

MICHIGAN HEALTH ENDOWMENT FUND

2024 ORGANIZATIONAL CAPACITY BUILDING GRANT APPLICATION QUESTIONS

PLEASE NOTE THIS DOCUMENT IS FOR REFERENCE ONLY. ALL APPLICATIONS MUST BE SUBMITTED THROUGH [OUR ONLINE GRANT PORTAL](#) BY 5:00 P.M. ET ON FEBRUARY 29, 2024 FOR CYCLE 1 OR AUGUST 22, 2024 FOR CYCLE 2.

PROJECT INFORMATION

The **Organizational Capacity Building** Initiative assists health-focused, community-based organizations in becoming stronger, more effective institutions within their community by meeting basic organizational needs, allowing them to spend more time and energy focused on their mission and collaborative efforts.

These grants are designed to increase health-focused, community-based organizations' effectiveness and sustainability across Michigan. We will prioritize funding for organizations that have an explicit focus on a health issue that aligns with the Health Fund's priorities.

To help organizations work collaboratively in submitting proposals to our 2024 Organizational Capacity Building Initiative, we're sharing the application questions below.

PROJECT SUMMARY

In this section, we'll ask for the basics: **Project Title, Request Amount, Project Start Date, and End Date**. More info can be found in the grant portal. We'll also seek detailed information on the following:

- A. BRIEF DESCRIPTION:** Please provide a brief overview (no more than three paragraphs) of your proposed activities, including a description of what success would look like at the end of the grant.
- B. GEOGRAPHIC REACH:** Please share the specific communities or geographic region(s) that your organization serves.

WHAT WE'RE LOOKING FOR:

In the first part of the question, we'll ask applicants to describe the geography type that applies to their project (i.e. city/township, county, region, statewide). In the second part, applicants will be asked to define the specific geography the project would serve.

- C. ORGANIZATION'S MISSION:** What unique gap within the community does your organization fill? What health issues, challenges, or needs does your organization address? How will this funding support your organization's mission and strategic priorities?
- D. CAPACITY:** How will this specific request improve your organization's capacity to address individual, programmatic, organizational, or other challenges?

- E. COMMUNITY BENEFIT:** How will your stakeholders or people you serve directly or indirectly benefit from this investment?
- F. PROJECT OUTCOMES:** Select no more than three short-term and no more than three long-term outcomes that you will measure and report on for this project from the list.
- Short-term Outcomes:**
- Enhanced and integrated evaluation activities
 - Improved organization leadership and/or executive coaching
 - Increased efficiency in internal and/or external facing processes
 - Increased partnerships
 - Organization is better able to implement new evidence-based practices
 - Organization is better able to serve clients or stakeholders
- Long-term Outcomes:**
- Built financial organizational sustainability,
 - New or increased financial contributions
 - Organization is better able to fulfill its mission
 - Organization is better able to serve clients/stakeholders
 - Sustained operational improvements/permanent changes
- G. OUTCOME MEASURES:** Please describe how you plan to measure the outcomes you selected. Include descriptions for measuring both short-term and long-term outcomes.
- H. ORGANIZATIONAL ASSESSMENT:** A Has your organization completed any assessments to identify specific capacity needs? If so, please describe the identified needs in the text box below and/or upload appropriate documentation in the Attachments section.
- I. COLLABORATION:** Will you collaborate with other organizations or consultants on this project? If yes, please describe how and upload a scope of work, if available.

OTHER REQUIRED MATERIALS

In addition to answers to these questions, applicants will provide budget information, required attachments — including letters of support from each partner organization outlining their role in the collaborative — and other proposal materials through [the grant portal](#). Please log in to get started, and [view our RFP](#) for more information about our priorities and required organizational documents.

MICHIGAN HEALTH ENDOWMENT FUND

2024 COLLABORATIVE CAPACITY BUILDING GRANT APPLICATION QUESTIONS

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PROJECT INFORMATION

The **Collaborative Capacity Building Initiative** supports increased or improved collaboration among providers, service agencies, the business community, and community-based organizations within a community to address health issues in a sustainable way.

These grants will support community-based and community-led work that creates a sustainable foundation for cross-sectoral collaboration and coordination designed to spur progress on a key health issue(s). Projects should target a specific place such as a neighborhood, school(s), city, county, or region and/or a specific group within a defined geography.

To help organizations work collaboratively in submitting proposals to our 2024 Collaborative Capacity Building Initiative, we're sharing the application questions below.

PROJECT SUMMARY

In this section, we'll ask for the basics: **Project Title, Request Amount, Project Start Date, and End Date**. More info can be found in the grant portal. We'll also seek detailed information on the following:

- A. GEOGRAPHIC REACH:** Please select the community the collaborative intends to work in.

WHAT WE'RE LOOKING FOR:

In the first part of the question, we'll ask applicants to describe the geography type that applies to their project (i.e. city/township, county, region, statewide). In the second part, applicants will be asked to define the specific geography the project would serve.

- B. TARGET POPULATION:** Does the collaborative group intend to work with a specific population within the selected geography? If so, please describe that population

NOTE: Priority will be given to groups that focus on health improvements for older adults, children, or groups facing significant health disparities in the selected geography.

COLLABORATIVE INFORMATION

- A. COLLABORATIVE FOCUS:** What are the goals and shared vision of success of this

collaborative? Please describe the specific health issues or challenges and how the collaborative intends to address them.

- B. LOCAL DATA:** What does local data (if available) tell you about the health problem(s), challenge(s), or need(s)? How will you incorporate this data in your approach? Finally, please describe any plans to collect and analyze additional local data.
- C. COMMUNITY VOICE:** Does the collaborative intend to engage the community in the planning process? If so, how?
- D. PROJECT OUTCOMES:** Select no more than three short-term and no more than three long-term outcomes that you will measure and report on for this project from the list.
- Short-term Outcomes:**
- Aligned community vision or strategy to address health disparities, social determinants of health, or the Health Fund's 8 focus areas
 - Barriers to effective collaboration or coordination are identified and reduced or eliminated
 - Improved ability to organize and analyze data to inform direction of collaborative
 - More community leaders
 - Nonprofits are more networked with collaborative partners
- Long-term Outcomes:**
- Collaborative members become go-to resource
 - Ability to demonstrate long-term health impacts
 - Increased capacity to address targeted health outcomes by ecosystem
 - Nonprofits are more networked within their place (geographic or topical)
 - Reduced organizational turnover within the collaborative
 - Robust backbone organization
 - Sustainable collaborative
 - Trust built between organizations
- E. OUTCOME MEASURES:** Please describe how you plan to measure the outcomes you selected. Include descriptions for measuring both short-term and long-term outcomes.
- F. OTHER EFFORTS:** Are there any other collaborative groups working on the health issues you intend to work on that are currently active in your community? If the answer is yes, please describe how the new collaborative would fill a gap not covered by existing groups. Include links to websites — if applicable — for existing collaboratives.
- G. COLLABORATIVE MODEL:** What model or framework of collaboration will you use and why?
- H. COLLABORATIVE STRUCTURE:** Please describe the roles for each partner organization, the capacity of each organization to contribute to the work, and the in-kind or financial contribution of each member organization.
- I. CHALLENGES:** What challenges or risk might the collaborative face?

OTHER REQUIRED MATERIALS

In addition to answers to these questions, applicants will provide budget information, required attachments — including letters of support from each partner organization outlining their role

in the collaborative — and other proposal materials through [the grant portal](#). Please log in to get started, and [view our RFP](#) for more information about our priorities and required organizational documents.