Summary of the Opportunity
Kaiser Permanente Washington is dedicating up to $1.5M over three years to fund a cohort of awardees to improve food security for students and their families in under-resourced communities. Funds will support innovative partnerships between school districts and community-based organizations led by individuals identifying as Black, Indigenous, and other People of Color (BIPOC-led CBOs). Joint project awards of up to $500,000 will be considered (equals approx. $166,000 per year over three years, to be split between the district partner and BIPOC-led CBO partner). The application deadline is September 9, 2022; and the anticipated grant term is December 1, 2022 – September 30, 2025 with 7 months of planning time allocated at the beginning.

Eligible applicants are:
✓ Nonprofit 501(c)(3) tax-exempt organizations, school districts, governmental entities, or tribal organizations in good standing with IRS (Groups or programs without tax-exempt status may utilize an eligible nonprofit agency as the fiscal sponsor to apply for funding)
✓ Located within Kaiser Permanente Washington’s core geographic service area of King, Kitsap, Pierce, Snohomish, Spokane, and Thurston counties
✓ Serving communities with high poverty indicators (see description in Section VII)

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I. Background & Identified Needs

The mission of Kaiser Permanente is to provide high-quality, affordable health care services and to improve the health of our members and the communities we serve. As a nonprofit organization, Kaiser Permanente makes carefully selected investments each year to strengthen social and environmental factors that improve the health of our communities. Kaiser Permanente Washington’s 2021 Community Health Needs Assessment highlighted that a just recovery from the COVID-19 pandemic requires strengthening food security of households in under-resourced communities, which will improve equity in health, education, and economic outcomes.

The inequitable impact of food insecurity on households of color with children
Before the COVID-19 pandemic, around 10% of Washington state households were considered food insecure — i.e., there was not consistent access to enough food for every person in the household to live an active, healthy life. By July 2021, the proportion that were food insecure had risen to 27%; and 54% of those households had children. Food assistance usage in Washington before and during the pandemic was highest among individuals identifying as Black (52%), Hispanic (54%), American Indian/Alaska Native and Native Hawaiian/Pacific Islander (50%), compared to White (34%). Communities of color have historically experienced food insecurity at disproportionate rates due to systemic racism and compounding economic inequities.

Evidence Based Youth & Family Hunger Solutions
Students eligible for Free and Reduced-Price Meals get more than half of their daily nutrition intake from school meals. School breakfast and lunch and out-of-school community based meal programs such as Summer Food Service Program and At-Risk Afterschool Meals are proven approaches to providing healthy food to food insecure youth, strengthening health and education outcomes. Federal programs like Basic Food/SNAP (Supplemental Nutrition Assistance Program) and WIC (Women, Infants and Children Program) are evidence-based interventions that increase family purchasing power and lead to greater household economic stability.

Historic window of opportunity
Hunger has been in the spotlight during the COVID-19 pandemic, and historic federal and state investments have been made to improve food security through schools and nonprofits. Washington state legislation expanding access to school meal programs, including Community Eligibility Provision and Breakfast After the Bell, will impact a record high of 900 schools representing 385,000 students in the 2022-23 school year. This historic expansion means that more than 400 new schools will be eligible for these programs beginning in the 2022-23 school year, benefitting 180,000 additional children in Washington.

Participation Gaps in WA
To maximize the benefits of this legislation, it is imperative to increase participation in student meal programs. In October of 2021, 47% of students in WA were eligible for free or reduced-price school meals; yet nationally, WA ranks 45th in school breakfast participation, 44th in afterschool meals participation, and 35th in summer meals participation proportionate to eligibility. When district Child Nutrition Services (CNS) program participation rates are low, it means many food-insecure youth are not getting the nutrition they need throughout the day. Because districts are reimbursed for meals served, it can also result in a lack of resources and financial strain for CNS programs. The expanded legislative funding supports CNS food and equipment purchasing costs that are critical to program infrastructure; but is restricted to these expenses. The legislation is most effective when implemented alongside strategies that address barriers to student meal participation, such
as: stigma, logistical access to summer and afterschool meal sites, cultural dietary needs of students from diverse racial and ethnic backgrounds, sourcing fresh foods, and family purchasing power that impacts student hunger outside of the school day. When not addressed, these barriers result in inequitable health outcomes for students who rely on school meals for their daily nutrition.

