



Request *for* Proposals

2027-2028 Grant Cycle

Texas Health Community Impact
Southern Region

TEXAS HEALTH COMMUNITY IMPACT FUNDING OPPORTUNITY

FUNDING OPPORTUNITY:	Texas Health Community Impact 2027-2028 Grant Cycle
REGION:	Southern (Erath and Johnson Counties)
RFP RELEASE DATE:	April 13, 2026
DEADLINE FOR QUESTIONS:	May 4, 2026, by 5 p.m. Central Daylight Time (CDT)
APPLICATION DEADLINE:	May 29, 2026, by 11:59 p.m. CDT
TOTAL FUNDING AVAILABLE:	Per county <ul style="list-style-type: none"> • Phase One: Up to \$33,333 per community collaborative • Phase Two: Up to \$250,000 – <i>Note, only Phase One grantees will be eligible for Phase Two funds.</i>
NUMBER OF AWARDS:	Per county <ul style="list-style-type: none"> • Phase One: Up to three community collaboratives • Phase Two: One community collaborative
PROJECT PERIOD:	Jan. 1, 2027, to Dec. 31, 2028 <ul style="list-style-type: none"> • Phase One: Jan. 1 to June 30, 2027 • Phase Two: July 1, 2027, to Dec. 31, 2028

ABOUT TEXAS HEALTH

As the health system that cares for more North Texans than any other provider, Texas Health Resources is committed to delivering support through programs and services that help lead to measurable and sustainable community improvements. We serve as a catalyst to transform lives by investing in the vision of a healthier future for our communities. We believe where you live should not play a major role in your health and well-being. Texas Health Community Health Improvement works to proactively address health disparities and the social and environmental conditions that affect overall health.

Texas Health Community Impact invests in community health and well-being through grantmaking and strategic collaborations. From data-driven, home-grown regional strategies to technical assistance, we offer creative grant opportunities to support North Texas organizations with a mutual desire to transform health and well-being in innovative ways.

Our outcomes-focused approach seeks to address health disparities identified as non-medical drivers of health in specific ZIP codes. Texas Health's aim is to help identify and innovatively address the root cause of health disparities before they develop into poor health outcomes. Considered upstream, these approaches combat poor health outcomes by implementing solutions to reduce the negative impact of non-medical drivers of health.

For the 2027-2028 grant cycle, Texas Health is investing a total of \$5 million in grants across its five regions, which spans nine counties. Groups seeking to work collaboratively on innovative upstream approaches to address priorities identified in each region are encouraged to apply for this competitive funding opportunity.



Proposed solutions should align with the following guiding principles:

- Leverage data to identify needs and measure progress
- Drive equitable opportunities for optimal health
- Meet people where they live, work, play and pray
- Care for the whole person
- Pursue solutions that are efficient, innovative and sustainable

KEY REQUIREMENTS

The Texas Health Community Impact grant program is committed to fostering innovative, collaborative and strategically aligned initiatives that address critical health challenges in our communities. This outlines the standardized requirements for applicants seeking funds during the 2027-2028 grant cycle, emphasizing the importance of innovation as defined by the Public Health Accreditation Board.

By setting clear expectations for project design, collaboration and sustainability. Texas Health aims to support impactful solutions that reduce health disparities and improve outcomes in high-needs ZIP codes.

The next two pages provide details for each key requirement.

Innovation



Texas Health has adopted the Public Health Innovation definition, as outlined by the Public Health Accreditation Board (PHAB).¹⁴

Public Health Innovation

As described by the PHAB, public health innovation refers to the creation and implementation of a novel process, policy, product, program or system leading to improvements that impact health.

Tenets of public health innovation include the following:

- ✓ It is an ongoing, systematic process that can generate incremental or radical change.
- ✓ It requires both collaboration and co-production with people with lived experience who will be affected by the results of the innovation.
- ✓ It is an open process lending itself to adaptation or replication.

