



CARE Connect Mini-Project Request Form Winter 2024-25

Background and need: In 2022, the Thumb Community Health Partnership along with the Sanilac County Community Foundation obtained funding to improve access to community supports like food, transportation, housing, health services, education and training, and social connections. These are often referred to as Social Determinants of Health (SDOH).

The CARE (Communities and Residents Empowered) Connect Task force was formed to ensure that the voice of people with lived experience and grassroots organizations was used to improve SDOH supports. The vision of the Task Force is **“A community where all people are knowledgeable of and have access to affordable quality health services and social supports.”** This is accomplished through the Task Force’s Mission to **“Empower and engage residents to strengthen and expand the capacity of SDOH services and supports.”**

Description of opportunity: Funds are available for short-term projects to improve access to SDOH supports and build capacity. There is a priority for projects that address housing, transportation, or navigation of services. Projects for other needs are accepted and may be funded depending on the number and quality of applications.

Eligibility: Nonprofit grassroots organizations in Huron, Lapeer, Sanilac, or Tuscola counties.

Priorities: Priority will be given to projects that:

- Focus on increasing access to safe and affordable housing, transportation needs, or services to help with navigation of services.
- Involve multiple community stakeholders.
- Increase access to information about services.
- Builds relationships between service providers.
- Additional points for seasonal needs such as utilities, winter clothing, personal products, overnight housing out of the winter elements, and seasonal adjustments to food pantries.
- Grassroots coalitions or organizations with less than 5 paid staff

Project Maximum: \$2,500. A limit of one application per organization.

Use of funds: Projects must be for the direct benefit of residents in Huron, Lapeer, Sanilac, or Tuscola Counties. Funds will be provided as a **reimbursement** to the approved applicant organization. Funds cannot be used for: gift cards, vehicle purchases, indirect cost allocations, or match funding for federal grants.

Funds Available: A total of \$25,000 is available to be distributed for projects.

Deadline & Project Period: All applications should be sent to: info@thumbhealth.org by 5:00 PM on January 15, 2025. **Project Period:** March 1, 2024, through June 30, 2024

Reporting & Project Expectations: A final expense reimbursement form must be submitted no later than June 30, 2025. A short project report will be required. All organizations are asked to update or create a profile in 2-1-1 by June 30, 2025. Exceptions may be made based on the capacity of the organization and other marketing efforts that make services known in the community. All organizations completing a project are asked to attend an informational meeting regarding the "Gift of Giving" campaign designed to increase donations and volunteers. Technical assistance will be provided to help interested organizations participate.

Project Selection and Requirements: An impartial committee will review projects in January with project announcements by February 15, 2025. A project agreement between the project organization and the Thumb Community Health Partnership will be established. A report form will be provided that includes the number of people impacted/participating, a description of accomplishments, success stories, and challenges. At least one project picture will be required for sharing of the project online and through social media. If your project is selected, you must provide proof of nonprofit status and a signed agreement must be executed before expending any funds.

Date submitted:

Organizational information (must be a 501 C 3 or other nonprofit organization)

Organization Name:

EIN Number:

Contact Person:

Address:

Contact Email:


Contact Phone:


Counties that will be impacted (check all that apply):

- Huron Lapeer Sanilac Tuscola

Which SDOH need will this project impact? (check all that apply)	<input type="checkbox"/> Food
	<input type="checkbox"/> Transportation
	<input type="checkbox"/> Housing
	<input type="checkbox"/> Health Services
	<input type="checkbox"/> Education/Training
	<input type="checkbox"/> Social Connections

What age group will this project benefit: (check all that apply)	<input type="checkbox"/> Age 0-8
	<input type="checkbox"/> Age 9-18
	<input type="checkbox"/> Age 19-64
	<input type="checkbox"/> Age 65+

Budget: Indicate the amount of funds requested by line item included below.	
Expense type	Amount
Personnel (wage/fringe)	
Travel	
Supplies (list detail in project description)	
Contractual	
Outreach/Advertising	
Other	
Total (Not to exceed \$2,500)	

Targets: For each activity indicate the number of people that will benefit.	
Activity	# of people
Total	

Does the completion of your project require funding greater than \$2500? If yes, please explain if you have already secure or how you plan to secure the additional funds.

No Yes, Please explain below:

Organizational Information

Please Describe your Organization:

What is your organization’s background in addressing social needs (SDOH):

How many paid Full-time staff are employed by your organization?

How many part-time staff are employed by your organization?

Project description: On the next page, provide a description of your project.

What do you plan to do/What are your project activities? Describe who will benefit from your project.

Explain how the requested funds will be used.

