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| redBA | **KAISER PERMANENTE**  **Youth and Trauma Informed Care**  **2013 Grants Program**  **Request for Proposals**  **Background and Instructions**  **August 7, 2013**  **Bidders’ Call August 19, 2013 at 1:00 p.m.**  **Proposal Deadline September 18, 2013 at 5:00pm** |

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**BACKGROUND INFORMATION**

**Kaiser Permanente:**

Kaiser Permanente is committed to helping shape the future of health care. We are recognized as one of America’s leading nonprofit health care delivery systems. Founded in 1945, our mission is to provide high-quality, affordable health care services and to improve the health of our members and the communities we serve. Kaiser Permanente serves approximately 8.9 million members in nine states and the District of Columbia. Health care for members and patients is focused on their total health and guided by their personal physicians, specialists and team of caregivers. Our medical teams are empowered and supported by industry-leading technology advances and tools for health promotion, disease prevention, state-of-the art care delivery and world-class chronic disease management. Kaiser Permanente is dedicated to care innovations, clinical research, health education and the improvement of community health.

**Kaiser Permanente Community Benefit Programs:**

To act upon Kaiser Permanente’s mission, the vision of Kaiser Permanente Northern California Community Benefit Programs is that Kaiser Permanente will play a leading role in addressing the needs of the low-income and underserved - so that all people live in healthy, vibrant communities with access to quality health care.

**Call to Action Regarding Violence:**

Homicide is the second leading cause of death for California youth ages 15 to 24; with the rate for African-American youth more than 18 times higher than that of white victims.[[1]](#footnote-1) This public health crisis is right here in our backyard; with seven of California’s top ten counties for homicide rates located in our Northern California service area; 80% of Alameda County school-based health center clients reporting having witnessed or being a victim of violence in 2010-2011[[2]](#footnote-2); and in our own Northern California Kaiser Permanente emergency departments we saw 1,702 visits by 12-19 year olds for *intentional* injuries (92% related to assault and 8% to abuse) in 2012.

As such, Kaiser Permanente Northern California Community Benefit Programs is releasing this Request for Proposals (RFP) as part of a larger framework to invest in strategies that reduce violence, support recovery from trauma, and promote resiliency.

**Guiding Principles**

The Kaiser Permanente Northern California Community Benefit Programs’ guiding principles underlying this Request for Proposals are:

* **We believe that violence is a public health issue.**

*This means that violence is preventable, and that solutions must reduce risk, and support resiliency at the individual, family, community, systems and societal levels.*

* **We will focus on the populations that are most impacted by violence - which are low income communities and communities of color.**

*Violence affects us all, and is unacceptable*

* **We will approach violence like we approach medicine, with a focus on prevention, and a commitment to high quality, evidence-informed care for the treatment and recovery from trauma.**

*As such we will engage a range of Kaiser Permanente assets to help guide this grants program, learn from community partners and help identify best practices for improving health and promoting long-term, sustainable change in our communities.*

**Exposure to Trauma and “Trauma-informed Care”**

The landmark *Adverse Childhood Experiences (ACE) Study* conducted by the Centers for Disease Control and Kaiser Permanente demonstrated that adults reporting exposure to adverse childhood experiences, including violence and abuse, have an increased likelihood of stroke, diabetes, cardiovascular disease, cancer, and early death - especially if their experience involved multiple forms of exposure.[[3]](#footnote-3) This study which included over 17,000 adults, showed that those who experienced six or more ACEs were likely to die 20 years sooner, and have lower job performance and employment compared to adults with no ACEs.3

We also know that trauma has serious short- and long-term effects on educational achievement, social and emotional health and overall well-being. For example, young people with a history of childhood maltreatment in the foster care system are two to four times more likely to routinely smoke tobacco and about one and one-half times more likely to be inactive/obese.3

According to the Substance Abuse and Mental Health Services Administration (SAMHSA), individual trauma results from “an event, series of events, or set of circumstances that is experienced by an individual as physically or emotionally harmful or threatening and that has lasting adverse effects on their functioning and physical, social, emotional, or spiritual well-being.”

SAMHSA defines a “trauma informed care” approach as “A program, organization, or system that is trauma-informed realizes the widespread impact of trauma and understands potential paths for healing; recognizes the signs and symptoms of trauma in staff, clients, and others involved with the system; and responds by fully integrating knowledge about trauma into policies, procedures, practices, and settings.”

