

GRANT PROPOSAL GUIDELINES

- We **connect people who care with causes that matter, so their philanthropy makes a difference now & forever.**
- We are a **collection of Field of Interest & Donor Advised Funds** with **@\$3.5M granted annually** to nonprofits in Chester County & beyond.
- **99%** of our grants are made by our generous Fund Advisors, who make grant decisions all year.

Proposals submitted by nonprofits are considered for 2 types of grants:

Field of Interest & Donor Advised Funds (No Deadline)

- ◇ Grants **focus on Chester County** causes & issues, but are not limited to Chester County.
- ◇ Charitable nonprofits working **in all fields of interest** are considered for grant awards. (I.e. arts, culture, & humanities; education; community improvement; environment; religion; health; & human services)
- ◇ **General operating** grants are encouraged. Nonprofits should be specific about their mission, goals, & measurable outcomes.
- ◇ Proposals can be submitted **anytime all year.**
- ◇ Grant decisions are made **intermittently** all year, as Fund Advisors desire.
- ◇ Grant **awards** typically range from **\$500-\$7,500.**

Fund for Chester County Capacity Building Grants (Due 9/15)

- ◇ For eligibility in this grant program, nonprofits must be **located in & serve Chester County.** NPO's with budgets of \$500,000 or less are given preference.
- ◇ The goal of capacity building grantmaking is to **strengthen the effectiveness of NPO's serving the Chester County region,** in areas including:
 - Mission, Vision & Strategy
 - Governance & Leadership
 - Partnerships & Collaborations
 - Operations & Technology
 - Fundraising, Development & Marketing
- ◇ Proposals must be submitted by **September 15** to be eligible for consideration.
- ◇ Grant **awards** typically range from **\$500-\$5,000,** with monies distributed by **February.**

- Use this form @ www.chescocf.org to apply online for grants from all Community Foundation Funds.
- **Email proposals to grants@chescocf.org**
- Proposals are considered "complete" when CCCF has **confirmed** receipt of the **Grant Proposal Summary Sheet, Narrative & Attachments.**
- Proposals are shared electronically and online with Fund Advisors, Donors & Grant Panels.
- Per IRS Regulations, applicants **must be** charitable, tax exempt organizations with 501(c)(3) certification & **cannot** be individuals.

Please contact Grants Administrator **Kevin Baffa** at **(610)-698-8211** or grants@chescocf.org with any questions.

I. CHESTER COUNTY COMMUNITY FOUNDATION GRANT PROPOSAL SUMMARY SHEET

One page only. This page will be shared electronically with Grant Panel Members & Fund Advisors.

Note: If Philanthropy Network's Common Grant Application is used, CCCF's **Summary Sheet MUST accompany application.**

To obtain an electronic version of this application, visit www.chescocf.org

Date

Contact Information

Organization Name: WC Atkinson Mem. CS Center, Inc.
Address: 822 East Chestnut Street, Coatesville, PA. 19320
Phone: 610.380.6193
Website: www.wcatkinson.org
Year Incorporated: 1988
FEIN: 232560093

ED/CEO Name: Minnie McNeil, Acting
ED/CEO E-mail: mm10410053@msn.com
Board Chair Name: Charles Ochola, PhD
Board Chair Approval (check here):
Primary Contact Name: Minnie McNeil
Primary Contact E-mail: above

Organization Information:

Field/s of Interest:

Arts, Culture & Humanities
 Health

Environment/Animal Welfare
 Human Services

Education
 Religion

Mission:

To enhance neighborhood revitalization by providing community resources, referrals and housing for lower income individuals and families, and shelter for homeless men in the greater Coatesville area; and to promote a holistically healthy lifestyle through education; preventive, supportive, and cultural services.