SNAP Eligibility in Washington also expanded during the pandemic, but many eligible households did not enroll due to the barriers that included: eligibility concerns; burdensome paperwork; insufficient benefits; and embarrassment to utilize the benefit. Solutions to address those barriers include individualized family outreach and direct enrollment supports from trusted community-based organizations that is culturally informed and in the family’s preferred language.

II. RFP Purpose & Blueprint

The purpose of this RFP is to address the participation barriers described above through innovation and partnerships that create sustainable food access solutions for households of color with children. In developing the RFP, we sought input about food access gaps and innovative grassroots solutions from stakeholders representing diverse perspectives, including: school districts, community-based organizations led by individuals identifying as Black, Indigenous, and other people of color (BIPOC-led CBOs), youth, and state leaders of child hunger-relief programs.

This RFP applies learnings from the COVID-19 pandemic related to building new food distribution systems that meet community needs. Districts have meal distribution infrastructure, including staffing and brick and mortar buildings, but are working within restrictive USDA budgets that limit innovation. Districts value integrating youth and family voice into meaningful and regular workflows to improve meal service, but often lack relationships to do so. BIPOC-led CBOs are addressing the most pressing food access needs faced by BIPOC community members. Community trust and relationships are their strength, approaching hunger with dignity and shared cultural understanding. However, BIPOC-led CBOs are frequently undercompensated for their community organizing work. Additional resources would increase their capacity to scale food distribution in convenient locations that are culturally and linguistically affirming. Community input highlighted that if school districts and BIPOC-led CBOs were to partner to wrap around food insecure communities, it could pave the way to more equitable health and education outcomes for food insecure youth of color.

The blueprint below guides this RFP. It was influenced by Kaiser Permanente and Alliance for a Healthier Generation’s Thriving Schools Integrated Assessment, and the 2021 report, “Addressing Social Influencers of Health and Education Using a Multi-Tiered System of Supports Framework” (The Center for Health and Health Care in Schools, the School-Based Health Alliance, and the National Center for School Mental Health). The blueprint outlines Kaiser Permanente’s vision to support and learn from innovative solutions that result in school district environments, policies and systems that are developed with BIPOC community voice, coordinated for equitable meal distribution, and integrated with community-based supports. Projects awarded must have the following objectives:

1. Foundational practices (gray box) improved to be “mostly” or “fully” in place by end of grant term
2. At least one tiered intervention (colored layers in the blueprint pyramid) is implemented
3. Engage in KP’s grantee learning cohort, designed to explore improvements and recommended practices for equitable partnerships between BIPOC-led CBO and schools for replication in other communities
III. Grant Amount & Duration

Kaiser Permanente Washington is dedicating up to $1.5M to fund a cohort of awardees over three years. To create equitably funded sustainable partnerships between BIPOC-led CBOs and School Districts, Kaiser Permanente is accepting joint applications that compensate both partners. We anticipate awarding grants for three joint projects.

**District & CBO Joint Projects:** Joint awards of up to $500,000 will be considered (approximately $166,000 per year over three years, to be split between the School District partner and BIPOC-led CBO partner)

- To apply for this RFP, partners will submit a collaboratively developed project proposal and budget, designed to foster the joint development of an equitably funded project.
- For projects selected, both the District and CBO partner will be awarded a grant directly from Kaiser Permanente. An exception can be made if partners elect to sub-contract with one another directly.
Both the CBO and District must have an identified project lead who is accountable for meeting the commitments of each partner organization. It is expected that each partner receives equitable funding to support staffing time and other operating costs that assure project success (see details and examples in Project Budget, Section VI).

Partners must establish a Memorandum of Understanding or Agreement (MOU or MOA) by end of phase 1 (see Section V).

