

UNITED WAY OF OLMSTED COUNTY



INDEPENDENT LIVING

JULY 2018

UNITED WAY OF OLMSTED COUNTY

903 West Center Street, Suite 100.
Rochester MN, 55902

P : (507)-287-2000

E : impact@uwolmsted.org

W : uwolmsted.org

FB: [facebook.com/uwolmsted](https://www.facebook.com/uwolmsted)

TW: twitter.com/uwolmsted

UNITED WAY OF OLMSTED COUNTY 2018 REQUEST FOR PROPOSALS

United Way of Olmsted County is a community change organization that fights for the education, health, and financial stability of every person in our community. Olmsted County is a fantastic place to live, work, play, and raise a family. A community with tremendous natural beauty, caring neighbors, a strong economy, and seemingly boundless opportunity, Olmsted County is an exceptional community.

But too often, there are people in Olmsted County who are left behind and don't share in the vitality. An unacceptable income gap. Geographic and socio-economic segregation. Personal and collective isolation. Gross inequities along racial and ethnic lines. These conditions and more cause Olmsted County to be experienced differently by people in need. United Way fights to erase divisions, bridge divides, and right inequities. We work to connect people with resources that change lives and transform our community.

We do this in a variety of ways. We operate programs and shared resources that support the community, such as our 2-1-1 information and referral service or our Get Connected volunteer matching portal. We work collaboratively with partners from many organizations and walks of life to create system change and solutions that elevate our community more than any single program or organization could. We provide financial, technical, and volunteer support for programs that make a difference.

At United Way, we LIVE UNITED with the change-makers, risk-takers, and problem-solvers as we seek, find, and create lasting solutions to the challenges that face our community.

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EXECUTIVE SUMMARY

United Way is working to bring an end to inequity in Olmsted County and help people in need reach their potential. This requires taking a long view, working to ensure that families are stable and children grow up in healthy environments that promote success. Those families can break cycles of poverty, strengthen across generations, and make a better community for us all.

Some families face challenges as they work to maintain stable, healthy households. United Way sees a particular need in Olmsted County to provide supports for seniors, recent immigrants and refugees, and people with mental illness to live independently in the community. When individuals and families can live healthy, financially stable, and independent lives, our community is stronger.

We are issuing this Request for Proposals to establish partnerships and offer support for programs that provide services and/or training in instrumental activities of daily living (IADLs) to vulnerable populations. We particularly welcome proposals from programs that serve seniors, recent immigrants and/or refugees, or individuals with mental illness. Proposals from programs serving other populations that can benefit from support in IADLs will also be considered.

United Way of Olmsted County welcomes proposals from organizations of all sizes serving Olmsted County's diverse communities. Organizations serving and led by people of color, immigrants/refugees, people with disabilities, LGBTQ people, or other underrepresented communities are especially encouraged to apply.

Anticipated Investments:

- United Way of Olmsted County anticipates awarding approximately \$200,000 in annual Independent Living investments beginning July 1, 2019, through June 30, 2023
- There are anticipated to be 4-5 successful proposals

Key Program Requirements:

- Annually report the number of individuals who receive services or training to support instrumental activities of daily living
- Demonstrate, practice, and report on continuous improvement practices
- Participate in anonymous partner surveys

* for complete details and program requirements, refer to page 10

Key Program Expectations:

- Attend quarterly partner cohort meetings
- Update your organization's 2-1-1 listings annually
- Participate in developing client success stories at least one time per year
- Submit annual program and performance reports on time

* for complete details and partner expectations, refer to page 11

Key Proposal and Review Information:

After submitting proposals, prospective partners may be invited to meet with United Way staff and volunteers to discuss the program being proposed. Additional paperwork may be requested and clarifying questions may be posed. The process is expected to be interactive, with prospective partners and United Way representatives engaging in ongoing dialogue about the proposal.