Geographic Area Served (If not all of Chester County, specify primary Chester County regions served):

Community Outreach – Coatesville; Shelter – Chester County

Describe Population Served & Annual Number of People Served:

<u>Annual Budget</u> \$440,000	<u>3</u>	# of Full-Time Equivalent Paid Staff
<u>85</u> % of budget for program expenses	<u>15</u>	# of Board Volunteers
<u>15</u> % of budget for administrative expenses	<u>85</u>	# of Active Non-Board Volunteers
<u>Gratis</u> % of budget for fundraising expenses <small>100 % total</small>	<u>75/wk.</u>	# of Volunteer Hours

Top 3-5 funding sources:

County of Chester DCD and Dept. of Human Services (EFSP), PHFA PHARE Fund, Genuardi Family Foundation, Stewart Huston Charitable Trust, Rental Income

Is this grant proposal for: Capacity Building or General Operating ?

If Capacity Building Proposal, the focus is:

Mission, Vision & Strategy Governance & Leadership Partnerships & Collaborations
 Fundraising, Development & Marketing Technology Other: _____

Grant Amount Requested from the Community Foundation: \$ 8,000 _____

Proposal Summary: The Atkinson Center Seeks a grant for operational costs of its Men's Shelter. We are fortunate to remain open since the beginning of the pandemic, and increased Shelter hours to 24/7. During that time, the Case Management Team with CC collaborative partners and 2 foundations successfully transitioned 87% of its 23 residents to permanent housing. While current 24/7 sheltering increases safety of residents, staff and community; it also markedly increases budgetary expenses.

II. CHESTER COUNTY COMMUNITY FOUNDATION GRANT PROPOSAL NARRATIVE

Provide clear, concise information. 3 pages maximum.

1. Nonprofit's history, goals, key achievements & distinctiveness

History: The WC Atkinson Memorial Community Service Center was organized in 1988. The former Clement Atkinson Memorial Hospital was purchased in 1988. With assistance of PA DCA, the former emergency room was renovated into a shelter for homeless men in 1992. The main hospital was renovated into 18 apartments in 1993, funded primarily through PHFA and several banks. The Atkinson Health Center was opened and managed by Brandywine Hospital 1994-2007. The former home of Dr. Whitter Atkinson was renovated into a Community Resource Center in 1995. With the assistance of the Claneil Foundation, two transitional houses for men transitioning for the Atkinson Men's Shelter, and employed or awarded disability were purchased and rehabbed in 1998 and 1999 respectively. Four dilapidated houses, one block from the Center were purchased, bulldozed and replaced with three 3-bedroom townhouses, funded largely by HUD, CC DCD, a mortgage, and completed in 2002. The former hospital, renamed for founder Dr. Whittier C. Atkinson was named an Historic Site by the Pennsylvania Historical and Museum Commission, April 2007. It was a productive and busy 19 years. Since then, we have rented space to organizations that benefit the community like New Life foster care program and Dream Big Academy, a youth mentoring group. A variety of programs ensued like Grandparent and Diabetic Support Groups, ESL, Computer Literacy, Photography for youth, the formation of a Girl Scout Club and more.

This proposal focuses on the Shelter for Men. Prior to the pandemic, Atkinson sheltered an average of 100-120 men per year since 1992. It has struggled financially throughout that time, but has never closed, no service was ever interrupted, nor has there been a missed payroll; of necessity we sometimes exchanged rental fees for staffing needs, a benefit to renter and Center. The program has thrived mainly through volunteerism. Meanwhile, the outcomes and the impact of the shelter has been indisputably huge. As a low barrier to access shelter, men have been admitted that were totally inebriated. Prior to 211, men were brought to the door and dropped off many times. Currently, the men are often active drug/alcohol abusers, others completed long term sentences in prison, many others have poor credit or no credit, have felony charges, and/or poor life skill training. Mental and Physical illness has been a barrier to permanent housing far too long. Others have owned businesses that failed for a variety of reasons, still others are Veterans that did not complete their programs at the VAMC and ended up on the streets of Coatesville. Saddest are the divorced whose children were told that their dad was dead, to cut off all ties with family. These same men have remained at the shelter for an extended period of time and departed the shelter with jobs and a priority of clearing debt, have successfully completed D/A programs and remained "clean" and some reunited with family. Many others finally were awarded disability benefits, because they were in one place long enough to complete the process. Best of all, a few have purchased a home, the latest being a former shelter resident that has spent years with us in various roles, and this week 2/2/2021 completed the purchase of his home. Yes! We're excited for him.

