PROPOSAL SUBMITTAL FORM

Agency Information

Agency Name: Community Action Council

Mailing Address: PO Box 11610, Lexington, KY 40576

Street Address: 710 W High Street, Lexington, KY 40508

Phone: (859) 233 - 4600

Is your Agency registered with the IRS as a 501(c)3 organization? ☑ Yes ☐ No

*Note: Agencies **must** be registered with the IRS as a 501(c)3 organization to be eligible for ESR Program funding.*

Does your agency have a current profile with Blue Grass Community Foundation's GoodGiving.net? ☑ Yes ☐ No

*Note: Agencies **must** have profiles with GoodGiving.net to be eligible for ESR funding.*

Website Address: www.commaction.org

Agency Representative *(typically the Executive Director - Name, Title, Phone, Email)*:

Bridgett Rice, Interim Executive Director, 859-233-4600, bridgett.rice@commaction.org

Person Completing Application *(Name, Title, Phone, Email):*

Cara Howell, Planning & Projects Manager, 859-233-4600, cara.howell@commaction.org

Program Information

Name of program for which funds are being requested: **Healthy Meals on a Budget**

Total Funding Amount Requested: $ **18,700**

RFP #13-2019 PROPOSAL SUBMITTAL FORM

- **Save this PDF formatted Proposal Submittal Form to your hard drive before beginning to enter responses in it to ensure your responses are saved to the form.**
- **LIMIT RESPONSES IN TEXT BOXES TO 250 WORDS**
- **REMINDER: All proposals must be written in a clear and concise manner, as there will be no follow-up or clarifications to proposer's submittal form once the evaluation process begins.**

5.1 Program Proposal & Design

5.1.1 Needs Statement—Purpose of the Program Proposal / Problem Statement **15 Points**

Using local data, provide a description of the problem in Fayette County. Identify the specific population your program is targeting (i.e. age, geographical region, economic status, etc.) and explain why. Discuss whether this population is under-served or at-risk. Describe your understanding of the local system of services addressing this problem, obstacles and/or opportunities your clients face, and how your agency fits within this system of services.

Kentucky Health reports that Fayette County's adult obesity rate is 27 percent. The poverty rate in Fayette County is 17.7 percent, higher than the national average of 14 percent. Families living in poverty often face increased barriers to establishing healthy dietary habits. As a consequence, research demonstrates that obesity often coexists and correlates with family food insecurity. In Fayette County, multiple recent initiatives such as Bluegrass Double Dollars, the Backpack program, and community gardens have focused on increasing access to healthful foods among households with low income. These ongoing local efforts, when coupled with community education will help adjust subjective perceptions about food and interrelationships among food affordability, convenience, dietary quality, and health.

Healthy Meals on a Budget (HMOB) will recruit under-served, Head Start/Early Head Start-eligible families, or other families (with or without children) who reside in the high-poverty neighborhoods of Russell and Winburn. Head Start/Early Head Start (HSEHS) is a federally-funded child development program that promote comprehensive school readiness in young children and families from low-income backgrounds. An integral part of the Council's HSEHS programming is anti-obesity efforts, including the promotion of healthy diet and physical activity. HMOB will provide families with practical education on food purchasing and preparation, placing equal emphasis on household economy and nutrition. For example, the program promotes increasing vegetable consumption through the integration of community and container gardening activities. HMOB services are delivered to parents and children together, supporting whole-family engagement in all aspects of children's education and development.

5.1.2 Service Delivery Model **15 Points**

What steps will you take or what activities will you provide to assist clients in achieving these goals? Describe each "unit of service" you will provide for clients and how often and how long this service will be provided (e.g. a one-time three-hour training; a weekly one-hour support group for 12 weeks; one 30-minute health exam twice a year; 1-3 hour advocacy services as needed; etc.) How will these services address the problem as identified in the Needs Statement above? Be specific.

HMOB will offer at least six participatory group workshops. The "unit of service" for HMOB is a single, two-hour workshop which will each serve approximately 10 families (with "family" defined as any group of individuals that identify themselves as related and may include children of any age). At least one workshop will be tailored toward dual language families.

