

# **Maine Health Access Foundation Fund for the Future**

## **Frequently Asked Questions**

**This list is compiled from Live Chats held on June 1<sup>st</sup> and June 16<sup>th</sup> 2009**

*Posted June 18, 2009*

### **Q 1: How does MeHAF define “community?”**

A: We encourage applicants to define their community geographically for two reasons:

- 1) The existing social, economic, and environmental conditions where we live, work, and play have a profound effect on our health. These conditions tend to be related to specific geographic locations.
- 2) Attempting to serve a single demographic group across a number of communities could prove difficult, given the varying conditions that affect that population within each community – no two communities are the same.

Communities should be defined geographically in a way that makes sense given the selected health issue and priority population(s). Given the modest amount of funding available it may be difficult to address an issue or specific population at the state-wide level meaningfully.

### **Q 2: Do you have examples of activities that funders outside the health sector have supported?**

A: We don't have any particular activities in mind, but you can find more information at the Maine Philanthropy Center ([www.mainephilanthropy.org](http://www.mainephilanthropy.org)) to learn about more funders in Maine.

### **Q 3: If we have received a grant from MeHAF in the past, am I eligible to apply?**

A: Yes.

### **Q 4: Are all applications being posted on Facebook for comment, or just those that are chosen to go on and write a full proposal?**

A: MeHAF will post only the Letters of Interest of those invited to submit a full proposal. Applicants will be notified by July 13<sup>th</sup> whether or not they will be invited to submit a full proposal.

**Q 5: How many applicants do you anticipate inviting to submit full proposals?**

A: It depends on how many LOIs we receive and their quality. This is a new pilot program for MeHAF, so it is difficult for us to make predictions.

**Q 6: Should applicants include the required in-kind or cash support into their budgets, or leave it out?**

A: You do not need to as part of the budget for the Letter of Interest. You are required to describe expected costs as part of the LOI, but applicants can certainly add more detail if they choose.

**Q 7: What is the best way to search for your Facebook page?**

A: Search for “Fund for the Future” and you should be able to find it. You will not be able to find it by searching for “MeHAF” or “Maine Health Access Foundation.”

**Q 8: You wrote “The goal of Fund for the Future is to improve the health of Maine people through projects or activities that reach beyond the delivery of clinical health care services.” Would you consider system transformation as meeting the definition of going “beyond the delivery of clinical health care services”?**

A: Possibly, it will depend on the extent to which it meets the goals of the RFP.

**Q 9: Are you looking for models that serve as pilots to be replicated in other communities if successful?**

A: Yes, when appropriate. But it is not a requirement.

**Q 10: Is there a deadline for submitting questions prior to the Letters of Interest?**

A: Questions should be submitted in sufficient time for us to respond in a way that will inform your letter of interest. All questions should be submitted by Wednesday, July 24, 2009.

**Q 11: Will the grant allow for funding of staff for the project?**

A: Yes.

**Q 12: Where can I view the full RFP? Is it on the Facebook page?**

A: The full RFP is not on the Facebook page, although there is a link to it in the “Info” section. You can access it on the MeHAF web site:  
[http://www.mehaf.org/pictures/RFPs/2009D\\_Fund\\_for\\_the\\_Future\\_RFP.pdf](http://www.mehaf.org/pictures/RFPs/2009D_Fund_for_the_Future_RFP.pdf).

**Q 13: You state that at the Foundation's discretion, selected successful projects may receive up to an additional two years of funding. How will that be determined? And what is the likelihood that additional funding will be made available to a grantee?**

A: Additional funding will depend on availability of funds and performance during the first two years of the grant.

**Q 14: The RFP describes this program as a laboratory for new ideas. Does this include modifying projects in ways that have never been tried or tested before?**

A: Current successful projects that can be expanded in scale and scope, or engage new, non-traditional partners will be considered for funding. The proposed approach to health improvement must have a clear rationale, be derived from and consistent with best available evidence and practices.

**Q 15: You state that the health issue must emerge from a community planning process. Can you please explain more? If we conduct focus groups in a defined neighborhood, would the identification of a health issue by the focus group members be considered an adequate community planning process for this proposal?**

A: The Fund for the Future is a place-based pilot program. Communities that engage in a thorough process that identifies a health issue that is a priority will be more competitive. Regarding focus groups, the degree to which they would represent adequate community planning will depend on the level of participation and the degree to which key groups within the community are represented. A project that identifies a health issue with little or no public input will not be competitive.

Letters of support from diverse organizations within a community, in-kind support from partner organizations, and shared implementation responsibilities among partners are also examples of broad-based community support.

**Q 16: How do we connect with the groups or processes, such as MAPP, that are engaged in improving health in our communities and identifying priority health issues?**

A: One way to do so would be to contact the local Healthy Maine Partnership (HMP). You can find the HMP serving your area at:  
[http://www.healthymainepartnerships.org/Local\\_Partnerships.aspx](http://www.healthymainepartnerships.org/Local_Partnerships.aspx).