Kaiser Permanente and our partners will be providing technical assistance throughout the grant term to set the projects up for success, including:

- Thriving Schools Integrated Assessment tool and tailored coaching from Alliance for a Healthier Generation to develop evidence-based action plans
- Kaiser Permanente measurement & evaluation consultation
- Community of practice learning topics that meet cohort training needs
- Consultation as desired with United Way of King County to support implementation of evidence-based meal programs (both in schools and in community during summer and afterschool)

### IV. Eligibility to Apply

All applicants must be:

- Nonprofit 501(c)(3) tax-exempt organizations, school districts, governmental entities, or tribal organizations in good standing with IRS (Groups or programs without tax-exempt status may utilize an eligible nonprofit agency as the fiscal sponsor to apply for funding)
- Located within Kaiser Permanente Washington’s core geographic service area of King, Kitsap, Pierce, Snohomish, Spokane, and Thurston counties

Districts who apply must:

- Serve high poverty communities, as evidenced by the combination of at least 2 of the following:
  - District-wide Free and Reduced Lunch Meal rate of 50% or higher
  - District-wide Black, Indigenous, and People of Color (BIPOC) student population of 50% or higher
  - Mandated to operate Community Eligibility Provision (CEP) and/or Breakfast After the Bell (BAB) in a cluster of at least 5 schools or 33% of schools in district (contact mvistica@uwkc.org for support with eligibility analysis)
  - Develop project with Child Nutrition Services & Community/Family Engagement District Departments

CBOs who apply must:

- Serve vulnerable population(s) within the District footprint
- Be trusted by the community, as evidenced by successful history of convening, gathering community input, and implementing community services and programs based on community need
- Be led by both a Board and Senior Leadership Team comprised of at least 50% of individuals who identify as Black, Indigenous, and other people of color (BIPOC)
V. Grant Timeline & Required Activities

The anticipated three-year funding term will last from December 1, 2022 – September 30, 2025.

In addition to the required project deliverables below, both the District and CBO partner must commit to sending a representative to participate in five meetings per year throughout the grant term. This equates to two meetings in the fall, two in the spring, and one in the summer. Meetings will be a variation of:

- Learning Community of Practice (CoP) with cohort of awardees
- 1:1 project check-ins with their Thriving Schools Integrated Health Team, inclusive of staff from Kaiser Permanente, Alliance for a Healthier Generation, and Cohort Evaluation Consultants

<table>
<thead>
<tr>
<th>Phase</th>
<th>Antic. Dates</th>
<th>Required Activities</th>
<th>Required Deliverables</th>
</tr>
</thead>
</table>
• Convene BIPOC youth and family focus groups to attain input into Project Action Plan  
• Co-create District-CBO partnership agreement (MOU or MOA), including roles & responsibilities, equitable division of phase 2-3 grant budget, workflows, and desired outcomes | By July 31, 2023 the following are submitted for KP Review & Approval:  
1. Project Action Plan, which includes evaluation metrics (baseline meal participation rates & target % increase)  
2. Refined Grant Budget  
3. District-CBO Partnership MOU or MOA |
|                               | Dec 1, 2022 – June 30, 2023 |                                                                                     |                                                                                        |
| Phase 2: Implementation       | School Years 23-24 & 24-25 | • Execute activities outlined in Project Action Plan, with regular feedback channels from BIPOC youth and families incorporated (Sample Project Action Plan shared in Appendix)  
• Develop Project Sustainability Plan (template will be provided) | Annual Action Plan Progress Reports:  
1. July 31, 2024: Report includes draft project sustainability plan  
   a. Feb. 28, 2025: Updated draft of sustainability plan submitted  
2. July 31, 2025: Report demonstrates:  
   a. KP Blueprint foundational activities are “mostly” or “fully” in place  
   b. At least one tiered intervention from KP Blueprint is implemented |
|                               | July 1, 2023 – June 30, 2025 |                                                                                     |                                                                                        |
| Phase 3: Integration & Blueprint Development | 3 months | • Review and contribute to KP Blueprint (compilation of cohort learnings for application in other communities)  
• Continue integrating sustainability plan | By September 30, 2025:  
1. Complete interview with KP Measurement and Evaluation team  
2. Review written copy of KP Blueprint |
|                               | July 1, 2025 – Sept. 30, 2025 |                                                                                     |                                                                                        |

VI. Project Budget

Budget at time of submission should include clear line items for Planning Phase, and estimated costs for
Implementation & Integration Phases. A revised budget will be due at the end of Planning Phase.