At HMOB workshops, families will receive a hands-on, interactive demonstration of how to prepare a meal that represents a healthful and affordable alternative to a more familiar dish. During the presentations, families will be introduced to foods, equipment and techniques with which they may be otherwise unfamiliar- e.g. the processing of spaghetti squash to make a pasta substitute, or how to plant and care for a container or community garden. Families will learn in detail both the nutritional benefits and the cost savings of the meal substitution, and participants of all ages will be invited to ask questions and discuss issues relevant to the meal. Finally, families will be invited to share the meal in a group setting.

All families participating in a workshop will receive the recipes, food to make the meal at home and general information about nutrition and food shopping, customized for Lexington-Fayette County. The Council will assist families in creating a weekly meal plan with their children during the workshop. Each family will also receive one take home kitchen item, such as a vegetable peeler, to encourage them to apply and extend their learning in the home.

5.1.3 Client Eligibility and Requirements **5 Points**

What eligibility requirements must clients meet to qualify for services? What are the expectations of clients while receiving services? (e.g. client must pay $30 fee for each class; client must remain sober; client is responsible for chores; nothing other than participation in services; etc.)

Eligibility for HMOB will be based on either a) enrollment of a family member in one of the Council's HSEHS programs in Fayette County or b) family residency within the high-poverty Lexington neighborhoods of Russell or Winburn (where the workshops will be held). This strategy will ensure that the majority of participants will have low income and can most benefit from the targeted instruction and materials.

Participation in HMOB will be free of charge. The only expectation that must be met when attending an HMOB event is cooperative participation in workshop activities. Families will also be requested to provide contact information, complete a pre- and post-workshop assessment, and to participate in a follow-up survey.

5.1.4 Evidence-Based/Best Practice **10 Points**

Describe the evidence-based or promising practice model on which this service approach is based. Provide particular sources that indicate what you are doing is best-practice.

HMOB exemplifies the two-generational approach to education that drives HSEHS programming. This approach is based on the understanding that early childhood learning, and developmental outcomes are dependent on the entire family context, and thus children's needs are best addressed when other family members simultaneously receive support and assistance in their goals. In regard to nutrition, parents have a profound effect on children's current and future diet—both via their direct food purchasing and preparation choices for the household along with the modeling of healthy behaviors. Before investing effort in improving the family nutrition situation, parents must feel confident in their ability to provide for the family's nutritional needs and well-informed about the role of nutrition in children's growth and development. Children in turn influence their household food economy by expressing tastes and preferences, discussing nutrition with their parents, and assisting in food purchasing and preparation.

The most recent Head Start Program Performance Standards (HSPPS), effective 2016, encourage programs to "develop innovative two-generation approaches that address prevalent needs of families across their program that may leverage community partnerships or other funding sources." In support of HSEHS's missions, Ascend at the Aspen Institute has published a framework of principles and policy recommendations for two-generational human services programming. Among its recommended principles are: a dual-outcomes emphasis in measuring outcomes and impact; engaging with and listening to families; and ensuring equity by acknowledging and addressing structural problems that create social disparities. HMOB's curriculum-integrated, participatory, and context-responsive design embodies each of these principles.

5.2 Program Measures & Evaluation

5.2.1 Service Efficacy & Desired Outcomes **10 Points**

What do you hope to help your clients achieve? What are some examples of goals you will set with clients? What is your service philosophy in terms of helping your clients achieve these goals? Describe how you define "successful" completion of services. (e.g. service is complete if: client remains for entire three-hour training; client continues services until judge orders otherwise; etc.) What percentage of clients meet that criteria for success?

The goal of HMOB is that families with low income will feel more knowledgeable, inspired, empowered, and motivated to make health-informed choices at all points of household food management, from selection and purchasing to preparation and consumption. The hands-on demonstrations of meal preparation at HMOB workshops, beyond being fun family bonding and learning experiences in their own right, are designed to serve as catalysts for families to transform their daily habits at home. In pursuit of this aim, the workshop will incorporate realistic, sympathetic attention to various barriers, real and perceived, that families with low income may face in establishing healthy dietary habits. Discussion topics, shaped around specific dishes featured in each demonstration, will include: responding to food marketing; accessing and navigating grocery stores, markets, restaurants, and other food outlets; hygienic food handling; and reading nutrition labels. HMOB will also focus on heightening families' awareness of specific local resources to help them meet their nutrition needs. Further, HMOB workshop content will coordinate with elements of the HSEHS classroom curriculum; for example, a workshop discussion on growing vegetables may be matched with classroom lessons about container gardening.