**CALL FOR PROPOSALS**

**Grant Parameters and Goals:**

Kaiser Permanente Northern California Community Benefit Programs (KP NCR CB) is seeking to support community based agencies and school-based health centers that serve at-risk youth (ages 12-19 years old) to achieve the following four **goals**:

1. Increase/operationalize screening for a larger population of youth to identify those experiencing trauma;
2. Augment immediately available support services\* for identified youth (preferably on-site);
3. Expand/strengthen partnerships with agencies that can provide additional short- and long-term services\* for referred youth; and
4. Enhance understanding by teachers, staff and providers about signs/symptoms of trauma and the broader adoption of a trauma-informed approach, particularly in response to, and/or as a first step in addressing disruptive behavior.

\*Services may include (but are not limited to) individual or group counseling, social services, mental health treatment, enrichment programs such as mentoring and after-school activities.

While we recognize that the grant scope is quite broad, we are looking for programs that can work to some degree on all four goals, given how interrelated and critical they are for serving youth who will need varying degrees of attention and intervention.

We are particularly interested in proposals that approach these goals from a population-based perspective, with attention to long-term sustainability of scaled up services. In other words, project components that maximize the reach of screenings, trainings and service provision (e.g., broader screening, and group counseling vs. individual counseling), strengthen referral relationships and processes for long-term engagement and work to integrate expanded services into regular operations over time.

**Examples of Projects:**

The following examples are provided to help illustrate the kinds of project components we are seeking to support, and are not meant to be prescriptive or an exhaustive list:

* A school-based health clinic that already provides counseling services to at-risk youth on an “as needed” basis, increases screening by integrating (ACES or other) questionnaire into screening at all visits while expanding ability to engage with identified youth on-site.
* A school based health clinic that coordinates training(s) school staff and teachers about the signs and symptoms of trauma in youth, and redesigns the referral processes for students facing disciplinary action, so that they are first referred for screening and then provided counseling or other services as needed, as part of school responsive action.
* A community-based agency that provides after-school enrichment services to at-risk youth augment connections with local social service and mental health providers (for example via professional training programs) to begin offering on-site appointments for identified youth and to strengthen inter-agency referral and communication channels.

**Grant Terms:**

Grants will be awarded in the amount of up to $50,000 each, with a one year project period running from November 1, 2013 through October 31, 2014. A short progress report and/or site visit will be required approximately 6 months into the project (by April 30, 2014) and a final report will be due one month after the grant ends (by Monday, December 2, 2014)

**Commitment to Learning:**

The intention of this grants program is to learn about emerging and best practices in screening, treatment and long-term support for youth who have experienced trauma, as well as systemic gaps and barriers that need attention to improve prevention as well as treatment. As such, we plan to convene funded organizations during the grant period to share information and to identify other opportunities to engage Kaiser Permanente assets.

**ELIGIBILITY**

In general, we are looking to fund organizations that demonstrate current capability and engagement in the activities described in the four goals above, and that would use grant funds to enhance and expand the reach of existing services, and to participate in a peer-network to share experiences and learn from others. We are also looking for organizations that currently have competency serving this specific age group (12-19 years old). We are not looking for organizations seeking to develop new programs, new competencies, or expand to new target populations at this time.

**Criteria:**

To be considered, applicants must meet basic grant eligibility requirements (described below) as well as satisfy the following criteria:

* Exists as a school-based health center (or school-linked health service program) or as a non-profit, community based organization that primarily serves at-risk youth ages 12-19.
* Already screens youth for trauma (using ACES or other screening tool) and engages identified youth in initial counseling/case-management/services upon identification of need.
* Possesses some partnerships with external agencies for referral and a general understanding of the range of services youth need for new partnership engagement.
* Has leadership agreement to hold at least one staff training (broadly defined) on trauma-informed care during the grant period. If training is already widespread, ability to further integrate trauma-informed care and approach into operations.

**Basic Eligibility:**

To be considered, applicants must also meet our basic grant eligibility requirements as described below. This information can also be found on our website at [www.kp.org/communitybenefit/ncal/grantmaking](http://www.kp.org/communitybenefit/ncal/grantmaking).

