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February 18, 2014

Dear United Way Partner:

United Way of the Greater Lehigh Valley is embarking on the next evolution of our journey to positively impact the people in our community. Our organization has been working toward launching an eight-year plan to substantially change the Lehigh Valley by 2022. Our plan connects individuals and families across Lehigh and Northampton Counties to programs and services to help children succeed in school, families to have access to quality food, healthy aging and emergency services.

We cannot do this alone. United Way will work with community and corporate partners and volunteers to raise resources and generate awareness about the pressing needs in our communities. By 2022, we are committed to achieving the following community goals:

- **Education**: Increase the number of third grade students reading at grade level by 50%
- **Food Access**: Reduce the number of people in the Lehigh Valley who are food insecure by 50%
- **Healthy Aging**: Increase the number of older adults whose basic needs are met at home by 50%

Our promise to the Lehigh Valley is to improve lives and community conditions. We will accomplish this by assessing needs, raising and investing money, and mobilizing people toward action. We cannot advance our work without the powerful network of partners contributing to our collective success. The role of our partners (non-profit, civic, education, health and business) is critical to the success of these community goals.

The need for our communities to work together more strategically and effectively to produce impactful change has never been greater. Together, we level the playing field; build better lives for our kids and families; and support the cornerstone of our community, our elders.

If you have any questions about our plan or the application process, please feel free to contact us.

Sincerely,

David Lewis
President

Marci Ronald
Vice President, Community Impact
SECTION I: UNITED WAY COMMUNITY GOALS: A COLLECTIVE IMPACT STRATEGY

OPERATING PRINCIPLES AND PARTNERSHIP
United Way of the Greater Lehigh Valley seeks to improve lives and community conditions. To that end, we intentionally invest in partnerships and strategies that help achieve success in United Way community goals of education, food access and healthy aging, while also covering emergency services.

United Way investments in partnerships that include support of:
• Promise Neighborhoods of the Lehigh Valley
• United Way Alliance on Aging
• United Way Community Schools

Partnerships serve as catalysts for mobilizing people, gathering resources, promoting best practices, connecting coalitions and efforts, conducting population level research, and changing policy to better support the effective delivery of services for those in need.

Partnerships work to create systemic change that over time builds capacity for strategies to be implemented more effectively. They leverage the work of the individuals to further the work of the whole.

To support partnerships, United Way invests in programmatic strategies as a way to directly deliver services to individuals in need. Investing in the right mix of strategies, aligned to our partnerships, will maximize the positive impact experienced by each customer served. As investments in partnerships and programmatic strategies evolve, United Way will continue to provide the leadership, convene the partnerships, and develop the resources and solutions to improve lives and community conditions.
RESULTS BASED ACCOUNTABILITY
In 2008, UWGLV brought the strength of Results Based Accountability (RBA) to the community. Through a series of community conversations and working sessions, as well as expert individual assistance over the course of six years, United Way and partners have improved capacity to deliver higher quality services to citizens with the most need in the Lehigh Valley. RBA allows us to support our partnerships and provide resources where necessary.

United Way continues to seek new and innovative ways to positively impact the community while maintaining the integrity that RBA brings to the investment model.

COLLECTIVE IMPACT
In January 2011, the Stanford Social Innovation Review published a white paper on a concept called “Collective Impact.” Since then, this concept has grown as a framework for effective, results-focused collaboration. The authors of the article, John Kania and Mark Kramer, argued that “large-scale social change requires broad cross-sector coordination, yet the social sector remains focused on the isolated intervention of individual organizations.” To that end, United Way has followed the work of Kania and Kramer, as well as similar champions for this concept. By studying this model, alongside our Results Based Accountability and community impact models, United Way further evolves our investment process.

United Way cannot act alone to achieve the results of the boldly identified community goals aimed at improving lives and community conditions in the Lehigh Valley. Through collective impact, United Way, along with other community partners, will contribute common goals and in the process, deepen connections, maximize effectiveness and strengthen the community.

As a general rule, RBA asks three questions that form the basis of our framework:

1) How much did we do?
Quantity measures describe the number of customers and the depth of program engagement (e.g. number of program sessions, hours per program session).

2) How well did we do it?
Quality measures describe program effectiveness. Quality measures are used to hold a program accountable for adhering to the expected service delivery model.

3) Is anyone better off?
Results measures demonstrate improved performance or other calculated change among service recipients. They can be used to determine if people are benefiting from the services that are delivered through this investment process.
**Community Goal:** By 2022, increase the number of third grade students reading at grade level by 50%.

