

WASHINGTON AIDS PARTNERSHIP REQUEST FOR PROPOSALS ROUND 44, Fall 2010

The Washington AIDS Partnership (the Partnership) invites nonprofit organizations involved in the battle against HIV/AIDS in the Washington, D.C. metropolitan area to submit proposals by **Monday, August 23rd** for funding in **December 2010**. The Partnership invites proposals from community-based nonprofit 501(c)(3) organizations that work in the greater Washington, D.C. metropolitan area and serve local constituencies. The Partnership's geographic scope includes the District of Columbia, Arlington, Loudon, Fairfax, Prince William and Stafford counties, the cities of Alexandria, Falls Church, Manassas and Manassas Park in Virginia, and Charles, Calvert, Frederick, Montgomery and Prince George's counties in Maryland. Local governments are not eligible for grants. However, collaborative projects between government and nonprofit organizations will be considered.

PROPOSAL DEADLINE

Proposals are due by Monday, August 23rd, 2010 by 5:00 pm. Please mail or deliver **two** copies of the proposal and **one** set of attachments and supporting materials to:

J. Channing Wickham
Executive Director
Washington AIDS Partnership
1400 16th Street NW, Suite 740
Washington, DC 20036

Things to remember:

- Proposals will not be accepted by fax or email.
- Use paper clips to bind your proposal.
- Do not bind, staple, or double-side proposals.
- Do not include DVDs/CDs or any color copies.
- **Proposals will not be accepted if received after 5:00 pm on August 23rd.**

OPTIONAL PRE-PROPOSAL MEETING

An optional pre-proposal meeting is scheduled for **Wednesday, July 28th, 2010 at 2pm**. The purpose of this meeting is to provide an overview of the grantmaking process, discuss the Partnership's priority areas, and answer any questions or concerns. If you would like to attend this meeting, please RSVP by emailing your name and organization to Jennifer Jue at jue@washingtongrantmakers.org. Space is limited so please RSVP before Friday, July 23rd, 2010. Meeting location information will be sent out in response to RSVP emails. If your organization has not been funded before, the Partnership strongly suggests that a staff representative attend this meeting. We have found that new applicants benefit from attending the pre-proposal meeting and learning about the Partnership.

LETTER OF INQUIRY

The pre-proposal letter of inquiry is a means of attaining staff feedback on your potential funding ideas before preparing a full proposal. **First-time applicants and organizations**

that have not been funded before by the Partnership are required to submit a letter of inquiry. The letter of inquiry is optional for applicants that do not fit into the above categories. Letters of inquiry should include a short description of the proposed project and the amount of funding sought, and should be a maximum of three pages. Letters of inquiry for Round 44 must be submitted no later than **Wednesday, August 4th, 2010 by 5:00 pm.** Letters of inquiry must be submitted by email to jue@washingtongrantmakers.org.

FUNDING CATEGORIES

Applicants are limited to submitting one proposal per category, and two proposals per grant round. However, if applicants fit the requirements for a medical morale grant, they may submit a third proposal under the medical morale category.

Prevention: The Partnership's priority is primary HIV prevention interventions targeting high-risk and underserved populations as defined by the local CDC Community Planning Groups. The Partnership is interested in funding evidence-based interventions, including CDC-approved interventions, innovative community-driven interventions based on local research and experience, and those that plan to continue or build upon successful models. When possible, applicants should identify the intervention(s) they plan to use in their application and provide a brief description. For prevention programs that have an HIV testing and counseling component, please explain your plan to connect individuals who test positive to a medical provider. As HIV prevention is a priority for the Partnership, 50% or more of funding is awarded in this category.