The Council will consider HMOB services to be successfully completed for a participating family when that family has been actively engaged for the duration of the two-hour workshop; feels comfortable with preparing the meal at home, demonstrates the acquisition of new knowledge as captured by a post-workshop questionnaire. It is anticipated that at least 80 percent of participating families will meet this criterion.

5.2.2 Client Empowerment & Community Impact **10 Points**

Describe what meaningful difference these services make in the lives of people served. What value is added to the community? Provide examples. (e.g. client demonstrates change in attitude; client has behavior change; etc.)

HMOB services will increase household food management among families with low income. These families will be able to participate in the existing local food economy to meet their own nutritional needs. It is anticipated that their increased participation will have a beneficial stimulating effect on the community. For instance, increased traffic at the Lexington Farmers Market or at community gardens will enable these institutions to broaden their offerings and services, further expanding local access to healthful, high-quality foods.

Ultimately, it is expected that practical nutrition education, especially education that addresses concerns and issues disproportionately faced by families living in poverty, will have the effect of improving overall community health. Reducing disparities in food access and nutrition quality is vital to diminishing income-based health disparity overall. Suboptimal household food management contributes to significant health risks, including malnutrition, obesity, and even food-borne illness. Obesity in particular is associated with severe chronic health conditions—such as cardiovascular disease, type 2 diabetes, cancer, and osteoarthritis—which come with significant long-term costs to the community in the form of increased health care costs and reduced labor productivity. In the long term, participation in HMOB should help prevent diet-related health risks such as obesity, especially among the vulnerable population of children under age five. Since early childhood obesity predisposes children to adult obesity through many mechanisms, the impact of this two-generational/whole-family approach can extend into these children's future lives.

5.2.3 Data Assessment & Quality Improvement **10 Points**

While it doesn't have to be complicated, evaluation is more than saying "we provided this many 'units of service.'" How will you know if your services have been effective? How does this relate to the desired outcomes for your clients? How will the information gathered be used to improve your services in the future? Be specific (for example, data collection may be through focus groups, pre-and post-tests, client satisfaction surveys, etc.), and also **be specific regarding sampling size and frequency of evaluation.**

The Council will collect contact information from every family participating in HMOB, either through a pre-registration process or upon the family's arrival at the workshop. At the conclusion of each workshop, families will be asked to complete and return a brief questionnaire. The questionnaire will ask participants to provide specific examples of new ideas about food purchasing, preparation, or consumption that they learned during the workshop, and which ideas they intend to apply in their own household in the future. Questions will evaluate the learning and the quality of experience for both parents/adults and children. The goal is that completed questionnaires can be collected from at least 45 unduplicated participants.

The Council will use the contact information collected from these families—including ongoing face-to-face contacts with those participants who are enrolled in a HSEHS program or other Council programming—to solicit additional feedback from at least 20 or more unduplicated families during the three to six-month follow-up period. The follow-up questionnaire will be designed to evaluate families' gains in knowledge and self-efficacy regarding nutrition over the longer term, including their continued utilization of the educational and other materials received at the workshops. For example, parents may be asked if they used the information to help in meal planning; paid more attention to nutrition labels, restaurant menus, or store signage; or tried new foods or cooking techniques in the interest of improving health.

5.3 Capacity & Sustainability

5.3.1 Staff Qualifications & Experience **5 Points**

Provide information on the key/primary individuals that will be involved in the provision of services and demonstrate that they have the capacity to address the stated need. List each position by title and name of employee, if available. Describe the anticipated roles and responsibilities for each person as it relates to this project. Describe the experience, expertise, and capacity of each individual to address the proposed activities.

Health and Nutrition Manager (HNM) - Ms. Jessica Coffie, the Council's HNM, will provide direct program oversight and support for the HMOB workshop. Ms. Coffie, a Certified Nutritionist in Kentucky with an M.S. in Hospitality and Dietetic Administration, has worked with the Council since 2011. She has ten years of experience working with nutrition among people with low income, especially pregnant women and small children.