Goal: We were intentional about not focusing on the person at entrance, except to understand the causative factors of their homelessness. Then the Case Manager began to chart a pathway with the resident to stable housing however that looked for each person. Most believed, "housing is not in the cards for me." Over and again, we proved that sentiment to be incorrect. The step forward begins with Trust, one resident at a time. Helping men reach their highest potential is our goal.

Achievement: In June 2019, Atkinson's Individualized Intensive Case Management Program began. The team included a Licensed MSW, consultant; a case manager, and MSW student intern and case manager clerical assistant. The shelter hours were extended until 11am two days/week. The impact was immediately felt as more time was allotted for each resident, selected appointments were made with follow-up, transportation vouchers were secured, relationships were built with landlords, and housing vouchers were secured from CC Housing Authority. Other County partners collaborated with Atkinson to focus on stably housing residents as a priority. When the pandemic happened, we declined to send our residents to the hotel because we were not confident that they would follow the guidelines of the hotel or the county. We did not want to set the men up for failure. Because we accept additional men during code blue, our census was 23 men in January 2020. We then opened 24/7 and with Covid-19 CARES funding we followed safety protocols and secured the shelter with major safety upgrades. Engaging our collaborative partners, by May 2020, 87% of the residents were given a key to their own front door, a first time for many of them. The MSW intern followed up in their homes to be certain they were acclimating well, and to answer questions, and most of all to encourage the resident to report issues to the landlord, so issues could be rectified early on. A major issue surfaced that many were hesitant to do that because they did not want to risk being asked to leave. So, lots of rental education happened for the benefit of the former resident and the landlord.

Distinctiveness – We are currently **open 24/7** to prevent day wandering that may increase the chances to be infected with Covid-19 or it's variants, and by extension infect community members, fellow residents and/or staff.

Atkinson began the Individualized Intensive Case Management (**IICM**) initiative, June 2019, and has proven to be very effective in stably housing residents; our primary goal.

- All shelter attendants are former residents.
- We require a negative covid-19 test within the week of admission.
- We are low barrier to entrance, there is no drug testing before or during the shelter stay.
- The residents receive uninterrupted mental health services through tele-med and/or virtual services which are vitally needed for continuum of care.
- Atkinson provides support, advocacy and assistance with seeking legal counsel, and completing legal documents related to court cases, and are present in court with the resident.
- Each man is given a backpack upon admission filled with large sized personal care items, socks, and PPE. They are provided other items as needed like hats, gloves, sweaters, etc.
- Each resident is required to do a daily chore, based on their individual ability.
- Atkinson has a small library of donated books, and daily newspaper. The residents have access to a computer for job searches. Safety precautions are taken.
- A monthly men's health workshop and quarterly screenings was provided by a male health professional prior to the pandemic. We have subscribed to Zoom; the health workshops will now continue.
- Atkinson has a monthly birthday celebration which is both anticipated and appreciated.
- Atkinson has one F/T employee (Case Manager), others are part time or consultants. The Shelter Coordinator and many other positions are dedicated volunteers.
- When Atkinson is involved in community outreach activities, like MLK Day of Service, the residents are invited to participate, most do and enjoy being a part of the community fabric.
- Finally, Atkinson has a Covid-19 Team comprised of health professionals who monitor all aspects of safety related to the pandemic; they monitor practices, also train and have drills with staff. A representative of the group reports directly to the board.

