Bridgeton Landfill Community Project Fund

Request for Proposals for Access to Health Care

Issued on October 8, 2020

Proposals due by 5:00 pm Central Time on November 20, 2020

Proposals may be found at: https://www.grantinterface.com/Home/Logon?urlkey=stlgives

Virtual Grant Information Session - Wednesday, October 21 from 9am – 10:30am

To attend complete this registration form or contact nmartinez@stlgives.org for more details
BACKGROUND

The Bridgeton Landfill Community Project Fund (Bridgeton Fund) was established in July 2018 with $12.5 million from a legal settlement between the State of Missouri and Republic Services, Allied Services, and Bridgeton Landfill, LLC regarding the subsurface smoldering event at the Bridgeton Landfill in Bridgeton, MO. Per the terms of the settlement, the Bridgeton Fund will support nonprofit (501c3) organizations providing services in or located within a four-mile radius of the Bridgeton Landfill. Grants from the Bridgeton Fund are for initiatives that contribute to the betterment of the environment, health, and safety of the communities within this area. The Bridgeton Fund will sunset in 2022.

The St. Louis Community Foundation manages the grant-making for the Bridgeton Fund and undertook an information-gathering process to determine community priorities in the three focus areas of public safety, health, and the environment. This process has included one-on-one and small group meetings with stakeholders in the targeted community, focus groups, and community meetings. As a result, four funding areas emerged as of primary interest:

- Public Safety
- Access to Health Care
- Access to Mental Health and Substance Abuse Services (awarded Spring 2019)
- Greening, Gardening, and Outdoor Living (awarded Spring 2020)

This request for proposals is specific to Access to Health Care.

The Bridgeton Fund may not be used for the following:

- Payments to individuals
- Acquisition of any property
- Support of any type of legal proceeding
- Reimbursement or payment for any past expenses, damages, or losses incurred by any person
- Any project or initiative created or funded and controlled by the State of Missouri, except any environmental cleanup project explicitly authorized by Missouri law

More information about the Bridgeton Landfill and the settlement can be accessed at the following websites:

- Department of Natural Resources: [www.dnr.mo.gov/bridgeton](http://www.dnr.mo.gov/bridgeton)
- Bridgeton Landfill, LLC: [www.bridgetonlandfill.com](http://www.bridgetonlandfill.com)
- Missouri Attorney General: [www.ago.mo.gov/home](http://www.ago.mo.gov/home)

For more information about the St. Louis Community Foundation and the Bridgeton Landfill Community Project Fund, please visit our website at [www.stlgives.org](http://www.stlgives.org).
PURPOSE

Through the community needs assessment, the St. Louis Community Foundation identified increased access to health care and health information as a primary need for people living and working within a four-mile radius of the Bridgeton Landfill. The outcomes for this “Access to Health Care” initiative, therefore, are:

- The Bridgeton Landfill Community Project Fund target community can access affordable, quality healthcare within the geographic area
- The concerned community has increased access to information about and increased knowledge of their health, particularly related to cancer and respiratory issues

We are seeking partnerships with nonprofit organizations to provide this increased access and to achieve these outcomes. Collaborations that take advantage of the assets already in the community are encouraged, as a clear understanding of the impacted community and its needs are requisite. Successful proposals will share how this community voice is elevated in program/project planning and implementation.

Possible projects and programs may include but are not limited to:

- Community health workers/care navigators
- Health screenings
- Chronic condition and disease management
- Immunizations
- Health education and health literacy
- Telehealth
- Nutrition
- Health intermediaries
- Wraparound services that support access to health care (ex – transportation)
- Other health projects and programming

Projects and programs should be focused within the four-mile radius of the Bridgeton Landfill (please see Exhibit 1 for a map of the area). Of particular interest are projects that include historically under-represented populations such as people of color, people with disabilities, English language learners, and those with low to moderate incomes.

Though we recognize that mental health is a critical component of overall health, as the Bridgeton Landfill Community Project Fund funded a mental health initiative in 2019, the Access to Health Care Initiative is specifically focused on physical health.

Grants may be for up to three years (2021 – 2023) and will be renewed based on the success of each year of funding. Proposals must address sustainability of the project/program after the Bridgeton Landfill Community Project Fund sunsets in 2022 and the funding cycle is completed in 2023.
The St. Louis Community Foundation has designated a total of $3.0 million over the three years for the Access to Health Care Initiative.