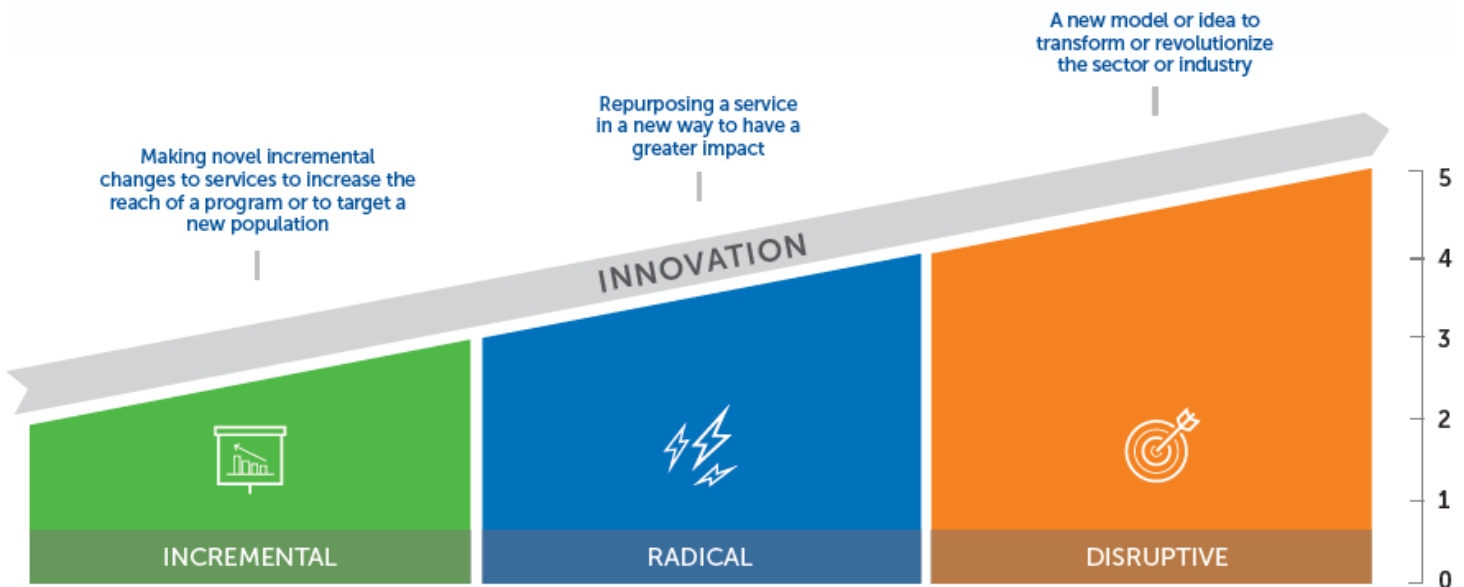
Strategic Alignment



Applicants are expected to detail how proposed initiatives adequately respond to the regional priorities and fulfills the requirement to serve the targeted ZIP code areas.

Proposed projects are expected to:

- ✓ Focus on reducing the negative impact of non-medical drivers of health for the populations in high-needs ZIP codes.
- ✓ Incorporate innovative solutions to improve health in communities with worsening health outcomes.
- ✓ Have a solid implementation plan that considers cultural sensitivities and addresses community needs.
- ✓ Clearly demonstrate the level of involvement and contributions from collaborators, including deliverables and budgetary commitments.
- ✓ Identify opportunities for Texas Health to engage through volunteering.



Collaboration



Collaboration means working together to address systemic problems with the community at the center. According to the National Network for Collaboration, approaches that “bring individuals, agencies, organizations and community members” together to generate solutions for current and emerging problems collectively are at the core of collaboration.

Collaborative approaches integrate service offerings, building meaningful connections between agencies to eliminate gaps in community services. As indicated in Figure A, collaboration involves multiple organizations aligning efforts and working collectively toward a shared goal.

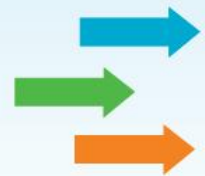
INDIVIDUAL ACTIONS

- One or more organizations working in silos
- No communication with others
- Does not qualify for this funding



ISOLATED IMPACTS

- Separate business objectives
- Little time together
- Poor communication
- Distant



COORDINATED EFFORT

- Shared goals and objectives
- Strong communication among collaborative organizations
- Dedicated time
- Close



Figure A. Visual representation of what Texas Health Community Impact means by collaboration as a coordinated effort.
Adapted from Collective Impact at UC San Diego

Promoting Sustainability



Texas Health also focuses on improving the potential for sustainability, by ensuring applicants clearly understand the evaluation requirements, offering personalized technical assistance and supporting the efforts of our third-party evaluation in strengthening data collection and reporting.