- **Public Information Session:**.....July 31, 2018
- **Initial Proposals Due:**.....September 11, 2018
- **Initial Meetings:**.....September 24-27, 2018
- **Full Proposals Due:**.....October 26, 2018
- **Final Meetings:**.....November 12-14, 2018
- **Develop Performance Measures:**.....Nov. 19 - December 7, 2018
- **Anticipated Award Announcements:**.....December, 2018
- **Funding Begins:**.....July 1, 2019
- **Funding Ends:**.....June 30, 2023

UNITED WAY FOCUS AREA: INDEPENDENT LIVING

Independent Living is a term used both in elder-care and in caring for individuals with disabilities. United Way's use of the term may overlap significantly with, but is not meant to be equivalent to, the nuanced definition of the term as used in these two contexts. Instead, United Way of Olmsted County uses it to refer collectively to the efforts of programs designed to improve the ability of vulnerable individuals to maintain housing, employment, and an improved quality of life in a community setting. These outcomes may be achieved by maintaining independence in the face of challenges or by moving from a dependent state to an independent state through skills acquisition or service provision.

Broadly speaking, programs may support individuals in various aspects of independent living, such as housing (particularly transitional), employment and training, social connectedness, instrumental activities of daily living (IADLs), or therapy and counseling. ***For this RFP, United Way is focused on programs providing services around instrumental activities of daily living.***

Independent Living programs are expected to work with individuals from vulnerable populations. For this RFP United Way will give preference to programs that serve one or more of the following populations:

- Seniors
- Recent immigrants and refugees
- Individuals with mental illness

Programs that serve other vulnerable populations are eligible to apply. Other vulnerable populations would include, but are not limited to:

- Individuals escaping domestic violence
- Low-income youth ages 17-24
- Individuals with chemical dependency
- Recently incarcerated individuals

- Adults with disabilities
- Veterans

Instrumental activities of daily living (IADLs) is a term used in healthcare to refer to the skills related to an individual’s ability to care for themselves in a community setting. Typically, the term is used with regard to seniors and individuals with disabilities, but many vulnerable populations face barriers to completing one or more of these activities. The instrumental activities of daily living include:

- Cleaning and maintaining the house
- Managing money
- Moving within the community (transportation)
- Preparing meals
- Shopping for groceries and necessities
- Medical self-care
- Using the telephone or other forms of communication

Programs that work with clients to acquire the skills to perform IADLs (such as through life skills classes) or which provide services that address the specific IADL in question (such as translation or transportation) can increase the ability of an individual to live independently in the community, facilitate their integration into the community, or promote successful re-integration into the community after institutionalization.

BENEFITS OF INDEPENDENT LIVING

Breaking Cycles

Living independently, whether through employment, housing, or instrumental activities of daily living, is the lynch-pin for many individuals wishing to break a cycle in their lives. Incarcerated individuals that have been asked about their post-release plans typically say that getting a job is crucial to their ability to stay crime free (Baer et al., 2006), and individuals who earn above minimum wage (Visher, Debus, & Yahner, 2008) for an extended period of time are less likely to recidivate (Sampson & Laub, 1993).

Women attempting to remove themselves from a domestic violence situation are most likely to have continued contact with their ex-partners if they attempt to negotiate for financial assets from the relationship (Fluery, Sullivan, & Bybee, 2000), and 30% of women leaving a domestic violence situation forgo child support even when their financial stability is contingent on such support (Shalansky, Ericksen, & Henderson, 1999).

For individuals with severe mental illness, social participation and employment are both considered protective factors against poor mental health and negative outcomes such as suicide, violence, and relapse (Wait & Harding, 2006). Similarly, abstinence, addiction, and work may be conceived of as dependent variables for individuals overcoming chemical dependency – meaning each activity appears to directly impact the others (Vaillant, 1988).

Decrease Costs to Society

Preventing relapse and keeping vulnerable populations in their own homes reduces public expenses. Aging in place – keeping seniors in their own homes – has been calculated to save an average of \$43,947 per individual per year in public money (Kitchener, Ng, Miller, & Harrington, 2010).

Each case of recidivism has been estimated at \$118,000 in public money (SPAC, 2015), and treatment for chemical addiction can range from \$1,000 for detox to \$60,000 for inpatient rehab – the cost of which may be borne by public funds if an individual cannot afford to pay (“Cost of Drug and Alcohol Rehab,” 2017).