- 80,000 children of the current, at-risk population (birth–third grade) of 160,000 children from 2014–2022
- 6,400 students of the current third grade, at-risk population of 12,800 students from 2014–2022
- “Grade level reading” refers to the tracking of third grade reading success, using the current standard available measure across Lehigh and Northampton Counties.

**COMPELLING CONCERNS**

United Way is joining a nationwide effort to increase reading proficiency by the end of third grade. Leading education research focuses on the importance of success in a child’s earliest years. In the Lehigh Valley, United Way found that students at-risk of not succeeding were concentrated in particular schools and catchment areas. United Way knows that young children and students in early grades will define a future workforce in the region. Consider the following:

- There are a total of 6,801 third grade students in the Lehigh Valley.\textsuperscript{ii}
  - One in four students – 24% – do not read at grade level.
  - One in three students in Allentown schools do not read proficiently.
  - One half of students in Allentown schools are not proficient and are economically disadvantaged.

- Poverty and reading proficiency are strongly linked to future success. According to a national study,\textsuperscript{iii}
  - Jeopardy: Students who cannot read proficiently by the end of third grade are four times more likely not to graduate high school.
    - 16% of non-proficient third graders will not graduate from high school.
  - Double Jeopardy: Students who cannot read and are in poverty are six times more likely not to graduate high school.
    - 26% of non-proficient and economically disadvantaged third graders will not graduate high school.

- Up to half of the printed fourth grade curriculum is incomprehensible to students who read below that grade level.\textsuperscript{iv}
- Nearly half of Lehigh Valley children ages 0–4 years (49% in Lehigh County, 39% in Northampton County) live in low-income families.\textsuperscript{v–vi}
- Availability of high-quality childcare is limited: less than 4% of children ages 0–3 years in Lehigh Valley are enrolled in State-designated quality services.\textsuperscript{vii}
- Enrollment in pre-k is low for children ages 3–4 years: 14% in Lehigh County and 7% in Northampton County.\textsuperscript{viii}
COMMUNITY RESPONSE
To accomplish community goal objectives by 2022, United Way will invest in children, beginning at birth (including maternal health), in schools where need is the greatest. United Way engages in multi-method investing that includes programmatic strategies, Community Schools and Promise Neighborhoods. Strategies to ensure success are as follows:

1) Ensure children ages 0–5 receive quality early learning opportunities.
   • Infants born with a low birth weight have an increased risk of long-term disability and impaired development.ix
   • Parent education programs have been linked to decreased rates of child abuse and neglect; better physical, cognitive and emotional development in children; increased parental knowledge of child development and parenting skills; improved parent-child communication; reduced youth substance abuse; and more effective parental monitoring and discipline.x, xi, xii
   • Parent involvement is the number one predictor of early literacy success and future academic achievement.xiii
   • By age 3, children of low-income families know only half as many words as children who come from more advantaged families. As a result, disadvantaged children can be 18 months behind their peers by the time they start kindergarten.xiv
   • Preparation during the pre-k years is a key factor affecting third-grade reading.xv
   • High-quality preschool dramatically improves high school graduation rates, as well as college attendance.xvi
   • It is critically important that early educators identify children who need focused instruction – children who may be considered at-risk due to challenging behavior. Teachers can guide these students to learn new social and emotional skills by implementing child-centered, developmentally appropriate activities.xvii

2) Support a strong transition into kindergarten.
   • To build a strong link between early learning and school-age programming, United Way will invest in strategies that best prepare children for kindergarten. This includes programmatic strategies for incoming students who require special attention in the summer preceding kindergarten.

3) Invest in results-focused programming for students kindergarten–third grade.
   • Summer learning programming helps to prevent summer learning loss, as well as remediates, reinforces and accelerates learning.xviii, xix
   • The underlying philosophy of positive youth development programs is holistic, preventative and positive, focusing on the development of assets and competencies in all young people.xx
   • Attending school regularly is vital to ensuring children develop strong foundations for subsequent learning.xxxi
   • All children, regardless of socio-economic background, do worse academically in first grade if they are chronically absent (missing 10% or more of school, including excused and unexcused absences) in kindergarten.xxxii
   • Achievement, especially in math, is linked to attendance; attendance also strongly affects standardized test scores, graduation and dropout rates.xxxiii

4) Ensure future success: invest in students beyond third grade.
   • United Way will place limited dollars into fourth–eighth grade investments in the 2014–2018 Investment Cycle, and will continue to support Lehigh Valley regional efforts on high school graduation and successful career entry.
Community Goal: By 2022, reduce the number of people in the Lehigh Valley who are food insecure by 50%.