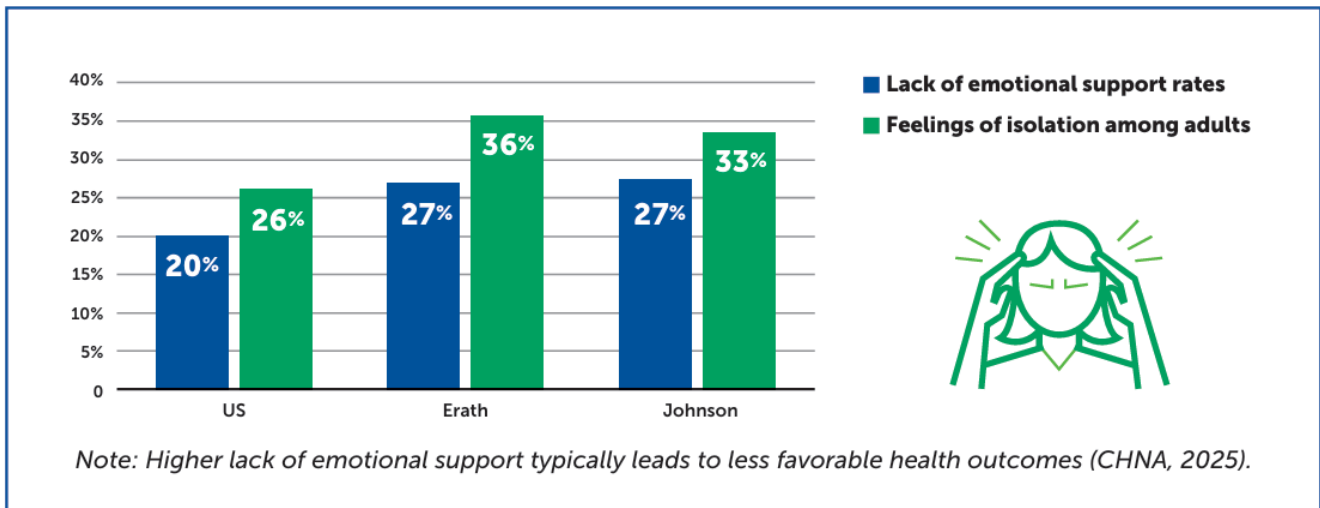
By adhering to these standardized requirements, applicants can ensure their proposals reflect the core values that drive the Texas Health Community Impact. Our shared commitment to addressing non-medical drivers of health, fostering meaningful partnerships and promoting sustainability will help create lasting improvements in the communities we serve. Together, we can advance health outcomes and build a foundation for impactful, data-driven solutions that endure beyond the grant cycle.

SOUTHERN REGION 2027-2028 STRATEGY

Identified Needs

Adults in Erath and Johnson Counties are facing a critical gap in social and emotional support, with lack of emotional support rates 35% higher than national averages (Community Health Needs Assessment, 2025). Without immediate, coordinated action, these trends will accelerate poor health outcomes and continue to deepen the cracks in care within these rural and non-urban communities.

There is strong evidence that stress and lack of social connectedness often coexist and reinforce each other (Acoba, 2024; Holt-Lunstad, 2024; Samuel, 2024). Stress reduces our capacity for social engagement and the lack of connection amplifies stress (Haseltine, 2025; Holt-Lunstad, 2024). As such, interventions that increase social connectedness may significantly reduce stress and improve mental health (Bruss et al., 2024; Holt-Lunstad, 2024).



Stress intensifies feelings of isolation, and caregiving often amplifies both.

Research shows that more than 66 million Americans frequently feel lonely — even when around others — and strong social connection is a key protective factor for mental and physical health (Society Connectedness & Health Lab, n.d.; Centers for Disease Control and Prevention, 2026). Within this context, caregivers shoulder substantial emotional and physical demands.

As essential healthcare allies, caregivers manage appointments, assist with daily tasks and provide vital human connection. Chronic caregiver stress can undermine self-care, increase financial and physical strain, and lead to burnout, depression, and long-term health problems such as heart disease and weakened immune function (Schulz & Sherwood, 2008).

Caregivers in Erath and Johnson Counties face these challenges even more acutely. In 2023, 66% of 506 residents surveyed in our high-needs ZIP codes cited caring for an aging or disabled adult as a top stressor (CNM). This stress is compounded by limited support, with approximately one caregiver

resource available for every 2,259 residents (Esri, 2025; A. Bennett & J. Smith, personal communication, Jan. 27, 2026). With greater exposure to stress and isolation and fewer resources to buffer those pressures, caregivers in these counties are a particularly vulnerable population and require targeted investment and support.