Domestic violence is estimated to cost the US \$8.3 billion in expenses annually – a combination of higher medical costs (\$5.8 billion) and decreased productivity (\$2.5 billion) (Gerberding, Binder, Hammond, & Arias, 2003). Successful recovery, reintegration, and housing stabilization of individuals from vulnerable populations not only results in improved outcomes for the individual, it has the potential to allow public money to be invested in other essential community supports.

Maintain or Improve Quality of Life

For seniors in particular, the ability to perform IADLs is closely linked to self-esteem and life satisfaction (Oswald, Jopp, Rott, & Hans-Werner, 2011). This is likely related to the fact that 75% of seniors desire to remain in their own home for the rest of their lives (Spangler, Sink, & Jamison, 2015). For many, living independently is the hallmark of successful aging.

As Minnesota has begun to favor community residences (as opposed to institutional residences) for adults with intellectual and developmental disabilities, it has been demonstrated that people who are capable of living semi-independently will generally experience better quality of life outcomes than peers with comparable abilities living in a group home (Dieffenbach, 2012).

For individuals with mental illness, the inability to perform self-care is often both symptomatic of a spell of poor mental health and a factor that exacerbates symptoms of poor mental health. Self-care is notoriously challenging for individuals who are depressed, and many illnesses (such as obsessive compulsive disorder, agoraphobia, and social anxiety) can interfere directly with an individual's ability and motivation to care for themselves in an independent living situation. Particularly with young adults struggling with mental illnesses such as anxiety and depression, life skills training can be effective in increasing mental health and self-esteem (Sobhi-Gharemaleki & Rajabi, 2010). Life skills courses have not been demonstrated to be as generally effective for adults or those with chronic mental illness such as schizophrenia (Tungpunkom, Maayan, & Soares-Weiser, 2012).

WHAT WORKS - EXAMPLES BY IADL

Individuals who are unable to **clean and maintain their house** or rental unit are more likely to face fines, forfeiture, and eviction. Individuals with mental illness may neglect their housing, leading to eviction or condemnation of their property by public authorities. Seniors who are unable to maintain their own home will often be urged by family to move to an assisted setting. Refugees often live in low-income housing which may pose health hazards, and language barriers may prevent some families from learning how to safely use, clean, and maintain their new homes.

A study by Georgia Institute of Technology interviewed seniors on their strategies to complete home maintenance tasks they were no longer able to perform. Over 70% of the tasks identified as problematic included cleaning (particularly floors and bed maintenance) and yard-work (particularly mowing and cleaning gutters). The most common solution that seniors used to complete these tasks was by outsourcing them, whether to a service or family member. Among those who were unable to outsource this work or address it with technology, 30% said that they planned to address it by moving to a different form of housing. A full 40% of participants said they left the work undone, and 14% said they attempted the work anyways – both strategies which place the individual at heightened risk for environment hazards and accident (Fausset, Kelly, Rogers, & Fisk, 2011).

The Catholic Family Center in Rochester, NY, piloted the Healthy Home program in 2005. This program educated participants on activities they could undertake to improve the safety and health of their home. Refugee participants developed action plans to reduce hazards in their home, address pest problems, and change their use of household appliances. Upon visiting participant homes after the training, staff reported improved cleaning and food storage practices (Smith Korfmacher & George, 2012).

Individuals who struggle with **managing money** may find it difficult to remain financially stable, save for the future, or make informed financial decisions. Individuals who have spent significant amounts of time in refugee camps may not have handled or budgeted money for years and may have difficulties navigating new financial institutions and avoiding predatory practices. Seniors may also have difficulty avoiding predatory practices or wisely managing reduced finances and may have age-relevant challenges such as navigating Medicaid and Social Security. Individuals living with mental illness often encounter substantial medical bills at the same time as restricted income due to job loss, and many mental illnesses are marked by impulsivity in spending.

Low-income youth, generally ages 17-24, can often benefit from financial literacy coursework, with the greatest impact occurring when coursework is completed as early as possible. States that have universal financial literacy requirements for high school students see significantly improved credit scores amongst 18- to 21-year-olds (Center for Financial Literacy Champlain College, 2017), and young adults who attend seminar-style courses have been shown to have increased financial knowledge, increased responsible attitudes toward credit, and decreased avoidant attitudes toward credit (Borden, Lee, Serido, & Collins, 2008). One study found that financial literacy is especially low among women, minorities, lower-income, and less-educated people, and that even college-educated individuals often fail to pass financial literacy assessments. The same survey found that respondents who displayed higher financial literacy or higher confidence in their math or personal finance knowledge had better financial outcomes: they were less likely to use high-cost borrowing methods, and they were more likely to plan for retirement or have set aside savings for emergencies (de Bassa Scheresberg, 2013).

