

Grant Proposal Report to Commission from Task Force

Recommendation: Forward or fund with no corrections

Legal Applicant: Goodwill Industries of
Northern New England

Project Name: Good Health Works
AmeriCorps

Category: ☒ AC Formula -- Standard
☐ AC Formula -- Rural State
☐ AC Competitive
☐ Other Competition

Type: ☐ Planning
☐ Operating
☒ Fixed Amount
☐ Cost Reimbursement
☐ Ed Award Only

Applicant type: ☒ New (no prior AC experience)
☐ Re-compete (# of yrs: __)

Proposed Dates: 8/25/2025 to 8/24/2025
Submitted request is for Yr [1]

Federal Focus Area:

Commission priorities:

Local Share Required in Budget: ☐ Yes ☒ No

Source of Funds detail required: ☒ Yes ☐ No

Requested Resources: Funds and Slots (*indicates sections with calculation errors)

	CNCS		Local Share
Operating			
Member Support			
Indirect (Admin)			
CNCS Award amount	\$546,200	Total Local Share (cash + in-kind)	N/A
% sharing proposed			
% share required			
Cost-per-member proposed	\$ 24,125		
max allowed	\$27,000		

Total AmeriCorps Member Service Years: 20.23

	Slot Types Requested						
	1700	1200	900	675	450	300	Total
Slots With living allowance	16					20	
Living allowance proposed	24,125						
Slots with only ed award							

Program Description (executive summary):

Goodwill Northern New England (Goodwill) proposes to have 36 AmeriCorps members in communities experiencing public health inequities in Maine. AmeriCorps members will expand the capacity of state, county, or local public entities and community-based organizations (CBOs) that are delivering a variety of public health services. At the end of the first program year, the AmeriCorps members will have gained hands-on experience and training in public health leading to post service employment while implementing evidence-based public health interventions to help 18 organizations increase their capacity. In addition, the AmeriCorps members will leverage an additional 100 community volunteers who will be engaged in implementing evidence-based public health interventions. The AmeriCorps investment of \$546,200 will leverage \$160,000 comprised of \$60,000 in public funding and \$100,000 in private funding to support the project.

Service locations: Goodwill Industries of Northern New England

Other than the legal applicant, please list the agencies or organizations that appear to be the major collaborators or partners in this grant. Maine Department of Health and Human Services

Will the applicant place AmeriCorps members with other agencies? ☒ Yes ☐ No

Applicant proposes to deliver services:

☐ Within a single municipality ☐ Within a single County but not covering the entire County
☐ County-wide in a single County ☒ Multiple Counties but not Statewide ☐ Statewide

Performance measures (targets proposed for Year 1; targets for years 2 and 3 set in continuations):

SERVICE ACTIVITIES

OUTPUT: Number of organizations that received capacity building services

Proposed target: 18

OUTCOME: Number of organizations that increase their efficiency, effectiveness, and/or program reach

Proposed target: 14

MEMBER DEVELOPMENT

(measures listed in the RFP not entered and targets were not proposed because CNCS does not allow them)

To be entered in state award if selected nationally for funding.

CAPACITY BUILDING

OUTPUT: Number of hours contributed by volunteers recruited and/or managed by AmeriCorps member

Proposed target: 2000

OUTCOME: Additional service activities

Proposed target: 450

Scoring Detail:

Peer Reviewer Consensus Score. *Assessment of narrative using point distribution from federal agency. Major categories (Program Design, Organizational Capability, Budget and Cost) are dictated by CFR rubric for scoring.*

CATEGORY	Rating	Points
Rationale & Approach/Program Design Section (50%)		
The Community and Need	Weak	4
Logic Model	Weak	4
Evidence of Effectiveness	Weak	4
Funding Priority and Preferences	Adequate	2.25
Member Training	Adequate	4.5
Member Supervision	Adequate	4.5
Member Experience	Adequate	4.5
Commitment to AmeriCorps Identification	Adequate	3.75
Organizational Capability Overall Rating 25%		
Organizational Background and Staffing	Adequate	13.5
Commitment to Diversity, Equity, Inclusion, and Accessibility	Adequate	5.25
Cost Effectiveness and Budget Adequacy 25%		
Member Recruitment	Weak	3.5
Member Retention	Adequate	5.25
Data Collection	Adequate	3.75
Budget Alignment to Program Design	Weak	3
Total		62.25