Public Policy: The Partnership will consider proposals for public policy efforts designed to improve the quality of, access to, or availability of HIV/AIDS services or prevention for residents in the Partnership's giving area. The Partnership is interested in proposals that focus on systems change, whether through targeted assessments of services and needs in specific localities or advocacy focused on improving public policy for specific populations or localities. As public policy is another priority for the Partnership, 20-25% of funding is awarded in this category. **** All public policy requests must include a logic model. Please go to www.wkkf.org/Pubs/Tools/Evaluation/Pub3669.pdf for instructions on how to develop a logic model. ****

Medical Morale: Medical morale grants are designed to improve the morale of hospital personnel, community-based clinic personnel, and staff of nonprofits that have at least one doctor or nurse on staff, with a special emphasis on the human and organizational factors affecting the morale of these care-giving employees. Grantseekers must have a medical component to their program in order to apply for grants in this category, but need not be solely or even primarily a medically-focused organization. Past grants have addressed staff burnout, relationships between different levels of a health care team, and management practices that may be having unintended or unexplained consequences on staff morale. Because of the complex and subtle nature of medical morale, grantseekers are encouraged to submit letters of inquiry or to seek additional information about this grant category from Partnership staff. We strongly encourage creative and uniquely-tailored approaches to medical morale issues, believing that there is no one answer for the many issues that can be addressed. The grant category is premised on the belief that client

care improves as staff morale is raised. The Partnership awards approximately 8-9% of its funding in this category.

Technical Assistance: The Partnership will consider proposals from community-based service organizations seeking to strengthen their capacity to deliver quality services and/or advocate for people living with or at risk for HIV/AIDS. Grants in this area may include activities designed to strengthen or improve: financial management, technology development, strategic planning, board development, evaluation, and mergers. The Partnership awards approximately 5-10% of its funding in this category.

*** In some cases, the Partnership will consider grants that do not fit into our four main categories. Please contact Partnership staff at 202-939-3379 in advance of submitting your application.

APPLICATION FORMAT

For this grant round, the Partnership will be using the **Common Grant Application Format**. Please follow this format when preparing proposals for the Partnership. The format can be accessed on the Washington Grantmakers' website, www.WashingtonGrantmakers.org. Please contact Washington Grantmakers at (202) 939-3440 if you have trouble downloading the format.

ADDITIONAL REQUIREMENTS

In addition to the Common Grant Application Format, a **Proposal and Population Information Form** (located near the end of this RFP) must be completely filled out and included with each proposal. The Partnership is **unable to review any proposals** submitted without a completed Proposal and Population Information Form. Please make sure to indicate which funding category you are applying for on the form.

Organizations that have previously received funding from the Partnership **MUST** be up-to-date on their reporting requirements before seeking additional support. Please call Jennifer Jue at (202) 939-3379 if you are unsure about your status. If your organization is currently a recipient of a grant from the Partnership, you also **MUST** include progress to date for that grant in your proposal. If you are requesting continuation funds for a program funded by the Partnership, you **MUST** detail progress to date in the proposal.

As noted in the funding category section, **all public policy requests must include a logic model**. Please go to www.wk kf.org/Pubs/Tools/Evaluation/Pub3669.pdf for instructions on how to develop a logic model.

WEB RESOURCES

Please visit the Partnership's website, www.WashingtonAIDSPartnership.org, for more resources including epidemiologic information, research information, and best practices.

NONDISCRIMINATION REQUIREMENT

The Partnership funds only those organizations which do not discriminate, in any practices, with regards to race, color, religion, sex, gender, national origin, marital status,

personal appearance, family responsibilities, veteran status, matriculation, physical ability, age, ethnicity, and sexual orientation.

FREQUENTLY ASKED QUESTIONS

1. What are the deadlines for Round 44?

- **Wednesday, July 28th, 2010, at 2:00 pm:** Optional pre-proposal meeting.
- **Wednesday, August 4th, 2010, 5:00 pm:** Letters of inquiry are due.
- **Monday, August 23rd, 2010, 5:00 pm:** Grant proposals are due.
- **Mid-December 2010:** Applicants will be notified of the outcome of their request.

2. What kinds of proposals are being sought?

The Partnership encourages proposals that do one or more of the following:

- identify and respond to gaps in existing services;
- target hard-to-reach and underserved populations;
- build organizational capacity to deliver services;
- incorporate coordination and collaboration between service providers and minimize duplication of efforts;
- address emerging trends and issues in the HIV/AIDS epidemic such as: dual diagnoses of HIV and Hepatitis C, maintenance of risk reduction behaviors, harm reduction, Crystal Meth use and HIV, etc.;
- mobilize key constituencies including policy makers, business leadership, religious, professional, and grassroots organizations;
- effectively train, use, and support volunteers;
- leverage other philanthropic or government dollars; and
- demonstrate cost effectiveness.

