Introduction

This RFP provides instruction and criteria that applicants must meet to submit proposals for the Colorado Healthy Eating Active Living (HEAL) Cities and Towns Campaign funding opportunity described herein. Applicants should submit proposals in accordance with this RFP.

Summary

Kaiser Permanente plans to invest up to $495,000 over three (3) years to support one grantee to implement the HEAL Cities and Towns Campaign in Colorado. This funding opportunity is intended to fund a nonprofit organization to coordinate the statewide HEAL Cities and Towns Campaign, including training and technical assistance to help city/town officials adopt policies that improve their communities’ opportunities to increase physical activity, to access healthy food, and to implement worksite wellness plans and activities.

The goal of this grantfunding is to increase the number of existing Colorado HEAL Cities and Towns that achieve one of the HEAL Cities and Towns Campaign designation levels higher than “active” (i.e., fit, elite. See page 7 for designation descriptions). Over the three (3) year grant period, the successful grantee will collaborate with Kaiser Permanente Colorado, Public Health Advocates and the national HEAL Cities Campaign, and the Colorado Municipal League, to provide technical assistance to cities and towns in Colorado. The technical assistance will build awareness among city/town officials about the role of the physical environment in promoting healthy habits and provide city/town officials with support in adopting and implementing city/town policies that make it easier for residents to engage in healthy behaviors. The successful grantee will also be expected to develop formal partnerships with other statewide organizations and to develop and implement systematic ways to connect Colorado HEAL Cities and Towns Campaign participants for peer learning to increase collaboration, information sharing, and problem solving.

The specific goals of the Colorado HEAL Cities and Towns Campaign and this funding opportunity are:
1. Increased implementation of city/town policies that create healthier food and physical activity environments for their employees.
2. Increased opportunities for healthy eating (i.e., increase fresh fruit, vegetable and water consumption, decrease consumption of sugar sweetened beverages).
3. Increased opportunities for physical activity in local community settings (e.g. increase walking, bicycling, and wheelchair rolling to school, work, and everyday activities; increase daily physical activity).
4. Increased equitable access for all residents to opportunities for healthy eating and physical activity within HEAL cities/towns.

This funding opportunity is expected to achieve the following objectives by the end of the three-year funding period:

1. Increase awareness and understanding among city, town, and county officials of the relationship between health, health equity and economic development, and the role of the physical environment in promoting healthy cities and towns.
2. Increase the number of Colorado HEAL cities and towns that achieve designation levels higher than Active (Fit, Elite).
3. Increase in the number of statewide organizations that take an active, formal, leadership role in the Colorado HEAL Cities and Towns Campaign.
4. Increase the number of Colorado HEAL Cities and Towns Campaign participants who are involved in peer learning, sharing information, engaging in problem solving, and disseminating best practices.
5. Increase the number of opportunities for low-income residents and communities experiencing health disparities to access affordable healthy eating and physical activity within Colorado HEAL cities and towns.

The successful applicant will provide leadership and services statewide in Colorado. To ensure smaller and rural towns/cities receive equitable attention and to facilitate regional collaboration and common approaches, the successful applicant must partner with an organization that serves a different population (i.e., rural or urban) in a different part of the state. This collaboration must be described in the application and documented by a letter of collaboration that specifies the role of the collaborating organization and the population it serves. If you are the successful applicant, you and your partner will be expected to formalize your collaboration during the development of the grant agreement through a mechanism such as a Memorandum of Understanding or a contract. (See Appendix C for guidance on urban and rural.)

**Timeline**

<table>
<thead>
<tr>
<th>Event</th>
<th>Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>RFP Released:</td>
<td>January 4, 2017</td>
</tr>
<tr>
<td>Proposals Due:</td>
<td>February 15, 2017, 5:00 p.m. MT</td>
</tr>
<tr>
<td>Funding Notification:</td>
<td>By July 3, 2017</td>
</tr>
</tbody>
</table>
Award Information

Total Funds Available: Up to $495,000
Number of Awards: One Grantee
Amount of Awards: Up to $165,000 per year ($495,000 total)
Grant Period: August 1, 2017 – July 31, 2020

Eligibility Requirements Overview

The applying organization must be a Colorado-based 501(c)(3) in good standing with the IRS; fiscal agents are allowed. While the Campaign will be implemented statewide, the applying organization must have its primary office within Kaiser Permanente’s Service Area (defined by providing services in one or more of the following counties): Adams, Arapahoe, Boulder, Broomfield, Clear Creek, Crowley, Custer, Denver, Douglas, Eagle, El Paso, Elbert, Fremont, Gilpin, Grand, Jefferson, Larimer, Lincoln, Otero, Park, Pueblo, Summit, Teller and Weld.

