



**Proposal for RFP #
Community Development Division
Building Human Capital: Early Childhood Funding**

Submit application to CDDapplications@cityofmadison.com

**Deadline: 12:00 pm (noon) CST on Wednesday, August 16, 2023
PROPOSALS RECEIVED AFTER 12:00 NOON WILL NOT BE ACCEPTED.**

Directions

Responses to this RFP should be complete and comprehensive but succinct. The responses to the questions within each of first three (3) sections below can be submitted in Word or a PDF. The total number of pages for the first three sections should not exceed ten (10). Any additional pages over ten will not be considered in the review. Disclosure pages, if needed, (see section 3 below) will not count toward the total page limit. Font should be no less than 11 pt. and margins should be no smaller than .5 in. Attachments or documents not specifically required should not be submitted.

NOTE: If you are proposing to include multiple methods of services or programs, for example, on-site child care programming and separately provide consultation services for other programs, two proposals (each with a separate budget) should be submitted separately. If you are proposing to do the same service at multiple locations, for example, child care at two different locations, one proposal may be submitted. The proposal should clearly delineate details for each location. Please contact Monty Marsh (mmarsh@cityofmadison.com) for any questions about clarifications regarding joint or singular proposals. Additionally, please contact Monty Marsh if you need assistance with translation services.

1. Applicant

Include the following information on the first page of the proposal:

The Rainbow Project, Inc. Child & Family Counseling and Resource Clinic

Sharyl Kato

831 E. Washington Ave.

Madison, WI 53703

608.255.7356 ext. 311

skato@therainbowproject.net

EIN: 39-1422626

Legal Status: Private Not-For-Profit 501 (c)

Yes, Rainbow Project staff will be available to present for 3-5 minutes on September 14th @ 2:30 pm for a virtual meeting with the Early Childhood Care and Education Committee.

2. Required Proposal Narrative

Please respond to each question individually and fully. There is no word count limit for each question. Applicants have discretion regarding the use of space within the ten pages. However, the entire proposal should not exceed ten (10) pages.

Organizational Capacity

1. Please describe your organization. Include any relevant information about the mission, vision, values, and history of the organization as it relates to the services or programming you are proposing to provide.

The Rainbow Project (RP) staff members, Board of Directors, Professional Resource Network, Stewards of the Yellow Brick Road Faculty, volunteers, residents/ interns, are very proud, honored, excited & grateful for this opportunity to submit a proposal for Building Capitol: Early Childhood Program.

The Rainbow Project Child & Family Counseling & Resource Clinic is “An agency built on a foundation of hope, courage, trust, wisdom, determination, teamwork, and compassion”.

The Rainbow Project Vision: Create a safe, healthy, and nurturing world for children and families.

The Rainbow Project Mission: Provide restorative healing and hope for young children and their families who have experienced trauma, helping them build a foundation for the mastery of life-sustaining skills.

The Rainbow Project Values:

Respect-Uphold a philosophy of interactions with others, internally, with children and families we work with, colleagues and the community

Growth-Desire to inspire, support, and foster our own personal and professional growth as well as others, children and families, team members, colleagues, and the community

Compassion-Recognition, empathy, and support for individual differences – including but not limited to life experiences, culture backgrounds & abilities

History of precipitating factors built upon collaboration and fueling the beginning of Rainbow Project Early Childhood Care & Education (ECCE) Expertise and Support: Once upon a time, there was an early childhood preschool, on Madison's east side, located only a few blocks from the shelter residence (now known as DAIS), where victims of domestic violence & their children stayed, for up to a month. The preschool had a service agreement with the shelter to enroll young children, residing at the shelter. Preschool teachers, at the time, realized that the usual classroom curricula of activities were not working for the children from the shelter.

Advocates from the domestic violence shelter noticed that young boys at the shelter, playing in the toy housekeeping corner, would state, "I'm the dad, so I get to hit you" to a young girl. Or advocates would observe a 3-year-old trying to strangle another child, replicating an actual domestic violence incident the child witnessed, at home, that weekend. In the meantime, Dane Co. 4C's (County Coordinated Childcare Center) had completed a report that noted at least 15-20% of children in each preschool classroom social emotional developmental/behavioral needs beyond the norm and requiring specialized attention.