Health and Nutrition Specialists (HNS) –Ms. Luisyana Gamboa will plan and coordinate the HMOB workshops; prepare the content for the nutrition information materials distributed during the workshops; and will facilitate the HMOB workshops, providing the demonstrations of meal preparation, interacting directly with families, and collecting feedback. Ms. Gamboa holds an M.S. in Nutrition and Food systems and has worked for nine years providing nutrition education and technical assistance to families and small children. Ms. Gamboa is fluent in Spanish and has conducted nutrition counseling, research, and other community nutrition activities among Hispanic populations in the U.S. and Mexico. Ms. Laura Tincher, also an HNS with the Council, will assist Ms. Gamboa in the preparation and facilitation of HMOB workshops. Ms. Tincher is a registered dietician (RD) and licensed dietitian (LD) in the state of Kentucky and holds an M.S. in Dietetic Administration. She has three years of prior experience providing nutrition instruction in group settings. Both Ms. Tincher and Ms. Gamboa joined the Council in 2016.

5.3.2 Partnership & Resource Leverage **5 Points**

How do your programs and services support our community's comprehensive response to the identified priority area of Community Wellness & Safety? Does your organization have any formal agreements or informal working relationship with other local service programs?

What role does your governing board members, volunteers, and / or donors play in facilitating viable service delivery and program administration? Does your program have any major civic benefactors or corporate sponsors? Describe other secured funding sources and committed operational resources your organization has allocated for the proposed program.

HMOB is designed as a community education program that enables participants with low income to take better advantage of locally available resources to improve household food management. As stated previously, some agencies and initiatives in Fayette County have focused intensive efforts on increasing access to healthy foods among families with low income. While these much-needed programs have expanded healthful food options, the Council recognizes that real household nutrition management is a complex process that involves many factors beyond food availability. Among these are education about the importance of nutrition; knowledge about food preparation techniques; perceptions of convenience, affordability, desirability, and palatability; and family habits and cultural traditions. Taking these factors fully into account, HMOB will provide targeted guidance and encouragement in navigating Lexington's local food system.

The Council and its Head Start programs partner routinely and extensively with multiple service providers who share its goals of improving community health and nutrition. The Council serves as one of the largest referral sources for God's Pantry and receives referrals from the WIC program for its child development services. In the past, the Council has partnered with the University of Kentucky Extension Office and another program offered through the Council, 24/7 Dads, and intends to work with these groups again.

The Council's Board and HSES Policy Council provide administrative oversight of the Council's programs. As an extension of HSES, HMOB is partially supported by federal funding. ESR funding allows the Council's to expand the program to include families not associated with HSES.

5.3.3 Outreach & Inclusion Strategy **15 Points**

Demonstrate how the program will ensure services are available and accessible by all potential participants, especially related to language barriers for persons with limited English proficiency; persons with physical or other disabilities; and persons impacted by poverty and economic distress.

Has your organization enacted any policies (or employs any standard operating procedures) to ensure equitable service opportunity and / or benefit program to a diverse cross-section of the greater community?

The Council will ensure that HMOB is maximally accessible to participants. Given its operation of Head Start and other antipoverty programs, the Council is acutely aware of practical barriers commonly faced by families with low income—including lack of transportation, irregular work schedules, and lack of adequate child care—that can affect their ability to access public events. HMOB activities will take place at two of the Council's ADA compliant community centers, which are familiar to many families as the location of their child development centers and convenient to other neighborhood residents. Workshops will occur in evening hours, at varying times over the year so that families with diverse schedules will have more options and opportunities to attend. Since children are welcome and encouraged to participate in the program alongside their parents, child care needs are not a barrier to access.

Like all of its Head Start program's family engagement opportunities, HMOB sessions will be culturally inclusive and responsive to the needs of the communities they target. The Council employs bilingual staff and translators who work with participants on an ongoing basis to ensure that its facilities and learning environments are linguistically and culturally appropriate for all families. One of the Health and Nutrition Specialists who will facilitate HMOB workshops, Ms. Luisyana Gamboa, is a fluent Spanish speaker with extensive experience investigating and addressing nutritional access issues among Hispanic families and children. The Council also has other Spanish-speaking staff to address dialect variations within the Spanish-speaking community.

