 

**Advocacy Capacity-Building Technical Assistance Opportunity**

**Initiative Overview**

Since inception, the Health Care Foundation of Greater Kansas City and REACH Healthcare Foundation have offered their grantees multiple training and educational opportunities to encourage participation in the policy advocacy and social change fields. We have learned alongside our grantees that succeeding in these arenas requires not just increased knowledge but also strong nonprofit organizations with the skills, tools, leadership commitment, and integrated practices that allow them to leverage their strengths and translate their expertise into community impact. To this end, we hope to move beyond these training and educational opportunities and provide a small cadre of grantees with the opportunity for intensive technical assistance to work toward more robust engagement in public policy, advocacy, and social change. This opportunity is not intended for those grantees that are primarily advocacy organizations; rather it is targeted toward direct service providers, community-based organizations, and other collaborative efforts in the health field, broadly understood, that seek to initiate or develop policy advocacy capacity.

The proposed outcomes of the project are:

1. Nonprofit organizations will be prepared to effectively advocate for program/policy needs that benefit poor and underserved individuals in the foundations’ six-county service area.
2. Participating organizations will complete an assessment, pinpoint the organization’s advocacy strengths and weaknesses, develop a work plan around a particular goal, and gain know-how on effective engagement of their constituency.
3. Participating organizations will develop advocacy capacity and serve as leaders in their respective fields, catalyzing a cohort of service providers with an orientation towards addressing root causes of the problems to which they respond.

**Initiative Team Leaders**

The Advocacy Capacity Initiative is directed by **Jessica Hembree,** Program and Policy Officer at the Health Care Foundation of Greater Kansas City and **Pattie Mansur**, Communications Director at the REACH Healthcare Foundation. The designated technical assistance provider is **Melinda Lewis**, an Assistant Professor at the KU School of Social Welfare, nonprofit consultant, and long-time member of the nonprofit advocacy community. In this third round, an additional TA provider will complement this team, in order to provide optimal assistance to the growing cadre of participating organizations.

**Technical Assistance Application**

This technical assistance opportunity is designed to help nonprofit organizations address structural issues, policies, and practices that affect the practice of social change, including policy advocacy and lobbying. NOTE: This opportunity provides for technical assistance, not direct financial awards for organizations or programs. Organizations must be current grantees of the Health Care Foundation of Greater Kansas City or the REACH Healthcare Foundation. Those agencies whose prime function is policy advocacy are not eligible to apply.

For 2014, **up to three organizations will be selected** to receive customized technical assistance for a maximum 12-month period. Successful applicants will:

1. Receive up to 12 months of consulting and technical assistance services provided by a skilled consultant, with the possibility for some ongoing assistance on a retainer basis, as organizations continue to build their capacity to successfully deploy an integrated advocacy approach.

1. Complete an advocacy capacity self-assessment to pinpoint the organization’s advocacy strengths and weaknesses and support development of a work plan around particular goals. This will allow each grantee to address the particular competencies, organizational practices, and patterns of thinking that facilitate advocacy success. Together with the identified consultant, the organization will demonstrate progress toward the work plan during the course of the contract.
2. Work with the technical assistance provider to identify and implement improvements. Technical assistance plans will be developed in partnership with the organization’s leadership and board.
3. Agree to participate in evaluation activities that will help the Health Care Foundation of Greater Kansas City and REACH Healthcare Foundation understand needs in this area of work, including a mid-course convening alongside the other technical assistance grantees and a concluding convening to share experiences and findings from the project.

**The application package consists of:**

1. A completed organizational advocacy assessment (attachment A).
2. A narrative statement.

**The narrative statement should not exceed three pages and should address the following:**

1. Briefly describe your organization, including mission, vision, and history. Discuss your organization’s policy, advocacy, and social change efforts to this point. In what ways does your organization attempt to tackle the root causes of the barriers impact your constituents? How do your programs and services work to achieve your vision and to promote social change?
2. Describe candidly the conditions within your organization and/or local community that explain your interest in this initiative, and how you see technical assistance benefiting your organization and your target population.
3. Based upon the completed advocacy self-assessment, provide a profile of your organization’s strengths and weaknesses. What immediate (within the following twelve months) technical assistance will help strengthen your ability to engage in meaningful social change work?
4. Explain how your organization will allocate staff resources for this project and your organization’s capacity to continue efforts beyond the technical assistance period. We are particularly interested in your Board’s commitment to providing leadership and direction for this project.