Additionally, organizations must:

- Demonstrate a formal relationship with a partner organization, prior to application that will ensure all cities/towns, in rural and urban environments, are fully and appropriately served by the Campaign resources. For purposes of application, the formal relationship can be documented with a Letter of Collaboration that specifies the role of the collaborating organization and the population it serves; the successful applicant and its collaborator will be expected to execute a Memorandum of Understanding or a contract as part of the grant agreement process.
- Have experience working with public leaders at the local, county, or state level; it is preferred, but not required, that this experience and expertise be with healthy eating and/or active living.
- Complete all prior reporting requirements if a previous Kaiser Permanente Colorado grantee.

For more information on specific eligibility requirements, please read the eligible organizations section of this RFP.

Communications

We will facilitate a webinar on Friday, January 13, 2017, from 2:00 p.m. to 3:00 p.m. MT. Webinar participants will receive an overview of the RFP goals and instructions for submitting proposals. There will also be an opportunity to ask questions. To attend the webinar, please RSVP to co-contributions@kp.org to receive log-in information. Email your name, organization, email address, and phone number with the subject line HEAL Cities and Towns Webinar RSVP.
Following the webinar, applicants may email additional questions to co-contributions@kp.org. Updated questions and answers will be posted on kp.org/share/co. We will not accept content questions via any other means to ensure fairness in the RFP process.

**Technical Assistance**

For technical support regarding the online submission process, please email co-contributions@kp.org. We will respond to technical questions no later than 48 hours after receiving. Please put “HEAL Cities and Towns Campaign RFP-technical Assistance” in the subject line of the email.
# Table of Contents

1. Background and Overview of the Funding Opportunity ................................................. 6  
   A. About Kaiser Permanente Colorado ........................................................................ 6  
   B. Purpose of Kaiser Permanente’s HEAL Cities and Towns Campaign Funding  
      Opportunity ........................................................................................................ 6  
   C. Goals and Outcomes of Kaiser Permanente Colorado’s HEAL Cities and Town  
      Campaign Funding Opportunity .......................................................................... 9  

2. Grant Guidelines ........................................................................................................ 10  
   A. Partnerships to Serve Urban and Rural Cities and Towns .................................. 10  
   B. Funding Guidelines .......................................................................................... 11  

3. Grantee Requirements ............................................................................................... 12  
   A. Accountability Requirements ............................................................................... 12  
   B. Kaiser Permanente Colorado’s Role and Resources ......................................... 14  

4. Proposal Submission .................................................................................................. 14  
   A. Electronic Application Process ............................................................................ 14  
   B. Proposal Review Process .................................................................................. 15  
   C. Technical Support ............................................................................................ 15  
   D. Sections of the Application ................................................................................ 15  
   E. Required Attachments ....................................................................................... 15  

5. Appendix ..................................................................................................................... 16  
   Appendix A: Application Questions ........................................................................ 17  
   Appendix B: Current Colorado HEAL Cities and Towns ....................................... 20  
   Appendix C: Guidance on Urban and Rural ......................................................... 20  
   Appendix D: Additional Resources ......................................................................... 21
1. Background and Overview of the Funding Opportunity

A. About Kaiser Permanente Colorado

Kaiser Permanente Colorado is the state’s largest nonprofit health plan, working to improve the lives and health of all Coloradans for 47 years. We are comprised of the Kaiser Foundation Health Plan of Colorado and the Colorado Permanente Medical Group—one of the state’s largest medical groups with more than 1,100 physicians. We provide comprehensive care for our 675,000 Kaiser Permanente Colorado members through 30 medical offices across the state—from Pueblo to Greeley and now in the mountains in Summit and Eagle counties. We are also committed to our social mission and in 2015, proudly directed more than $124 million to community benefit programs to improve the health of all Coloradans.

We understand that health extends beyond the doctor’s office and the hospital. To be completely healthy, people need access to healthy and nutritious foods, clean air, effective schools, safe parks and playgrounds. We’re very intentional about improving the health and vitality of Colorado communities.

We affect thousands of lives each year through a wide range of programs, partnerships, and assistance to help those in our community. For many years, we’ve worked collaboratively with community organizations to assess the community’s health needs and resources.

B. Purpose of Kaiser Permanente’s HEAL Cities and Towns Campaign Funding Opportunity

In 2016, we conducted a community health needs assessment (CHNA) to inform community benefit strategies. This research provided data about the communities’ unique health needs and resources. Access to affordable, healthy food and the opportunity to lead physically active lifestyles were among the needs identified by the communities served by Kaiser Permanente Colorado. Healthy eating, active living, and addressing obesity are public health priorities for Colorado as well as many individual communities served by Kaiser Permanente.

History of HEAL Cities and Towns Campaign in Colorado

In 2008, Kaiser Permanente worked with Public Health Advocates (then known as the California Center for Public Health Advocacy) to establish the national HEAL Cities Campaign to make healthy choices easier for people who live, work, and go to school in California cities and towns. The HEAL Cities Campaign spread to four additional states and is locally implemented through partnerships between state municipal leagues and state-wide organizations in Colorado, Oregon, Maryland, and Virginia.