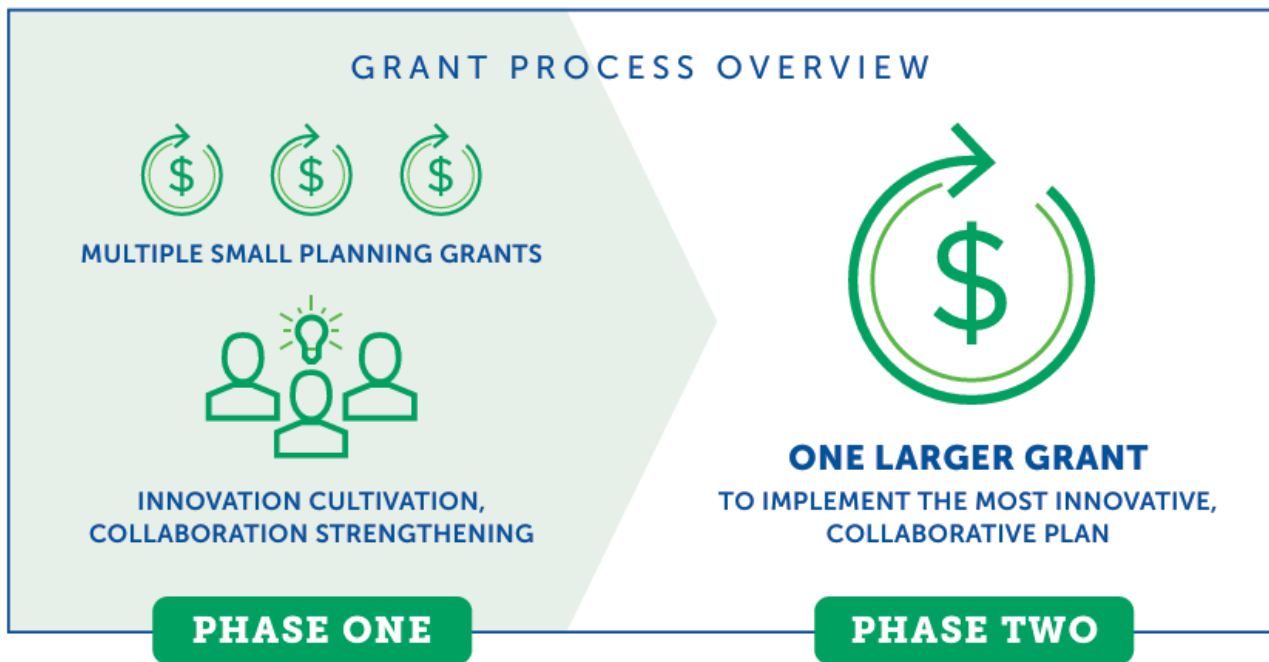
Grantmaking Approach, Goals and Objectives

For the 2027-2028 grant cycle strategy, the Southern Region’s aim is to decrease caregiver stress by increasing community supports in Erath County 76401 and 76446 (Dublin, Huckabay, Lingleville, Morgan Mill and Stephenville); and Johnson County 76009, 76031, 76033, 76059 and 76093 (Alvarado, Cleburne, Keene and Rio Vista).

For this grant, Texas Health Community Impact Southern Region uses the John Hopkins Bayview definition of caregiver, which is “a person who tends to the needs or concerns of a person with short- or long-term limitations due to illness, injury or disability.”

To accomplish this, a two-phased approach will be taken in each county.

- **Phase One:** Award small grants to several collaboratives to ignite innovative, coordinated program development in alignment with the region’s aim. A collaboration quality assessor will be leveraged to determine the quality of the collaboratives. To strengthen program evaluation development, grant participants will consult with Texas Health Community Impact’s third-party evaluator.
- **Phase Two:** From the Phase One grants, a larger grant will be awarded to the strongest collaborative with the most innovative plan, so they can implement their program.



This RFP seeks proposals for Phase One. Collaboratives are not expected to have a specific program in mind at the time of application. The purpose of the Phase One grant is to collaboratively create an innovative plan, which will be submitted as a Phase Two proposal. It is expected, however, that collaboratives include members who can articulate a shared vision for how they will work together through this process.

