**Communities Mobilizing for Safety**

RFA # CCH-2024-01

**Proposal Template**

Completed applications must bereceived at [SVPrevention@health.ny.gov](mailto:SVPrevention@health.ny.gov) by

**May 24, 2024, at 5:00 pm EST.**

In addition to this document, the following attachments must be included to apply:

* Attachment 5a – Applicant Budget Template (3 months)
* Attachment 5b – Applicant Budget Template (1 year)
* Letter of commitment from each subrecipient
* Relevant resumes (optional) (see question 5E)

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| 1. Cover Page (0 points)   Application will not be scored without submission of a completed and signed cover page. | | | |
| Organization Name: | | | |
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| Tax ID #: | | | |
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| Primary Contact Name, Title, Phone & E-mail Address: | | | |
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| Organizational Address and County: | | | |
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| Minimum Organizational Eligibility Requirements: *(Check all that apply)* | | | |
| Not-for-profit 501(c)(3)  Local government entity  City or County Health Department | | School District  Youth Bureaus | |
| Minimum Region and County Eligibility Requirements: *(Check 1 county)* | | | |
| Region | **Eligible Counties** | | |
| Region 1  Rest of State | Albany  Broome  Chautauqua  Chemung  Chenango  Erie  Jefferson  Monroe | | Onondaga  Oswego  Schenectady  St. Lawrence  Sullivan  Westchester  Yates |
| Region 2  New York City | ☐ Bronx  ☐ Kings | | |
| Social Determinants of Health: *(Check at least 1 primary)* | | | |
| Primary Selection *(Check only 1)*  Economic Stability  Neighborhood & Physical Environment  Community & Social Context | | **Secondary selection (optional)**  Economic Stability  Neighborhood & Physical Environment  Community & Social Context | |
| Community Engagement Approaches: *(Check only 1)* | | | |
| Community Mobilization  Coalition Building  Promotores/Community Health Workers | | | |
| Communities at Highest Risk: *(Check at least 2)* | | | |
| ☐ African American or Black  ☐ Asian  ☐ Hispanic or Latino  ☐ Pacific Islanders  ☐ Native American  ☐ Men and Boys  ☐ Women and Girls  ☐ Gender Expansive Individuals  ☐ LGBTQ+ Communities  ☐ People with Disabilities | ☐ Rural Communities  ☐ Tribal Communities  ☐ Urban Communities  ☐ Homeless or Housing Insecure  ☐ Migrant Workers  ☐ Poor or Economically Disadvantaged  ☐ Immigrants or Refugees  ☐ Foster Youths or Families  ☐ Parents and Families  ☐ Perpetrators of Crimes or Violence | | |
| Community of Focus: *(provide a brief description of the political and/or social boundaries within the selected county)* | | | |
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| *The undersigned hereby affirms that the statements contained in the application package are true and complete to the best of the applicant’s knowledge and accepts as a condition of a contract the obligation to comply with applicable state and federal requirements, policies, standards, and regulations.* | |
| Signature of Authorized Official: |  |
| Printed Name and Title: |  |
| Date: |  |

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| 1. Executive Summary (Not scored) |
| *The purpose of this section is for the applicant to provide a brief description of their organization and project proposal.* |
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| Application Questions (80 points) | |
| 1. Organizational Capacity (20 points)   *The purpose of this section is for the applicant to describe their fit and capacity to successfully plan, implement, and evaluate their proposal.* | |
| 3A. Provide an overall description of the organization such as the mission, staffing structure, programs, prevention initiatives, and community services. Please include a description of the organization’s management and operations that prioritize a trauma-informed and caring workplace. |
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| 3B. Describe the organization’s experience with sexual violence, primary prevention, and community-level strategies. Please include a description of the organization’s experience with gathering input, sharing power, and decision making with survivors of sexual violence or the priority population and community of focus. |
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| 3C. Describe the organization’s pay-equity policies, practices, and/or programs. |
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| 3D. Describe the organization’s actions toward anti-racist health equity. Include information on the organizations culturally and linguistically appropriate services, efforts to improve accessibility for all community members, and more. |
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| 1. Community Engagement and Assessment (20 points)   *The purpose of this section is for the applicant to describe their experience with community engagement and knowledge of the community’s needs, strengths, and resources.* | |
| 4A. Describe the organization’s experience with community-engagement and existing partnerships with diverse community-based organizations. Please include a description of community coalitions, working groups, meetings, and events that the organization leads or participants in. |
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| 4B. Describe the organization’s experience with gathering feedback from the community to improve a service, program, policy, or practice. Include a description of the organization’s experience gathering information on community needs, strengths, and resources. |
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| 4C. Describe a variety of available sexual violence resources in the selected county and community of focus, particularly outside of the applicant organization. Include a description of how the organization collaborates with other available resources in the community. |
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| 4D. Describe health disparities in the selected county and community of focus. These can be related to sexual violence health inequities or other health disparities that may be related to sexual violence (e.g., pregnancy, STD/HIV, injuries, violence, mental health, drug, and alcohol abuse). Provide available quantitative or qualitative data and sources. |
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| 1. Project Narrative (30 points)   *The purpose of this section is for the applicant to describe their proposal as it aligns with the RPE Program Scope of Work.* | |
| 5A. Provide an overall description of the proposed project, including the selected social determinant(s) of health, population & community of focus, and community engagement approach. |
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| 5B. Demonstrate why the organization selected the priority population and community of focus. Describe what needs, assets and resources exist in the proposed community of focus and how they will be addressed and/or leveraged during the implementation of this project. |
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| 5C. Demonstrate why the organization selected the social determinant(s) of health. Please demonstrate how the proposal builds upon community needs, strengths, and resources and works towards reducing health disparities within the community of focus. |
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| 5D. Demonstrate why the organization selected the community engagement approach. Describe the roles and responsibilities of key community partners in planning, implementing, and evaluating the proposal. How will community members and organizations engage in decision-making and how will the organization share power with the community? Include a description of any subrecipient organizations included in the proposal. |
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| 5E. Describe the staffing proposal that will support and implement the project proposal and Scope of Work. Include how primary staff designated for the project and key partners/subrecipients who will be implementing the project possess the necessary skills and competencies related to primary prevention and health equity approaches. Include a letter of commitment from each subrecipient included in the application (required). Include resumes for any currently hired staff as attachments to the application (optional). |
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| 1. Optional Preference Points (10 points)   *The purpose of this section is for the applicant to gain additional preference points for culturally specific organizations and/or implementing a youth/adult leadership team as a part of the proposal.* | |
| 6A. Is the applicant organization a culturally specific organization? |
| Yes  No | |
| If yes only, provide a justification that includes how the organization is led and staffed by a specific culture. Demonstrate how the organization has intimate knowledge of lived experience of the community of focus and how organization policies, practices, programs, and services are culturally specific. | |
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| 6B. Is the applicant organization planning to utilize a youth/adult leadership team? | |
| Yes  No | |
| If yes only, describe the youth/adult leadership team including recruitment, structure, and ongoing involvement in program planning, implementation, and evaluation. | |
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*Thank you for completing this proposal.*