The Purple Purse Foundation provides the Moving Ahead Curriculum to nonprofits throughout the US serving domestic violence victims. The curriculum works with survivors to recognize the signs of financial abuse, understand their rights, and create a plan for financial independence. This curriculum has been used to train more than 1,600 nonprofit organizations, which have in turn served thousands of domestic violence survivors across the country. A study of program participants conducted by Rutgers University found that participants reported improved financial literacy, increased ability to set and follow budgets, increased understanding of credit ratings, and a 10% increase in quality of life ratings (Postmus, Hetling, & Hoge, 2013).

Individuals who struggle to **move within the community** due to transportation barriers find it difficult to participate in the workforce, attend medical appointments, and complete other IADLs such as shopping for groceries and necessities. Transportation barriers may exist for seniors who are unable to safely drive themselves, adults with developmental disabilities who are unable to obtain a driver's license, refugees and immigrants who do not have the English skills to complete the written component of the driving exam, and a wide variety of individuals living in poverty who are unable to afford a personal vehicle.

One study found that a transportation voucher program – in which participants were issued a set number of vouchers to be 'spent' with transportation providers of their choice - resulted in improved emotional well-being and an improved quality of life for adults with disabilities. More than 70% of participants reported that their emotional well being and community participation had improved, and 54% of participants indicated that participation in the voucher program had resulted in better overall quality of life. The type of disability was an important factor in determining the degree of gain experienced, particularly in terms of community participation and overall quality of life (Samuel, Lacey, Giertz, Hobden, & LeRoy, 2013).

The US Government Accountability Office (GAO) has determined that as the population of older adults continues to grow, having access to a variety of transportation options is critical to ensure older adults' access to health care, social and recreational events, and other instrumental activities of daily living. When flexible transportation services exist and are accessible, older adults can more comfortably age in place in their homes and communities for as long as possible. GAO notes that transportation for life-sustaining needs in many states are being met but there is a significant gap in transportation for social and recreational purposes. As demand for older adult rides surpasses available funding, very little funding remains for social outings like going to church or shopping with friends, which officials stress are very important components to helping older adults age in place and remaining connected to their community (United States Government Accountability Office, 2014).

Individuals who struggle with **preparing meals** may demonstrate poor health outcomes or risk their own safety while handling kitchen equipment and utensils. Preparing meals may be especially challenging for seniors experiencing arthritis, frailty, and reduced coordination. Individuals with mental illness and/or chemical dependency may struggle with self-motivation needed to cook and care for themselves. In many cases poor nutrition and health outcomes may result from dependency on convenient and affordable food ultimately lacking in nutritional value.

Video modeling of meal preparation skills has been shown to be effective for adults with intellectual disabilities. In this form of intervention, participants watch a video of someone preparing a simple meal, then work to prepare the meal themselves under the guidance of an occupational therapist or care provider. Meal preparation skills learned this way have been shown to be generalizable to new skills and can be replicated in new settings (Algahtani & Schoenfeld, 2014; Anne Rehfeldt, Dahman, Young, Cherry, & Davis, 2003; Giere, Rudrud, & McKay, 1989; Neistadt, 1987).

The Recovery Health Eating and Active Learning in Treatment Houses (REHEALTH) program provided nutrition intervention for adults early in the course of treatment for chemical dependency. The program consisted of healthy food choices, weekly nutrition classes, and a cooking course. Participants reported a significant decrease in total energy intake, as well as a reduction in daily servings of sweets, fats and oils, as well as healthier body weights. This intervention occurred while

participants were in treatment centers, but improved health habits continued even after they began re-integrating into the community (Wiss, 2015). Clients early in recovery tend to gain weight, which often leads to anxiety and depression, which in turn may put individuals at risk of relapse. This and similar interventions may interrupt this cycle and contribute to independent living (Cowan & Devine, 2008).