The 2027-2028 Southern Region goals and objectives are as follows:

Goals and Objectives

Through a two-phased grant approach, the Southern Region seeks to decrease caregiver stress by increasing community supports in Erath County **76401** and **76446** (Dublin, Huckabay, Lingleville, Morgan Mill and Stephenville); and Johnson County **76009, 76031, 76033, 76059** and **76093** (Alvarado, Cleburne, Keene and Rio Vista).

PHASE ONE GOAL

By **June 4, 2027**, collaboratively develop and submit an innovative Phase Two proposal to decrease stress in caregivers within the geographic areas of greatest need by increasing community supports.

Objective One

The collaborative develops an innovative Phase Two proposal using the components shown at right.

Objective Two

An independent organization assesses the quality of each collaboration as they develop their innovative Phase Two proposal.

PHASE TWO GOAL

By **Dec. 31, 2028**, decrease stress in caregivers within the geographic areas of greatest need by increasing community supports.

Quick Pitch

1

Background

2

- Geographic Area of Need
- Target Population
- Strategic Alignment

Project Description

3

- Innovation
- Collaboration
- Activities
- SMART Goals
- Outputs & Outcomes
- Sustainability
- Marketing and Promotion

Data and Evaluation

4

- Data Collection, Measures & Tools

Workbook

5

- Budget
- Logic Model
- Project Plan

Appendices

6

- Client Journey
- Referral Process
- Marketing & Promotion Plan
- Collaborative Memorandum of Understanding
- Collaboration Planning Tool
- Evidence of Collaborative Work

EXPECTATIONS OF AWARD RECIPIENTS

Fulfill Memorandum of Understanding (MOU) Requirements. Lead applicants of awarded collaboratives and Texas Health will execute an MOU detailing the following:

- Project Goals, Deliverables and Outcomes
- Data Sharing Agreement
- Payment Terms
- Reporting Requirements
- Terms and Conditions
- Texas Health Grant Promotion Expectations

Lead applicants serve as the direct point of contact with Texas Health Community Impact – i.e. signs the MOU, responds to requests, presents on progress. The lead applicant also coordinates with collaborators to ensure progress and resolve conflicts and administers funding payments to collaborators.

Engage with Texas Health Community Impact. Lead applicants and respective collaborators should engage with Texas Health in the following ways:

- Receiving technical assistance from the Texas Health Program Manager — including but not limited to regular touch base calls (and as needed), guidance on budget changes or project adjustments, and connections to enhance outcomes.
- Fulfilling communication requirements.
- Participating in learning opportunities either convened or facilitated by Texas Health.
- Hosting at least one site visit to highlight progress to key stakeholders associated with Texas Health.
- Presenting the collaborative approach and/or results at meetings convened by or with Texas Health.

ELIGIBILITY

Project Implementation. *Planning grant applicants must demonstrate the ability to begin implementing activities within a month of MOU execution.* Exceptions may be considered on a case-by-case basis.

Prior Applicants. Organizations that applied for a previous Texas Health Community Impact grant cycle and were not awarded are eligible to apply.

Not Eligible. Organizations previously funded as lead agency for two cycles are not eligible to apply. **Existing or proposed programs with funding directed to Texas Health are not eligible for this opportunity.**

The following is a non-exclusive list of potential lead organizations that may be eligible to apply:

- State, county, city or township governments
- Independent school districts
- Public housing authorities
- Public or state-controlled institutions of higher education
- Nonprofits with a 501(c)(3) IRS status

Healthcare systems, individual hospitals or hospital districts can be part of a collaboration but cannot serve as the lead applicant.

FUNDING EXCLUSIONS

The following expenses are not allowable:

- Indirect costs exceeding 10% of the total collaborative direct costs. Indirect costs are expenses that do not relate to a specific intervention or service such as overhead, utilities, accounting and rent support.
- Endowments or capital campaigns.
- Capital expenses, construction projects and purchase of large equipment. Mission-critical equipment purchases may be considered and must be approved by Texas Health.
- Fundraising activities or event sponsorships.
- Direct delivery of reimbursable healthcare services.
- Grants or scholarships to individuals.
- Advertising reimbursement of pre-award costs.
- Lobbying activities, including publicity or propaganda, preparation, distribution, or use of any material designed to support or defeat the enactment of legislation before any legislative body.