3. Does the Partnership focus its funding on particular geographic areas or populations?

The Partnership's funding focus is on populations and geographic areas such as the District that have disproportionately high rates of HIV/AIDS. Populations who are particularly affected by HIV/AIDS include African Americans, increasingly women, men who have sex with men, and substance users.

4. How can Partnership funds be used?

Grant funds may be used for staff salaries, office operations, and other direct expenses of a proposed or existing project. Requests for general operating support will be considered. Capital grants will also be considered. Partnership funding is limited and is not intended to replace government funding.

5. What will not be funded?

Grants will not be made to individuals, for medical research, for sectarian purposes, or for reimbursement of medical care. Grant funds cannot be used for the following purposes: to reduce operating deficits, to fund direct health care treatment, to reimburse health services, or to fund endowments.

6. Does my organization qualify for a medical morale grant?

In order to submit a medical morale proposal, your organization must have a medical component and employ at least one doctor or one nurse. Applicants are encouraged to contact the Partnership if they have questions about whether or not they qualify.

7. How many proposals may my organization submit?

Most organizations may submit up to two proposals per grant round, but each proposal must fall in separate funding categories. If your organization qualifies for a medical morale grant (see question #6), you may submit a third proposal in the medical morale category.

8. What about grant size and duration?

Partnership grants have ranged in size from \$2,500 to \$90,000. In 2009, the average grant was \$29,000. However, there is no set limit on grant size and larger grants are not precluded. To see the most recent grants list, please visit the Partnership's website at www.WashingtonAIDSPartnership.org. Grants are made for a one-year period. The Partnership will award approximately \$400,000 in Round 44.

9. If I am requesting funds to continue a project that the Partnership has already funded or knows well, do I need to submit a full proposal or can I submit a shorter, renewal proposal?

Although the Partnership may be familiar with your organization, you must submit a full proposal.

10. How will proposals be reviewed?

The Partnership Steering Committee evaluates proposals and presents a grants docket for approval to the Washington Grantmakers' Board of Directors. The Steering Committee uses the following criteria when evaluating proposals:

The project or program . . .

- is conducted in the metropolitan ` area;
- has clearly defined and realistic goals and outcomes;
- has the potential to reach the target population(s);
- has the potential for significant impact;
- targets a population at significant risk for HIV/AIDS; and
- has a plan for the described activities, realistic budget, and a thoughtful evaluation plan.

The grant-seeking organization demonstrates. . .

- a mission that is compatible with the proposed project;
- the capacity to carry out the project;
- involvement of the target population(s) in the project, or a plan for developing that involvement;
- a strong and active board of directors;
- key collaborative relationships where desirable; and
- a knowledge of concurrent efforts to reach the target population.

11. There seems to be more of an emphasis on evidence-based interventions in this RFP. What is the Partnership looking for and what information should I include in my agency's application?

Like many funders, the Partnership has long been interested in supporting evidence-based interventions. This RFP specifically asks applicants to identify the interventions they will use in their proposal narrative and the Proposal and Population Information Form. Please see page 2 and 10-11 for more information.

12. What can I expect after submitting a proposal?

Steering Committee members will review submissions using the criteria listed in this RFP. Partnership staff may schedule a meeting, phone interview, or site visit to gather more information from selected applicants. All applicants will be notified **in writing** of decisions made in **mid-December 2010**. We expect to receive many more requests than can be funded. If your proposal is declined, it does not mean that it lacks merit.

13. If my project or organization receives Partnership funding, what type of reporting will I be required to complete?

All grantees are required to submit an interim and final grant report. Prevention, Medical Morale, and Technical Assistance grantees follow the Partnership's standard grantee report format for both interim and final grant reports. Public Policy grantees must follow a format specifically tailored for public policy grants which aims to document how and to what extent grantees have been able to reach their public policy outcomes and affect real policy change. Whether your organization receives a Prevention, Medical Morale, Technical Assistance or Public Policy grant, what you report on will be based on the goals, outcomes, activities, and evaluation plan you include in your proposal. Finally, some online reporting will be required due to the Partnership's relationship with the National AIDS Fund (described later).