**Exhibit 1: Bridgeton Landfill Community Project Fund Geographic Area**

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**TIMELINE**

<table>
<thead>
<tr>
<th>Date</th>
<th>Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>October 7, 2020</td>
<td>Request for Proposals released</td>
</tr>
<tr>
<td>October 21, 2020</td>
<td>Information Session (see below for information)</td>
</tr>
<tr>
<td>November 20, 2020</td>
<td>Grant proposals due at 5:00 pm CST</td>
</tr>
<tr>
<td>January 2021</td>
<td>Grants announced</td>
</tr>
</tbody>
</table>

**ELIGIBILITY**

Any nonprofit that is a 501c3 or is fiscally sponsored by a 501(c)3, and meets the requirements outlined in this RFP, may apply for funding from the Bridgeton Landfill Community Project Fund. This may include some governmental or semi-governmental entities, such as libraries and schools. The nonprofit does not have to exist within the four-mile radius, though the proposed program, project, or initiative must be located within or serving the people who live and/or work within the four-mile radius.

As stated above, priority will be given to projects or programs that include historically under-represented populations such as people of color, people with disabilities, English language learners, and people with low to moderate incomes.
APPLICATION

The application for funding through the Access to Health Care Initiative may be found on the St. Louis Community Foundation’s online grant portal at https://www.grantinterface.com/Home/Logon?urlkey=stlgives. Once there, either create an account for your organization or, if you have already established an account, enter your account information and find the Bridgeton Fund – Health Initiative on the “Apply” page.

You may find more information about the Bridgeton Landfill Community Project Fund on the nonprofit page of St. Louis Community Foundation’s website at: https://stlgives.org/nonprofits/grants-management/.

Applications are due by 5:00 pm CST on Friday, November 20, 2020. Technical assistance with the online application will not be available after 3:00 pm CST on November 20.

INFORMATION SESSIONS

The St. Louis Community Foundation will host an information session for any organization interested in applying for these grants. Logistics are below.

- The session will be Wednesday, October 21, 2020 from 9:00 – 10:30 a.m. CST
- This will be a zoom session and will be recorded with the link placed on the St. Louis Community Foundation website
- The zoom session will be limited to 100 people
- To register, please go to: https://forms.office.com/Pages/ResponsePage.aspx?id=LJVF30W6_OGFkAwp9Yxn5Ju33O0ReT1Esfq12MhXlclUN1hZTTFZRIYSTUpWQVA3REg5NklOUUFFEv4u

QUESTIONS

Please contact us with questions about the Bridgeton Fund and this RFP. The primary contact is:

Elizabeth George   or   Nikki Martinez
Director of Community Investment   Community Investment Manager
314.880.4956     314.880.4961
 egeorge@stlgives.org     nmartinez@stlgives.org

APPENDIX

List of application questions
Bridgeton Fund - Health

St. Louis Community Foundation

Doing Business As

Does your organization use another name?*
Doing Business As (DBA)

Choices
Yes
No

Doing Business As (2)

Please list and explain*
Character Limit: 500

Fiscal Sponsor

Are you using a fiscal sponsor?*

Choices
Yes
No

Fiscal Sponsor (2)

Fiscal Sponsor Name*
Character Limit: 250

Fiscal Sponsor Tax ID*
Character Limit: 250

Fiscal Sponsor Contact Name*
Character Limit: 250

Fiscal Sponsor Contact Email*
Character Limit: 254

Fiscal Sponsor Contact Phone*
Character Limit: 250
Organizational Information

Mission Statement*
Organization's mission statement
Character Limit: 1000

Organization's Fiscal Year*
(month/date through month/date)
Character Limit: 250

Organization's Annual Budget*
Character Limit: 20

History*
Please provide a brief summary of your organization's history and description of your work in the Bridgeton Landfill Community Project Fund 4-mile catchment area.
Character Limit: 10000

Programs*
Please provide a brief description of the organization's current programs, activities, number served annually, and accomplishments.
Character Limit: 10000

Proposal Overview

Project Name*
Character Limit: 100

Type of Request:*  
Choices  
Capital Support  
Existing Project/Program  
Expansion of Existing Project/Program  
New Project/Program  
Other

Project/Program Area*  
Please check all that apply to your proposed project/program

Choices  
Chronic Condition and Disease Management  
Community Health Workers/Care Navigators
Health Education and Literacy
Health Intermediary
Health Screenings
Immunizations
Nutrition
Other Health Programming
Telehealth
Wraparound services (ex. transportation)

Proposal Summary*
Please provide a brief summary of your program/project
*Character Limit: 500

Funding Period Start (requested)*
*Character Limit: 10

Funding Period End (requested)*
*Character Limit: 10

Total Amount Requested*
For multi-year requests please indicate total grant amount
*Character Limit: 20

Project Information

Service Total
How many individuals do you intend to serve by this grant (please limit your response to a six digit integer).
*Character Limit: 10

Community Description*
Please describe the community you intend to reach and engage through this project. As appropriate, use descriptors such as:

- demographics
- population strengths
- trends and factors impacting the population
- any other descriptors that are important to understand your community

*Character Limit: 10000
**Geographic Area served**
Please provide cities and zip codes for the geographic area that will be served through this programming. Projects and programs must be located within four miles of the Bridgeton Landfill located at 13570 St. Charles Rock Road, Bridgeton, MO 63044.