PROPOSAL SUBMISSION

2027-2028 Grant Cycle Proposal Timeline

Date(s)	Activity	Details
April 13, 2026	RFP Released	Proposals must be submitted through the Texas Health Resources Grants e-Portal at https://www.TexasHealth.org/Apply .
April 13 – May 4, 2026	Q&A Period	Questions will be accepted by the Texas Health team during this period via THCI-Grants@TexasHealth.org . Please use the email subject line “RFP Questions” and indicate which region(s) you are inquiring about. Questions will not be accepted after 5 p.m. CDT on May 4. Webinars will also be available regionally. Additional information can be found at TexasHealth.org/THCI-RFP .
May 29, 2026	Submission Deadline 11:59 p.m. CDT	The submission period will close at 11:59 p.m. CDT on May 29, 2026 . Proposals will not be accepted after the deadline. <i>Applicants are responsible for familiarizing themselves with the e-Portal to avoid missing the deadline.</i>
June 1 – Dec. 1, 2026	Review Process	All submissions will be reviewed, and applicants may be asked to respond to clarifying questions about their proposals.
Dec. 18, 2026	Grant Award and Onboarding Process Begins	Notification of grant awards is expected to occur by Dec. 18, 2026. Recipients of grant awards will be required to attend an onboarding session and meet with their assigned Texas Health Program Manager in January 2027.



**All proposals must be submitted through <https://www.TexasHealth.org/Apply>.
Late submissions will not be accepted.**

Please note: The lead applicant will submit one proposal on behalf of the collaborative.*
*New users will need to register in the e-Portal to gain access to the application.

Frequently Asked Questions (FAQs)

- Questions regarding this RFP will be accepted via email to THCI-Grants@TexasHealth.org until **5 p.m. CDT on May 4, 2026**. Please use the email subject line “RFP Questions” and indicate which region(s) you are inquiring about.
- For information about previously funded projects, visit: TexasHealth.org/Community-Impact.
- A Q&A section on the Texas Health Community Impact website will be updated **May 1 and May 10**: TexasHealth.org/THCI-RFP.
- Region-specific webinars will take place between **April 14 and April 24**. Visit TexasHealth.org/THCI-RFP to register or watch a recording.

SOUTHERN REGION PHASE ONE PROPOSAL QUESTIONS

To be completed in the [e-Portal](#) by 11:59 p.m. on May 29, 2026.

1. Geographic Area of Focus

What is your geographic area of focus as defined by Texas Health? Select one or more of the following:

- 76401 (Erath)
- 76446 (Erath)
- 76009 (Johnson)
- 76031 (Johnson)
- 76033 (Johnson)
- 76059 (Johnson)
- 76093 (Johnson)

2. Collaborative History (1,800 characters maximum with spaces)

Tell us about your collaborative’s history of working together. If this is a new collaboration, tell us the inspiration for joining forces.

3. Key Personnel

For your collaborative, use the table within the e-Portal application to list each organization, the key personnel and their role with their organization. *Note: Key personnel are individuals who are essential to carrying out the responsibilities of the planning grant.*

4. Caregiver Experience (3,000 characters maximum with spaces)

What is your collaborative’s experience with caregivers as defined by Texas Health?

5. Planning Grant Interest (1,800 characters maximum with spaces)

Tell us why your collaborative is interested in the Phase One planning grant opportunity.

6. Planning Grant Application (1,800 characters maximum with spaces)

Phase One is a planning grant and not all collaboratives who apply for Phase Two will be selected to implement their plan. Regardless, what does your collaborative hope to learn or gain (specific skills, network, experience, etc.) from this planning grant?

7. Innovation (1,800 characters maximum with spaces)

Innovation as defined by Texas Health is paramount. Through this planning grant, tell us how your collaborative will work toward developing a program that has not been done before. *Note: Please refer to the Texas Health Community Impact Key Requirements for the definition of innovation and the innovation scoring scale.*

8. Participation with Quality Assessor (1,800 characters maximum with spaces)

In addition to technical assistance from Texas Health, this planning grant includes a third-party collaboration quality assessor. Tell us about your collaborative's approach for constructive feedback.

9. Funding Request

What is the total funding amount requested for this Phase One planning grant?