2. Funding request

- **Description of key initiatives** – To remain open 24/7 and engage each man in Individualized Intensive Case Management in an effort to transition the resident from homelessness to individually appropriate stable housing and highest level of self-reliance.
- **Specific needs & issues to be addressed** - the most pressing need is to maintain a safe environment that prevents the spread of Covid-19 among residents or staff which requires additional measures and upgrades to include cleaning supplies, 3 air filters, PPE for residents and staff, professional linen service, annual hazmat cleaning and repair of the boiler. The 24/7 shelter hours require additional operational dollars for staff salaries and meals. Additionally, the IICM team needs funds for transportation vouchers, funds for security deposits and other start-up rental fees.
- **Why it is important to fund this now** – Because we, along with all others are currently in a crisis and remediations and rising costs requires a current response to current needs. We were resilient and innovative throughout 2020 in maintaining safety while helping residents navigate a pathway to permanent housing; not easy for single men in a County with limited affordable housing. As mentioned, 87% of the residents were successful. They were compliant in helpful ways throughout the process. As an example, we required men to stay on property for 3 months and they did; miraculously. We need funding from many sources now to continue innovative and creative approaches to help men achieve with dignity, because they can, withstanding the barriers they face.
- **How impact & results will be demonstrated** – All residents are participants in the Individualized Intensive Case Management initiative, and are closely monitored to prevent lapse in progress. When appointments are made, there is a follow-up to ensure the appointment was kept, the resident understands the “next steps” and commended for accomplishing the short-term goal. Each action is documented with progress notes. The team meets each Wednesday morning to discuss individualized results of the previous week, and when necessary new methods are tried to increase compliance with expectations of both the resident and the Team. All strategies are developed *with* the resident and with the end goal in mind; stable housing with rare recidivism to homelessness. The measure of success is reflected by the rate of men that have the key to the door of their own home. Recognizing that significant impact can sometimes mean acquiring housing in a group setting or sharing setting, based on individual need. Alongside this goal, every effort is made to prevent the spread of Covid-19 through education, communication and innovation; resulting in no resident or staff member being infected by the Covid-19 virus or its variants. Finally, we follow the Logic Model. We document the inputs (IICM team), the activities (individualized interactions, plans and goals), outputs (actual appointments kept, vouchers received, treatments completed), outcomes (jobs, housing secured, sobriety, compliant with medication schedules and health appointments) and impact, (each man begins to reach for his highest potential, rebuffing recidivism to homelessness, experiencing wholistic health, and becoming a contributing member of the community) which leads us to emphatically know as an agency whether we are making a difference.

III. ATTACHMENTS

E-mail or mail this support information

1. Copy of 501 (c) (3) federal tax-exempt letter
 2. List of Board of Directors, with their affiliations
 3. Most recent annual report & financial statement, audited if available
 4. Itemized organizational operating budget with actual results for prior fiscal year & current fiscal year to date
 5. If capacity building initiative, itemized budget (including external consultant's proposal, if applicable)
 6. Current strategic plan. If your nonprofit does not have a current strategic plan, explain why.
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so their legacies make a difference.*



WHAT IS CAPACITY BUILDING?

Capacity building helps bring a nonprofit to the next level of operational, programmatic, financial, or organizational maturity, in order to more effectively & efficiently fulfill its mission.

Capacity building may include (but is not limited to) projects which address:

- **MISSION, VISION & STRATEGY**
Organizational Assessment - Strategic Planning - Financial Planning
- **GOVERNANCE & LEADERSHIP**
Board Development - Executive Transition/Succession Planning - Leadership Development - Staff Training & Professional Development
- **PARTNERSHIPS & COLLABORATIONS**
Coalition Building – Collaboration - Mergers & Acquisitions - Strategic Restructuring
- **RESOURCE DEVELOPMENT & MARKETING**
Major Gift Donor Identification, Cultivation, Development & Stewardship - Development Campaigns (Annual, Capital, Planned Giving) - Earned Income Development - Social Enterprise Feasibility & Development - Marketing, Branding & Communications
- **TECHNOLOGY & OPERATIONS**
Business Continuity Planning - Financial Management - Human Resources - Volunteer Management - Industry Certification - Risk Management - Technology Improvements