



## **FY 2025 Emergency Funds Project Virginia Home Visiting Programs**

FACT of Virginia has established a direct assistance emergency fund project to support families served by home visiting programs included in [Early Impact Virginia's Directory of Home Visiting Programs](#).

A budget of \$100,000 has been made available for 20 awards of \$5,000 to be made for the provision of direct financial support, not otherwise available, of up to \$1,000 per household. This support is intended to strengthen family stability by assisting with unexpected expenses presented to families in or near poverty.

### **Eligibility Criteria:**

- 501©3 Nonprofit Organizations or Local Government Agencies included in [Early Impact Virginia, Home Visiting Program Directory](#).
- This award will be distributed on a reimbursement basis. As such, awarded programs will be reimbursed up to \$5,000 upon completion of a brief narrative report (see questions below), invoice, and financial accounting statement of the expenses covered to FACT's Executive Director. Receipts for expenses covered by these funds are not required to be submitted but must be made available for review upon request. FACT shall have sole authority to determine whether submitted expenses are reimbursable, as such, programs should consult with the FACT's Executive Director if there are questions about allowable expenses prior to making payments.

### **Programmatic Criteria:**

- To ensure fair and equitable distribution of these funds to individuals and families, programs are required to a coordinated referral and response protocol in place to determine how individuals and families will be provided with this financial assistance. This process must include documentation of due diligence in maximizing existing resources (rental assistance, food pantries, etc.) prior to accessing this limited award.

- Funds may not be paid directly to individuals or families but rather to vendors providing services or goods.
- This project is intended to provide direct, flexible financial assistance for families in or near poverty enrolled in home visiting programs. It is intended to “fill in the gaps” of existing support, therefore, assistance provided to participating families should be flexible in nature.

**Timelines:**

- Applications are due by Wednesday, April 30, 2025. Please send one email with this completed application and attach your agency’s referral and response protocol if appropriate.
- A response of award or denial will be provided within ten business days from receipt.
- Funds must be spent within one year of the award notice.
- All final documentation must be emailed to [nicole.poulin@dss.virginia.gov](mailto:nicole.poulin@dss.virginia.gov) within 30 days of the total award being spent. Please send one email with all the required information.
- Upon completion of the project and approval of the required documents outlined above, funds will be distributed via hard copy check issued by the Virginia Department of Treasury within 30 days of receipt of approved final documentation. \*

**Final Narrative Report Questions (due with final invoice and financial documentation):**

1. What are some examples of how funds from this award were spent? Please include at least one story as an example of how this project made a difference for a family or individual in your community.
2. How many families and individuals were helped by this funding?
3. What were the greatest challenges faced in implementing this project?
4. What were the greatest successes gained in the implementation of this project?
5. What suggestions do you have for FACT, if any, about how this project could be improved?

### **Application questions**

Please respond to the following questions. Once completed, please return this document with any required attachments in one email to Nicole Poulin, [Nicole.poulin@dss.virginia.gov](mailto:Nicole.poulin@dss.virginia.gov)

Please respond to the questions below.

- 1) Name of Organization:
  
- 2) Name and email of the Director or Executive Director of your organization:
  
- 3) Is your organization included in Early Impact Virginia's Directory of Home Visiting Programs?  
☐ Yes ☐ No
  
- 4) Please list the counties/cities your organizations serve:
  
- 5) Name and email of person submitting this application:
  
- 6) Name and email of person responsible for program implementation of the project:
  
- 7) Does your program have in place a coordinated referral and response protocol within the scope and reach of this project for individuals or families receiving services from your agency to access this financial assistance? If so, please include details below or attach a copy when submitting this application. ☐ Yes ☐ No

Please direct any questions to Nicole Poulin, [Nicole.poulin@dss.virginia.gov](mailto:Nicole.poulin@dss.virginia.gov) or 804-310-1520

*\*FACT reserves the right to monitor sites to ensure appropriate use of funds and/or terminate the agreement if funds are not being used according to the terms outlined above*