10. Attachments/Uploaded Items

Please provide the following documents:

- Phase One Budget. *Note: Upload the budget for the lead grantee and funded collaborators. The template is available in the e-Portal application form. Download, complete and upload to the application form in the e-Portal.*
- Letter of Commitment. *Note: Include one letter of commitment, describing the collaborators and their commitment to this project. Each collaborator must sign the letter.*

SOUTHERN REGION PHASE ONE PROPOSAL RESPONSIVENESS

Community Collaborative proposal responsiveness will be assessed using the following criteria:

1. Need and Opportunity Aligns with Priorities and is Collaborative (20%)

Strategic alignment with community needs and Texas Health Community Impact priorities. Clear engagement with multi-sectoral, capable organizations in the collaborative and initial plans for engaging with the third-party collaboration quality assessor. An unclear connection to the region's priorities will not score highly.

2. Potential for Collaborative Impact and Sustainability (25%)

The proposal provides a clear and compelling demonstration of the collaborative's understanding of the planning grant objectives, its commitment to participation and the anticipated benefits of engaging in the process.

3. Potential for Innovation (30%)

The collaborative proposes inclusion of actions for inspiration of innovative or novel approaches.

4. Potential for Soundness of Collaboration (25%)

The collaborative provides evidence that they will take a coordinated approach and propose a realistic budget.

RIGHT TO REJECT

Texas Health reserves the right to:

- Reject any or all proposals submitted.
- Request additional information from any or all applicant organizations.
- At their sole discretion, conduct discussions with any applicant organization to ensure full understanding of and responsiveness to the RFP requirements.

Applicant organizations will not be reimbursed for the cost of developing or presenting a proposal in response to this RFP. For administrative purposes, proposals must be submitted through Texas Health's e-Portal. Submission of the proposal does not constitute an obligation to fund. All proposals will be reviewed, and finalists determined solely as described in this RFP.

NOTE: Pages 13-15 of this document provide information on the Southern Region's Phase Two proposal, which represents a potential outcome of Phase One.

For planning purposes, Phase Two proposal questions and scoring criteria are provided so collaborative applicants are aware of potential future requirements while completing Phase One.

SOUTHERN REGION 2027-2028 STRATEGY – SOURCES CITED

Acoba, E. (2024). Social support and mental health: The mediating role of perceived stress. *Frontiers in Psychology*, 15(1330720), 1-12. <https://doi.org/10.3389/fpsyg.2024.1330720>

Bruss, K., Seth, P., & Zhao, G. (2024). Loneliness, lack of social and emotional support, and mental health issues — United States, 2022. *U.S. Centers for Disease Control and Prevention: Morbidity and Mortality Weekly Report*, 73(24), 539-545. <https://www.cdc.gov/mmwr/volumes/73/wr/pdfs/mm7324a1-H.pdf>

Centers for Disease Control and Prevention. (2026). *Community & Connection*. <https://www.cdc.gov/mental-health/about-data/community-connection.html>

CNM. (2023). 2023 Data report for Erath, Johnson, and Kaufman Counties. [Report provided to Texas Health as a deliverable of the 2023-2024 Texas Health Community Impact grant awarded to CNM.]

Esri. (2025.) <https://www.arcgis.com/apps/dashboards/26bb17a3a1ab4f3b8b64051e8090cb39>

Haseltine, W. (2025). New evidence that we're wired for connection. *Psychology Today*. <https://www.psychologytoday.com/us/blog/best-practices-in-health/202503/new-evidence-that-were-wired-for-connection>

Holt-Lunstad, J. (2024). Social connection as a critical factor for mental and physical health: evidence, trends, challenges, and future implications. *World Psychiatry*, 23(3), 312-332. <https://doi.org/10.1002/wps.21224>

Samuel, K. (2024). Stress is driving an epidemic of social isolation. *Psychology Today*. <https://www.psychologytoday.com/us/blog/the-power-of-belonging/202410/stress-is-driving-an-epidemic-of-social-isolation>

Society Connectedness & Health Lab. (n.d.). *Social connectedness and mental health*. Retrieved Jan. 25, 2026, from <https://www.socahlab.org/social-connectedness>

SOUTHERN REGION PHASE TWO PROPOSAL

The intent of this section is to inform Phase One applicants of the forthcoming Phase Two proposal questions and responsiveness. No action is needed at this time.

If awarded a Phase One grant, proposed projects for Phase Two consideration should:

- Focus on reducing the negative impact of non-medical drivers of health.
- Incorporate innovative solutions to improve health outcomes.
- Have a solid implementation plan that considers cultural sensitivities and addresses community needs.
- Clearly demonstrate the level of involvement and contributions from collaborators, including deliverables and budgetary commitments.
- Identify opportunities for Texas Health to engage through volunteering, education or other.