The Colorado HEAL Cities and Towns Campaign began in 2012 with funding to LiveWell Colorado from the Colorado Department of Public Health and Environment. LiveWell Colorado currently coordinates the Campaign in Colorado, funded by Kaiser
Permanente Colorado. The Campaign educates city officials about the role of the physical environment in promoting healthy habits, works with municipalities to assess how their existing policies affect the community’s health, and provides them with technical assistance to adopt and implement policies that make it easier for residents and city employees to engage in healthy behaviors.

Today, 46 Colorado communities have adopted resolutions to join the Campaign and support community members in making healthy choices, such as walking to school or work, accessing fresh produce, or staying well at work. The HEAL Cities and Towns Campaign focuses on three policy-related areas: land use, access to healthy foods, and employee wellness.

1) **Land Use**: Access to everyday physical activity through sidewalks and bike paths, the availability of parks and open space for recreation, and close proximity of housing to grocery stores, farmers markets, and community gardens all depend on good land use policies. Cities' land use tools of planning, zoning, and infrastructure investment can have a positive impact on community.

2) **Access to Healthy Foods**: Cities have powerful planning, economic development, and public relations tools to attract healthy food to underserved neighborhoods. Cities are focusing these tools on establishing healthy corner stores, grocery stores, farmer’s markets, community gardens, and urban farms in the neighborhoods that most need them.

3) **Employee Wellness**: Cities can reduce the impact of stress and poor health on their employees by creating a work environment, and programs, that support nutrition, physical activity, breastfeeding, and stress reduction. A healthier workplace can contribute to increased morale, fewer sick days and higher productivity.

The Campaign currently recognizes cities and towns that adopt varied healthy eating and active living policies with three designation levels:

- **Eager**: Cities/towns join the Campaign by adopting a resolution and deciding to focus on an area or adopting a policy related to a Campaign area.

- **Active**: Cities/towns that are seeking Active designation have already adopted and implemented two policies in at least one Campaign area. Active Cities adopt a HEAL Cities Campaign resolution that includes at least two commitments for policy development or by adopting an additional policy in one of the Campaign areas they have not yet addressed.

- **Fit**: Cities/towns that are seeking Fit designation have already adopted and implemented at least one policy in each of the three Campaign areas. Fit Cities adopt a HEAL Cities Campaign resolution that includes at least two commitments for
further policy development or by adopting an additional policy in one of the Campaign areas.

Colorado’s HEAL Cities and Towns Campaign offers a fourth designation level:

**Elite:** Cities/towns seeking Elite designation have adopted the three policies identified in the Fit level, plus two additional policies (total of five policies).

In offering this competitive funding opportunity, we intend to build upon the already-strong Colorado HEAL Cities and Towns Campaign, while also using preliminary findings from the program-wide evaluation to strengthen the Campaign, to meet the needs of HEAL cities and towns, and to support strong connections among Colorado HEAL cities and towns participants.

**National HEAL Cities Campaign**

Cities and towns can play a central role in reversing the trend toward sedentary behavior and high-calorie diets, both contributors to obesity and other chronic diseases. City land-use decisions around planning, zoning, and infrastructure investment directly affect residents’ health and access to everyday physical activity such as walking and biking, availability of open space for recreation, and access to healthy food. Based on review of evidence, the [Community Preventive Services Task Force](https://www.cdc.gov/coalition/tpc/programs/cps/index.htm) recommends design and land use policies and practices that support physical activity in urban areas of several square miles or more.

Cities and towns can also play a role in reducing the impact of stress and poor health on their employees by creating a work environment and programs that support physical activity, good nutrition, breastfeeding, and stress reduction. A healthier workplace contributes to increased morale, fewer sick days, and higher productivity. Based on review of evidence, the [Community Preventive Services Task Force](https://www.cdc.gov/coalition/tpc/programs/cps/index.htm) recommends several policies that can help reduce employee health risks and improve quality of life, including worksite programs intended to improve diet and/or physical activity behaviors to reduce obesity.

Preliminary results from a multi-state evaluation of the HEAL Cities Campaign activities across all Kaiser Permanente states/regions found several effective elements of the Campaign, including:

- HEAL City designation provides credibility to cities/towns, helps cities garner additional resources, and advances a city/town’s image of being forward thinking.
- The designation levels (eager, active, fit) are effective in engaging cities to adopt more HEAL policies, drive healthy competition among cities, and provide validation of progress and concrete goals for city/town’s efforts.
- The state municipal leagues (in Colorado, the Colorado Municipal League) are important players in introducing cities/towns to HEAL, promoting additional HEAL learning, and facilitating connections among HEAL cities/towns.
HEAL coordinators are valuable resources to cities/towns and play an important role in helping cities/towns see the interconnectedness of a number of issues in relation to health.