Individuals who struggle with **taking prescribed medications (or more broadly, medical self-care)**, for whatever reason, run the risk of over- or under-medicating themselves. Seniors and individuals with mental illness are particularly likely to have medications which must be adhered to, and these groups may experience barriers to adherence such as Alzheimer's, memory loss, lack of motivation, or distorted perceptions.

Cognitive adaptation training—which involves supports such as pill containers with alarms, organization of belongings, and activity checklists to prompt adaptive behaviors in one's own home—has been shown to modestly improve medication adherence in adults with schizophrenia who live independently in a community setting (Velligan, Prihoda, Ritch, Bow-Thomas, & Dassori, 2002).

Older adults' medication adherence reportedly ranges from 26% to 59%, and patients who do adhere to provider recommendations are nearly three times as likely to experience positive health outcomes as those who do not. A meta-analysis undertaken by the University of Missouri found that intervention that include packaging changes, self-monitoring of symptoms, and audible reminders were most effective. Medication and disease education, nurse supervision, and the number of intervention sessions did not significantly change adherence patterns (Conn et al., 2009).

Individuals who struggle with **using the telephone and other forms of communication** may suffer from isolation, be unable to use services which can address other IADLs (such as transportation or meal delivery), and may be unable to communicate their needs adequately to service providers or others in the community. Seniors face diminishing vision and impaired hearing, which may impact communication. Many adults with developmental disabilities struggle to communicate clearly and interpret language accurately.

Untreated hearing loss in older adults has been linked to self-reported depression, anxiety, and paranoia. Seniors with untreated hearing loss are less likely to participate in organized social activities. Those who adopt the use of hearing aids often report improved relationships, self-confidence, mental health, and sense of safety (Reinemer & Hood, 1999).

American Sign Language, often used in conjunction with vocal or verbal behavior, has been shown to promote the production of speech among children with disabilities such as autism, Down syndrome, intellectual and developmental disabilities, social-emotional disorders, and physical disabilities. The interventions also have positive effects on speech and oral language production regardless of other variables, including type of disability and the different conditions of the interventions (Dunst, Meter, & Hamby, 2011).

Beyond any doubt, ***there are countless other innovative and effective means for supporting individuals in the instrumental activities of daily living. The above are provided as suggestions and models*** of programs that have been effective in other places but do not replace local innovations or ingenuity in developing solutions to local problems. United Way of Olmsted County welcomes proposals from programs that represent new innovations and concepts in supporting independent living through instrumental activities of daily living.

For a deeper exploration of independent living and related research, visit <https://www.uwolmsted.org/independent-living>

If you wish to speak with a United Way staff member about this research, this request for proposals, or ask questions about a proposal idea, please contact Zeni Aly at ZeniA@uwolmsted.org or 507-287-7877.

GRANT DETAILS & REQUIREMENTS

Investment Information:

United Way anticipates making approximately \$200,000 in annual investments in independent living through this RFP. Investments will begin in July, 2019, and end in June, 2023. We anticipate 4-5 total successful proposals.

Reporting & Milestones:

- Key performance measure(s): Number of individuals who receive services or training to support instrumental activities of daily living
- Additional performance measures to be co-developed by program and United Way

Budget Requirements:

Proposals that advance in the review process will be expected to include a complete program budget that provides both income and expense details. Program budgets may be submitted in your own preferred format; if you do not have a budget template of your own, we are happy to provide you with a sample you may work from.

While United Way wants to understand your program as clearly as possible in order to establish a positive partner relationship, we know that programs and program plans change and evolve over time. We anticipate that there will be changes to program budgets and designs over the life of the program and ask that you consult us when such changes are warranted.

United Way knows that all programs require foundational organization support for administrative and fundraising functions. Program budgets should reflect such supports. We anticipate that for most programs, combined administration and fundraising costs comprise 10%-25% of the total program budget.

Similarly, any capacity-building (such as program evaluation systems, equipment, or training) needed to enact or sustain the program should be reflected in the program budget.

United Way funding is provided for programs, rather than organizations. Independent Living investments will not be restricted to specific line items within a program's budget (such as an individual staff member or a capital purchase). These awards are made to the overall program budget and are not restricted to specific kinds of program-related expenses.