Task Force Consensus Score. *The Task Force reviewers assess the additional technical criteria that states are directed to consider by the CFR.*

	Quality Rating	Score
Program Alignment		
• Alignment with funding priorities	Strong	25
Program Model		
• Serve communities described in 2522.450(c)	Weak	1.25
• Proposal adds to goal of being programmatically, demographically, and geographically diverse	Adequate	1.875
• Potential for innovation and/or replication	Adequate	1.875
• Strength of evidence program can be sustained over time.	Strong	2.5
Preferences from RFP Announcement		
• From a partnership or coalition whose members represent local organizations working together	Weak	3.75
• Proposal submitted by an organization led by or primarily supporting or recruiting participants from historically marginalized communities and/or people.	Adequate	5.625
Past Performance		
• Can comply with requirements, info consistent with other grant administrator's info, consistent with externally verified past performance	Adequate	1.875
• RECOMPETE ONLY: applicant used member positions		
• RECOMPETE ONLY: used financial resources allocated		
• RECOMPETE ONLY: implemented program effectively		
Financial Plan	Adequate	7.5
Fiscal Systems		
• Capacity of Financial mgt system to comply with fed requirements	Strong	5
• Strength of orgz financial mgt practices as evidenced by audits, etc.	Strong	5
• Strength of sponsor orgs financial status/stability per audit, 990, etc.	Adequate	3.75
Grant Readiness		
Total Task Force Score		78.075
Peer Review Score		62.25
Final Score for Applicant (200 possible)		140.325

Final Assessment of Application:

- ☒ Forward or fund with no corrections/modifications
- ☐ Forward or fund with corrections/modifications
- ☐ Do Not Forward or fund

Referenced Conditions/Corrections

The following proposal issues need to be clarified or, in the case of missing required elements, added.

Peer Reviewer Notes and Appraisal Summary:

Section: Program Design (50 %)

Need

While the application effectively cites the need for more health focused services in rural areas, there is absolutely no quantification of either historical or projected efficacy of the GTO intervention program on actual patients. Data collected since 2022 on patient outcomes in the other public health programs referenced should have been included. Further, the applicant merely claims that 18 site locations have agreed to accept the GTO program without any support letters, only an unattributed quote. The applicant would strengthen the application by addressing these two issues: 1) quantifying the efficiency of GTO on patient outcomes and 2) providing support letters from organizations (i.e. sites that have agreed to use the GTO framework).

Applicant describes the goal is to improve public health outcomes for vulnerable populations. Public health services target substance abuse recovery, access to health care and mental health services, support for youth with Adverse Childhood Experiences (ACE). Need more information describing the evidence based public health interventions and how they improve volunteer management, increase capacity for community partners, develop job skills to make members better prepared for potential careers in public health. Maine has health care workforce shortages, scarcity of public health in rural areas and urban communities attract marginalized, underserved populations including unhoused/homeless, persons in recovery, justice system involved, and immigrants. Support Maine Dept of Health/Human Services to support community-based organizations, partnerships and relationship building for innovation, collaboration, and strengthening health care delivery system. Recruit community volunteers for both basic operations and as appropriate provide mentoring and peer to peer coaching.

The applicant is stating that it is working with vulnerable populations and has identified some of the key indicators of Maine such as age of the residents, unemployment and workforce shortages as well migration rates. The applicant, however, fails to give specifics of the vulnerable population that it is serving, to show need. Additionally, the applicant does not show the amount or type of services given by current agencies that are currently working with this population in the hub and the need for similar services in rural areas. This would show a baseline and the impact of this initiative. The applicant is also focusing on rural communities and have identified that they conduct listening sessions to identify the unique needs of this population. It is unclear who was involved with this listening session and how participants were informed of this session. Additionally, the applicant has mentioned that current service hubs are in urban areas where they are dealing with the underserved population such as those in recovery or immigrants. The applicant does not mention how it will specifically identify, redirect and impact those individuals who cannot be served in the current service hub. The applicant does identify how it will engage service providers and will identify host sites but neglects to make the connection to its existing data to ensure host sites are accessible to the population it is intended to serve. This is a new application with an existing model that will be used to have an impact on public health intentions. The applicant is very general of the roles and responsibilities of community volunteers, and it would help to ensure that this is clearly defined to ensure outcomes are met.