ABOUT THE WASHINGTON AIDS PARTNERSHIP

The Partnership is a collaboration of grantmaking organizations that leads an effective private-sector response to the HIV/AIDS epidemic in the Washington, D.C. metropolitan area through grantmaking, technical assistance, public policy initiatives, and investment in youth development through an AmeriCorps program. The Partnership is one of 29 local sites of the National AIDS Fund, one of the nation's largest philanthropic organizations dedicated to eliminating HIV/AIDS as a major health and social problem.

The Partnership is housed at Washington Grantmakers. Founded in March 1992, Washington Grantmakers is a membership organization of over 100 private, corporate, and community foundations, charitable trusts, and corporate giving programs.

Since 1989, the Partnership has awarded more than 750 grants totaling over \$19 million. Partnership grants reflect a commitment to strengthening community-based systems of prevention and care for people at risk for, living with, or affected by HIV/AIDS in the region. The Partnership is guided in its work by a Steering Committee of funders, HIV experts, people living with HIV/AIDS, and community leaders.

The Partnership's key goals include:

- **Invest in “best practice” prevention approaches** – Support innovative and science-based HIV/AIDS interventions and programs targeting underserved and marginalized populations.
- **Promote effective public policy** – Support and develop policies, coalitions, and systems reform to prevent new infections and improve access to health care for those already living with HIV/AIDS.
- **Build the capacity of the nonprofit sector** – Strengthen the infrastructure of local organizations that provide much-needed HIV/AIDS prevention, care, and advocacy.
- **Engage the philanthropic sector** – Educate, convene, and foster collaboration among local and national funders around HIV/AIDS and related issues.
- **Build leadership** – Recruit, train, and mentor leaders to address HIV/AIDS both locally and nationally.

FUNDING PARTNERS (as of 07/2010)

- Diane and Norman Bernstein Foundation
- Morris and Gwendolyn Cafritz Foundation*
- Chasdrew Fund
- Naomi and Nehemiah Cohen Foundation
- Community Foundation for the National Capital Region (CFNCR)
- Consumer Health Foundation
- Fabrangen Tzedakah Collective
- Gannett Foundation
- Gilead Foundation*
- Stephen A. and Diana L. Goldberg Foundation
- Corina Higginson Trust
- Individual and Anonymous Donors
- International Monetary Fund
- Jenesis Group
- Elton John AIDS Foundation*

- Johnson & Johnson*
- Robert Wood Johnson Foundation
- Kaiser Permanente*
- Herbert J. and Dianne J. Lerner Foundation
- MAC AIDS Fund*
- Meyer Foundation*
- Moriah Fund
- Morningstar Foundation
- National AIDS Fund*
- Open Society Institute and the Foundation to Promote Open Society*

- Prince Charitable Trusts*
- Rocksprings Foundation
- Smith-Evans Foundation
- Syringe Access Fund
- Trellis Fund
- Wachovia Wells Fargo Foundation
- Washington Forrest Foundation
- Weissberg Foundation
- World Bank *

*Indicates annual support of \$50,000 or more

Washington AIDS Partnership Proposal and Population Information Form

The following form should be completed and included with your grant application. For this grant, please indicate the demographics of the population(s) you will **predominantly** target with the funds, and the type and purpose.

Organization Name _____

Populations Served

Gender (check all that apply): Male Female Transgendered

Age (check all that apply): 0-12 yrs 13-18 yrs 19-24 yrs 25-55 yrs 56+ yrs

Race/Ethnicity (check only one for the group predominantly targeted):

African American/African Hispanic/Latino White
 Asian/Pacific Islander Combination of people of color All ethnic/racial groups

Population HIV Status (check all that apply): HIV-positive HIV-negative Unknown status

HIV Risk/Exposure Categories (check up to three, i.e. the three primary categories):

** If a population served by this project only accounts for a small percentage of the project's total target population (less than 5%), this is not considered a primary category and should not be listed.*