6.0 Program Budget Summary Form Instructions

Proposal Submittal shall be considered incomplete and shall be rejected without completed Budget Summary Form. *(Including total amount of ESR grant request.)*

For organizations requesting funding for more than one program in this RFP, combine into a single Program Budget narrative for the proposal.

Please note that the Program Budget will be part of the grantee agreement with LFUCG and regular tracking and expenditure reporting will be required.

To ensure readability and uniformity, please use the Program Budget form included. Provide brief line-item detail as specified in each section below and verify all calculations.

This section provides a summary of the total proposed Program Budget for FY 2020. It requests the allocation of all projected funding amounts (City and non-City sources) for anticipated FY 2020 program expenditures.

Total Program Budget

Column A should reflect projected expenditures for the entire program (not just the proposed LFUCG ESR grant funding request portion). When the chart is completed this column should equal ESR Grant Funding Request plus other/non-ESR program funding. (A=B+C)

ESR Grant Funding Request

Column B is the grant amount being requested from this RFP to support this program's services to eligible Fayette County Participants.

Non-LFUCG Program Funding

Column C is the non-LFUCG ESR funding that is allocated to the Total Program Budget (A-B = C).

This form is for the budget for the PROGRAM applying for ESR funds, not the total agency budget.

For each category identify the amount requested and the amount to be leveraged through other programs or organizations (if applicable).

Staff Salaries – Identify the number of Full-time position salaries allocated to the program, and part-time positions allocated to the program, and the amounts of each allocated to Columns A, B, & C.

Consultant Services – In the "List Details" box, **briefly** describe any expenses associated with providing expanded supportive services or other services for which the organization intends to contract with another entity. Any of these expenses to be provided by the proposing organization should be included in other line items.

Space/Facilities – In the "List Details" box, **briefly** list the basis of the allocation of rental costs, utilities, janitorial costs, and any other facility costs for the Program. Identify any office or program space in an LFUCG owned building, and any other costs (rent, monthly utilities, etc.) reimbursed to LFUCG.

Scholarships/Stipends – In the "List Details" box, **briefly** list the type of scholarships or stipends, and include the number of people or organizations to receive funds.

Operating Expenses – In the "List Details" box, **briefly** list the costs associated with expenses, supplies, utilities, and any other expense associated directly with the operation of the project.

Other – In the "List Details" box, **briefly** list any other costs for the Program not covered above.

PROGRAM BUDGET SUMMARY

Agency Name **Community Action Council**

Program Name **Healthy Meals on a Budget**

FY 2020 (July 1, 2019-June 30, 2020) Total Program Budget

	# of Employees:	Column A Total Program Budget [= B+C]	Column B ESR Grant Funding Request	Column C Non-ESR Program Funding [A-B]
1. Staff Salaries for Program				
Full-Time (FTE)	0.05	23,190	3,160	20,030
Part-Time		0	0	0
Total Salaries		23,190	3,160	20,030
3. Consultant Services	$	0	0	0
list details	N/A			
4. Space/Facilities	$	220	220	0
list details	$220 - To provide for the portion of all costs related to office and meeting space at the Council's facilities to be utilized by HMOB. Includes utilities, maintenance, repairs, insurance, security, and janitorial services, as per the Council's facilities plan ($220)			
5. Operating Expenses	$	13,316	13,316	0
list details	$13,316 - To cover the costs related to communications ($75) and information technology ($104) expenses, insurance and bonding for .05 FTE personnel ($87), program supplies (containers, foil, pots and pans, giveaway kitchen implements, community/container gardening supplies) ($6,500), food expenses ($5,900), and printing and marketing ($650).			
6. Scholarships / Stipends	$	0	0	0
list details - numbers & amounts	N/A			
7. Other	$	2,004	2,004	0
list details	$2,004 - To provide for the portion related to programs costs for administrative functions such as Accounting, Human Resources, the Office of the Executive Director as approved by the Council's approved Indirect Cost Rate Agreement. The Council has a provisional rate of 13% however has budgeted at 12.0% based on historical costs ($2,004).			
8. TOTAL PROGRAM BUDGET	$	38,730	18,700	20,030

Cost per Program Participant: $ 312

I understand that this document in its entirety is incorporated into my grant Agreement with the Lexington-Fayette Urban County Government.

Authorized Representative *(typed name)*: Bridgett Rice

Title: Interim Executive Director **Date**: 4/18/2019