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WHO WE ARE

he Healthy Communities Foundation (HCF) is a private independent foundation established in 1999 resulting from the sale of MacNeal Hospital in Berwyn, Illinois to the Vanguard Health Services. In August 2016, the Board was reconstituted and it established a new mission and vision for the Foundation. In April 2017, to better reflect the vision of being a community-engaged and informed foundation, the Foundation changed its name from the Arthur Foundation to the Healthy Communities Foundation.

Our Mission and Vision

We are a community-informed grantmaking foundation that seeks to measurably improve the health and well-being of individuals, families, and communities in our service area by promoting health equity, quality and access. We envision that all residents of our communities lead full, healthy and happy lives, and enjoy equal life expectancy.

Our Core Values

- Energizing the spirit and potential of our local community
- Supporting efforts to provide tools that build healthier lives
- Pursuing our work with a health equity frame
- Addressing immediate community needs while investing in long-term systems change
- Valuing experiential and evidence-based practices that produce measurable results
- Bringing stakeholders together to share wisdom and cultivate trust, collaboration, and coordination
- Maintaining the highest legal and ethical standards in the stewardship of foundation resources

Our Commitment to Racial and Ethnic Equity

OUR BELIEFS

All residents of our community, particularly those who live with the greatest disparities, should have access to the resources and opportunities that improve their well-being and create a sustainable quality of life. Systemic conditions, such as implicit bias and institutional and structural racism, impede those goals and disproportionately affect people of color and ethnic minorities.

OUR ACTIONS

To address these imbalances, we commit ourselves to invest in community-led collaboratives and programs, policy advocacy, and research projects that shape data and community-informed grantmaking.

Last updated: August 2018

OUR STRATEGIC PLAN

During the 2018-2019 grant cycle, we have implemented a new Board-approved strategic plan which aims to drive our collaborations, strategic partnerships, and grantmaking principles. For more information, please refer to the HCF Strategic Plan – 2018-2021, which you can find on our website.

GRANTMAKING STRATEGY

Using research commissioned by the Sinai Urban Health Institute, as well as a variety of local and national research and resources, we understand that where you live can deeply impact how well and how long you live. For this grant cycle, we will award grants to organizations that focus on individual health needs as well as systemic barriers to health. We consider ourselves accountable to health stakeholders in our region who understand local community needs. As our communities evolve and as health issues overlap with other social issues, we aim to be responsive and collaborative towards community-informed solutions.

Our Grantmaking Principles

- Focus on racial, ethnic, and socioeconomic equity
- Community-defined solutions as a process and an outcome
- Long-term partnerships and commitment
- Fluidity in response to emerging strategies and crises
- Community-embedded and engaged HCF staff
- Leverage the power of collaborations and efforts at the intersection of issues/strategies
- General operating support to catalyze and sustain systems change
- Grounded in community experience, evidence-based strategies, and evaluation



Grantmaking Framework

All organizations must be able to demonstrate that the proposed programs/services align with at least one of the categories below, which comprise our grantmaking framework.

ACCESS

to quality health care

HCF recognizes that high quality, comprehensive health care services are often out of reach for residents in our region. Common barriers to timely care can include high costs, inadequate or no insurance coverage, lack of available services, long wait times, and lack of culturally competent care. HCF will invest in strategies that expand access to health care with a particular focus on residents who live with the greatest health disparities in our priority zone service region. Access efforts can include:

- Expanding numbers served by current programs/services
- Adding new programs/services to meet increased demands, urgent/unanticipated issues, and/or changing demographic needs
- Incorporating evidence-based practices into services and/or community outreach and engagement
- Providing culturally competent approaches to service delivery and community engagement, including assessments, data collection, training, translations, and/or other activities

ADDRESS

social determinants of health HCF understands that overall health is deeply influenced by where we live, learn, work, and play. Aspects of everyday life such as housing, jobs, education, transportation, and outdoor space can influence health outcomes. We recognize that residents in our region do not have the same access to these essential elements that contribute to a healthy life. Investment efforts in the social determinants of health include:

- Strengthening trust, connections, and opportunities between individuals, communities, and institutions to promote better health outcomes
- Influencing aspects of residents' lives that influence health, such as housing, economic well-being, education, and transportation
- Community safety efforts, including violence prevention, criminal justice reform, and better opportunities for re-entry among ex-offenders
- Focus on parenting and early childhood to improve parenting skills, promote healthy living and learning environments, and increase access to high quality prenatal and childcare

Grantmaking Framework (continued)

ADVOCATE

for health-related change

We know that the most effective ways to influence health are by addressing the root causes of inequalities. HCF works to impact existing structures and policies to create more opportunities for policies and systems communities to have a voice at the table where decisions are made. Some of our investment strategies include (but are not limited to):

- Fostering greater alignment, coordination, and collaboration among agencies to be more responsive, effective, and adaptive to community health needs
- Affecting legislation or policies adopted by school districts, housing, transportation, and other institutions that can influence individual and community health outcomes
- Cultivating grassroots leadership, conduct community organizing, and/or influence institutions to be more inclusive, responsive, and equitable in access to resources, opportunities, and power

AUGMENT

knowledge through capacity building

For this grantmaking cycle, HCF seeks to invest in efforts that contribute to community-driven and/or community-specific research, data collection, and analysis. Such efforts should investigate, disseminate, and otherwise contribute to field of local health. We will consider efforts that:

- Collect health/other data on populations affected by health disparities
- Improve health data collection
- Disseminate health disparity data and/or evaluation results
- In future grant cycles, we aim to invest in and contribute to local opportunities for learning, organizational stability, program quality, and growth through capacity building and technical assistance. We will seek community stakeholder input and ideas to help us develop future capacity building initiatives.



Current Grantmaking

HCF will phase in its grantmaking strategy, beginning with general operating support in 2018 and expanding to strategic initiatives and capacity building support by 2020. For the 2018 grant cycle, HCF will only consider requests for general operating support. For more information about our investment approaches, please refer to the HCF Strategic Plan – 2018-2021, which you can find on our website.

Resource Allocation Principles

LEGACY

Given that HCF's endowment is funded from the proceeds of the MacNeal Hospital sale to a private company in 1999, HCF will make grants in the MacNeal Hospital service area.

HEALTH EQUITY

To achieve health equity, HCF will allocate the majority of funds to zip codes that rank lowest in our social determinants of health study.

For more information about our priority zone zip codes, please refer to the HCF Strategic Plan – 2018-2021, which you can find on our website.

What We Fund

Eligibility

To be considered for funding, organizations must:

- Serve individuals living in the defined funding region.
- Be a nonprofit organization (or have a fiscal agent) that is exempt from the federal income tax under provisions of section 501(c)3 of the IRS Code.

Funding Restrictions

HCF will not fund:

- Partisan political activities
- Religious activities
- Capital campaigns*
- Individuals
- Businesses
- National organizations not focused in the HCF region

*Capital expenses for materials will be considered. For example, medical equipment, dental chairs, etc.



GRANT PROPOSAL INSTRUCTIONS

Online Grants Portal

HCF has transitioned to a new online grants portal. To apply for funding in the 2018 cycle, all organizations must create an account on WizeHive.

An organizational account will allow organizations to update contact information and access submitted documents at any time. Organizations can begin an application, save work, and submit it when ready.

Starting on August 17th, 2018, to create an account on WizeHive, please visit: https://webportalapp.com/sp/login/hcf_application_18

Note: If your organization does not have access to a computer or internet, please contact the Foundation for assistance.

Important Grant Proposal Dates

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August 17, 2018	Grant application opens online
August 21, 2018	HCF Information Session
September 17, 2018	Proposal submission deadline
Early December 2018	Board meeting and grant notification

Description

Proposal Outline

Note: Questions highlighted in grey are not included in the renewal application for ongoing work.