Audit/Financial Reports:

United Way of Olmsted County policy requires that partners and prospective partners required by state law to conduct an independently prepared financial audit annually (all those with annual revenues greater than \$750,000) maintain the most current audit available on file with United Way of Olmsted County at all times. **Programs invited to submit a full written proposal will be asked to submit an audit at that time (October 26).**

All other partners and prospective partners (those with annual revenues less than \$750,000) must submit and maintain on file with UWOC a current financial audit independently prepared by an outside firm and completed within the past three program agency fiscal periods. For each year between audits, partners must submit to UWOC a financial compilation that is in GAAP format.

For purposes of this proposal process, finalist programs with annual revenues less than \$750,000 will be required to submit an audit or compilation prior to December 7, 2018, and a completed audit must be submitted no later than June 30, 2019.

Proposal review criteria:

Proposals will be evaluated in consideration of the following criteria, which will inform United Way's investment decisions:

- **Alignment:** Program fits UWOC values and strategies, as well as the investment goals identified in this RFP.
- **Priority Populations:** Program is intentionally designed to serve vulnerable and/or low-income populations, with a preference for programs that serve seniors, recent immigrants and refugees, or people with mental illness.
- **Performance Measurement:** Program demonstrates commitment to data-driven reporting and continuous improvement efforts.
- **Program Design:** Program is intentionally designed, with high likelihood of achieving goals.
- **Budget:** Program budget includes administrative costs, capacity-building needs, and meets United Way's overall investment criteria.

Additional consideration may be given to programs that demonstrate the ability to partner effectively with United Way and others and which are able to advance UWOC programs and strategies.

EXPECTATIONS OF PARTNERS:

- **Attend quarterly partner cohort meetings:**

Each quarter, for the length of this award period, representatives of partner organizations will gather with United Way staff to discuss programming, relevant challenges and opportunities, and emerging trends in the field. These meetings will sometimes be intended for executives and other times for program staff contacts. This is an important part of United Way's ongoing knowledge-building plan.

- **Update your organization's 2-1-1 listing annually:**

United Way sponsors 2-1-1, our local affiliate of the nation-wide information and referral service, available by phone, mobile-responsive web platform, and live internet chat. It is critical that this service maintain the most up-to-date information possible about community supports and services. All United Way partners are required to update their service information at least one time each year.

- **Participate in developing client success stories:**

It is to the mutual benefit of United Way and its partners that we develop compelling stories of the success of individual clients, with appropriate permissions and media releases. These stories help to illustrate the value of our partnership and enhance United Way's ability to continue providing financial support for programs throughout the community.

- **Submit annual program and performance reports on time:**

For the length of the award period, partner programs must submit program and performance reporting on an annual basis. Metrics reported will include the Key Performance Measure(s), referenced above, and other performance measures mutually determined by your program and United Way staff.

- **Make volunteer engagement opportunities available:**

While it is not required of any program that it engages volunteers in its work, United Way asks that partners assist in finding and developing opportunities to engage United Way's stakeholders (volunteers, donors, corporate partners, etc.) in volunteer service opportunities.

- **Integration with United Way programming:**

Also not a requirement, United Way asks partners to consider the ways in which other United Way programming can be promoted through the partner's work (e.g. providing FamilyWize prescription discount cards to program participants, etc.).

PROPOSAL & REVIEW PROCESS

- **Public Information Session:July 31, 2018 at 3:00pm**

An optional public session, during which United Way staff will provide an overview of the investment opportunity, the program requirements, and the proposal and review process. There will be a brief time for questions and answers. Individual follow-up discussions may also be arranged.

- **Initial Proposals Due:September 11, 2018**

All initial proposals must be completed by 12:00pm on Tuesday, September 11, 2018. Proposals are intended to be brief (questions included here as Appendix A) and should be submitted through UWOC’s online grants portal at www.uwolmsted.org/grants. For assistance with the online tool, please contact Zeni Aly at 507-287-7877 or zenia@uwolmsted.org.

- **Initial Meetings:September 24-27, 2018**

A brief initial meeting will be scheduled with select prospective partners. These initial meetings are informal and require no specific preparation. In most cases, we advise you to include a key program contact in these conversations. This time allows for dialogue that will help our team become familiar with your program plans.