Theory of Change, Evidence of Effectiveness, Logic Model

While inputs including number of sites, volunteers and specific trainings are identified, the core activities, including duration of intervention, dosage of intervention and target population are missing, along with measurable and meaningful outputs for target population. Additionally, there are multiple references to 16 stipended AmeriCorps volunteers which aligns with only the 5% of the MSYs by objective. This is patently unclear and reinforces the point that there is questionable planning behind this application. Finally, there is a mention of 415 other activities to be conducted by volunteers without any explanation. Such an untethered comment again raises serious questions about the lack of planning effort behind this grant application. This applicant would garner more points by identifying

and quantifying core activities, including duration of intervention, dosage of intervention and target population are missing as are measurable and meaningful outputs for target population. Creating a list of tasks by MSY and objective would help explain where the 52 AmeriCorps volunteers will be resourced. Explaining the purpose and connection to delivering the GTO framework arrayed against 415 other activities may also help secure more points.

Applicant describes the goal is to improve public health outcomes for vulnerable populations. Public health services target substance abuse recovery, access to health care and mental health services, support for youth with Adverse Childhood Experiences (ACE). Need more information describing the evidence based public health interventions and how they improve volunteer management, increase capacity for community partners, develop job skills to make members better prepared for potential careers in public health. Maine has health care workforce shortages, scarcity of public health in rural areas and urban communities attract marginalized, underserved populations including unhoused/homeless, persons in recovery, justice system involved, and immigrants. Support Maine Dept of Health/Human Services to support community-based organizations, partnerships and relationship building for innovation, collaboration, and strengthening health care delivery system. Recruit community volunteers for both basic operations and as appropriate provide mentoring and peer to peer coaching.

The applicant has named 18 public health host sites in its inputs; however, only 14 of those sites will be provided with training and support so clarification would be helpful on what is occurring at the other 4 sites. The applicant has also neglected to elaborate more on the target population in their logic model as well as neglected to expand on the delivery of services outside of the host sites which would mitigate one of the barriers to the rural population to ensure accessibility which is a main issue for the rural population. The number of members is clearly defined as 36 members that will be trained on the Getting to Outcomes 10 steps for 1-3 hours per week for each member, but it is not clear for how long. It is assumed there are prescribed timeline is considering this is evidenced based model. The applicant is also very specific in regard to the dosages for training that lead to certification in either Recovery Coach, Emerging Youth Development Leaders Fellowship or Men Health Community Worker but again lacks duration. Also, it is unclear how the members are recruited and if a baseline is established for transfer of learning. The applicant has a personalized training plan but does not know how this plan is developed and evaluated. The applicant has also identified long-term outcomes such as increased economic opportunity and stability but is not clear how this is defined and how this is quantified as in percentages. Without the baseline of participants, it is hard to show the impact such as increased knowledge or skills. Also, some of the short-term outcomes need to be quantified to be better evaluated.

Evidence of Effectiveness

The applicant does not provide adequate quantification of GTO framework delivery outcomes and why they are preferable to other intervention programs. The application merely references a study and its authors, not its content on this critical point. Further, the applicant simply states as support for GTO efficacy, a retention number without providing a total number. This providing the numerator (number of volunteers retained) but withholding the denominator (total number of volunteers) is weak at best and non-transparent at worst. This application would do well to: 1) quote relevant content from studies it references; 2) provide complete statistics and; 3) quantify how AmeriCorps members will add significantly to existing community efforts. Getting to Outcomes (GTO) has been operational and researched for 20+ years, using evidence based processes, evaluating impacts including impact on capacity building, program fidelity, accountability, replication. If the