I. Application

Application Type

Key Dates

New or renewal

Request Summary

- Which primary communities within the HCF service region does your organization currently serve? <drop down menu>
- HCF seeks to support organizations whose work aligns with our grantmaking priorities. Please choose the area(s) that best describe how funds will be used. <drop down menu>



Narrative

- Proposal Title: (255 characters max)
- History and Background: Briefly describe the organizational mission, history, and key accomplishments: (500 words max)
- Health Focus and Impact: How do your programs and services address the health needs of the community(ies) you serve? (500 words max)
- Description of Organizational Programs and Services: Please describe the programs and services provided by your organization as a whole. Please include the total number served unduplicated. (500 words max)
- Use of Grant Funds: Please describe how support from HCF will be utilized and your anticipated impact. (500 words max)

Collaboration

Please describe if you are part of any collaboratives. Examples include but are not limited to:
funding collaboratives; community-wide, multi-sector planning initiatives; community
outreach/awareness efforts; policy advocacy; capacity building; and or professional development
or other learning opportunities. Please list the name and role that your organization plays.
Examples of roles include convener, advisor, member, etc. (300 words max)

Engagement

- If applicable, please describe how you engage community members in the conversation and solutions for building healthier communities and environments. If not applicable, please write N/A below. (250 words max)
- If applicable, please describe how you support inclusive efforts that promote community-based solutions. If not applicable, please write N/A below. (250 words max)

Leadership

- Staff: Please tell us about the leadership and expertise of staff responsible for the work outlined in this proposal. Relevant information could include lived experience, education, and number of years in role. If the position is currently unfilled, please note whether it is an existing or new role. (350 words max)
- Changes in Leadership: Has your organization experienced a leadership transition in the last 12 months? If so, please describe below and note if there is an interim executive director. If not applicable, please write N/A below. (250 words max).

Evaluation

- To streamline future proposals and reports, HCF would like to know what type of data and evaluation information is currently being collected by your organization. Please explain how you currently evaluate your organization's programs and their effectiveness. Please include 3-5 key outcomes you currently collect and how these outcomes inform your work. (500 words max)
- Do you serve the uninsured? (Y/N)
- Are your services available to individuals regardless of their legal status? (Y/N)

Organizational Profile

- Optional: Please describe how the demographic composition of the populations you serve inform service delivery and/or program design. If not applicable, please write N/A below (250 words max).
- Optional: Please tell us how your organization aligns with health equity or is working towards a health equity approach. If not applicable, please write N/A below. (350 words max).
- # of FT staff, # of PT staff, total staff
- If applicable, please describe how your organizational staff are representative of the communities you are based in and/or serve. If not applicable, please write N/A below. (250 words max).
- Current fiscal year (start and end dates)
- Current fiscal year revenue
- Current fiscal year expenses
- Optional: If a deficit is indicated above, or if your attached audits show fluctuations, please explain the circumstances below. If not applicable, please write N/A below. (150 words max).



Attachments

- Most recently available audit
- Prior-year audit, if available
- Board-approved organizational budget
- List of Board of Directors and affiliations
- Foundation Funding: Please upload a list of your foundation sources over \$10,000 for the most recently completed fiscal year.
- If not indicated in your account, please upload a listing of all organizational locations and offices.
- II. HCF Zip Code Detail
- III. Population Served Demographic Profile
- IV. Board and Staff Demographic Profile

Please refer to the "HCF Service Region & Demographic Profile Worksheet" available on our website.



FAQS

Please see our website for frequently asked questions. We will be updating these questions as they arise until the submission deadline.

GLOSSARY

Included below is a list of key terms and definitions relevant to our work and grantmaking strategy. Please feel free to reach out to us with questions on how to present your work in alignment with these definitions.

Health Disparities	A health difference that is closely linked with social, economic, or environmental disadvantage (healthypeople.gov).
Health Equity	Is achieved when every person has the opportunity to "attain his or her full health potential" and no one is disadvantaged from achieving this potential because of some socially determined circumstance. Health inequities are reflected in different lengths of life; quality of life; rates of disease, disability, and death; severity of disease; and access to treatment (CDC).
Racial Equity	A framework to analyze how race and ethnicity shape our experiences with power, access to opportunity, treatment, and outcomes (Grant Craft/PRE).
Social Determinants of Health	The conditions in which people are born, grow, live, work, and age that impact health outcomes. These circumstances are shaped by the distribution of money, power, and resources at global, national, and local levels (WHO).
Systems change	Addressing the systemic barriers that create inequities (Power Moves).

CONTACT INFORMATION

Please contact us if:

- You have questions aligning your work with our grantmaking framework.
- You need help understanding the grant proposal guidelines.
- You need help submitting your grant application.

You can email us with questions at administration@hcfdn.org, or you can call us at (708) 443-5674.