*Character Limit: 2000*

**Reflecting Community/Clients in Organization**
How are the demographics of the community/clients your organization serves reflected in the composition of your staff, board, and/or volunteers?

*Character Limit: 5000*

How is your organization incorporating the voice and perspective of the community described in your proposal.*

*Character Limit: 5000*

**Purpose of this funding request**
Please describe the intended goals, benefits and measurable outcomes of your proposed project/program.

*Character Limit: 10000*

**Project/Program Activities**
Please provide an in-depth description of the activities and services you intend to engage in or providing including 1) how much, 2) how often, 3) how long activities or services will be provided. For expanded programming requests, distinguish between current and expanded activities/services.

*Character Limit: 10000*

**Timeline**
What is the timeline for implementation of this project?

*Character Limit: 10000*

**Partnerships & Collaborations**
If applicable, please provide the names and brief description of roles of partners necessary for the success of this project. If municipal or county support is needed, please indicate who within which governmental entity you are working with to ensure project/program success.

*Character Limit: 10000*

**Staffing & Qualifications**
Who are the key staff, board members, and/or volunteers who will ensure the success of the project/program and what are their qualifications?

*Character Limit: 10000*
**Mission Alignment**
How does this project/program support and/or advance your mission?
*Character Limit: 5000*

**Sustainability**
Please describe how your organization plans to fund and sustain this programming when this grant term concludes?
*Character Limit: 2500*

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**Project Evaluation**

**Measurable Outcomes**
What are the anticipated short-term and long-term measurable outcomes that would be achieved by this grant?
*Character Limit: 10000*

**Evaluation Tools**
What tools and processes does your organization use to measure whether or not your project/program is achieving the described goals and outcomes? Please describe measurement tools (intake sheets, participation checklists, pre/post surveys, client questionnaires, follow-up surveys, co-design evaluation tools etc).
*Character Limit: 5000*

**Evaluation Results**
How will evaluation results be used to inform and/or strengthen future programming and organizational operations?
*Character Limit: 5000*

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**Diversity, Equity, and Inclusion**

**Diversity, Equity, and Inclusion**
Please list any internal or external efforts your organization is currently undertaking to incorporate diversity, equity, and/or inclusion (DEI) into your policies and practices. Are there DEI initiatives your organization hopes to undertake?
*Character Limit: 10000*
Required Attachments

Board of Directors List*
Please provide of list of your organizations board of directors, including the following information for each member:

- Professional Affiliations (name of employer and title)
- Zip Code of Residence (e.g. 63105)

File Size Limit: 1 MB

Letter(s) of Support
If applicable, please provide a letter of support from each collaborating organization that explains their role and is signed by the top executive(s) of that organization.

File Size Limit: 1 MB

Fiscal Sponsorship Documents
If applicable, please provide a memorandum of understanding or contract between the organization and your fiscal agent/fiscal sponsor.

File Size Limit: 1 MB

Project Budget
Please use the Missouri Common Grant Application budget template found here. For multi-year requests, please add and edit columns to reflect annual expenses.

File Size Limit: 3 MB

Organization Budget*
Please upload operating budget (expenses and revenues) for current fiscal year. (You may use Excel, CGA organizational budget template, or your own personal budget template.)

File Size Limit: 5 MB

Audited Financial Statement OR 990*
Please upload either:

- complete copy of organization's audited/reviewed/compiled financial statements for the most recent fiscal year

OR

- organization's most recently filed IRS form 990

Please note if you upload the 990, you must upload internally prepared financial statements in the next question.

File Size Limit: 10 MB
Financial Statements (required only if submitting 990)
If you are uploading an IRS form 990, please also upload internally prepared financial statements for the past two years including:

- statement of activities (income statement)
- statement of financial position (balance sheet)
- statement of cash flow

Please note - please combine financial statements into one document before uploading them.

File Size Limit: 10 MB

Other Supporting Documents
Please upload other supporting (optional) documents here.

File Size Limit: 1 MB

Budget Details

Funding Request Type*
For how many years are you requesting funding?

Choices
1 Year
2 Years
3 Years

Year 1 Request*
Character Limit: 20

Year 2 request*
Character Limit: 20

Year 3 Request*
Character Limit: 20

COMPLETING THE BUDGET TEMPLATE: For multi-year requests, please add and label columns to break down annual costs and requests.

Budget Narrative Justification*
After completing the budget template, please provide a description of each line item expense listed on the program/project budget. Indicate whether this is a new expense for your project or if funding is being requested to cover a current/existing expense. For multi-year request, please break down annual costs. *(For example, if you list personnel expenses, please state whether these funds will be used for new or existing staff positions. Explain how the numbers are being calculated.)*