This same evaluation identified opportunities for enhanced HEAL Cities Campaign work, including:

- Increasing awareness and understanding of the HEAL Cities Campaign goals and resources.
- Documenting best practices identified by other city/town participants including how activities are financed, how challenges were overcome, and which policies and activities have been effective and which have not and why they are effective or not.
- Tracking of other funding opportunities available to cities/towns.
- Linking work to other local, regional, state, and national efforts that can leverage Campaign work.
- Providing additional training and technical assistance to help cities/towns advance to higher designations.

This funding opportunity aligns with Kaiser Permanente Colorado’s CHNA, the national HEAL Cities Campaign goals and activities, and with Kaiser Permanente’s mission “to provide high-quality, affordable health care services and to improve the health of our members and the communities we serve.”

C. Goals and Outcomes of Kaiser Permanente Colorado’s HEAL Cities and Towns Campaign Funding Opportunity

Applicants should propose HEAL Cities and Towns strategies that address the following four goals:

1. Increased implementation of city/town policies that create healthier food and physical activity environments for their employees.
2. Increased opportunities for healthy eating (e.g., increase fresh fruit, vegetable and water consumption, decrease consumption of sugar sweetened beverages).
3. Increased opportunities for physical activity in local community settings (e.g., increase walking, bicycling, and wheelchair rolling to school, work, and everyday activities; increase daily physical activity).
4. Equitable access to opportunities for healthy eating and physical activity within HEAL cities/towns.

Specific objectives expected by the end of the three-year grant period include:

1. Increase awareness and understanding among city, town, and county officials of the relationship between health, health equity and economic development, and the role of the physical environment in promoting healthy cities and towns.
2. Increase the number of Colorado HEAL cities and towns that achieve designation levels higher than Active (Fit, Elite).
3. Increase in the number of statewide organizations that take an active, formal, leadership role in the Colorado HEAL Cities and Towns Campaign.

4. Increase the number of Colorado HEAL Cities and Towns Campaign participants who are involved in peer learning, sharing information, engaging in problem solving, and disseminating best practices.

5. Increase the number of opportunities for low-income residents and communities experiencing health disparities to access affordable healthy eating and physical activity within Colorado HEAL cities and towns.

The selected grantee is required to implement the following activities (additional activities to achieve the objectives may be performed):

1. Provide technical assistance to Colorado HEAL cities/towns that will support movement from one level to the next (‘Eager’ to ‘Active’ to ‘Fit’ to ‘Elite’). If the national Campaign revises or changes the designations, the Colorado Campaign will revise accordingly.

2. Build collaboration and peer learning support systems among Colorado HEAL cities/towns.

3. Participate in regular conference calls of the national HEAL Cities Campaign coordinators, attend the annual national HEAL Cities Campaign coordinators convening organized by Public Health Advocates for the HEAL Cities Campaign, and diseminate learnings to Colorado HEAL cities/towns.

4. Identify and develop formal partnership(s) with statewide organizations to support the work; maintain and strengthen existing relationship with Colorado Municipal League.

2. Grant Guidelines

A. Partnerships to Serve Urban and Rural Cities and Towns

We intend to fund one organization for three years. Preliminary information from the evaluation of the national HEAL Cities Campaigns across all Kaiser Permanente regions suggests that smaller HEAL cities and towns operationalize the Campaign and policies somewhat differently from larger, more urban cities. The evaluation also suggests that HEAL cities/towns find regional collaboration helpful. Therefore, we are requiring that if the applicant serves an urban area, it must establish a formal relationship with a collaborating organization (or organizations) that serves a rural area(s) so that all cities/towns in Colorado are equitably and appropriately served. If the applicant is located in a rural area of the state, the applicant must establish a formal relationship with a collaborating organization (or organizations) that serves an urban area(s) and/or urban cluster(s). If you are the successful applicant, you and your partner will be expected to formalize your collaboration during the development of the grant agreement through a mechanism such as a Memorandum of Understanding or a contract.
For purposes of this RFP, the United States Census Bureau’s definitions of urban and rural are used. See appendix C for additional guidance on urban and rural areas in Colorado.

**B. Funding Guidelines**

Each applicant may submit only one proposal and must also meet all the other eligibility requirements or the application will not be reviewed. Organizations may apply for a total funding amount up to $495,000 ($165,000/year).

If you are a previous Kaiser Permanente Colorado grantee, you must have fulfilled all reporting requirements of your previous grant(s). Existing Kaiser Permanente Colorado grantees are eligible to apply for this funding.

We provide general guidance for organizations when developing the proposal budget and budget narrative. [Click here](#) for guidance information.