MSM IDU MSM & IDU Pediatric exposure
 Heterosexual contact Hemophilia Blood transfusion/products Other/risk not reported

Special Populations Targeted (check up to three, i.e. the three primary categories):

** If a population served by this project only accounts for a small percentage of the project's total target population (less than 5%), this is not considered a primary category and should not be listed.*

Alcohol/Drug users Mentally ill Family/Friends
 Homeless Sex industry workers Physically disabled/Hearing impaired
 Refugees/Immigrants HIV+ pregnant women Offenders/Ex-Offenders
 General Public Children/Youth (up to age 24) Gay/Lesbian/Bisexual/Transgender/Questioning

Geographic location(s) of target population (check all that apply):

DC MD VA Other _____

IRS Status: 501(c)(3) Fiscal agent 501(c)(3) Pending with IRS

Grant Information

Request Amount: _____

Please provide a one-sentence description of how the grant will be used. (Example: Funds will be used to conduct an HIV peer-education program for African-American youth ages 13-18 in Wards 7 and 8.)

Funding category of grant requested (check only one): Prevention Medical Morale ¹
 Public Policy Technical Assistance

Intervention Type (definitions on next page): Evidence-based Intervention Community-based Intervention
(for Prevention and Public Policy requests only) Structural Level Intervention

1. If you are applying for medical morale funding, please complete this form according to your organization's overall target population. Though the immediate target population for medical morale projects is staff, the long term target population is clients and that is the information the Partnership would like to track.

Intervention Definitions for Proposal and Population Information Form:

For Grant Round 44 and future grant rounds, the Partnership will need Prevention and Public Policy applicants to designate their grant request as either an evidence-based intervention, community innovation, or structural intervention on the Proposal and Population Information Form. Definitions include:

Evidence-based Interventions (EBIs) are either based on scientifically proven models, or are intentionally designed based on behavioral or social research and include at least basic process and outcomes evaluation to help improve the intervention and determine effectiveness. While evidence-based interventions in the CDC's Diffusion of Evidence-Based Interventions (DEBI) project are eligible, EBIs also includes those which may NOT be included in the CDC's DEBI project, but for which agencies can articulate clear theory, a basic foundation of research (either through formative research, literature analysis, etc.), and thoughtful process and program evaluation which informs ongoing intervention refinement. *The Partnership is highly interested in funding EBIs in Round 44.*

Community innovations are creative efforts that have theoretical basis for effectiveness, yet they incorporate new or evolved strategies to address HIV/AIDS in an ever-changing context. These programs offer the promise of creating new models for the future of our work. *The Partnership is open and interested in funding community innovations though evidence-based models remain a priority in Round 44.*

Structural interventions are meant to prevent HIV/AIDS and/or improve health and quality of life by changing community norms or community structures (social networks, service delivery systems, public policy, etc.) rather than changing individual behavior one person at a time. Some examples of structural interventions include campaigns to reduce stigma or homophobia, syringe exchange, state-level policy advocacy or the integration of HIV prevention into faith-based institutions. *Structural interventions, whether through HIV prevention or public policy efforts, remain a Partnership priority in Round 44.*

GRANT PROPOSAL TO THE WASHINGTON AIDS PARTNERSHIP

ROUND 44 CHECKLIST

This checklist is for your planning purposes only. You do not need to submit this with your proposal.

*Our goal is to work with you to present the best representation of your organization. **Grant proposals not adhering to these guidelines may not be considered for funding.***

- ___ The grant proposal adheres to the Washington Grantmakers' Revised Common Grant Application Format.
- ___ Two copies of the proposal are included.
- ___ One copy of attachments is included.
- ___ The Proposal and Population Information form is completed and included for each proposal you are submitting.
- ___ For public policy requests, a logic model is included.
- ___ An update of any current Partnership grants is included in the proposal.
- ___ My organization is up-to-date on reporting requirements.
- ___ No DVDs or CDs are included.
- ___ All pages should be standard letter size, 8.5 inches x 11 inches.
- ___ **No staples have been used.**
- ___ **None of the material is bound.**
- ___ **None of the material is double-sided.**
- ___ **None of the material is in color, only black and white print.**