REQUEST FOR PROPOSALS

Children and Youth with Special Health Care Needs
Family Impact Initiative Mini-Grant Program: FY2027

Total Available	Request Amount	Application Deadline	Program Activities End
$20,000	**$2,000-$5,000**	**October 5, 2026 5:00 p.m. ET**	**June 30, 2027**

Through the Family Impact Initiative (FII), which is funded by the Title V Maternal and Child Health Service Block Grant through the Pennsylvania Department of Health, the City of Philadelphia Department of Public Health, Division of Reproductive, Adolescent, and Child Health (ReACH), is offering mini-grants to improve support for children and youth with special health care needs (CYSHCN) and their families in the communities where they learn, grow, and receive services. Eligible applicants include School District of Philadelphia K-12 schools, Philadelphia library branches with youth or family programming for CYSCHN, and other Philadelphia-based schools, programs, or organizations serving CYSHCN and families.

Mini-grants may support family and youth engagement, community building, information and resource access, disability and neurodiversity awareness, navigation, inclusion, transition, and other family-informed improvements to improve the system of care in which CYSHCN receive services. Parent, caregiver, youth, and young-adult leadership is strongly encouraged. Each application must identify an eligible organization responsible for the agreement, funds, documentation, and reporting.

Program Background and Definition

The Children and Youth with Special Health Care Needs Program works with families, schools, providers, and community partners to improve access, coordination, information-sharing, and systems of support. For this RFP, **children and youth with special health care needs (CYSHCN)** includes children and youth who have, or are at increased risk for, chronic physical, developmental, behavioral, or emotional conditions and who require health and related services beyond those generally required by children and youth of the same age.

I. Eligibility and Program Priorities

Eligible Applicants

- A K-12 School District of Philadelphia school;
- A Philadelphia library branch that provides specific programming services for CYSHCN, or families of CYSHCN; or
- Another Philadelphia-based school, program, or organization that regularly serves CYSHCN, or families of CYSCHN.

The lead applicant must identify a project lead and an authorized organizational representative, directly benefit Philadelphia CYSHCN and/or their families, meaningfully involve family or youth perspectives, and have capacity to complete the program and reporting requirements. Applicants may partner with families, schools, libraries, recreation centers, health care providers, or community organizations; the lead applicant remains responsible for the budget, documentation, and reporting.

Eligible Program Requirements	Priority Considerations
• Serve school-aged children and youth, generally ages 5-17; transition-age youth may be included for preparation for adulthood. • Respond to a need identified by youth, families, schools, programs, or community partners. • Include meaningful family or youth participation in at least one stage. • Promote inclusion, access, equity, community connection, or improved support. • Include activities achievable within the grant period.	• Communities with high IEP or economic-disadvantage rates; • Documented gaps in services or supports; • Historically underserved populations, adolescents, or youth with higher support needs; • Strong family or youth leadership; • Credible sustainability and geographic or program-area diversity.

Applicants are not required to meet a specific schoolwide IEP or economic-disadvantage percentage. Describe the needs of the population to be served and include relevant data when available.

Priority Program Areas

• Peer support for parents, caregivers, or youth	• Family education, workshops, or practical resources	• Disability and neurodiversity awareness and inclusion
• Youth self-advocacy, leadership, or transition to adulthood	• School-family-provider communication and coordination	• Referral, navigation, or warm-handoff processes
• Accessible, culturally responsive, or multilingual resources	• Staff or volunteer education	• Sensory, self-regulation, or accessibility resources connected to a broader program

II. Grant Funding and Fiscal Requirements

Requirement	What It Means
$20,000 available; requests must be between $2,000 and $5,000.	Award size and number depend on application quality, reasonable budgets, and available funds.
PDPH may offer full or partial funding.	Partial awards may require a revised scope and budget.
Awards require fiscal approval, required documentation, and an executed agreement.	Award notification alone does not authorize spending.
Payment or reimbursement procedures will be stated in the agreement.	Awardees may need invoices, receipts, proof of payment, and other supporting records.
Written approval is required for material program or budget changes.	Unspent, unsupported, or improperly used funds may be withheld, forfeited, or returned.

Grant-funded purchases and expenses must be completed, invoiced, and supported by required fiscal documentation by May 15, 2027. Approved program activities may continue through June 30, 2027 using resources or services purchased or invoiced by the fiscal deadline.