- 40,000 people of the current, at-risk population (80,000) from 2014–2022
- A person is food insecure if nutritious food is not accessible and available at all times.
COMPELLING CONCERNS
According to the United States Department of Agriculture, food insecurity is about consistent access to adequate amounts of nutritious food. Individuals and families must have enough nutritious food available to survive and remain healthy. Consider the following, from Feeding America, the nation’s leading domestic hunger relief charity:xxiv

In 2012, 33.1 million adults in the United States experienced food insecurity. Food insecurity can have wide-ranging, detrimental consequences on the physical and mental health of adults, including more vulnerable populations such as pregnant women and seniors. Lack of access to a nutritious and adequate food supply has implications not only for the development of physical and mental disease, but also behaviors and social skills.

Insufficient nutrition puts children at risk for illness and weakens their immune system. The immature immune systems of young children ages 0–5 make them especially vulnerable to nutritional deprivation, and as a result, the ability to learn, grow, and fight infections is adversely affected.

Food insecurity is not just about hunger, or the general access to food. It is about access to nutritious food. In the 2000 edition of Dietary Guidelines for Americansxxvi and the Healthy People 2010 objectivesxxvii of the National Institute of Health, adults are advised to choose a variety of fruits and vegetables and to consume at least two servings of fruits and three servings of vegetables each day.xxviii Considering the adverse physical and behavioral health consequences, this point cannot be understated.

Nationwide, 20% of men and 30% of women consume five or more fruits and vegetables daily, according to a national study.xxix In that study:

• Race is not a significant factor.
• Having a high school diploma is not a significant factor.
• Health is a significant factor. People who do not smoke (former smokers and nonsmokers alike) and people with lower body mass index (BMI) tend to consume more fruits and vegetables.

The issue of food insecurity greatly impacts the Lehigh Valley. The 2014 Farm Billxxx implies an estimated $65 per family – every month – cut on food subsidies in this region.xxxi Locally, we know now is the time to respond to the growing food access crisis:

• Close to 80,000 Lehigh Valley residents – or 12% – are food insecure, meaning they are unable to consistently access nutritious and adequate amounts of food necessary for a healthy life.xxxii
• By comparison, 15% of people statewide and 16% of people nationwide are food insecure.xxxiii
• 43,000 – or 54% – of food insecure residents are above 180% of the poverty line. This makes them ineligible for public benefits of any kind.xxxiv
• Eight food deserts – geographic locations with limited access to nutritious food – have been designated by the U.S. Department of Agriculture in the Lehigh Valley. They include four in Bethlehem, two in Allentown, and one each in Easton’s West Ward and Pen Argyl.

COMMUNITY RESPONSE
Achieving results on the food access community goal will depend on interactive investments between United Way Community Schools, Promise Neighborhoods of the Lehigh Valley, and United Way Alliance on Aging. United Way will work with the community to develop a strong Valley-wide coalition to address this goal. In the 2014–2018 Investment Cycle, United Way will accept proposals for the following strategies:

1) Prevention Strategy
   Support nutrition education programming that aligns with United Way education and healthy aging investments, by serving students and/or their families in priority schools, and/or by serving adults over the age of 65.

2) Intervention Strategies
   Support emergency food programming, specifically pantries utilizing the “choice” service model. Support soup kitchens that are compliant with current Federal food safety requirements. Invest in at-home meal delivery, including, but not restricted to seniors.
Community Goal: By 2022, increase the number of older adults whose basic needs are met at home by 50%.

- 8,000 people of the current, at-risk population (16,000) from 2014–2022
- “Basic needs” are “self-care needs,” or activities necessary to remain independent at home. (e.g. bathing, meal delivery, transportation assistance.)