**General Requirements of All Kaiser Permanente Grant Applicants**

This funding opportunity is open to Colorado-based 501(c)(3) organizations in good standing with the IRS; fiscal agents are allowed. The lead applicant must be located within Kaiser Permanente Colorado’s Service Area, defined by the following counties: Adams, Arapahoe, Boulder, Broomfield, Clear Creek, Crowley, Custer, Denver, Douglas, Eagle, El Paso, Elbert, Fremont, Gilpin, Grand, Jefferson, Larimer, Lincoln, Otero, Park, Pueblo, Summit, Teller, and Weld. Collaborating organizations do not need to be located with Kaiser Permanente Colorado’s service area. Each applicant must also meet all the other eligibility requirements or the application will not be reviewed.

We are not able to consider funding requests that support the following:

- Religious purposes
- Partisan political activities
- Athletic or sports activities
- International or social organizations
- Endowments or memorials
- Fraternal organizations
- Field trips or tours
- Individuals
- Bricks and mortar capital or capital improvement projects
- Activities or organizations associated with the use of alcohol or tobacco

**Non-Discrimination Verification.**

We have an unwavering commitment to equal access and opportunity for all persons. Organizations applying for funding will be required to attest that they do not discriminate on the basis of race, color, religious creed, national origin, age, sex, marital status, sexual orientation, gender identity, handicap, disability, medical condition, or veteran status either in their employment or their service policies and practices.
Conflict of Interest.
We ask each organization requesting funding to disclose any relationships with us that may be, or appear to be, a conflict of interest. Such relationships do not necessarily prohibit an organization from receiving funding, however, they must be disclosed.

3. Grantee Requirements

A. Accountability Requirements

Each grantee will be required to:

- Sign and agree to the terms within the grant agreement.
- Work with Kaiser Permanente to develop an evaluation plan that assesses impact of the funded work.
- Submit annual progress reports and one final report throughout the term of the grant, including financial information (see Reporting Requirements section for specifics).
- Participate in data analysis and dissemination of knowledge, including presentations.

Reporting Requirements
Grantees will be required to provide annual progress reports and one final report throughout the term of the grant. Grant reports will be due on August 31, 2018; August 30, 2019; and a final report on August 28, 2020. Each report should be completed using the Colorado Common Grant Report Form and include:

- Progress made toward stated goals, strategies, and activities.
- Progress toward evaluating the impact of the grant.
- Significant successes and challenges the organization experienced in implementation.
- Lessons learned as a result of successes and challenges and any changes or course correction that will be made based on those lessons learned.
- A budget narrative that explains expenditures to date, variances over 20 percent from planned spending, and any anticipated changes to expenditures.
- A budget report that shows expenditures to date compared to the approved budget for the grant.

Evaluation Requirements
The grantee will be required to work with our evaluation team to develop and implement a comprehensive evaluation. At a minimum, the evaluation will include measuring and reporting the following metrics that address each objective of this RFP.

1. Objective: Increase awareness and understanding among city, town, and county officials of the relationship between health, health equity and economic
development, and the role of the physical environment in promoting healthy cities and towns

   a. Metric: Number of city, town, and county officials aware of the campaign and aware of the benefits of HEAL-focused policies (baseline and follow up)
   b. Metric: Number of city, town and county officials who receive technical assistance from the Campaign coordinators

2. Objective: Increase the number of Colorado HEAL cities and towns that achieve designation levels higher than Eager (Active, Fit, Elite)
   a. Metric: Number of cities and towns that achieve a higher designation, with priority on “active” cities/towns achieving “fit” and “elite” designation.
   b. Metric: Number of city, town and county officials who received technical assistance and, subsequently, achieved a higher designation
   c. Metric: Number of HEAL resolutions passed in HEAL cities and towns
   d. Metric: Number of HEAL policies implemented in HEAL cities and towns
   e. Metric: Population size of cities/towns that pass HEAL policies and/or achieve higher designation levels (including demographic characteristics)
   f. Metric: Number of HEAL cities and towns that have implemented two or more policies

3. Objective: Increase the number of statewide organizations that take an active, formal, leadership role in Colorado HEAL Cities and Towns Campaign
   a. Metric: Number of opportunities provided for statewide organizations to take a leadership role
   b. Metric: Number of statewide organizations that take a leadership role

4. Objective: Increase the number of Colorado HEAL Cities and Towns Campaign participants who are partnering together by collaborating, sharing information, and engaging in problem solving.
   a. Metric: Number of peer learning opportunities provided yearly
   b. Metric: Number of partners attending peer learning opportunities
   c. Metric: Number of partners who report the peer learning opportunities are valuable to their work

5. Objective: Increase the number of opportunities for low-income residents and communities experiencing health disparities to access affordable healthy eating and physical activity within the Colorado HEAL cities and towns.
   a. Metric: In targeted cities and towns, number of healthy eating and physical activity opportunities available (baseline and follow up) (e.g., number of food outlets accepting SNAP, number of acres of green space)