III. Allowable and Unallowable Expenses

Potentially Allowable	Prior Written Approval Required	Not Allowable
• Program and educational supplies • Support-group and community-building materials • Sensory, self-regulation, and accessibility materials • Printing, translation, interpretation, and accessible formats • Approved trainers, speakers, facilitators, and experts • Outreach and communication materials • Approved navigation, education, advocacy, or family-support resources	• Food or refreshments • Gift cards or incentives • Technology or durable equipment • Staff extra-duty payments or stipends • Higher-cost sensory or accessibility items • Other expenses not clearly listed as allowable	• Unrelated operating costs • Regular salaries, fringe, or indirect costs • Unapproved general-purpose technology • Furniture, construction, renovation, or permanent alterations • EPSDT/Medicaid/insurance-reimbursable services • Cash payments • Fundraising, lobbying, partisan activities • Expenses outside the authorized fiscal period • Purchases primarily benefiting one individual

All costs must be necessary, reasonable, directly connected to the approved program, and included in the approved budget. PDPH and its fiduciary partner make the final determination of allowability and may require budget revisions.

IV. Awardee Responsibilities

- Identify one project lead and complete all award, fiscal, and administrative documentation.
- Participate in a start-up meeting or receive written notice of the official start date before beginning.
- Implement the approved program and obtain written approval for significant scope, timeline, population, or budget changes.
- Meaningfully involve parents, caregivers, youth, or young adults as proposed.
- Maintain invoices, receipts, attendance or participation records, materials, activity records, feedback, and other required documentation.
- Participate in at least one FII progress check-in and track approved measures.
- Protect privacy; do not include unnecessary personally identifying or confidential information in reports or presentations.
- Submit final fiscal documentation by May 15, 2027; complete activities by June 30, 2027; submit the final report by July 12, 2027; and provide one presentation or written summary July-September 2027.

V. Application Requirements

Submit one complete application. The cover sheet and program narrative may not exceed five pages in total. The budget, work plan, and certification are excluded from the five-page limit.

Section	Required Content	Review Emphasis
1. Cover Sheet	Applicant, project lead, authorized representative, amount requested, population, partners, and contact information.	Eligibility and completeness
2. Summary and Need	Program overview; population served; need, barrier, or gap; and how the need was identified.	Alignment and documented need
3. Activities and Work Plan	Activities, responsible people, timeline, partners, and how activities address the need.	Design and feasibility
4. Family/Youth Involvement	How family or youth perspectives informed the program and their role in planning, implementation, review, or evaluation.	Meaningful engagement
5. Accessibility, Inclusion, and Equity	Relevant disability, language, health-literacy, culture, transportation, technology, scheduling, cost, or communication barriers and strategies.	Equitable participation
6. Results and Measurement	At least two measures, data-collection method, and target. Avoid unnecessary personally identifying information.	Results and measurement
7. Sustainability and Capacity	What may continue, who will maintain it, resources needed, and applicant staffing/administrative capacity.	Sustainability and readiness
8. Budget, Work Plan, and Certification	Itemized costs and calculations; milestones; and authorized signatures.	Budget quality and authorization

VI. Proposal Review and Scoring

Criterion	Points	Review Standard
Alignment with CYSHCN and FII priorities	20	Clear need; direct Philadelphia benefit; alignment; relevant feedback, experience, or data.
Meaningful family or youth involvement	20	Clear, appropriate role in shaping, planning, implementing, reviewing, or evaluating the program.
Program design and feasibility	20	Specific activities, responsible staff, realistic timeline, partnerships, and adequate capacity.
Expected results and sustainability	20	At least two useful measures, reasonable collection methods, anticipated benefit, and credible continuation plan.
Accessibility, inclusion, and equity	10	Relevant barriers identified and practical strategies for equitable, respectful participation.
Budget quality	10	Complete, itemized, allowable, reasonable, and directly connected to activities and results.
TOTAL	**100**	Applications should receive at least 70 points to be considered fundable; the threshold does not guarantee an award.

When scores are similar, FII may consider family/youth leadership, documented gaps, economic or systemic barriers, adolescents or youth with higher support needs, accessibility, sustainability, and geographic or program-area diversity. PDPH may fund in full or in part, request clarification or revisions, reject applications, and reallocate funds if an applicant cannot complete the award process.