Services & programming to address social emotional development delays, or behavioral health concerns were not available for young children. Special needs in the schools were limited to learning, speech, or developmental/physical disabilities. And so, the preschool submitted a grant proposal to the Wisconsin Council on Criminal Justice (WCCJ) to begin an innovative, early intervention/prevention program, to address the needs of young children (infants – 6 years) and their families exposed to child abuse, neglect, domestic violence & child sexual abuse, mental/physical illness, grief/loss, parent-child attachment challenges and to help prevent more future severe problems from occurring in the future.

This was the first prevention program funded by WCCJ. This source generally funded bricks & mortar to build prisons, or services for adolescents/adults in corrections. The grant was approved & in 1980, Sharyl Kato, one of the previously involved preschool teachers, was hired as director.

The start-up grant was awarded for 2 years, and RP began August 15, 1980. The 1st day the RP agency opened, the agency was full to capacity and had 35 families on the waiting list, demonstrating the significant need for behavioral & mental health services for young children & their families. One of our primary community referral sources was ECCE centers including in- home family daycare programs. RP staff would receive 5, 10, 15 phone calls per day from childcare staff, asking for help in dealing with challenging children/caregivers. We have always worked with the early childhood care/education (ECCE)programs of the children already ENROLLED in the RP clinic. But we were not able to readily respond to consultation calls we were receiving. This is the time when we submitted a proposal to the City of Madison for CORE funding (1989). We recently responded to a request from United Way of Dane Co. to provide CORE service in early childhood programs outside the City of Madison. We also recently, in response to requests, have sought and received time-limited grant funding for CORE services for 4K classrooms & MMSD elementary schools.

For the past 43 years, highly qualified & experienced Rainbow Project staff have provided a broad range of specialized inclusive trauma informed, evidence-based prevention, treatment, and crisis services for a diverse population of young children (ages 0-11) and their families. Trauma Includes child abuse and neglect, child sexual abuse, community violence, domestic violence, serious accidents, grief, loss, separation, and natural disasters.

Rainbow Project does not work with children in isolation, RP intervention and treatment services are provided for individuals, dyads (child/parent; couples etc.), families, or groups (of children, parents/grandparents, families, etc.). RP clinicians provide services via home visits, in-person office visits, and telehealth. In addition to providing services for dyadic caregiver/infant/toddler/child sessions , Rainbow also provides group parenting support and education. RP clinicians are well-versed in working with children and adults with mental, behavioral health, and trauma histories. The purpose of dyadic work is to strengthen the parent-child relationship, attachment, and social emotional development.

2. Please describe in detail your organization's experience and abilities in successfully providing early childhood services, technical assistance, or programming. Include current work that is the same or similar to the work you are proposing to provide and any outcomes that can be highlighted from this work. Include detailed information about the demographics of individuals currently being served (number of individuals, age, race

and ethnicity, income levels, geographic area of the City, and any other relevant demographic information).

Since RP began, in 1980, RP staff have provided evidence based, trauma -focused services (prevention, early intervention, short & long-term behavioral health trauma recovery services for young children & their families who are at risk or have experienced trauma. RP staff have always worked with the ECCE centers/programs & schools that the children/families we served, attended. The comprehensive, holistic RP service model has always known the values & essential necessity of this partnership in helping children adjust in the classroom setting & to promote and maximize growth for children personally & socially as well as build support for their families. (Allies in the Classroom, NAEYC Building capacity for the ECCE community is also essential in supporting dedicated staff.

Currently the RP has 3 distinctive programs that work specifically with Early Childhood Education and Care Centers and their staff throughout the City of Madison, and Dane County from Preschool to KG:

A. Consultation, Onsite Observation, Resources, & Education (CORE) Program.

Observation and consultation Examples include:

- Helping children, caregivers, & teachers prepare for transitions from pre-school to KG School Readiness
- Helping Parents/caregivers help their children “Catch Up” in Development Post-COVID
- Helping young children with Grief & Loss
- Understanding regulations of emotions and behavior for young children at risk, or who have experienced stress
- Understanding the development stages of young child Self-Concept & Cultural Identity
- Helping children experiencing anxiety and depression
- Building Resiliency & Protective factors for young children. RP designated clinicians include (3) licensed bilingual/bicultural Spanish speaking therapists.