**Q 17: Some projects may involve many overlapping and varied health issues. Will you be looking for us to define a single health issue?**

A: Yes, define a single health issue. However, some health issues are interrelated and the strategies you pursue may address multiple issues and their related risk factors.

**Q 18: Are you open to projects involving advocacy and policy work at the state level?**

A: MeHAF is looking for change that makes a difference in your community. If your community and project partners feel that this is best accomplished by state-level policy and advocacy work, you will need to make the case in the LOI.

**Q 19: How broad a definition of health is acceptable?**

A: MeHAF is using a very broad definition of health for this pilot funding program. Projects should address factors that have been identified by a community as impacting their health. Proposed projects should focus on one priority health issue, and the proposed approaches to health improvement must have a clear rationale, be derived from and consistent with best available evidence and practices, and have broad-based community support and buy-in.

**Q 20: Is it appropriate to target one health issue, in a variety of ways over a variety of different age groups?**

A: It will depend on the needs defined by the community and the populations that are included in those needs, as well as the partners participating in the project.

**Q 21: Would minority health be considered a single health issue? Or should it be more focused, such as the incidence of diabetes among the minority and refugee populations in our community?**

A: We would encourage more specific focus. Projects with greater focus may make the project more easy to frame and describe, and potentially more competitive.

**Q 22: Is mental health an appropriate health issue to be addressed?**

A: Yes, if mental health has been identified as a priority health issue, and the proposed project does not focus on providing direct mental health services.

**Q 23: Will funding for selected projects begin in January of 2010, or later?**

A: Projects will begin January 2010, but funding will be distributed December 2009.

**Q 24: Asking for public comment on the letters of interest and proposal seems like a good way to see how communities might respond to these new ideas and better inform projects that will be invited to submit a proposal and those that get funded. How much should those organizations applying get involved in giving public comment?**

A: We encourage the organization applying to stimulate public comment from their community.

**Q 25: Will final proposals be required to change based on Facebook comment and response to the Letters of Interest?**

A: Facebook comments should inform the final proposals.

**Q 26: Will public comments on Facebook and Kluster be used to determine community support?**

A: It won't determine community support, but the goal is that the Facebook comments will inform your proposal. The Kluster feedback phase of the process will take place after proposals have been submitted, and will be taken into account at final review.

**Q 27: I cannot access Facebook through my organization's internet. Will there be an alternative venue for public comment and information sharing?**

A: There will not be an alternative venue for public comment - it will only happen via Facebook. We encourage all applicants to engage their communities and let them know about the public comment component of Facebook. If applicants are comfortable creating a personal Facebook page from their home computer, we would encourage them to do so. If an applicant is not comfortable or unable to do so, after the public comment phase concludes on Facebook MeHAF will collect and send the comments on specific letters of interest to the applicants as necessary.

**Q28: Is a registered 501(c)(3) hospital (or other direct care provider) eligible to apply for funding?**

A: In communities where there are no other organizations that have the capacity to either apply for the funding or carry out project activities, direct care providers may serve as a fiscal sponsor for a group that is not incorporated.

**Q 29: What does MeHAF mean when it says it will allow applications from organizations that have not attained 501(c) (3) status but have a suitable fiscal**

**sponsor in place?**

A: A grant is usually awarded to an organization that has qualified for exemption as a public charity under Section 501(c) (3) of the Internal Revenue Code; however, MeHAF will consider funding a Fiscal Sponsor for a project conducted by an organization or collaboration that is not recognized as a public charity by the IRS.

MeHAF recognizes that not every charitable endeavor needs the infrastructure required to become a formal tax exempt organization under Section 501(c) (3) of the Internal Revenue Code. For example, an emerging organization may have the energy, resources and vision to carry out their mission, but not the need to build a permanent infrastructure as a public charity with a qualified exemption. Additionally, MeHAF promotes collaboration and often times public charity organizations working together on a common endeavor need to identify a Fiscal Sponsor or lead organization to accept grant funding on behalf of a collaborative model.

The Fiscal Sponsor is considered the Grantee by MeHAF and therefore is responsible for all legal aspects of the grant. As the Grantee, the Fiscal Sponsor agrees to be accountable to MeHAF for the programmatic and financial outcomes of the grant. All information requested in the application for the applicant organization including the EIN number is that of the Fiscal Sponsor.

**Q 30: When posting the FAQs, will you provide a list of the organizations who have participated in the live chat sessions?**

A: We will be sharing the FAQs, but not a list of organizations. If you want to connect with other organizations feel free to connect via Facebook. Applicants looking for potential partners may post comments on our Facebook page looking for partners. Len Bartel can also connect organizations by phone or direct email.