- **Full Proposals Due:October 26, 2018**

Programs invited to complete a full proposal should submit their completed proposal by 12:00 pm on Friday, October 26, 2018. The full proposal (questions included here as Appendix B) will request additional details related to your requested funding level and the details of your program budget. Your own program budget format will be accepted. If you don’t have a program budget already, a template can be provided to assist you.

- **Additional Program Meetings:November 12-14, 2018**

Select prospective partners will be invited to have further dialogue with United Way’s review team. This meeting is intended to clarify any remaining questions our team has about your program and address any remaining questions or concerns your organization has about partnership with United Way of Olmsted County.

- **Performance Measurement:November 19 - December 7, 2018**

Finalists will work together with UWOC staff to develop the performance measures to be reported during the funding cycle. These measurements will be co-created and specific to the program. Performance measures should align with Results Based Accountability measures and focus on measurements of “how much” and “how well,” while “better off” measures will be considered above-and-beyond.

- **Awards Anticipated:December, 2018**

Prospective partners can anticipate being notified of the status of their request on or before December 31, 2018, after United Way’s Board of Directors has approved its final decision.

- **Funding Begins:July 1, 2019**

First disbursements of Independent Living grants will be made in July, 2019.

- **Funding Ends:June 30, 2023**

Final disbursements of Independent Living grants will be made in June, 2023.

UNITED WAY'S ONLINE GRANTS PORTAL:

All proposals must be submitted through United Way of Olmsted County's online grants portal. In your web browser, type in www.uwolmsted.org/grants to learn more about UWOC's funding priorities. The grants portal works best in Google Chrome.

To submit a proposal, click on "Funding Opportunities" to access the most up-to-date listing of funding opportunities. Select the opportunity that interests you, and click on apply. You'll be asked to log in or create a new user account in order to access the proposal materials.

For technical support with the proposal process, you may contact Zeni Aly, Community Impact Administrative Assistant, at 507-287-7877 or ZeniA@uwolmsted.org.

For previous UWOC partners – this is a new system and all partners will need to create a new account.

FREQUENTLY ASKED QUESTIONS

Can one organization submit proposals for multiple programs?

Yes. United Way of Olmsted County makes awards to programs, rather than to organizations. In the event that a single organization has more than one program that meets the goals of the RFP, multiple proposals will be considered.

Organizations may also be eligible to submit proposals to multiple RFPs within United Way's overall investment portfolio.

My program has been funded under one of UWOC's impact areas in the past. Is this RFP for me?

That depends. This RFP is intended to make investments in programs that support vulnerable populations in living independently by providing services or training in instrumental activities of daily living.

My program already receives United Way funding. Can I submit a proposal to this RFP as well?

Yes. There is no rule limiting a single program from receiving United Way support through more than one funding stream, nor is there any promise that any eligible program will necessarily be selected for investment.

Will you accept joint proposals?

Yes. Joint proposals involving multiple organizations are welcome to submit their proposals but are limited to programs that are being jointly delivered. In practical terms, that requires all organizations to be serving the same individual clients toward a single, shared outcome over a sustained period of time.

We recognize this is a change of practice, which may produce fewer joint proposals. We prefer to reserve this practice for situations that require shared proposals, shared reporting, and shared program planning. We encourage community-serving organizations to develop robust cooperation and partnerships wherever possible, even where they aren't able to jointly submit their proposal.

I represent a [faith-based organization] / [unincorporated group] / [government agency]. Is my organization eligible?

Yes. Government agencies/units are eligible.

Faith-based organizations are eligible, provided they can demonstrate that there will be no explicitly faith-related content included in their programming and that there are no discriminatory restrictions (age, race, gender identity, ethnicity, sexual orientation, religion, ability, or otherwise) on service recipients.

Unincorporated community groups are eligible, provided they can document their relationship with a proper fiscal sponsor.

Can I save and edit my progress on the online proposal?

Yes. Our online proposal management system requires a login to be created, which allows you to create, save, edit, and submit your proposal online.

When can I expect to hear back from you?

You should expect to receive an automated notification that your proposal has been received shortly after submitting it. If you believe you've successfully submitted your proposal but you haven't received an acknowledgement, please contact Zeni Aly (zenia@uwolmsted.org or 507-287-7877) for assistance.