Goal for Phase Two: By Dec. 31, 2028, decrease stress in caregivers within the geographic areas of greatest need by increasing community supports

SOUTHERN REGION PHASE TWO PROPOSAL QUESTIONS

1. Quick Pitch (450 words maximum)

Provide a concise summary of your proposal, including:

- Introduce your Community Collaborative (CC).
- Identify the need you're addressing, the geographic location and the target population your program will serve.
- Provide a high-level overview of your program, highlighting your **innovative** approach to decrease stress in caregivers by increasing community supports.
- Include the amount of funding requested.
- Include the program's expected outcomes and impact.

2. Background (500 words maximum)

Identify what the project addresses in alignment with the Texas Health Community Impact Southern Region 2027-2028 grant cycle strategy. Identify the geographic area of need using data from Texas Health and other reputable sources as necessary. Identify the target population and describe their demographics and unique challenges, using data from Texas Health and other reputable sources as needed. Provide data and evidence to support this need.

3. Project Description (1,500 words maximum)

• Innovation

Texas Health uses the Public Health Innovation definition from the Public Health Accreditation Board (PHAB). According to PHAB, public health innovation is the creation and implementation of a new process, policy, product, program, or system that improves health. In reference to innovation per the Texas Health Community Impact grant key requirements, explain how your program differs from existing efforts. Provide evidence when applicable.

• Collaboration

Identify the CC members. Explain how your collaborative is uniquely positioned to address the identified need. Highlight past successes, expertise and/or relationships with the community

that demonstrate your capability. Describe how the CC will work together to achieve program goals. Explain the process for continuous improvement throughout the grant implementation period.

- **Activities**

Describe the planned activities and how they will achieve the objectives. Detail the key activities you will implement. Include why the strategies were chosen and how they will achieve the desired outcomes.

- **Program Goals**

Clearly define the SMART (Specific, Measurable, Achievable, Relevant, Time-bound) goals of the program. Provide one output goal and two outcome goals.

- **Outputs and Outcomes**

Identify your program's key expected outputs and short-term, intermediate and long-term outcomes. Explain how the outcomes align with program activities and address the need identified by Texas Health.

- **Sustainability**

Discuss how sustainability efforts will be integrated throughout the project. Comment on what is envisioned for this project in the future and the relationship with collaborators. Provide examples of the possibilities as applicable.

- **Marketing and promotion**

Explain the marketing and promotions plan for the program. Provide examples for efforts intended to gain clients/program participants, generate awareness of the grant funded by Texas Health and disseminate program results.

4. Data & Evaluation (1,000 words maximum)

Outline how you will measure success. Identify tools, methods and/or indicators you will use to track progress and outcomes. Include metrics for tracking progress towards program goals and outcomes and data collection methods. Describe how evaluation findings will be shared and used to improve the program. Include who will receive the information, and when you will use them to refine your approach.

5. Workbook

Upload the Phase Two Workbook including the Budget, Logic Model and Project Plan in the e-Portal. Texas Health will provide a template.

6. Appendices

Upload the following documents in the e-Portal in the following order:

- a. Client Journey
- b. Referral Process
- c. Marketing and Promotion Plan
- d. Collaboration Memorandum of Understanding
- e. Collaboration Planning Tool
- f. Evidence of Collaborative Work

SOUTHERN REGION PHASE TWO PROPOSAL RESPONSIVENESS

Phase Two proposal responsiveness will be assessed using the following criteria:

- 1. Alignment with Priorities and Strong Collaboration (20%)**
Strategic alignment with Texas Health Community Impact priorities and community needs. Demonstrated engagement of varied capable partners in the proposal and within the collaboration quality assessment.
- 2. Innovation (30%)**
Use of innovative or novel practices and approaches. Proposals seeking to continue or simply expand existing services without any defined innovation will not score well.
- 3. Well-defined Output & Outcome Measures (25%)**
SMART goals outline expected outputs, outcomes, and demonstrate potential to impact the target community(ies) served.
- 4. Clear Implementation Plan (25%)**
Strong, realistic implementation plan, financial planning, targets, and timeline. Clear vision for how goals and outcomes will be achieved. Demonstrated capacity to launch proposed activities successfully within one month of an executed grant agreement. Evidence of recruitment strategy, collaborators, appropriate staffing, and budget. Proposal identifies several opportunities for funding acknowledgment and dissemination of results.