In addition to providing onsite classroom observation, an added aspect of the component proposed, includes RP staff designated as CORE Specialists who will be listed as collaborators with 4C, MMSD Parent Academy, neighborhood and community centers, Family Cafes, Fairs, and other resources directly from City Childcare Specialists and Early Childhood Education/Childcare & Family in-home Programs in the city of Madison. Coordination will occur to respond to City accredited early childhood programs.

B. Virtual Reflective Practice Support Groups. RP provided (1) group in 2021, (1) group in 2022, and (2) groups in 2023, with a total of 42 staff/directors participants from City of Madison accredited Early Childhood Education and Care Centers. Goals and positive outcomes from the groups include the ability for staff to be more aware of and to process feelings in the moment that affect thoughts and behaviors when working with children/youth and/or their parents/caregivers.

C. Emotion Coaching Parenting Group Program. RP has delivered Emotion Coaching Parenting groups for caregivers of young children primarily referred from Early Childcare and Education Programs in the Madison/Dane Co communities. RP clinicians provide at least two (10 wk.) series groups twice a year, since 2015, helping to nurture the parent/child relationship for over 60 families in our community. Includes single parents, foster parents, adoptive parents.

We have experienced consistent success in serving a wide and diverse population of children and families. The only community we have not had consistent connections with are the Hmong children and families. We have experienced a significant increase in Spanish speaking children and families. RP’s (3) full-time bilingual Spanish speaking therapists who are doing amazing work, not only with individual children & families but also with children and adult groups as well as community training/ outreach to families through LaMovida radio, newsletters, LaSup & other community venues.

3. Please describe the staff with direct responsibilities for this programming or service including required qualifications, experience, and training. Include if the staff are demographically representative of the population served.

Agency-wide, the children & families we served in 2022 included 71% non-white population and 67% of clinical staff are non-white. Our staff includes a majority persons of color, including African American, Asian and Latina. We employ (3) full time bilingual, bi-cultural Spanish speaking therapists. Our team works successfully with the diverse populations that we serve. Several RP staff are certified in evidence-based modalities focusing on young children including with UW Capstone Infant Mental Health Institute, evidence-based Trauma Focused Cognitive Behavioral Treatment, Psychological First Aid, Child Parent Psychotherapy. Other approaches RP clinicians are trained in include Theraplay, an evidence-based approach RP has utilized, since 1980. RP clinicians have a strong background in work as early childhood care/educators themselves as well as having rich clinical background.

Depending upon specific requests, if involving grief/loss, exposure to grief/loss, infancy, we match the RP therapist with the best fit. We have experienced consistent success in serving a wide and diverse population of children and families. The only community we have not had consistent connections with are the Hmong children and families. We have experienced a significant increase in Spanish speaking children and families. RP's (3) full-time bilingual Spanish speaking therapists who are doing amazing work, not only with individual children & families but also with children and adult groups as well as training/ outreach to families through LaMovida radio, LaSup & other community venues.

4. Please describe your organization's relationships to the community you serve and the broader early childhood community in Madison. Include in your answer how you solicit feedback and adapt your work to meet the needs of your community and specific examples of successful partnerships with various service providers. Include any qualitative or quantitative data sources used to inform these decisions.

Rainbow Project was born out of collaboration with DAIS, RESPITE, 4C's, and Red Caboose Early Childhood Program. RP staff have served on several Early Childhood Councils, Born Learning Delegations, and other conferences (local, state, national & international) providing training, technical assistance & consultation for a broad spectrum of audiences, related to the population of young children and families we serve, regarding a full spectrum of services including specialized prevention, early intervention, longer term trauma treatment & crisis emergency services. RP staff also participate both as leaders and as participants in City sponsored Community Conversations and Listening Sessions.