**Required budget item: Dedicated Project Managers**
Throughout the 3 years, the district and CBO partner must each have a dedicated project manager who will be accountable to meet the listed deliverables in Section V, including attending 5 meetings per year. It is acceptable for these roles to be hired during phase 1 of the grant, and this should be indicated in the application. A minimum of 1.0 FTE split between both partners is required (i.e. 0.5 FTE for the CBO and 0.5 FTE for the district); however Kaiser Permanente recommends 1.5 FTE. It is expected that each partner be allocated equitable funding to support staffing time and other operating costs that assure project success. Please contact haley.x.ballenger@kp.org for related questions. Example equitable scenarios include:

A. *To account for the community organizing expertise and time the BIPOC-led CBO will bring to the project, CBO partner dedicates 1.0 FTE for their project lead; and the District dedicates .5 FTE for their project lead. In this model, CBO is allocated >50% total project budget for staffing and operating expenses.*

B. *District has existing subcontract(s) with BIPOC-led CBO(s) and opts to embed a community member who identifies as BIPOC as a 1.0 District FTE to oversee the project and manage existing community food partnerships. In this model, District is allocated >50% total project budget for staffing; and CBO partner(s) are allocated funds to cover operating costs needed to partner with District – this could be a subcontracted item if preferable for both partners.*

C. *For CBOs and Districts who have hired staff already working in these areas, .5 FTE is allocated to each partner. In this model, partners have a 50%/50% budget split to cover staffing, operating costs, and equipment needed. The District partner is eligible for OSPI Child Nutrition equipment grants where the CBOs is not, and therefore the CBO receives extra project funding for equipment needs.*

**Prohibited Budget items: KP funds cannot be used to support capital improvement projects**

**Example Eligible Costs throughout the three years:**

**Planning phase:**
- Staffing time of project manager(s) overseeing development of Project Action Plan. Hiring is acceptable.
- Youth/family/community stipends to participate in focus groups

**Implementation phase:**
- Funds should be used to support gaps in federal and state funding, including: staff time, stipends for youth/family/community members, up-front food and equipment reimbursement costs while integrating new program models, and other community and district identified needs
- It is expected that once program infrastructure is in place, food costs will be sustainable through reimbursement by USDA Nutrition Programs
- Applicants are encouraged to leverage existing resources and reserve KP funds for gaps – please note:
  - OSPI and related grants to cover equipment purchasing costs
  - Farm to School Purchasing Grants
  - United Way of King County can provide implementation support for child nutrition programs, including identifying and funding equipment needs, tools for communicating with and training district stakeholders, tools for engaging students and families, and more. Contact Madeleine Vistica (mvistica@uwkc.org) for additional information.

**Integration & Blueprint Development Phase:**
- Staffing time to participate in KP’s Blueprint development process
- Summer 2025 meal costs; or costs to sustain expanded meal program delivery beyond the grant term
VII. Scoring Criteria

In addition to meeting the eligibility criteria (section IV), the following criteria will be used to score proposals and select awardees:

✓ District Child Nutrition Services (CNS) team plans to implement Community Eligibility Provision (CEP) and/or Breakfast After the Bell (BAB) in the maximum number of schools possible by the 2022-2023 Schoolyear. See “Grouping” on pg 15 or contact mvistica@uwkc.org for technical assistance and data/eligibility analysis.