COMPPELLING CONCERNS

- 98,000 adults over the age of 65 currently live in community settings in the Lehigh Valley.
- By 2040, the number of older adults 70+ will double in the Lehigh Valley.
- 15,000 – or 15% – of older adults in Lehigh and Northampton Counties have difficulties meeting their own basic care needs such as bathing, dressing, cleaning, grocery shopping and attending vital appointments.
- 70% to 80% of Alzheimer’s care is provided by family members – and 40% of those caregivers die before their loved ones from stress-related disorders.
- $31 million in benefits go uncollected in the Lehigh Valley each year because older adults do not know how to access or complete the applications.
- One in three older adults, ages 65 and older, falls each year. Of those who fall, 20% to 30% suffer moderate to severe injuries that make it hard for them to get around or live independently, increasing their risk of early death.
- 70% of working caregivers suffer work-related difficulties due to their dual caregiving roles.
- Older adults in the Lehigh Valley are experiencing high levels of chronic disease:
  - 50% report suffering from high blood pressure
  - 30% report having high cholesterol
  - 23% report having diabetes
  - 72% are overweight or obese

“We’re leading a national, collaborative effort to make it easier for individuals to get help with daily living – right in their own homes and communities.” – National Council on Aging
COMMUNITY RESPONSE
United Way engages in multi-method investing that includes programmatic strategies and partnerships including United Way Alliance on Aging and Promise Neighborhoods of the Lehigh Valley.

1) Prevention Strategies
Older adults prefer to stay in their own homes or in other community settings of their choice where they know their neighbors and can associate memories with each piece of furniture and object around them, rather than moving to a long-term care institution as they age. Several risk factors are associated with higher incidences of premature nursing home placement. Most widely-cited risk factors include:

- white, older, living alone
- fewer non-kin social supports
- feelings of not being able to control their future health
- difficulty performing Activities of Daily Living (ADLs) or Instrumental Activities of Daily Living (IADLs)
- hospitalization within the last year
- previous nursing home placement

Older adults who practice healthy behaviors, take advantage of clinical preventive services, and continue to engage with family and friends are more likely to remain healthy, live independently and incur fewer health-related costs.

United Way will invest in chronic disease management, fitness and fall prevention home assessments to reduce social isolation and ensure improved health.

2) Intervention Strategies
In addition to the older adult preference to stay in their homes, there is a financial benefit to society to keep older adults in their homes for as long as possible with supportive services, rather than long-term care.

In Pennsylvania in 2013, the median annual rate for a nursing home was $104,390 per person for a private room and $94,619 per person for a semi-private room. By contrast, the hourly rate for a home health aide was $20/hr. If the home health aide spent three hours per day, five days a week, in the home — higher than the average usage of a home health aide — the cost would only be $15,600 annually. The cost of adult day services gave a similar cost savings. The average adult day services rate was $56 per day, or $14,560 annually, based on care five days a week. This is a cost savings of over $79,000 per person, per year.

The Pennsylvania State Data Center’s analysis of the 2010 Census suggests that the Lehigh Valley currently has 5,122 individuals residing in nursing facilities and skilled nursing facilities. Based on our research with the Lehigh Valley Research Consortium, we know that an additional 16,000 older adults in the Lehigh Valley are experiencing at least one difficulty that could put them at risk of being institutionalized. By providing supportive services to these 16,000 older adults, we can keep them in their homes and communities longer and reduce the stress on their family caregivers who are supporting them.

United Way will invest in transportation, grocery shopping and handyman services for older adults who are experiencing difficulties meeting these needs without assistance. United Way will provide respite services such as adult day services and in-home homemaker/health aide services to give family caregivers a break from providing care for older adults experiencing difficulties with eating, dressing, bathing and moving due to physical limitations or dementia.
In addition to supporting community goals, United Way will continue to invest in critical emergency services in the areas of disaster, housing and safety-related services.

**COMPELLING CONCERNS**

While there is no specific income requirement for customers receiving emergency services, United Way recognizes the majority of individuals and families receiving services are below the poverty line. United Way believes that poverty status in the Lehigh Valley is an escalating factor in determining the need for emergency services, but that any individual or family may be susceptible to crisis at some point in their life, regardless of income.

- 13% of Pennsylvanians are below the poverty line. Additionally, many are unable to meet basic needs over the course of a three-month period, or are “asset poor”
  - 20% of Pennsylvanians are considered “asset poor”
  - 13% of two-parent families are “asset poor”
  - 48% of one-parent families are “asset poor”

“When the community is engaged in an authentic dialogue, it becomes empowered to identify its needs and the existing resources that may be used to address them.” – Federal Emergency Management Agency (FEMA)
COMMUNITY RESPONSE

1) Disaster Response and Relief

Pennsylvania is prone to a wide variety of disasters, including floods, fires, winter storms, hazardous-materials incidents, tropical storms, tornadoes and windstorms.\(^1\) In the last three years, the Lehigh Valley has endured a spate of emergency disasters, both locally (Allentown gas pipeline explosion in 2011) and federally (Superstorm Sandy in 2012). United Way recognizes the importance of providing much needed disaster response.