Rainbow Project has consistently provided Community Education training presentations at the local, state, national, and international levels. RP staff distribute yearly consumer participation surveys for feedback as well as feedback on ALL community education training presentations provided. We have distributed stakeholder & consumer feedback surveys and colleague feedback from teachers, foster parents, consumers, social workers, guardian ad litem. An example includes (3) presentations for (75) detectives with the Madison Police Dept. in order that they can better interview, observe & interact with younger trauma victims.

RP clinicians provide outreach through media, written, radio & television to provide information regarding young children and families exposed to trauma experiences and other topics such as Infant Mental Health. Through our RP academic program, we are supervising 5-6 graduate doctoral interns, and residents at any given time. RP provides at least (28) UW Medical Students in 8-week periods to be exposed to trauma services and the impact trauma has on primary health care for children and families.

5. Please describe how your organization provides programming and services that have an impact on poverty, racial equity, and social justice.

Overall, as a result of providing appropriate, effective trauma informed services, for both children and adults and families, individuals will be more successful in areas of development, regulation of sustaining employment, housing, better parenting, self-care, improved physical health and because our full spectrum of mental health services includes culturally relevant, proficient content, strong confidence and, self-concept and identity are developed as well as cultural history of trauma experiences learned and understand to help children and adults understand their own history of trauma.

In 2022, income of children/families we worked with falling below the poverty level totaled 81%, In addition, symptoms of trauma for victims include poor academic performance, challenges in mental and behavioral health, challenging securing and sustaining employment, healthy relationships. And 66% of children and families RP staff worked with were non-white. RP staff reflect the population we work with 58% RP staff non-white. In the past 43 years, RP staff have

helped 1st, 2nd & 3rd generations impacted by trauma, breaking the cycle of abuse, neglect, intimate partner violence, community violence, child sexual, exposure to community violence, serious accidents, drug endangered children, natural disasters, loss/separation. With the onset of COVID, the American Academy of Pediatrics, the American Psychological Assn. & the American Professional Society on the Abuse of Children published reports on the negative impact of racism for both children and adults in areas of mental and physical health. This is also at a time, with COVID, when we observed increases in depression, anxiety, suicide ideation, substance abuse, domestic violence, sexual abuse & poverty. The RP waiting list has doubled and tripled during and post COVID.

Social justice and advocacy are another important part of the RP mission and purpose. We as an organization have been intentionally committed to providing culturally inclusive services for those most disenfranchised. As a state licensed mental health clinic since 1984, we also provide more advocacy and case management services than other mental health agencies do.

Proposed Programs/Services

1. Which method(s) of programming/services are you proposing (see RFP for a description of each)?
 - a. Increase availability and access to high-quality care for children especially those who face multiple barriers to success (i.e. children living in poverty or facing housing insecurity, children with special needs, English language learners, etc.)
 - b. Create additional capacity for children ages birth to five in regulated care through individual coaching, training, and technical assistance
 - c. **Provision of training and coaching for social emotional practices including Wisconsin Pyramid Model and related Wisconsin Registry approved trainings that focus on social emotional development**
 - d. Support for regulated childcare offerings outside of traditional care options including but not limited to evening and weekend care, drop-in care, care for highly mobile populations, and care that is representative of the diverse communities of the City.

RP is proposing programming as described in section C. through the following programs:

C – 1: Consultation, Onsite Observation, Resources, & Education (CORE) Program. CORE is designed to provide support and mental health consultation for early childhood staff as well as caregivers. RP will provide on-site observation and consultation for individual children that may be exhibiting concerning behaviors, as well as entire classrooms. Consultation services are collaborative and may involve educators, families, and program directors to develop concrete strategies for how to best help the children in their programs with their social-emotional needs; readiness for Kindergarten from Preschool & Helping Preschoolers Adapt & Catch up from post COVID delays.