✓ Proposed project:
  o Is developed in partnership with BIPOC-led CBO & School District
  o Aligns with the KP blueprint (Section II), and demonstrates innovation for equity
  o Serves school sites with 50% and higher Free and Reduced Lunch rates and/or 50% and higher student of color population
  o Demonstrates District interdepartmental collaboration with Child Nutrition Services and Family/Community Engagement (including McKinney-Vento and LEP liaisons); or has a plan for collaboration if not already taking place
  o Prioritizes systems & programs that sustain meal distribution beyond grant period
  o Budgets identify and fill in gaps not addressed by federal and state funding

VIII. Application Instructions

Step 1: All Interested Applicants

☐ By end of day Friday, September 9, 2022, submit “KP Food Security RFP Application_Project Overview and Budget” (word document) to haley.x.ballenger@kp.org (Contact Haley if you need a copy)

Step 2: Selected Finalists

Applicants will be notified whether they have been selected as finalists to move forward for review by Kaiser Permanente’s Board by September 28-30, 2022 (anticipated). Finalists will be provided instructions to submit an online application in Mosaic, our grant portal, within three weeks following (anticipated deadline of October 18, 2022). Kaiser Permanente has developed cohort success metrics, and applicants will be able to copy and paste these for minimal application burden at this stage. Applicants will be asked to submit a more detailed project budget at this time (template will be provided).

IX. RFP Information Sessions

1. We hosted a virtual RFP information session on June 27, 2022. Access the recording HERE.
2. We will also conduct weekly office hours August 8th – September 9th to address questions. Register HERE.
X. Key Application Dates

<table>
<thead>
<tr>
<th>Key Application Steps</th>
<th>Date</th>
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<tbody>
<tr>
<td>(Optional) Attend RFP Information Session</td>
<td>June 27, 2022 [access recording here]</td>
</tr>
<tr>
<td>(Optional) RFP Application Office Hours</td>
<td>August 8 – Sept 8, 2022 [register here]</td>
</tr>
<tr>
<td>“KP Food Security RFP Application_Project Overview and Budget” (word doc) due to <a href="mailto:haley.x.ballenger@kp.org">haley.x.ballenger@kp.org</a></td>
<td>September 9, 2022</td>
</tr>
<tr>
<td>Finalists are invited to submit electronic grant application via Mosaic</td>
<td>September 28-30, 2022 (anticipated)</td>
</tr>
<tr>
<td>Finalist Mosaic Applications Due (copy/paste KP cohort metrics + add detailed budget)</td>
<td>October 18, 2022 (anticipated)</td>
</tr>
<tr>
<td>Awardees Announced</td>
<td>Week of November 21 (anticipated)</td>
</tr>
<tr>
<td>Grant Contracts Signed &amp; First Payment Issued</td>
<td>November 21 – December 2, 2022</td>
</tr>
<tr>
<td>Grant Term</td>
<td>December 1, 2022 – October 31, 2025</td>
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XI. Want help with your Proposal?

- **Proposal Technical Assistance:** Alliance for a Healthier Generation staff are available to support you in the development of this project. Contact Tara Witten, Healthy Schools Program Manager (tara.witten@healthiergeneration.org) to set up a 1:1 consultation.

- **School Meal Program Consultation:** United Way of King County is available to consult on increasing the impact of FNS Nutrition Programs, especially through Afterschool and Summer Meal Programs, Breakfast After the Bell, and the Community Eligibility Provision. Contact Madeleine Vistica (mvistica@uwkc.org) to schedule an initial conversation.

- **Identifying CBOs in your District Service Area:** To learn about community partners in your District service area who provide Afterschool and Summer Meals, and other hunger relief, reach out to Madeleine Vistica (mvistica@uwkc.org) at United Way of King County.

- **Washington State Dept. of Agriculture’s (WSDA) Farm to School Program:** check out the [Washington State Farm to School Network online directory](https://www.farms2schoolnetwork.org) to discover participating districts and community suppliers; the [WSDA Farm to School Toolkit](https://www.farms2schoolnetwork.org/toolkit) with versions for districts and farmers; and the [2022-23 Schoolyear Purchasing Grant opportunity](https://www.farms2schoolnetwork.org/opportunities/purchasing). Contact [farmtoschool@agr.wa.gov](mailto:farmtoschool@agr.wa.gov) for more information.

