A Coordinated Funding Approach
5 years of Impact – 2011 to 2016

6 funding partners*

Awarded through a joint decision-making process

$24.2 Million in Grants

Planning & Coordinating Grants: $1.5 million

Capacity Building $1 million

Program Operations $ 21.6 million

Targeting Four Priority Areas

AGING

SAFETY NET HEALTH & NUTRITION

CRADLE TO CAREER INITIATIVE

HOUSING & HOMELESSNESS

EARLY CHILDHOOD

SAVING

SCHOOL-AGED YOUTH

COORDINATED BY FIVE LEAD AGENCIES

Blueprint for Aging

Washtenaw Housing Alliance

Washtenaw Health Plan & Food Gatherers

Washtenaw Intermediate School District

Success by Six/Great Start

Washtenaw Alliance for Children & Youth

Supporting More than 50 Local Nonprofits

*In January of 2016, St. Joseph Mercy Hospital of Ann Arbor joined as a 7th funding partner with investments beginning in FY2016 – 17.
Understanding the Need
Washtenaw County

In 2011, the funders focused on increasing alignment of their existing investments and target areas. Need still exists in those areas as recent ACS and local data indicates.

<table>
<thead>
<tr>
<th>Category</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Preschool Enrollment</td>
<td>43.6% of 3 &amp; 4 year-olds are <strong>NOT enrolled</strong> in school</td>
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<tr>
<td>Graduation Rate</td>
<td>Only 71.9% for economically disadvantaged (ED) youth, compared to 92.4% for non-ED youth</td>
</tr>
<tr>
<td>Health Insurance</td>
<td>24,650 individuals still <strong>uninsured</strong></td>
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<tr>
<td>Food Insecure</td>
<td>14.7% of residents, or over 51,000 individuals</td>
</tr>
<tr>
<td>Homelessness Services</td>
<td>Over 4,000 individuals experiencing homelessness annually</td>
</tr>
<tr>
<td>Seniors (62+)</td>
<td>58% increase since 2000, or 18,190 new individuals</td>
</tr>
</tbody>
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Planning & Coordinating
Total Investment 2011 - 2016: $1.5 million

Success by Six Great Start Collaborative
Washtenaw Alliance for Children & Youth
Blueprint for Aging
Washtenaw Housing Alliance
Food Gatherers
Washtenaw Health Plan

FUNDING THE COST OF WORKING TOGETHER

- 2012-13: $310,000 investment in 6 agencies
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- 2013-14: $375,000 investment in 6 agencies
- 2014-15: $293,000 investment in 6 agencies
- 2015-16: $279,000 investment in 6 agencies
Systems change requires systems investment. Here are some highlights from Planning & Coordination investments:

- **Success by Six Great Start Collaborative**: Improving success in school and in life for every child by bringing together cross-sector partners in early childhood and school-aged youth serving from birth into adulthood.

- **Washtenaw Alliance for Children & Youth**: Provided leadership in a competitive application process to secure Washtenaw County’s participation in Zero: 2016, a national campaign to end veteran & chronic homelessness by the end of 2016.

- **Washtenaw Housing Alliance**: A focus on benefits advocacy. In their work provided more than 20,000 residents with health coverage as part of the implementation of the Affordable Care Act and Medicaid expansion.

- **Washtenaw Health Plan**: A focus on benefits advocacy. In their work provided more than 20,000 residents with health coverage as part of the implementation of the Affordable Care Act and Medicaid expansion.
In 2014, HIV/AIDS Resource Center applied for support costs to aid the merger of two non-profit agencies to ultimately expand regional reach, reduce administrative costs and further improve service delivery. The merger was finalized in early 2015.
Program Operations
Total Investment 2011 - 2016: $21.7 million

Program Operations is the largest area of investment. Funding is directed to non-profits for service delivery in the focus areas. All grantees are required to provide timely reporting to measure progress toward outcomes.