The grantee will be required to collect and report data throughout the grant period. Collected data (qualitative and quantitative) should be used to inform activities throughout the course of the grant.
We recognize that organizations may not currently have the internal capacity to track and report data. Our evaluation team is available to provide evaluation consultation and assistance, but you will be responsible for overall implementation of the evaluation. We encourage organizations to partner with another organization(s) as needed to help with evaluation. If you choose to partner with another organization(s) on evaluation, you should describe this in your proposal, specifically citing the nature of this partnership and how the ability to track and report data will be sustainable over time. A Letter of Collaboration from the evaluation partner should be included in the grant application that addresses how the applicant will collaborate with the evaluation partner. **Applicants must include an amount of at least 10 percent of their total budget request for evaluation.**

**B. Kaiser Permanente Colorado’s Role and Resources**

We view grantees as partners and will provide ongoing support to help ensure the grantee’s success. As a partner, we will provide:

- Assistance with developing an evaluation plan.
- Access to Kaiser Permanente subject matter experts and community partners.
- Collaboration to analyze data, prepare presentations and papers, and disseminate knowledge gained from the projects.
- Assistance with media and communications about the grant and about Kaiser Permanente’s relationship to HEAL Cities and Towns Campaign.

**4. Proposal Submission**

**A. Electronic Application Process**

**Applicants must submit an electronic application by Wednesday, February 15, 2017, 5:00 p.m. MT.**

The application must be submitted via the online application system. The applicant may wish to prepare responses in a word document then copy/paste them into the online system. Please review the tips on the main page of the online application form before beginning. Follow these instructions:

1. Click here to access the application
2. For new users, create a new account with an email address and password (or sign in using an existing email and password)
3. Complete the application form (see Appendix A for required questions of this RFP)
4. Attach required documents (see Sections of the Application for required documents of this RFP)
5. Select review to preview the completed application
6. Select submit after reviewing the completed application
Only one account should be created per organization. If multiple individuals need to access this account, share the Account ID (email address) and password with those individuals.

Applications will be considered for review if submitted electronically by the deadline. Applications will not be accepted by fax, nor will the submission deadline be extended. Applications that do not meet the deadline will be considered non-responsive and will not be entered into the review process. Once the application is submitted into the online grant application system the system does not allow the applicant to make changes or edits. It is recommended that applicants allow enough time to account for any potential technical issues when submitting an application.

B. Proposal Review Process

Proposals will be reviewed and evaluated by a panel of Kaiser Permanente Colorado professionals. All applications will receive two reviews: during the first review, each application will be scored and ranked based on the weights within the application; the top applications will then be reviewed as a group to ensure alignment with the outcomes of the RFP and geographic and population diversity.

C. Technical Support

Technical assistance questions regarding the electronic application submission can be emailed to: co-contributions@kp.org.

D. Sections of the Application

The submitted, electronic application includes the following sections:

- Organization Information
- Fiscal Agent Information
- Conflict of Interest and Nondiscrimination Policy
- Project Demographics and Kaiser Permanente Involvement
- Required Attachments

E. Required Attachments

To submit a full application, organizations should submit their project narratives in a word document attachment. In addition, organizations applying for funds must submit documentation of nonprofit status and further project attachments. Submission of the following attachments is required electronically as part of the application:

- IRS Determination Letter
- Board of Directors List; please note that the organizational affiliation of each Director is required
- Most recent audited financial statement (for same time period as IRS 990 form)
- IRS 990 Form
- Project Narrative (click here for the required questions)
- Project Plan (click here for the required template)
- Project Budget (click here for the required template)
- Project Budget Narrative ([click here](#) for guidance on the budget narrative)
- Letter(s) of Collaboration from formal partner organization(s)
- Optional: Letter of Collaboration from evaluation partner organization (only required if outside evaluation assistance is planned)
- Optional: Up to five letters of support from organizations familiar with applicant’s work

5. **Appendix**
   The following appendices are provided:

   - A - Application Questions
   - B - Current Colorado HEAL Cities and Towns
   - C - Guidance on Urban and Rural
   - D - Additional Resources
Appendix A: Application Questions

The online application includes both questions that applicants must complete within the online system as well as required documents that are uploaded, including the project narrative.