application gave more specifics about the evidence based process, this reviewer would have more confidence in their ability. GTO used for programs/services for positive youth development, substance abuse, teen pregnancy, sexual assault prevention, emergency preparedness, homeless veterans. GTO demonstrated to increased individual and organizational capacity and can be used for community health programs, behavioral health, prevention activities and evaluating program/service impacts toward sustainability. Goodwill managed public health AmeriCorps program in 2022, using the GTO model showing host site improvement impact and efficiency. They say 18 of 36 members are still employed in health care but don't give any specifics such as who the employers are, the work they're doing and wage.

The applicant does not specify if these programs that they are using as host sites are in rural areas which is their targeted population as well as have not established outcomes in relations to the ten steps associated with the GTO model to show its implementation and impact on the target population. For instance, one of the steps step 1 in identifying the need has not been completed for this area except for a listening session that has minimal information on how and who it was done on. Additionally, another step identifies best practices and ensures the fit of the structure implemented is appropriate for the target community and organization. This is not identified in the theory of change or logic model. There is a lack of this applicant to show the impact of the actual target population and how some of the activities that will be measured which are not shown in the logic model.

Funding Priority

Requesting more than half a million dollars and meeting only one Americorps funding priority and two Commission preferences out of a combined total of 13 criteria, yields a 23% match rate. A strong application would identify other priorities, such as Healthy Futures and explain qualitatively and quantitatively how the grant proposal connects to them.

Goodwill "Good Healthworks America" (GWA) supported Capacity Building for National Service and Public Health, and Workforce Development for Volunteer Maine. AmeriCorps members get hands on experience and training, learning new skills which can be used in future public health employment. The applicant aligns with the capacity building Focus area for national service and the public health volunteer Maine. The applicant also aligns with Maines Workforce development priority. The applicant is showing how they will increase the capacity of members to assist public health organizations who then can further assist the community. The applicant is also showing that they are indirectly impacting the workforce and this would be better shown if they had specific outcomes.

Member Training

The application identified several relevant certifications that will be offered and demonstrated sufficiently that they are relevant for the proposed project as well as future employment.

Application information shows members get orientation on day 1 including AmeriCorps history, program policies, benefits, time management, reporting requirements and specific host site training. Supervisors and members develop a "Member Work Plan" showing duties, long term projects, trainings and professional development goals. Ongoing training in GTO for planning, implementation, evaluations, volunteer management, public health interventions. Receive technical assistance in evidence based public health and foundational training for public health AmeriCorps.

Members receive a personalized learning plan that is created but is not revealed how this is assessed and revised if necessary or shows transfer of learning skills. There is, however, ongoing training in the GTO model as well as staff identified to assist in this endeavor such as the AmeriCorps on Evidenced Based Public Health that will support the fidelity of the model. The training tracks are identified in the logic model however the applicant neglects to show thresholds or quantify increases in skill development. It however shows the amount of hours

that members are trained in and the amount of members to be trained. There is also additional evidence to support that members participate in career development training to help support member development including specific certification pathways that can be taken in various areas.

Member Supervision

The application offers no description of AmeriCorps training for the site location supervisors. Equally concerning is the proposal for having only one AmeriCorps program coordinator in direct line for responding to up to 18 site location staff; 52 AmeriCorps volunteers; and another up to 100 community volunteers is too short-staffed. This individual will be inundated with questions and will not have sufficient time to respond, even with supervisors who are already Goodwill employees with strong experience. This resourcing and reporting arrangement needs to be completely reworked in order to garner sufficient points

Application describes daily supervision from host site supervisors; one for intervention and another for professional development. Bi-weekly check-ins with AmeriCorps program coordinator to assess progress, challenges and support. Host site supervisors get orientation about AmeriCorps regulation, compliance, activities and expectations, handbook, branding resources training in best practices, managing evidence based services, member support & compliance. Supervisors supported by Goodwill's workforce services model, integrating education and employment.