**Applications will be reviewed based on the following criteria:**

1. Evidence of organizational readiness (including the commitment of the board of directors) to engage in an organizational assessment process and adjust policies, practices, and resources to advance social change.
2. A completed and thoughtful advocacy capacity self-assessment, as well as a clearly identified technical assistance need that can be at least initially addressed within the scope of this project.
3. Commitment to continue social change efforts beyond the technical assistance support.

**Guidelines and Timeline for Submission**

**Proposals must be received by 12 p.m. on Friday, November 15 in order to be considered.** Proposals may be submitted by mail or by email addressed to:

Jessica Hembree

Health Care Foundation of Greater Kansas City

2700 E. 18th Street, Suite 220

Kansas City, MO 64127

Proposals may also be submitted via email to jhembree@hcfgkc.org

**Timeline**

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| Technical Assistance Application Release | October 8, 2013 |
| Application Deadline | November 15, 2013 |
| Notification of Award | December 13, 2013 |
| Award Term | January 1, 2014 to December 31, 2014 |

ATTACHMENT A: **Organizational Advocacy Assessment**

Although this information will be used to evaluate your proposal and your technical assistance needs, we want to assure you that there are no “right” or “wrong” answers.

| **Organizational Advocacy Capacity Assessment** | |
| --- | --- |
| Name of Applicant Organization: | |
| Primary Contact and Title: | |
| Phone: | Email: |

We have a decision-making structure that supports and manages our advocacy work.

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| ⭘ | ⭘ | ⭘ | ⭘ |
| In Good Shape | Yes, but Needs Work | Not Yet | Don’t Know |

Our mission statement includes advocacy as part of our work.

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| ⭘ | ⭘ | ⭘ | ⭘ |
| In Good Shape | Yes, but Needs Work | Not Yet | Don’t Know |

There is strong commitment on our Board for advocacy.

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| In Good Shape | Yes, but Needs Work | Not Yet | Don’t Know |

We have a written agenda adopted by our board that identifies the organization’s priorities for legislative and other types of advocacy.

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| In Good Shape | Yes, but Needs Work | Not Yet | Don’t Know |

We have elected to use the 501(h) expenditure test, if appropriate, to measure our lobbying limits.

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| In Good Shape | Yes, but Needs Work | Not Yet | Don’t Know |

We have at least one staff person whose job description includes specific responsibilities for advocacy.

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| In Good Shape | Yes, but Needs Work | Not Yet | Don’t Know |

We have one or more networks of individuals that we can and do mobilize in support of our advocacy activities.

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| In Good Shape | Yes, but Needs Work | Not Yet | Don’t Know |

Our organization regularly identifies and coordinates efforts with other stakeholders, coalitions, and advocacy organizations.

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| In Good Shape | Yes, but Needs Work | Not Yet | Don’t Know |

We have a process to help us assess the advocacy landscape in our field and to adapt our strategies accordingly.

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| In Good Shape | Yes, but Needs Work | Not Yet | Don’t Know |

We identify, build, and maintain working relationships with appropriate policymakers who influence decisions related to our advocacy objectives.

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| In Good Shape | Yes, but Needs Work | Not Yet | Don’t Know |

Our organization’s process for guiding our advocacy priorities and tactics is flexible and allows for quick changes amidst the dynamic policy environment.

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| In Good Shape | Yes, but Needs Work | Not Yet | Don’t Know |

We evaluate our advocacy efforts and incorporate what we learn in our efforts.

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| In Good Shape | Yes, but Needs Work | Not Yet | Don’t Know |

We include policy updates in our regular communication with clients, board members, volunteers and other supporters.

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| In Good Shape | Yes, but Needs Work | Not Yet | Don’t Know |

We provide opportunities for our staff to learn more about the structural and underlying causes impacting our area of focus.

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| In Good Shape | Yes, but Needs Work | Not Yet | Don’t Know |

We actively encourage and support our clients/constituents to advocate for policy change.

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| In Good Shape | Yes, but Needs Work | Not Yet | Don’t Know |

We have systems in our programs that help us to identify advocacy needs and to leverage our work to promote social change.

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| In Good Shape | Yes, but Needs Work | Not Yet | Don’t Know |