Cedars-Sinai Community Safety Net
Request for Proposals
To Support Local Mental Health Services

November 30, 2011

INTRODUCTION

Cedars-Sinai is a nonprofit, independent healthcare organization that is committed to providing excellent clinical and service quality, offering compassionate care, and supporting research and medical education. As part of Cedars-Sinai’s mission to improve community health, we are pleased to announce grants for nonprofits that offer mental health services in the local Los Angeles area.

In light of the current economic climate, many nonprofits in this field are facing exacerbated organizational and financial needs. Through this grantmaking effort, it is our aim to support these organizations in providing more individuals, families and communities with much needed mental health services.

Please visit www.cedars-sinai.edu for additional information.

Only those organizations whose proposals fit most closely with our grantmaking goals, described below in detail, will be awarded grants. Each applying organization may submit one proposal.

Proposals are due on January 17, 2012 by 5 p.m. The proposal packet must be submitted electronically as one PDF file. Please email proposals to Jonathan Schreiber, Director of Community Engagement at Jonathan.Schreiber@cshs.org. Submissions will be acknowledged within two business days following receipt.

Funding decisions will be announced no later than February 17, 2012, for the funding period of April 1, 2012 to March 31, 2014. Initial grant payments will be made by April 1, 2012. Please note that Cedars-Sinai staff will not be able to read or provide feedback on draft proposals.

If you have questions about the RFP please contact Jonathan Schreiber at 310-423-2408 or at the e-mail address above.

GRANT SPECIFICATIONS

Grant Purpose: Grants may be used only to provide direct services and supports within the guidelines outlined in the box on the next page. These funds are meant to support existing mental health service areas and programs with the specific goal of providing direct client-based services to a greater number of individuals and/or continuing to sustain current client numbers. A grant may be used to support more than one type of service.
GRANT GUIDELINES

Examples of Accepted Mental Health Service Provision (non-exhaustive list): Residential and outpatient services; individual and group counseling; support groups; therapy programs; crisis intervention; psychiatric services; substance abuse treatment; school based programs; senior peer counseling; and psychosocial support.

Population Served: Services may be provided to individuals and groups including children, adolescents, adults, couples and families. Priority will be given to underserved or marginalized populations with a demonstrated need for mental health services.

Geographic Area Served: Organizations providing service in the local Los Angeles area are eligible to apply. Priority will be given to those with plans to focus on Service Planning Areas 4 and 6.

Grant Amounts: Cedars-Sinai will award two-year grants of up to $75,000 for direct mental health services and supports.

Grant Payments: Grants will be disbursed over two years with up to $50,000 in the first year and up to $25,000 in the second year. The second payment is contingent upon approval of the submitted interim report and satisfactory progress towards meeting grant goals.

Grant Period: All grant terms will be for two years, from April 1, 2012 through March 31, 2014.

Funder Recognition: Grantees will be required to acknowledge Cedars-Sinai as a program funder (e.g., in printed materials, publications, websites).

Reporting: Grantees must submit a brief report at the conclusion of each of the first and second grant years. The interim and final reports will include the following elements:

- Short narrative (2 pages or less) of grant activities during the previous year. This will include reporting on progress in reaching stated goals, key achievements and challenges and key insights. Grantees will be required to provide specific information about the services provided through this grant including the service type, population(s) and geographic areas served, numbers of individuals served, total hours and frequency of service.
- Financial report, with detailed accounting of funds expended under the approved grant budget.
- Printed materials acknowledging support from Cedars-Sinai.

PROPOSAL REQUIREMENTS

A full proposal must include the completed checklist and organization cover page included in the RFP as well as the sections outlined below (organizational background, proposal summary, financial information and other requested attachments). Proposals should be submitted in no smaller than 11 point font and one inch margins. The response to each question should be numbered to correspond with the question.
**Organizational Background:** This section should be no more than **one** page in length.

1. Brief summary of organization’s mission and goals.
2. The need or problem that your organization works to address, and the population that your organization serves, including geographic location, socioeconomic status, race, ethnicity, gender, sexual orientation, age, physical ability, or language.
3. Number of paid full-time staff, number of paid part-time staff, number and type of student trainees (if applicable) and number of volunteers.
4. List of the organization’s Board of Directors.

**Proposal Summary:** The proposal summary should be no more than **two** pages in length.

5. **Statement of need:** What are the key challenges, issues and needs that this grant will help you to address?
6. **Brief summary of your request:** Describe the specific services you plan to provide with this grant support. Please include the following information for each service type for which you are requesting funding:
   - The specific populations and geographic areas served.
   - Description of the type of service to be provided, the number of individuals served and the frequency of service.
   - Key objectives in providing these services.
   - Anticipated outcomes for those served and how they will be assessed.

7. **Other:** Please provide any additional information you think is relevant to this grant request.

**Financial Information**

8. **Grant budget** for the two year funding request. Using the grant guidelines provided, please complete the budget template in section three of the attached supporting documents.

**Other Supporting Materials**

9. **Current organizational budget** including actual income and expenses year-to-date.
10. **Most recent financial statements** for recently completed fiscal year, audited if available. This information should include a balance sheet, a statement of activities (or statement of income and expenses) and functional expenses.
11. Documentation of 501(c)(3) status.
12. Most recent annual report, if available.