C-2: Virtual Reflective Practice Groups for Early Childhood Staff. Reflective practice is the ability to reflect on and process real life experiences at work and engage in a process of continuous learning. Reflection is personal and differs between people. The process of reflecting empowers participants to discover solutions that support effective and continued work, reduces stress and

C-3: Emotion Coaching & Other culturally proficient parenting programs including Conscious Discipline for parents/caregivers of Children in City of Madison Early Childhood Centers. Emotion Coaching, a 10-week evidence-based educational series informed by the research of Drs. John and Julie Gottman. The program offers a blended learning design that teaches caregivers skills to identify their child's emotions, including how to talk about them and coach the child in managing their feelings across time using a five-step method. Emotion Coaching course description: Feelings influence what we think and do. They also impact how we relate to others. Have you ever wondered how they shape the way you parent? Come to Emotion Coaching to increase awareness of emotions in your life as well as your child's. Expect to increase awareness and reveal new ideas for setting limits and problem solving with your child. Join other parents and caregivers to learn strategies that will make a difference now and promote a nurturing relationship between you and your child for years to come.

C-4:

RP Clinicians Facilitating & co-facilitating (2) 6–8-week groups, onsite Nurturing Groups (evidence-based Theraplay curricula) for children promoting social & emotional development, emotional/behavioral regulation, attachment, belonging, trust, and positive social skills for young children.

2. Please describe the specific programming or services proposed. Include a detailed description of:

a. The specific methods for contributing to one or more of the goals stated in the RFP section 1.4 **With the onset of COVID & post COVID reports/observations, teacher & parent/caregiver feedback surveys & demand for Rainbow services, as well as classroom observations indicate expanded concerns for delays in social/emotional development for children in early childhood programs. Similar symptoms are observed locally, statewide & nationally. Outcomes: 90% successful from parents/caregivers/early childhood education and childcare providers. Comments from caregivers/teachers include: "Whatever you are doing, keep doing it. My child has never been more comfortable with himself". ; " I know this child is chronologically 4 years old but socially & emotionally appears to be at 18 months old. The activities you have recommended, modelled & we have incorporated in the classroom have made a significant difference in their overall development but especially in their behavior & ability to relate to both children and adults."**

b. A clear explanation of the evidence, research or documentation of promising practice that supports the programming or service proposed

Dr. Robert Anda (Adverse Childhood Events - ACE lead researcher) has revealed that despite the negative impact of ACE incidents on children and early childhood brain development & neurobiology what has been discovered is that exposure to consistent, persistent environments of attunement, nurturing & positive interactions can change brain development and neurobiology. Dr. Seth Pollak, UW Madison Psychology & Psychiatry Dept. Research indicates nurturing (fuel) experiences facilitating attachment in infant mental health studies, is not lost as children age.

3. Where will services be provided and to whom? Include detailed information about the demographics of individuals that will be served (number of individuals, age, race and ethnicity, income levels, geographic area of the city, and any other relevant demographic information).

Primary RP CORE services (classroom observations, staff & parent consultation, technical assistance & training presentations) will be provided on-site of each participating early childhood childcare or education programs, services can be provided virtually when appropriate. An All-Center CORE training presentation can be provided in-person at the Rainbow Project or virtually.

RP proposes (3) Virtual Reflective Practice Groups a year -Spring, Summer, and Fall. Groups can be provided for City Accredited Early Childcare Center (1) Staff, (2) Directors, and (3) Spanish Speaking staff/directors. Groups are for 10 consecutive weeks, @ 1.5 hours per group, with 10 participants for each group. Pre and Post surveys are completed to measure outcomes gained.

RP proposes (2) Emotion Coaching/ or Conscious Discipline Groups a year – Spring and Fall (RP would be open to facilitating 3 groups a year if there is a high demand). Groups will be provided for caregivers of children enrolled in City accredited Early Childhood Centers. Groups will be conducted with a hybrid method, some virtual, and some in-person at the Rainbow Project (decided as a group). Groups are for 10 consecutive weeks, @ 2 hours per group, with up to 20 participants per group. When held in-person at the Rainbow Project, childcare and dinner for children/caregivers is provided. RP would like to offer (1) group for Spanish speaking caregivers, (1) group for African American caregivers.

4. Please describe how you will maintain a commitment to equity as demonstrated by the promotion of diversity (racial, socio-economic, ability, etc.) at all levels of programming or services.