2012-13:
- $4,285,089 investment
- 40 agencies

2013-14:
- $4,246,754 investment
- 38 agencies

2014-15:
- $4,321,494 investment
- 34 agencies

2015-16:
- $4,460,786 investment
- 34 agencies

Program operations investments are aligned with work in four community priority areas targeting seven community outcomes. Agencies select from among twenty research-based, best-practice program strategies linked to the corresponding community outcome when applying for funding.

Aging
- Increase independent living

Cradle to Career
- Improve school readiness
- Increase high school graduation rate
- Increase youth physical & emotional safety

Housing & Homelessness
- Reduce the number of people experiencing homelessness

Safety Net Health & Nutrition
- Increase access to health services & resources
  - Decrease food insecurity
Below are some programmatic highlights in each of the funding areas from the first 4 years of the Coordinated Funding investments. The final reporting for year 5 will be available in late summer 2016.

<table>
<thead>
<tr>
<th>Description</th>
<th>Number</th>
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<tbody>
<tr>
<td>Low-income children attended licensed daycare and early education facilities through scholarship support</td>
<td>1,729</td>
</tr>
<tr>
<td>Low-income youth made educational gains as a result of participating in a program</td>
<td>2,275</td>
</tr>
<tr>
<td>Low-income patients received subsidized medical and/or dental services</td>
<td>47,370</td>
</tr>
<tr>
<td>Pounds of food distributed by Food Gatherers to food insecure individuals and families</td>
<td>&gt; 20 million</td>
</tr>
<tr>
<td>Low-income households maintained permanent housing for at least 12 months following exit from a program</td>
<td>2,450</td>
</tr>
<tr>
<td>Low-income seniors whose critical need have been reduced</td>
<td>4,323</td>
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</table>
Based on data from the first three years of Coordinated Funding investments, agencies funded in the program operations component reported data showing who was served by age, ethnicity and location in the county (served). When compared to American Community Survey Data from 2009-2013 (actual), we find cases where service providers appear to “over-serve” in a demographic area, showing the success of outreach and other targeted efforts to serve those most in need of services.
Program Operations
Who We Serve

Income of program participants was compared to the Area Median Income (AMI) to confirm that funded agencies are indeed serving the most vulnerable residents in the region. As shown on the scale above, three-quarters of participants fall in the extremely low income category, while 97% of households served were low-income overall. Focused outreach and targeting of programs to those most in need have shown to be effective.

Participant Income

- 74% extremely low-income
  - 3-person household income < $22,750
- 14% very low-income
  - 3-person household income between $22,750-$37,900
- 10% low-income
  - 3-person household income between $37,900-$58,000

Of all program participants, 98% are low-income, meeting coordinated funding’s objective to serve the most vulnerable in the county.
Of all the individuals served by programs funded with Coordinated Funding dollars, almost 60% reside in Ypsilanti. Another 10% reside in the 48103 zip code of west Ann Arbor, based on preliminary data from program participant data reported by funded agencies in the first quarter of 2015.

In the 2016-18 funding cycle, a review of whether applicants provided services in and to residents of these high poverty areas was included in the award determination process.
Evaluating the Model

TCC Group - Philadelphia

In 2012, the TCC Group conducted an independent process evaluation of the Coordinated Funding model funded through a $75,000 grant from the RNR Foundation. The evaluation highlighted a number of strengths, including:

- Overall support for the concept and intent of the model
- Evidence for increased grantee capacity

The evaluation also noted areas for improvement, including:

- Opportunity for outcomes to be more meaningful
- Caution against broadening the model beyond 6 priority areas

Based on these findings, the Coordinated Funders partnered with the Planning & Coordination entities to facilitate outcomes development through an iterative process with the funders and their network of service providers. This work resulted in the seven community-level outcomes that drive our Program Operations investments, and is just one example of the improvements resulting from this evaluation.

In 2015, the next phase of evaluation began with TCC. A Coordinated Funding outcomes evaluation will be conducted by end of 2016.