VII. Timeline, Submission, and Questions

Activity	Date
RFP released	September 2, 2026
Written questions due	September 16, 2026
Responses distributed	September 23, 2026
Applications due	October 5, 2026, 5:00 p.m. ET
Review period	October 6-23, 2026
Anticipated award notifications	October 30, 2026
Award documentation	November 2-13, 2026
Anticipated start date	November 16, 2026
Final purchases, invoices, and fiscal documentation	May 15, 2027
Program activities end	June 30, 2027
Final report due	July 12, 2027
Presentation or written summary	July-September 2027
SUBMIT TO Health.CYSHCNgrants@phila.gov Subject: FII Mini-Grant Application - [Applicant Name]	QUESTIONS Toni-Ann Stewart Toni-Ann.Stewart@phila.gov

Submit one PDF or Word document whenever possible. The budget may be a separate attachment. Suggested filename: FII_MiniGrant_[Applicant Name]. Late or incomplete applications may be removed from consideration. Receipt confirmation does not establish completeness, eligibility, or selection.

Appendix A: Application Cover Sheet

The cover sheet and narrative together may not exceed five pages. Type directly into this form or reproduce the same headings in a separate document.

APPLICANT INFORMATION	
Applicant school, library, program, or organization	
Applicant type	☐ SDP school ☐ Library branch ☐ Other eligible organization
Address	
Website/social media (optional)	
PROJECT LEAD	
Project lead	Name / title or role
Email and phone	
AUTHORIZED REPRESENTATIVE	
Authorized organizational representative	Name / title
Email and phone	
PROGRAM INFORMATION	
Program title	
Amount requested	$_____ ($2,000-$5,000)
Proposed start and end dates	Start: _____ End: _____
Population to be served	Estimated number, ages/grades, and general description
Neighborhoods or ZIP codes	
Partners and roles	

Appendix B: Program Narrative

Use the numbered headings below. Applicants may replace the prompts with their responses or submit a separate narrative using the same headings. Keep the cover sheet and narrative within five pages total.

1. Program Summary and Identified Need

Describe the proposed program, population served, specific need or gap, how the need was identified, and relevant family/youth feedback, school or program experience, community information, or data.

Applicant response:

2. Proposed Activities and Work Plan

Describe the activities, who will be responsible, when they will occur, how partners will contribute, and how the activities address the identified need.

Applicant response:

3. Family and Youth Involvement

Explain how parents, caregivers, youth, or young adults helped shape the program and how they will participate in planning, implementation, review, or evaluation.

Applicant response:

4. Accessibility, Inclusion, and Equity

Describe relevant barriers and how the program will address disability access, language, health literacy, culture, transportation, technology, scheduling, cost, communication, or other participation needs.

Applicant response:

5. Expected Results and Measurement

Identify at least two measures. For each, state what will be measured, how it will be collected, and the target. Avoid unnecessary personally identifying information.

Applicant response:

6. Sustainability and Organizational Capacity

Describe what may continue after the grant, who will maintain it, resources needed, and the staff, volunteers, partnerships, experience, and administrative support available to complete the program and reporting.

Applicant response:

Appendix C: Itemized Budget and Work Plan

Itemized Budget

List each proposed expense and calculation. The total request must be between $2,000 and $5,000. Add rows as needed.

Budget category	Item or service	Calculation	Amount
Program supplies			
Educational materials			
Printing / access services			
Trainer / facilitator / service			
Family or youth participation			
Outreach / communication			
Other approved expense			
TOTAL REQUEST			

Budget Justification

Explain why each expense is necessary, how the cost was calculated, and how it supports the program. Identify expenses requiring prior written approval.

Applicant response:

Program Work Plan

Activity or milestone	Responsible person	Target date	Evidence of completion

Fiscal deadline: May 15, 2027. Program activities may continue through June 30, 2027 using items or services purchased or invoiced by the fiscal deadline.

Appendix D: Authorized Certification and Signature

By signing, the authorized representative certifies that:

- The application is accurate and the applicant has authority and capacity to complete the program;
- The program directly benefits Philadelphia CYSHCN and/or their families;
- Funds will be used only for approved activities and expenses;
- Required program and fiscal records, invoices, reports, and other documentation will be maintained and submitted on time;
- Written approval will be obtained before significant program or budget changes;
- Participant privacy and confidentiality will be protected;
- Actual or potential conflicts of interest will be disclosed; and
- The applicant will comply with applicable PDPH, FII, fiduciary-partner, and award-agreement requirements.

AUTHORIZED ORGANIZATIONAL REPRESENTATIVE	PROJECT LEAD
Name: _____	Name: _____
Title: _____	Signature: _____
Signature: _____	Date: _____
Date: _____	

Submit completed applications to Health.CYSHCNgrants@phila.gov by October 5, 2026, at 5:00 p.m. Eastern Time.