On August 15, 2023, The Rainbow Project organization celebrated 43 years of service in the Madison/Dane County community, serving over 18,500 young children and 18,500 adult caregivers/families. We have been devoted stewards of public dollars and have been intentionally dedicated to inclusivity, social justice and providing cultural equity & humility as an organization and as service providers. .

5. Please describe your timeline for implementing services. If you are proposing direct provision of care, describe any relevant hours of service as well as a timeline for any assessment within the program.

Yes, we will begin implementing services as soon as we are notified of proposal funding decisions. RP CORE Program services begin by meeting regularly in partnership with City Childcare staff to coordinate outreach, highlighting trends. RP CORE Orientation packets & protocol are ready to be distributed in person outlining scope of CORE activities with both New to CORE centers/programs as well as centers we have worked with in the past. As the RP Referral Coordinator begins to receive requests from centers, we internally designate the RP staff assigned to specific requests. The strength of this proposal is the strong partnership between the City Childcare Specialists and the Rainbow Project staff to coordinate & collaborate to provide the most vital and critical focus for now and the future and that is to strengthen and raise to "skies the limit" the Early Childhood Care &

Education system to the top!

6. Applicants are encouraged to collaborate with agencies to ensure that services are not duplicated. If the proposal is a collaboration of multiple agencies, please describe the following:
 - a. Why does collaboration enhance this proposal?
 - b. What formal agreements are/will be in place between the agencies to support this proposal?
 - c. How will decisions about programming and services be made within the collaboration?
 - d. How this collaboration will avoid duplication of services?
 - e. Any other relevant information about the collaboration

The innovative foundation of the RP service model arose from an early childhood care and education program, a non-profit human service agencies (Domestic Abuse Intervention Services, Respite Emergency Childcare Center, 4C Coordinated Childcare Center) as well has always included a community-wide collaborative service delivery model. Philosophically, this comprehensive model ensures providing access to RP services in the least restrictive manner, to overcome transportation, scheduling, stigma, confidentiality, disability & financial barriers for young children & their families.

Collaboration with schools, both private & public, enhances the unified environments that young children & families will need to navigate & will help to cross-share specialized knowledge with representatives from different systems, i.e., medical, funding sources, social service, teaching, law enforcement, community/neighborhood centers. Another primary collaboration with this program is between the RP CORE Program staff & the strong partnership between the City Childcare Specialists Unit staff and the staff from 10-30 different centers RP staff work with each year, providing a solid seamless foundation for timely, appropriate prevention/early intervention/trauma treatment & crisis services available when needed, in our community. Also, on a larger scale, RP staff members serve in leadership capacities on task forces & consortia to collaborate with other community and statewide agencies serving mutual children and families, to impact policy, funding & systems change. Lastly, and most fundamental to collaboration, especially when working with young children and families, whom are at risk, or who have experienced chronic stress/trauma, is the national ACE (Adverse Childhood Events) scores & research by Robert Anda et al. Science has shown that adverse events can impact us as children & as adults, including generationally, indicated in early childhood brain development and neurobiology. Recent research tells us that trauma victims, when exposed to positive, consistent, persistent nurturing, attuned & positively responsive environments, such as early childhood programs, children & families experience a restorative impact in trauma symptoms including on a physiological level. Young children are at the highest risk for developing post-traumatic stress disorder, however, at the same time are also ripe for recovery in supportive & nurturing environments (NCTSN).

Measurement of Success

1. Which *System Level Indicator* (see RFP section 1.4) will your proposal address and how?
When CORE first began, we based our service model upon the rich research from the NAEYC Natl. Assn for the Education of Young Children (article, Allies in the Classroom); as well as Stanley Greenspan (Emotional Milestones); Bruce Perry.
2. Which *Population Level Indicator* (see RFP section 1.4) will your proposal address and how?
Our proposal robustly addresses all (4) areas described and have been consistently goals the Rainbow Project staff have been dedicated to attain.in the Early Childhood Community. We have been able to collect positive longitudinal feedback and follow up on children disenrolled from early childhood programs, due to behavior/challenges from trauma experiences.
3. How will success be assessed and evaluated? Include a description of the tools, screeners or assessments that will be used.
Success of each of the (4) program components have specific evaluation tools. Garnering feedback from each consultation, services and follow-up provided is documented. We could not be prouder of the innovative, cutting-edge services we have provided and continue to provide that science now validates as best-practice, evidence based, culturally/racially relevant & inclusive based on the critical values, child, family, community mission that has made the difference in thousands of lives.