2) Emergency Housing

United Way will continue to support emergency shelter services in both Lehigh and Northampton Counties.

- Homelessness is rising in Pennsylvania,\(^i\) as it had the fourth largest increase of homeless individuals in the country between 2012 and 2013 – 728 (679 sheltered) in 2010 to 907 (734 sheltered) in 2013.

United Way recognizes the critical need for legal support, especially for those displaced or in a crisis that jeopardizes the loss of their home.

- 71% of legal needs of low-income households are not met by the court system.\(^iii\)
- A 2009 study by the Legal Services Corporation shows a “justice gap” – less than 20% of low-income Americans’ legal needs are being met.\(^iii\)
- Pennsylvania’s foreclosure rate is 3%, above the national median rate of 2%\(^iv\)
- Allentown had the third highest foreclosure rate in Lehigh County, one per every 698 houses. Easton had the fifth highest foreclosure rate in Northampton County at one per every 559 houses.

3) Services to Address Abuse and Sexual Violence\(^v\)

The experience of intimate partner and sexual violence crosses all lines, including age, income, gender, sexual orientation, geography, race, etc., although some groups are significantly more likely to face these challenges in their lifetimes.\(^vi\)

In the State of Pennsylvania in 2011–2012:\(^vi\)

- Shelter and counseling programs provided domestic violence services (shelter, counseling, legal advocacy, etc.) to 89,560 individuals (82,308 adults and 7,252 children).
- The 5,091 requests for shelter could not be accommodated because of lack of space.
- Local programs answered 130,654 hotline calls.
- In 2012, there were 100+ reported forcible rapes in the Lehigh Valley,\(^viii\) however this is not an accurate reflection of the situation. On average 60% of rapes go unreported,\(^ix\) and the FBI Uniform Crime Reporting recently changed its definition of ‘forcible rape’ to be more inclusive and comprehensive, yet the most recent available statistics are still following the previous definition.\(^ix\)
- One in six women and one in 33 men will experience an attempted or completed rape in their lifetime.\(^x\)
- Of intimate partner assaults perpetrated against women annually, 40% will result in an injury to the victim and 11% will result in some type of medical treatment to the victim.\(^x\)

Other types of violence include child maltreatment, which can take the form of neglect, physical, sexual and emotional abuse. Elder abuse can take similar forms, as well as abandonment and financial abuse. For a full listing of Center for Disease Control-designated forms of abuse and violence, please visit their website at http://www.cdc.gov/violenceprevention.

United Way will invest in emergency shelter, crisis intervention and supportive services related to abuse and sexual violence in the Lehigh Valley.
SECTION II: PROGRAMMATIC STRATEGIES IN THE 2014 APPLICATION

EDUCATION
United Way of the Greater Lehigh Valley seeks to invest in the following strategies to meet the education community goal in the 2014–2018 application cycle. Please see United Way Results Framework for details regarding the strategies below, Appendix A.

1) Birth through Preschool Children and Family Strategies
   a) Expectant mothers receive health services.
   b) Children ages 0–3 whose families receive parenting and child development education.
   c) Children ages 0–3 whose families receive early literacy skills support.
   d) Preschool instructors build skills to enhance age-appropriate, child development.
   e) Children ages 0–3 receive quality home or center-based care.
   f) Children ages 4–5 receive quality pre-k education services.

2) Kindergarten Transition Strategy
   a) Students entering kindergarten participate in transition programming to prepare for school.

3) Kindergarten through Third Grade Student and Family Strategies
   a) Students participate in summer learning opportunities.
   b) Students participate in targeted, academic interventions.
   c) Students participate in positive youth development programming.
   d) Students are connected to mentors.
   e) Students and their families participate in family literacy programming.
   f) Students and/or their families receive case management services.
   g) Students and/or their families receive behavioral health services.

4) Fourth through Eighth Grade Student and Family Strategies
   United Way will invest in a limited number of fourth through eighth grade programs. Proposals that address this age-group are welcome, although limited funding is available.
   a) Students participate in career-skill development (STEM supports).
   b) Students participate in summer learning opportunities.
   c) Students participate in positive, youth development programming.
   d) Students participate in targeted, academic interventions.
   e) Students are connected to mentors.
   f) Students and their families participate in family literacy programming.
   g) Students and/or their families receive case management services.
   h) Students and/or their families receive behavioral health services.
**Requirement: Priority Schools Alignment**

The 2014–2018 education programmatic strategies are limited to supporting programs that serve children and their families in particular schools within the Allentown, Bangor, Bethlehem and Easton public school districts, according to the list below. Priority schools have been identified based on a variety of factors, including third grade reading proficiency rates, Title I status, Adequate Yearly Progress status, feeder patterns and a known inadequacy of resources currently available.