XII. Questions?

Please contact:
Haley Ballenger
Community Health Program Manager, Kaiser Permanente Washington
Haley.X.Ballenger@kp.org — (206)573-8043
Appendix
# Sample Action Plan (Completed Year 1)

<table>
<thead>
<tr>
<th>RFP Requirements</th>
<th>Objectives</th>
<th>Examples of Potential Grant Period Activities</th>
<th>Outcomes</th>
<th>As Measured By</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Foundation:</strong> Systems, policy, and environmental changes improve from “not in place”/“partially in place” → “mostly” or “fully” in place</td>
<td>District has a coordination team for nutrition and food access</td>
<td>District interdepartmental team (Child Nutrition Services, Family/Community Engagement including McKinney-Vento and LEP liaisons) completes Thriving Schools Integrated Assessment (TSIA) – Food Access Topic</td>
<td>TSIA Action Plan is executed collaboratively across departments</td>
<td># of staff &amp; # of depts participating # of meetings held</td>
</tr>
</tbody>
</table>
| | District implements evidence-based school meal programs | 1-2 of the following are implemented:  
- Community Eligibility Provision (universal free meals)  
- Breakfast After the Bell! (all students eat free breakfast during the first class of the day)  
- Summer meal programs (assures school meal access during summer months)  
- Farm to School/Farm to Summer | Food insecure students reliably receive 2-3 free meals per day (year-round) | # of schools/sites participating in selected meal programs |
| | District implements policies and practices to mitigate stigma associated with school meal programs | Trauma informed approach for policies on nutrition & food access (understands trauma and stress, cultural humility and equity, safety and predictability, compassion and dependability, empowerment and collaboration, resilience and social-emotional learning), including:  
- Ensures students with unpaid meal balances receive the standard school meal and are not excluded from school activities  
- Prohibits publicly identifying students with unpaid meal balances through stamps, stickers, or other identification | Increased school meal participation in high FRL districts | # of students participating in school meal programs |
| | District partners with community organizations to support unmet nutrition and food access needs | District – CBO partnership(s) include shared goals, defined roles and responsibilities, ongoing community, evaluation plans, and sustainability plans.  
- Types of partners may include food pantries, food rescue organizations, farmers markets, backpack programs, organizations that enroll participants in SNAP and WIC. | Chronically food insecure families have greater access to supports that meet household food needs outside of the school day | # of students and families accessing designed programming |
| | District incorporates BIPOC community voice into child nutrition policies and programs | District uses inclusive and culturally responsive methods to gather input on access needs related to school meal programs  
- District communicates results of input in languages that reflect the diversity of the school community at least once per year | School meal distribution is structured to meet community access needs | # of youth and family input sessions |
| **At least one tier is selected for implementation.** | **Tier 1: District Meal Program Quality** Fresh and culturally appropriate foods embedded in district meal patterns & reimbursable by USDA | District integrates meal program procurement strategies that increase quantity of fresh produce used in school meals  
- Engage youth and family voice to improve menu options related to cultural dietary needs of diverse racial and ethnic populations | Nutritional health outcomes, and ultimately educational outcomes are improved for students who rely on school meals for their daily nutrition intake | % whole commodities in district meal programs; # of cultural meals reimbursed by USDA |
| | **Tier 2: Community-Based Food Distribution** Equitable access to afterschool and summer food distribution sites | In high poverty schools, districts partner with weekend and community meal programs to fill hunger gaps outside of school hours  
- Districts assure adequate staffing and appropriate equipment are available at every school | Increased afterschool and summer food access in high FRL districts | # of students participating in afterschool and summer meal programs |
| | **Tier 3: Family Purchasing Power** Improved family economic stability through culturally and linguistically affirming 1:1 enrollment supports for Basic Food (SNAP) and WIC | Districts partner with agencies that provide outreach and enrollment assistance in federal supplemental nutrition programs like SNAP and WIC  
- Districts and community partner(s) develop referral workflow process to connect families to individually tailored resources | Family purchasing power is increased through enrollment in SNAP and/or WIC | # of district families enrolled in SNAP and WIC |
Sources Referenced in Background Information (Section I)