3. Disclosure

If applicable, please include the following:

Disclosure of Conflict of Interest

Disclose any potential conflict of interest due to any other clients, contracts, or property interests, e.g. direct connections to other funders or City funded or potentially funded organizations, or with the City of Madison.

Disclosure of Contract Failures, Litigations

Disclose any alleged significant prior or ongoing contract failures, contract breaches, any civil or criminal litigation or investigation pending within the last three (3) years which involves your firm. List any contracts in which your firm and any subcontractor that has been found guilty or liable, or which may affect the performance of service to be rendered.

4. Budget

The budget should be submitted with the proposal using the template provided in an Excel document or a PDF. There are three tabs within this Excel spreadsheet: Total Budget, Program Budget Breakouts and Staffing. All three must be submitted in order for a proposal to be complete. Instructions for each tab are included at the top of the tabs in the template.

The budget template can be found on the CDD Other Funding Opportunities webpage:

<https://www.cityofmadison.com/dpced/community-development/contracts-funding/funding-opportunities>

Definition of Account Categories: In the budget, we are asking for costs in these four categories broken out by program.

- **Personnel:** Amount reported should include salary, taxes, and benefits. Salary includes all permanent, hourly, and seasonal staff costs. Taxes/benefits include all payroll taxes, unemployment compensation, health insurance, life insurance, retirement benefits, etc.
- **Program:** Amount reported for program costs should include all of the following items:
Insurance, professional fees and audit, postage, office and program supplies, utilities, maintenance, equipment and furnishings depreciation, telephone, training and conferences, food and household supplies, travel, vehicle costs and depreciation, and other operating related costs.
- **Space:** Amount reported for operating costs should include all of the following items:
 - Rent/Utilities/Maintenance: Rental costs for office space; costs of utilities and maintenance for owned or rented space.
 - Mortgage Principal/Interest/Depreciation/Taxes: Costs associated with owning a building (excluding utilities and maintenance).
- **Special Costs:** Amount reported for operating costs should include all of the following items:
 - Assistance to Individuals - subsidies, allowances, vouchers, and other payments provided to clients.
 - Payment to Affiliate Organizations - required payments to a parent organization (usually state or national).
 - Service/Program Subcontracts - the organization subcontracts for service being purchased by a funder to another agency or individual. Examples: the agency subcontracts a specialized counseling service to an individual practitioner; the agency acts as a fiscal agent for a multi-agency collaborative project and provides payment to those agencies under subcontract agreements.

Early Childhood Funding RFP Total Budget

Name of Agency: The Rainbow Project
Name of Proposal: Early Childhood COREPlus

Instructions

Complete the table below by filling in the yellow cells. Formulas within this spreadsheet will autofill into the white cells.

Proposals for a Single Program/Service: If you are proposing one program, for example, direct child care program, you must provide budget information for columns B and C.

Proposals for Multiple Programs/Services: If you are proposing to include multiple methods of services or programs, you must separately provide consultation services for other programs, two proposals (each with a separate budget) should be submitted for the same service at multiple locations, for example, child care at two different locations, one proposal and budget must be submitted below to delineate the budget for each program within your proposal. You may insert more columns, if needed.