Organization Information
1. Tax Status Information
   - Organization’s Legal Name
   - Organization’s Tax ID #
   - Organization Name
2. Organization Mailing Address
3. Organization Fiscal Agent Information (if applicable)
4. Organization Lead Contact Information
5. Project Contact Information (may be same as lead contact)

Conflict of Interest and Nondiscrimination
1. Do any Kaiser Permanente executives, managers, directors, physicians, or other employees or their family members:
   - Serve as a board member, director, officer, manager, employee or fiduciary agent of the organization;
   - Have a compensation arrangement or financial interest with the organization; or
   - Hold any position of substantial influence with respect to the organization?
2. Does a Member of Congress, Executive Branch Official, State Official, or their staff:
   - Serve as a board member, director, officer, manager, employee or fiduciary agent of the organization; or
   - Have a compensation arrangement or financial interest with the organization; or
   - Hold any position of substantial influence with respect to the organization?
3. Would any portion of this contribution be used to honor or recognize the achievements of a Member of Congress, Executive Branch Official, State Official, or their staff?
4. Does the organization have a political action committee (PAC) or committee on political education (COPE)?
5. The organization applying for a contribution does not discriminate on the basis of sex, age, economic status, educational background, race, color, ancestry, national origin, sexual orientation, gender identity, marital status, physical or mental disability in their programs, services, policies, hiring practices, and administration. Additionally, the organization affirms that it is not affiliated with or actively involved with terrorist activities. Does the organization comply with the statement above?
6. For a religious or faith-based organization, would the proceeds be used to support general operations, services and programs of the
congregation/membership/students, or to advance religious doctrine or philosophy?

Project Demographics and Kaiser Permanente Involvement
1. Proposal/Project Title
2. Proposal Funding Amount Requested
3. Total Project Budget
4. Organization Annual Operating Budget
5. Age Group Served (drop-down menu)
6. Ethnicity/Ethnicities Served (drop-down menu)
7. County/Counties Served (drop-down menu)
8. What visibility would Kaiser Permanente receive from the organization as a result of funding this proposal?
9. Include the name and title of Kaiser Permanente employees or business units engaged with the organization or project, and how they are engaged

Required Attachments
1. IRS Determination Letter
2. Board of Directors List; please note that the organizational affiliation of each Director is required
3. Most recent audited financial statement (for same time period as IRS 990 form)
4. IRS 990 Form
5. Project Narrative
6. Project Plan
7. Project Budget
8. Project Budget Narrative
9. Letter(s) of Collaboration from formal partner organization(s)
10. Letter of Collaboration from evaluation partner (if applicable)

Optional Attachments
1. Up to five letters of support from organizations familiar with applicant’s work
2. Examples of previous work

Project Narrative
Applicants should complete the following questions in a word document and upload the document to their applications.

Attachment: Budget (not scored)
Please use the required line-item budget template.

Attachment: Budget Narrative (not scored)
Click here for an example budget narrative and instructions for completing the budget narrative.

Note: While the budget and budget narrative are not separately scored, they should tie directly to the project narrative and the work plan. If budget items are not clearly linked
to specific parts of the project narrative and work plan, the application may lose points in the scoring of the narrative and project plan.
# Appendix B: Current Colorado HEAL Cities and Towns

