**Mercy Cedar Rapids Health Equity Fund - FY2024**

**What is health equity?**

The state in which everyone has the opportunity to attain full health potential, and no one is disadvantaged from achieving this potential because of social position or other socially defined circumstance.

**Why did Mercy create the Health Equity Fund?**

As a locally owned and operated hospital since 1900, Mercy is committed to the health and well-being of the communities we serve. Mercy recognizes the significant downstream impact of community conditions on an individual’s health. To advance health equity, Mercy wants to support and partner with those organizations who are engaging in strategies to address the root causes of poor health.

**Funding awards:**

* A one-time funding award ranging from $10,000 - $25,000.
* Funding may be requested:
  + to offer new innovative approaches
  + to support expansion of existing programs or services
* *Requests for capital contributions, equipment, or financial assistance to client (i.e., rent/housing assistance) are not typically funded.*

**Health Equity Fund Specific Criteria for FY24 (July 1, 2023 – June 30, 2024):**

* Organizations with a 501(c)(3) tax status with the IRS
* Organizations that have a local impact in Mercy’s service area (Benton, Cedar, Delaware, Iowa, northern Johnson, Jones, Linn and Tama counties)
* Organizations in alignment with Mercy’s mission and values
* Organizations whose proposed program/project(s) focuses specifically on one or more of these areas and advances health equity:
  + **Access to behavioral health services**
  + **Food insecurity**
  + **Safe and affordable housing, including support of individuals experiencing homelessness or the prevention of homelessness**
* Organizations whose proposed program/project(s) serve vulnerable, underserved, or low-income populations
* Organizations whose proposed program/projects(s) are data driven, evidenced-based, collaborative

**Timeline for FY24:**

* **By January 5, 2024 –** Health Equity Fund application released.
* **March 1, 2024, by 4 p.m. –** Applications due.
* **May 31, 2024 –** Award letters mailed by this date.

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*Please complete the following information and submit your application, FY2024 Budget Form, and Form 990 to Melissa Dean (*[*mdean@mercycare.org*](mailto:mdean@mercycare.org)*) by 4 p.m. on March 1, 2024.*

1. Name of requesting organization:
2. Address:
3. Federal ID and 501(c)(3) status:
4. Primary contact person:
5. Primary contact person’s email:
6. Organization’s mission:
7. Title of proposed program/project:
8. Geographic area(s) served:
9. Which area(s) does the proposed program/project focus on? Choose an item.
10. Amount requested ($10,000 - $25,000):
11. Is this request for a new or existing program/project? Choose an item.
12. How many individuals do you anticipate serving with this program/project?
13. Please provide a brief description of your proposed program/project, addressing the following:

* its purpose
* how it addresses a community need and
* how it will serve/serves vulnerable, underserved, or low-income populations

1. Please describe how the individuals served through this program/project provide input.
2. Please describe how and when the proposed program/project will be accomplished.
3. Please provide measurable goals and objectives for the proposed program/project.
4. Please describe how your organization will use the funding requested from Mercy for this program/project (e.g., provision of services, salaries, etc.).
5. Please describe how the proposed program/project is data-driven and evidenced-based.
6. Please describe how the proposed program/project is collaborative.
7. Please describe how the proposed program/project advances health equity.
8. Why is your organization passionate about the proposed program/project?
9. Please describe your current capacity (knowledge, resources, and/or services) to successfully implement the proposed program/project and sustain the overall funding needs of this program/project now and in the future.
10. Special consideration will be given to programs/projects who have the opportunity to leverage other funds with support from Mercy’s Health Equity Fund. Please share if you this applies to your program/project.
11. Please complete the FY2024 Budget Form and submit your organization’s most recent Form 990 with your completed application.

*Note: If the applicant organization is awarded funds, Mercy requests to be listed as a supporter in announcements about the program/project and to be able to share information about the support and partnership provided. Additionally, Mercy requests the organization to provide documentation of the impact of the funds received and how the funds were used. This information will be due by January 31, 2025.*