry will be accepted. If applicant indicates "NO" on this item, cost of federal background check should be included in proposed budget. For complete background check requirements, see Exhibit C attached. Background check documentation must be provided to YCCO for any providers included in proposed project. Yes No
* 24. In compliance with state and federal laws and regulations, contracted agencies will not discriminate on the basis of age, color, disability, gender identity or expression, genetic information, marital status, national origin, race, religion, sex, sexual orientation, or veteran status in any of their policies, procedures, or practices. I agree I do not agree