<table>
<thead>
<tr>
<th>Status</th>
<th>Community</th>
<th>Date Joined</th>
</tr>
</thead>
<tbody>
<tr>
<td>Eager</td>
<td>Saguache</td>
<td>March 16, 2015</td>
</tr>
<tr>
<td></td>
<td>Yuma</td>
<td>September 22, 2014</td>
</tr>
<tr>
<td></td>
<td>Mountain View</td>
<td>September 16, 2016</td>
</tr>
<tr>
<td>Active</td>
<td>Aurora</td>
<td>August 26, 2013</td>
</tr>
<tr>
<td></td>
<td>Bennett</td>
<td>June 11, 2013</td>
</tr>
<tr>
<td></td>
<td>Brush</td>
<td>April 1, 2013</td>
</tr>
<tr>
<td></td>
<td>Buena Vista</td>
<td>July 23, 2013</td>
</tr>
<tr>
<td></td>
<td>Carbondale</td>
<td>June 29, 2015</td>
</tr>
<tr>
<td></td>
<td>Cedaredge</td>
<td>August 22, 2016</td>
</tr>
<tr>
<td></td>
<td>Centennial</td>
<td>November 9, 2015</td>
</tr>
<tr>
<td></td>
<td>Denver</td>
<td>November 18, 2013</td>
</tr>
<tr>
<td></td>
<td>Durango</td>
<td>December 9, 2015</td>
</tr>
<tr>
<td></td>
<td>Edgewater</td>
<td>October 2, 2014</td>
</tr>
<tr>
<td></td>
<td>Englewood</td>
<td>November 3, 2014</td>
</tr>
<tr>
<td></td>
<td>Fort Collins</td>
<td>July 19, 2016</td>
</tr>
<tr>
<td></td>
<td>Frederick</td>
<td>September 24, 2013</td>
</tr>
<tr>
<td></td>
<td>Glenwood Springs</td>
<td>September 14, 2015</td>
</tr>
<tr>
<td></td>
<td>Greeley</td>
<td>August 13, 2015</td>
</tr>
<tr>
<td></td>
<td>Kiowa</td>
<td>February 17, 2015</td>
</tr>
<tr>
<td></td>
<td>La Junta</td>
<td>May 5, 2014</td>
</tr>
<tr>
<td></td>
<td>Lafayette</td>
<td>May 20, 2014</td>
</tr>
<tr>
<td></td>
<td>Lamar</td>
<td>July 22, 2013</td>
</tr>
<tr>
<td></td>
<td>Leadville</td>
<td>September 1, 2013</td>
</tr>
<tr>
<td></td>
<td>Lone Tree</td>
<td>August 7, 2014</td>
</tr>
<tr>
<td></td>
<td>Manitou Springs</td>
<td>October 22, 2013</td>
</tr>
<tr>
<td></td>
<td>Milliken</td>
<td>October 9, 2013</td>
</tr>
<tr>
<td></td>
<td>Montrose</td>
<td>April 21, 2015</td>
</tr>
<tr>
<td></td>
<td>Nederland</td>
<td>March 15, 2016</td>
</tr>
<tr>
<td></td>
<td>New Castle</td>
<td>August 7, 2014</td>
</tr>
<tr>
<td></td>
<td>Northglenn</td>
<td>July 14, 2014</td>
</tr>
<tr>
<td></td>
<td>Oak Creek</td>
<td>May 1, 2013</td>
</tr>
<tr>
<td></td>
<td>Pueblo</td>
<td>October 15, 2014</td>
</tr>
<tr>
<td></td>
<td>Rifle</td>
<td>November 10, 2015</td>
</tr>
<tr>
<td></td>
<td>Steamboat Springs</td>
<td>October 1, 2013</td>
</tr>
<tr>
<td></td>
<td>Thornton</td>
<td>September 1, 2013</td>
</tr>
<tr>
<td></td>
<td>Walsenburg</td>
<td>August 28, 2014</td>
</tr>
<tr>
<td></td>
<td>Wheat Ridge</td>
<td>June 9, 2014</td>
</tr>
<tr>
<td>Fit</td>
<td>Colorado Springs</td>
<td>December 9, 2014</td>
</tr>
<tr>
<td></td>
<td>Golden</td>
<td>April 24, 2014</td>
</tr>
<tr>
<td></td>
<td>Lakewood</td>
<td>May 12, 2014</td>
</tr>
<tr>
<td></td>
<td>Littleton</td>
<td>April 2, 2013</td>
</tr>
<tr>
<td></td>
<td>Salida</td>
<td>July 1, 2013</td>
</tr>
<tr>
<td></td>
<td>Sheridan</td>
<td>May 12, 2014</td>
</tr>
<tr>
<td>Elite</td>
<td>Commerce City</td>
<td>June 1, 2013</td>
</tr>
<tr>
<td></td>
<td>Cortez</td>
<td>June 11, 2013</td>
</tr>
<tr>
<td></td>
<td>Arvada</td>
<td>February 3, 2014</td>
</tr>
</tbody>
</table>
Appendix C: Guidance on Urban and Rural

For purposes of this RFP and to assist applicants in identifying partner and collaborators, we provide this guidance on “urban” and “rural”.

If your organization is located in or serves any of the following, you are considered the urban partner:

- Any of the seven counties in the Denver/Boulder area (Adams, Arapahoe, Boulder, Broomfield, Denver, Douglas, Jefferson)
- One or more of the following cities with populations greater than 50,000 as defined by the 2010 U.S. Census (listed in order of population):

  1. Denver
  2. Colorado Springs
  3. Aurora
  4. Fort Collins
  5. Lakewood
  6. Thornton
  7. Arvada
  8. Westminster
  9. Centennial
  10. Pueblo
  11. Boulder
  12. Highlands Ranch
  13. Greeley
  14. Longmont
  15. Loveland
  16. Broomfield
  17. Grand Junction
  18. Castle Rock
  19. Commerce City

(Source: http://www.colorado-demographics.com/cities_by_population)
Appendix D: Additional Resources

The following resources include best practices, references, and tools for healthy eating and active living.

National HEAL Cities Campaign Resources

Healthy Eating Active Living (HEAL) Cities Campaign website
http://www.healcitiescampaign.org/

HEAL Cities Campaign Tool Kits
http://www.healcitiescampaign.org/toolkit.html

HEAL Cities Campaign level designations
http://www.healcitiescampaign.org/eager_active_fit_cities.html

HEAL Cities Campaign polices webpage, including example resolutions
http://www.healcitiescampaign.org/policies.html

Colorado HEAL Cities and Towns Campaign home web page
https://livewellcolorado.org/healthy-communities/heal-cities-towns-campaign/

National Public Health Resources

Community Preventive Services Task Force recommendation on worksite programs to improve diet and/or physical activity behaviors.
https://www.thecommunityguide.org/findings/obesity-worksite-programs

Community Preventive Services Task Force recommendation on urban design and land use policies and practices that support physical activity in small geographic areas to increase physical activity. https://www.thecommunityguide.org/findings/physical-activity-street-scale-urban-design-land-use-policies