Please contact Monty Marsh (mmarsh@cityofmadison.com) for any questions about clarifications regarding joint

Revenue Source	Agency 2024 Total	Program A	Program B	Program C
Dane County	\$ 224,390.00	\$ -	\$ -	\$ -
United Way of Dane County	\$ 195,000.00		\$ -	\$ -
City of Madison-This program	\$ 50,000.00	\$ 50,000.00	\$ -	\$ -
City of Madison-Other Funding	\$ 150,000.00	\$ -	\$ -	\$ -
Other Government*	\$ 375,570.00	\$ -	\$ -	\$ -
Fundraising/Donations**	\$ 220,000.00	\$ -	\$ -	\$ -
User Fee	\$ 92,000.00	\$ -	\$ -	\$ -
Total Revenue	\$ 1,306,960.00	\$ 50,000.00	\$ -	\$ -

*Other Government: includes all federal and state funds, as well as funds from other counties (outside Dane County)

**Fundraising: includes funds received from foundations, corporations, churches and individuals, as well as those

Early Childhood Funding RFP Program Budget Breakout

Name of Agency: The Rainbow Project, Inc.

Instructions

Complete the table below by filling in the yellow cells. Formulas within this spreadsheet will autofill into the white Total Revenue cells.

Proposals for a Single Program/Service: If you are proposing one program, for example, direct child care programming at a single location, you will only need to fill in columns B and C.

Proposals for Multiple Programs/Services: If you are proposing to include multiple methods of services or programs, for example, on-site child care programming and separately provide consultation services for other programs, two proposals (each with a separate budget) should be submitted separately. If you are proposing to do the same service at multiple locations, for example, child care at two different locations, one proposal and budget may be submitted. In this case, use columns C, D and E below to delineate the budget for each program within your proposal. You may insert more columns, if needed.

Please contact Monty Marsh (mmarsh@cityofmadison.com) for any questions about clarifications regarding joint or singular proposals.

Account Category	Agency 2024	Program A Budget	Program B Budget	Program C Budget	Total City Request
A. Personnel					
Salary	\$ 934,809	\$ 32,619	\$ -	\$ -	\$ 32,619
Taxes/Benefits	\$ 137,595	\$ 8,321	\$ -	\$ -	\$ 8,321
Subtotal	\$ 1,072,404	\$ 40,940	\$ -	\$ -	\$ 40,940
B. Other Operating					
Insurance	\$ 22,000	\$ 738	\$ -	\$ -	\$ 738
Professional Fees/Audit	\$ 7,900	\$ 505	\$ -	\$ -	\$ 505
Postage/Office & Program	\$ 12,600	\$ 833	\$ -	\$ -	\$ 833
Supplies/Printing/Photocopy	\$ 13,200	\$ 506	\$ -	\$ -	\$ 506
Equipment/Furnishings/Depr.	\$ 20,250	\$ 690	\$ -	\$ -	\$ 690
Telecommunications	\$ 20,000	\$ 559	\$ -	\$ -	\$ 559
Training/Conferences	\$ 56,600	\$ 810	\$ -	\$ -	\$ 810
Food/Household Supplies	\$ 6,406	\$ 419	\$ -	\$ -	\$ 419
Travel	\$ 2,300	\$ 387	\$ -	\$ -	\$ 387
Vehicle Costs/Depreciation	\$ -	\$ -	\$ -	\$ -	\$ -
Other*	\$ -	\$ -	\$ -	\$ -	\$ -
Subtotal	\$ 161,256	\$ 5,447	\$ -	\$ -	\$ 5,447
B. Space					
Rent/Utilities/Maintenance	\$ 19,800	\$ 478	\$ -	\$ -	\$ 478
Mortgage Principal/Interest	\$ 12,000	\$ 582	\$ -	\$ -	\$ 582
Depreciation/Taxes	\$ 41,500	\$ 2,553	\$ -	\$ -	\$ 2,553
Subtotal	\$ 73,300	\$ 3,613	\$ -	\$ -	\$ 3,613
D. Special Costs					
Assistance to Individuals	\$ -	\$ -	\$ -	\$ -	\$ -
Payment to Affiliate Orgs.	\$ -	\$ -	\$ -	\$ -	\$ -
Sercie/Program Subcontrs.	\$ -	\$ -	\$ -	\$ -	\$ -
Other*	\$ -	\$ -	\$ -	\$ -	\$ -
Subtotal	\$ -	\$ -	\$ -	\$ -	\$ -
Total	\$ 1,306,960	\$ 50,000	\$ -	\$ -	\$ 50,000