**Organization Tax Status**

To be eligible for a Community Benefit grant, an applicant organization (or fiscal agent) must have operations in California, provide programs that align with one or more of our funding priorities, and have nonprofit status of one of the types listed below:

* 501(c)(3) with 509(a) designation as a non-private foundation
* 501(c)(19)
* 501(c)(8) or 501(c)(10) if used solely for charitable purposes and serving the general community
* Public school or public entity, including local, state, or federal government agency
* If an applicant is current or past KP grantee, it must be in good standing

**Geographic Restrictions**

Northern California Regional Community Benefit Programs funds organizations and programs that lie within the boundaries of Kaiser Permanente's [Northern California region](http://info.kaiserpermanente.org/communitybenefit/html/our_communities/northern-california/index.html). To be considered for Regional grant support a program must serve at least one [local service area](http://info.kaiserpermanente.org/communitybenefit/html/our_communities/northern-california/index.html) and ideally, have implications for replication and/or dissemination across the Northern California region. If you are a state or national organization, your corporate office must be located in Kaiser Permanente Northern California Region service area.

**Funding Limitations**

Kaiser Permanente is not able to consider the following types of funding requests:

* Religious purposes
* Partisan political activities
* Athletic or sports activities
* International or social organizations
* Endowments or memorials
* Fraternal organizations
* Field trips or tours
* Individuals

**Non-Discrimination Verification**

Kaiser Permanente has an unwavering commitment to equal access and opportunity for all persons. Organizations applying for funding will be required to attest that they do not discriminate on the basis of race, color, religious creed, national origin, age, sex, marital status, sexual orientation, gender identity, handicap, disability, medical condition, or veteran status either in their employment or their service policies and practices.

**What Will Not Be Funded:**

* New programs that do not build on existing work of the organization.
* Addition of a new full-time staff position.
* Programs that primarily serve youth younger than 12 years or older than 19 years.
* Activities related to broader education and prevention of violence/trauma are acceptable (e.g., gang violence, conflict resolution), but should not comprise the bulk of the workplan or budget.

**Budget Considerations:**

* Maximum budget of $50,000 for 12 months. Budgets over this amount or for longer periods will not be considered.
* Maximum of 15% overhead costs. Applicants may allocate up to 15% of the total budget for overhead costs, such as: rent, electricity, accounting services, etc.
* Staffing costs: Costs must be allocated for sufficient project management and oversight and should include specified time for appropriate staff to participate in peer learning and evaluation activities (1x per quarter).

**TIMELINE AND OTHER CONSIDERATIONS**

**Requirements During Grant Period:**

Upon award, all grantees will be required to participate in the activities listed below. Proposals should reflect allocation of time and resources for such participation.

* **Participation in quarterly peer learning sessions.** Sessions will most likely occur by conference call or webinar. Attendance at one in-person session should be assumed.
* **Participation in cross grantee evaluation*.***  Grantees will be expected to participate in any evaluation processes determined by NCR CB. We will certainly seek your input on any requirements developed.
* **Completion of progress and final reports.**Grantees will be required to complete a six month progress report and a final report.
* **Commitment to host at least one “trauma informed care” training** for staff/teachers

**Timeline:**

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| **Proposal Development** | |  | **After Launch** | |
| RFP Released | August 7, 2013 |  | Introduction webinar | To Be Determined |
| Bidders conference call | August 19, 2013 at 1:00 p.m. |  | 1st peer meeting | To Be Determined |
| Proposal due | September 18, 2013 at 5:00 p.m. |  | Quarterly peer meetings | To Be Determined |
| Awards announced | November, 2013 |  | Progress Report Due | April 30, 2014 |
| Project period | November 1, 2013 - October 31, 2014 |  | Final Report Due | December 2, 2014 |

**PROPOSAL INSTRUCTIONS**

**Online Application:**

Applicants must submit their application online to Kaiser Permanente's Northern California Community Benefit Programs via our “IGAM” system. To begin your application, please go to the following link:  [**https://www.GrantRequest.com/SID\_946?SA=SNA&FID=35109**](https://www.grantrequest.com/SID_946?SA=SNA&FID=35109)

**When You Enter the Website:**

* To create an account, click on "I am a new online applicant”. You will be required to enter an e-mail address and create a password. (If you have already applied online for other KP grants, simply log into your account and proceed with your application.)
* Once you have an account, the system will generate a confirmation e-mail that will include the Account Login URL and your password. *Please save this e-mail and bookmark URL and password for future reference.* You can now start your application.