Priority schools listed are currently United Way Community Schools, or in some way are being considered or prepared for future development with this transformational model. United Way is working closely with these school districts and partners to ensure sufficient internal capacity is available to effectively manage an influx of concentrated program investments as suggested in this plan. The intention of these coordinated and consolidated investments is to increase resources and opportunities that promote more positive student and family outcomes.

Please note:

- The term “students” in the above strategies refers to students identified by school staff as experiencing concerns with attendance, behavior and/or academic performance.
- All programs funded for any of the **Birth through Preschool strategies must** serve children and families of children living in the catchment area of the identified United Way priority school.
- All programs funded for any of the **Kindergarten through Third Grade strategies must** serve children and families of children living in the catchment area of the identified United Way priority school, with precedence given to those students attending the priority schools.
- All programs funded for any of the **Fourth through Eighth Grade strategies must** serve children and families of children attending a United Way priority school.
- All programs funded for **Family-based strategies** at any age must serve students attending a United Way priority school and their families.
- Funding to support programs in the Bangor Area School District will be limited to **Fourth through Eighth Grade strategies related to behavioral health and case management services for students and their families**.
- Applicants will identify the partnering school district(s) and indicate a school preference. Final programming per school will be determined after funding decisions have been finalized and in consultation between school district staff and United Way. Throughout the 2014–2018 cycle, adjustments in program/school selection may change according to need.

**Promise Neighborhood Alignment**

If a program proposes to serve residents in the Allentown Promise Neighborhood, please denote this on the application form. As work further develops, this information will be used to continue mapping existing resources available to serve these high-need neighborhoods. This information will not be used in any way to make funding decisions at this time.

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**United Way Priority Schools**

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<th>Bangor Area School District</th>
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<td>Easton Area Middle School (grades 5–6)</td>
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<td>Easton Area Middle School (grades 7–8)</td>
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*United Way Community Schools as of February 2014.*
FOOD ACCESS

United Way of the Greater Lehigh Valley seeks to invest in the following strategies to meet the food access community goal in the 2014–2018 application cycle. Please see United Way Results Framework for details regarding the strategies below, Appendix A.

1) Preventative Strategy
   a) Nutrition education – must serve students in priority schools and/or adults over 65 years old.

2) Intervention Strategies
   a) Choice food pantries – must be certified in the “choice” model
   b) Soup kitchens – must be in compliance with food safety inspection
   c) At-home meal delivery – including, but not restricted to older adults

Education and Healthy Aging Goal Alignment

For maximum integration and impact across United Way investments, the Preventative Strategy must align with the education or healthy aging goals. For education, this means nutrition education for students and/or families of students attending, or for children ages 0–5 feeding into, a United Way priority school. For healthy aging, this means nutrition education for adults over the age of 65 who are at-risk of developing difficulties due to having an unmanaged chronic disease. Please denote this alignment on the application form.

Promise Neighborhood Alignment

If a program proposes to serve residents in the Allentown Promise Neighborhood, please denote this on the application form. As work further develops, this information will be used to continue mapping existing resources available to serve these high-need neighborhoods. This information will not be used in any way to make funding decisions at this time.
HEALTHY AGING
United Way of the Greater Lehigh Valley seeks to invest in the following strategies to meet the healthy aging community goal in the 2014–2018 application cycle. Please see United Way Results Framework for details regarding the strategies below, Appendix A.

1) Preventative Strategies
   a) Improving key indicators for chronic disease (BMI, sugar levels, cholesterol)
   b) In-home fall prevention
   c) Fitness
   d) Handyman services (licensed professional who performs routine home maintenance and repairs)

2) Intervention Strategies
   a) Transportation assistance
   b) Grocery shopping services
   c) In-home support services
   d) Out-of-home support services

Valley-Wide Investment
United Way healthy aging programmatic strategies are required to serve at-risk older adults using a sliding fee scale for services or equivalent method of ensuring services to those in greatest financial need. United Way understands that older adult issues may occur with seniors who live in households with higher income caregiving children or older adults who need low-levels of financial assistance to afford services. For this reason, there is no income based requirements for this strategy, beyond usage of a sliding fee scale.