The applicant is implementing a dual supervision model with supervisor overseeing the intervention and as it mentor focusing on professional development. There is plan for bi weekly check ins and there is an extensive orientation that outlines regulations, prohibited activities and expectations. It would be helpful if this as also measured to show transfer of learning and understanding and any corrective action or feedback plans that support learning and promote growth when there is a concern. The applicant is also using existing best practices from its existing partner organizations to assist with supervision and training. Additionally, some of these outcomes for growth are in the mid term outcomes of the logic model but not quantified to show percentages or progress.

Member Experience

The application sufficiently discusses recruitment of talent that represents the community and offers experience in this area, noting 78% of hires in similar programs were local. It also articulates commitment to provide resources, including alumni.

Goodwill tries to recruit members: from local areas with knowledge of community and population, diverse backgrounds, talents and capabilities. Since 2022 nearly 80% of members in Public Health recruited from geographic and demographic communities served. Members participate in AC initiatives including Service Year Alliance/AC Building and Belonging, ongoing service project and training. Connect with AC Alumni on "National Days of Service" and calls to cohorts to discuss success, challenges.

It is unclear how members will be recruited and how they will reflect the community that they serve which is rural. There is no clear plan or strategy for recruitment even though the applicant has a history of doing such as they mentioned that "78.8% of AmeriCorps members in the prior PHA program were recruited from the geographic and demographic communities they served". It would be helpful to outline and build on what strategies were used to show that a strategic effort was made to ensure this occurred. Also as part of its logic model this can be an outcome that can be quantified and evaluated. The applicant has also provided additional opportunities for its members to connect with other members and alumni such as national service days where all members connected and regular cohort calls for reflection. It would also be helpful to outline how this reflection is used and learning occurs as result of this. There are also opportunities to ensure that diversity, equity and including are incorporated as Goodwill as a DEI Committee to assist with inclusion efforts and

consistently gathers feedback on its efforts of supporting staff and ensuring they feel safe. Also staff is trained on Recovery ready and disability inclusion.
Commitment to AmeriCorps Identification

Organizational Capability.

Organizational Background and Staffing

The applicant sufficiently describes its 16 years of experience with AmeriCorps programs, noting its strong experience with AmeriCorps leadership roles embedded in the Goodwill organization. The organizational chart is strong with key individuals and their years of experience identified. However, this application would have garnered more points if it added an additional resource to manage this proposed program with one coordinator responding to seemingly 170 individuals in the field (18 sites, assume one representative per site), 52 AmeriCorps volunteers and 100 community volunteers. Even at half that number, it is too many for a single coordinator who is not even identified as full-time – a requirement of this program. Finally, this application does not mention any internal documentation – policies or financial accounting systems dedicated to ensuring compliance with federal grant requirements.

Goodwill has managed AmeriCorps grants for 16 years in Maine and NH including “annual funding” from US Dept of Labor and AmeriCorps funding since 2022. Key organizational structure: AmeriCorps Director, Senior Program Manager, Program Coordinator, Life Navigator, GWA leader, member supervisors, program staff. Goodwill infrastructure supports IT, Finance, HR, and Leadership teams. Quality Assurance monitors compliance, program regulations, audits and systems. Goodwill has history of volunteer management.

The applicant has submitted an organization chart that includes both the positions and names of the individuals who will lead, provide oversight, manage finances, and monitor the program. The funded positions and time is also included in this description. The organization has had a history of implementing programs, with AmeriCorps at least 16 years and has focused on workforce development which ties into the mission and strategic goals. The applicant has defined their internal structure to show roles and responsibilities, as well as the infrastructural support at Goodwill. The applicant has also included a AmeriCorps needs assessment that shows they have met the readiness criteria in all areas except if employee performance appraisals were done annually. Additionally the program has included a start up plan and timeline with the specific activity outlined, responsible parties identified and completion date. Some of these activities occurred prior to this application as were necessary to have internal structures in place. The applicant has also outlined their programmatic and administrative structure to show their internal structure. The applicant did not include specific information regarding specifics of operating a federally funded program such as targets achieved, duration etc. The applicant has briefly demonstrated how they have engaged volunteers previously through their programs, as well as the amount of volunteers that they have worked with in their various programs.