**Documents Required:**  
In addition to the online grant application, applicants must submit all of the following attachments electronically via our IGAM system (it will prompt you at the end of your application):

Forms to Complete

1. **Online Application** 
   1. **Please title your application as follows:**
      1. **Youth & Trauma Informed Care – Your org name - 2013**
   2. Use the application and workplan to describe clearly the project components you propose over the next year to further the 4 goals described in the RFP. The supplemental application described below will ask for more detail about your current capabilities for which this grant support will enhance.
   3. For the evaluation section, please provide baseline data on the number of youth currently screened and served, with articulated goals for increased screenings and connections to services, as well as your sense baseline knowledge related to trauma informed care / approach. Operational and other process improvements should also be captured and reported.
2. [**Project Budget**](http://info.kaiserpermanente.org/communitybenefit/assets/any/grantmaking/northern-california/KP_NCAL_Grant_App_Budget_Template_2013.xls) (use template via enabled link or at kp.org/communitybenefit/ncal/apply)
3. [**Workplan**](http://info.kaiserpermanente.org/communitybenefit/assets/any/grantmaking/northern-california/KP_NCAL_Grant_App_Workplan_Template_2013.doc) (use template via enabled link or at kp.org/communitybenefit/ncal/apply)
4. **Supplemental Application Document** - Questions are listed below. Please answer all questions in word document and submit electronically. Limit = 2 pages, 11 size font.

Documents to Gather and Submit also electronically:

1. Request on letterhead from the applicant and fiscal sponsor, if applicable. Letter must include legal name and address of organization, requested amount, and project title.
2. Copy of current IRS determination letter indicating tax-exempt status
3. Organization's most recent Form 990
4. Organization's most recent audited financial reports
5. List of current Board of Directors and their affiliations
6. Current itemized organization operating budget
7. List of names, titles, and qualifications of key staff and volunteers

**Supplemental Application Document Instructions:**

Please provide information below in narrative form in a separate word document (2 page limit, 11 size font), and upload it into the electronic (IGAM) system with all of your other documents.

* Describe your organization’s current experience with and processes for screening/identifying youth affected by violence/trauma.
  + We are not mandating use of a specific screening tool (e.g., ACES) but please describe what tool/method your organization will use to identify and open dialogue with youth.
  + Please include description of how this grant will enable your organization to expand screening, and any thoughts/ideas on how your proposed enhanced screening efforts could be integrated into operations for sustainability over time.
* Describe your organization’s current capacity and which services\* are available to identified youth, and where they are located (are they on-site?)
  + Services may include (but are not limited to) individual or group counseling, social services, mental health treatment and/or case management/mentoring.
  + Please include description of how this grant will enable your organization to enhance services, and any thoughts/ideas on how services can be scalable (e.g., group counseling) and be sustainable over time.
* Please provide list of organization’s current partners to whom you refer youth for additional services\* and briefly describe the nature/extent of your interaction.
  + Services may include (but are not limited to) individual or group counseling, social services, mental health treatment and/or case management/mentoring.
  + Please include thoughts/ideas for additional services or organizations to bring you’re your referral network for youth in need.
* Please provide evidence of leadership support for training staff and/or teachers on trauma informed care and practice (e.g., letter of support, initial plans for timing…)
  + KP NCAL Regional Community Benefit Programs office is currently researching ways to assist with this grant component and will inform grantees ASAP. We anticipate connecting your organization with trainers, and will require at least one training occur for your staff/teachers. Further details will be provided to funded organizations.

**Bidders’ Conference Call Information & Additional Questions**

**Date and time:** **Monday, August 19, 2013 1:00 p.m.**

**Call in number:**  **1-888-858-2133 9030219#**

A conference call will be held to review the RFP and to answer potential applicant questions about the pilot program and the application process.

**Please submit questions prior to Monday, August 19, 2013 to** **Michael.P.Cox@kp.org** In subject line state “Questions for Youth Trauma Informed Care RFP.” Questions may also be asked during the bidder’s conference call.

Additional questions may be submitted to the above email address as well up to the date of submission of the application.

1. Lost Youth: A County-by-County Analysis of 2009 CA Homicide Victims Ages 10 to 24, Report issued by Violence Policy Center, Washington, DC: January 2011 [↑](#footnote-ref-1)
2. Same as above [↑](#footnote-ref-2)
3. Relationship of Childhood Abuse and Household Dysfunction to Many of the Leading Causes of Death in Adults The Adverse Childhood Experiences (ACE) Study. Am J Prev Med 1998;14(4) [↑](#footnote-ref-3)