Promise Neighborhood Alignment
If a program proposes to serve residents in the Allentown Promise Neighborhood, please denote this on the application form. As work further develops, this information will be used to continue mapping existing resources available to serve these high-need neighborhoods. This information will not be used in any way to make funding decisions at this time.

EMERGENCY SERVICES
United Way of the Greater Lehigh Valley seeks to invest in the following strategies to address emergency services in the 2014–2018 application cycle. Please see United Way Results Framework for details regarding the strategies below, Appendix A.

1) Disaster Response and Relief
   a) Relief received after a disaster, in any form, occurs

2) Emergency Housing
   a) Housing-based legal services
   b) Temporary shelter services

3) Services to address abuse and sexual violence
   a) Shelter services
   b) Violence and crisis intervention support
SECTION III: THE 2014–2018 INVESTMENT CYCLE AND APPLICATION PROCESS

The application process opens Tuesday, February 18, 2014, and closes at 5 p.m. on Monday, March 31, 2014. Applications will not be accepted after the deadline.

Application Process

• Read this Investment Plan and determine if your proposed program or services align with the plan and will achieve success with one of the United Way community goals.
• Application Format—Applications will be submitted online through Community TechKnowledge (CTK) at https://ctkodm.com/unitedwayglv/. There is no limit on the number of applications a qualified partner can submit.
• Qualified partners should use their current user name and password to enter the CTK system and complete an application form.

For technical matters relating to CTK, please contact Cassaundra Amato at 610.807.5704 or cassaundraa@unitedwayglv.org.

Applicants may seek technical assistance on the use of CTK beginning February 18, 2014. Please note: Applicants are asked to hold content questions about the investment plan until the scheduled information sessions. It is recommended that applicants attend one of the scheduled information sessions. United Way suggests reviewing the investment plan and logging into CTK prior to attending a session.

Information Session Monday, February 24, 1 p.m.
Information Session Wednesday, February 26, 8 a.m.
Information Session Thursday, February 27, 2:30 p.m.
[Snow Date] Information Session Wednesday, March 5, 9 a.m.

Information sessions will take place at the United Way of the Greater Lehigh Valley offices:
1110 American Parkway NE, Allentown, PA 18109

Please R.S.V.P. your attendance to Priscilla Rosado at 610.807.5731 or priscillar@unitedwayglv.org.

Photo by Marco Calderon.
Eligibility Criteria
A program will be considered for funding if it meets the following criteria:

✓ The primary applicant organization must be a 2014 Qualified Partner Agency of United Way of the Greater Lehigh Valley. If you do not know the status of your organization, or are not currently qualified, please contact Priscilla Rosado at 610.807.5731 or priscillar@unitedwayglv.org.

✓ The minimum program budget request is $20,000. There is no maximum requirement and the typical grant award range is $20,000 to $100,000. Organizations may submit any number of program proposals (each as a separate application form in CTK).

✓ The program must align with United Way’s results framework. Applicants will be required to track and report on all measures within the selected outcome strategy.

Program Budget
• The budget should describe a typical 12-month fiscal year, or “program year.”
• United Way grant amount should not exceed 50% of the total program budget for any year.
• If the proposed program will be in its first year of operation in 2014–2015, United Way may consider more than 50% of funding in the 2014–2015 year alone. The budget must reflect no more than 50% of the United Way grant by the 2015–2016 program year. Please reflect this in the budget narrative.
• Revenue and expenses should balance (equal “0”).

Program Awards
• Award Notification: Notice of a program award will be given in June 2014. Funds will be remitted beginning on September 1, 2014 and will be prorated to 10 months of funding in the first year.
• Reporting Schedule: Reports will be due annually to United Way in July of each year. The 2014–2015 program report will cover the periods of September 1, 2014–June 30, 2015.
• 1 + 3 Investment Cycle: Awarded programs will receive a 10-month contract for September 1, 2014–June 30, 2015. If the program demonstrates sustainability and results after the first program year, grant awardee will receive a three-year contract renewal for July 1, 2015–June 30, 2018.
• Contingency of Funds: Every program year throughout the 2014–2018 investment cycle will be contingent on program performance, demonstrated results and continued availability of funds. United Way reserves the right, at any time, to adjust or withdraw contract dollars if agreed-upon program delivery or results do not meet contract requirements.
Review Process
All applications meeting eligibility criteria, and submitted by 5 p.m. on March 31, 2014, will be evaluated on a 91-point scale. The proposed program, and its ability to address an identified United Way community goal in an effective manner, will be evaluated by teams of community volunteers, partners and United Way staff. The United Way Community Impact Council will make an investment recommendation. The United Way Board of Directors will review the recommendation and approve all final investment decisions.