After submission, you should anticipate hearing about the progress of your proposal during the week of September 17, 2018. We anticipate notifying final awardees on or before December 31, 2018.

APPENDIX A - INITIAL PROPOSAL

Organization Information:

Organization's Legal Name:

Program/Project Name:

Organization's Common Name, if different from above:

Proposal Contact Name:

Organization Address:

Proposal Contact Address/Phone/Email:

Organization Phone:

Executive Director/CEO:

Organization Email:

ED Address/Phone/Email:

Employer Identification Number:

Joint proposals involving multiple organizations are welcome to submit their proposals, but are limited to programs that are being jointly delivered. That requires all organizations to be serving the same individual clients, toward a single, shared outcome, over a sustained period of time.

Is this a joint proposal? Y/N

How many Collaborating Organizations are involved? (1,2,3)

Proposal Overview

1. Describe your proposed program (1 or 2 short paragraphs will do).
2. What are the goals of your proposed program?
3. We're funding programs and initiatives that provide services or training to support instrumental activities of daily living which will improve clients' abilities to maintain housing, employment, and/or an improved quality of life in a community setting. Tell us how your program achieves at least one of these things: (1 or 2 paragraphs would be great)

Equity

4. UWOC's goal with this investment is to serve vulnerable populations who live at or below 185% of the federal poverty line and who face barriers to independent living. Tell us how your program serves this population. (1 or 2 paragraphs would be great)

Continuous Improvement

5. For this funding opportunity, the "Key Performance Measure" is the number of individuals who access services or training to support instrumental activities of daily living. Do you measure, or are you willing and able to measure, the Key Performance Measure? (Yes/No)

United Way is not asking your requested funding amount at this time. If your program proceeds to the full proposal, you will be asked provide your requested funding amount, program and organizational budgets, and recent financial statements.

APPENDIX B - FULL PROPOSAL

Equity

1. Describe the demographic make-up of the people you serve or intend to serve through this program (this could include household income, race, ethnicity, age, etc...). UWOC's priority populations for this RFP are seniors, immigrants and refugees, and individuals with mental illness. Programs that serve other populations are eligible to apply.

Continuous Improvement

2. Describe your proposed program's evaluation and/or continuous improvement plan(s). We understand that some programs don't yet have one in place. If you don't have a plan in place already, describe your current approach to data collection and how you'll develop a continuous improvement plan (3 paragraphs will be enough).

3. How many people do you expect to serve annually during the grant period?

Program Design

4. Describe your program in detail (shorter than 5 paragraphs would be preferred).

5. Tell us how your program a) aligns to an evidence-based program or best-practice, AND/OR b) responds in an innovative or unique way to local conditions (shorter than 5 paragraphs would be preferred).

Attachments/Org Documents

Program Budget

- Program Budget. Your budget should:
 - o show all projected income streams for this project, including your organization's in-kind support and your requested funding from United Way
 - o include management and fundraising costs
 - o include and indicate any capacity-building needed to enact the program

If you desire technical assistance in preparing your budget, please click here to access United Way's budget help page

6. United Way of Olmsted County intends to invest up to \$200,000 annually in Independent Living programming through 4-5 programs in the community. What dollar amount are you requesting from United Way of Olmsted County? (This should match the number reflected in your program budget).

7. Use this space to provide any explanations, descriptions, or other narrative that should accompany your program budget.

Other attachments

- IRS Determination Letter
- Most recent IRS Form-990
- Contact list of current Board of Directors (name, mailing address, email, phone)
- Most recent audited financial statements*
- Your current organization budget

* For applicants and partners that are required by state law to conduct an independently prepared financial audit annually (all those with annual revenues greater than \$750,000), the most current audit available will be on file with United Way of Olmsted County (UWOC) at all times.

All other applicants (those with annual revenues less than \$750,000) must submit and maintain on file with UWOC a current financial audit independently prepared by an outside firm and completed within the past three program agency fiscal periods. For each year between audits, partners must submit to UWOC a financial compilation that is in GAAP format. At a minimum, a compilation will need to be on file with United Way prior to December 7, 2018, and a completed audit must be submitted no later than June 30, 2019.

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