Data Collection

The application identifies sufficient and reliable data collection methods and uses.

Applicant references having a system in place for monthly reports, data collection training, and electronic timesheet process. The applicant indicates there is a consultant to train staff on data collection, interpretation. Applicant references using an evidence-based model to collect and analyze data but doesn't provide sufficient info on what the specific evidence based models are and whether the consultant or staff is responsible for evaluation. Applicant could have provided names types of software used and database management.

The applicant has budgeted for an external; evaluation to assist with their program. Additionally there are budget allocations that support the interventions and measurements needed to evaluate the program,, There is data training and support for the program as well as dedicated staff for the website to ensure data management and collection fidelity. There are ample opportunities for feedback as there are monthly check ins and activity tracking. The data collection is also implemented in the timeline.

Budget Alignment to Program Design

The requested funding amount for 52 AmeriCorps positions meets the requirement of the program, however, local funds are not described as secured. Finally, the Face Sheet does not include the \$160,000 in local funds.

Applicant references having a system in place for monthly reports, data collection training, and electronic timesheet process. Applicant indicates there is a consultant to train staff on data collection, interpretation. Applicant references using a evidence based model to collect and analyze data but doesn't provide sufficient info on what the specific evidence based models are and whether the consultant or staff is responsible for evaluation.

The applicant has a cost per MSY of \$26,999.51 and total MSY of 20.23. There is a required match of 24% from its other host sites with \$60,00 being public funding an \$100,000 being private. The grant is seeking \$546,200 which is 20.23 multiple day \$27,000 a little over the needed \$546,189.77 total budget required,

SUMMARY APPRAISAL 1. Having reviewed all elements of the proposal provided to you, do you think that this applicant would be effective in this category of grant? Yes (X) No ()

Task Force Review Notes and Appraisal Summary:

Proposal Alignment and Program Model

Meets significant need; multiple sites both rural & urban; many years of experience with AmeriCorps; unsure of degree of community engagement in program design

Program addresses two VM priorities: Public Health and Workforce Development •While program may serve some in disadvantaged communities, it is not totally focused on them. As a result, just gave the program partial credit. •Does add to program diversity due to its geographic extent, potentially serving many areas of the state. •Program likely could be replicated in other areas; I don't see it, however, as particularly innovative since its effectively a re-initiation of a program previously run by GWNEE. •Goodwill has significant experience in workforce development, although less so in public health, and has run AC programs frequently and successfully •Given that the program was operated previously under a separate grant, relationships are in place and it appears firm partner commitments have been arranged for the coming grant year. •The organization has substantial financial resources available; although it has operated at a deficit for the last few years, it has more than enough financial strength to operate and maintain this program. •GWNNE has a significant staff; although

it appears that some of those directly involved in supervision and management of this program have not been long-term employees. Given the size of its staff, the agency should have no problem adjusting if staff changes take place •GWNNE indicates that most of its volunteer experience has come through its AmeriCorps programs. It has implemented many, but not all, volunteer best practices.

Past Performance

Goodwill has long history of working with individuals with special needs, understands populations with special needs; has many rural sites, but also some very urban ones

GWNNE has had significant experience with AmeriCorps programs and the federal and local requirements associated with such grants •Commitments seem to be in place for the local share •I don't believe information was submitted related to the success of prior grants, although there are references in the submission to having successfully run programs in the past with good outcomes for member retention •As noted, applicant does have experience working with volunteers although not all best practices have been implemented

While the program is designed to work with many partners, it is not from a partnership or coalition. Given the broad range of partners, I've given the proposal partial credit.

Financial Plan

The applicant has significant fiscal resources available, is familiar with federal requirements, and, although operating at a deficit for the last several years, has a strong available fund balance.

Well established organization.

Fiscal Systems

Source of match is well identified and should be easily attainable.

This is a fixed amount grant and the sources of local funds are identified and stated to be firm commitments.

Grant Readiness

Names intended partners (of which there are many) but doesn't describe their involvement in program design.

The start-up plan looks good and the organization has the finances and staff to implement.