2014 Application Form
United Way is seeking effective programming that aligns with this investment plan to create meaningful collective impact in our community. Review of proposals will consist of both point-based and ‘accept/reject’ program alignment questions. The online application is comprised of seven sections:

Point-based questions (91 points)
- Section I: Meeting Community Need (21 points)
- Section II: Delivering an Excellent Program (42 points)
- Section IV: Ensuring Program Quality (7 points)
- Section VI: Program Budget (14 points)
- Section VII: Organizational Collaboration (7 points)
These sections will be scored and ranked according to a Likert-scale review tool.

Accept/reject questions
- Section III: Results Framework Alignment
- Section V: Ensuring Goal Alignment
A program may become ineligible for funds if full alignment is not apparent in these sections.
APPLICATION CONTENTS BY SECTION

Eligibility Requirements and Basic Program Information
Ensure program meets essential requirements. Enter key contacts, program name and a brief description of the program. Indicate which community goal the program will address.

I) Meeting Community Need: Target Population and Program Objective (21 points)
Introduce the proposed program. Explain the program and demonstrate community need. Describe the target population as related to community need. How does the program objective align with a United Way community goal?

II) Delivering an Excellent Program: Program Strength and Capacity (42 points)
Explain how the program stands out as highly effective in the Lehigh Valley. This section should include a narrative on program model, effective staffing and demonstration of a data-driven program improvement process.

III) Results Framework Alignment (accept/reject program)
Select the outcome strategy that fits the proposed program. Limit one outcome strategy per program.

IV) Ensuring Program Quality (7 points)
Answer these “quality” measures based on selected outcome strategy. Verify the proposed program will meet program requirements relevant to program strategy. May require upload of certifications or other documents.

V) Ensuring Goal Alignment (education, food access, healthy aging) (accept/reject program)
Ensure all requirements are in place regarding education, food access, and healthy aging programs.

VI) Program Budget (14 points)
United Way will fund no more than 50% of the annual program budget. Programs will complete an annual budget representing a typical 12-month program year.

VII) Organizational Collaboration (7 points)
At the end of the CTK application form, check the box stating that your application is accurate and complete. Once you check this box and click “save,” your application is submitted to United Way.

Please save and print your application!
Click “save” and then “print” at the top of your form. Following the print command, the application is converted to a PDF. You can then save the PDF to your digital files and also print the document for your records.
**QUESTIONS?**

For application questions, please contact United Way. Please hold all content or alignment questions until the information sessions. Following the information sessions, questions can be directed to the following United Way staff:

<table>
<thead>
<tr>
<th>Name</th>
<th>Email</th>
<th>Phone</th>
<th>Role</th>
</tr>
</thead>
<tbody>
<tr>
<td>Marci Ronald</td>
<td><a href="mailto:marcir@unitedwayglv.org">marcir@unitedwayglv.org</a></td>
<td>610.807.5707</td>
<td>Overall Investment Process</td>
</tr>
<tr>
<td>Marc Rittle</td>
<td><a href="mailto:marcr@unitedwayglv.org">marcr@unitedwayglv.org</a></td>
<td>610.807.5726</td>
<td>Overall Investment Process, Food Access</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>and Emergency Services Alignment</td>
</tr>
<tr>
<td>Cori Rolón</td>
<td><a href="mailto:corir@unitedwayglv.org">corir@unitedwayglv.org</a></td>
<td>610.807.5742</td>
<td>Healthy Aging Alignment</td>
</tr>
<tr>
<td>Jill Pereira</td>
<td><a href="mailto:jillp@unitedwayglv.org">jillp@unitedwayglv.org</a></td>
<td>610.807.5739</td>
<td>Education Alignment</td>
</tr>
<tr>
<td>Mary Widmer</td>
<td><a href="mailto:maryw@unitedwayglv.org">maryw@unitedwayglv.org</a></td>
<td>610.807.5743</td>
<td>Education Alignment</td>
</tr>
<tr>
<td>Beth Tomlinson</td>
<td><a href="mailto:betht@unitedwayglv.org">betht@unitedwayglv.org</a></td>
<td>610.807.5745</td>
<td>Education Alignment</td>
</tr>
<tr>
<td>Cassaundra Amato</td>
<td><a href="mailto:cassaundraa@unitedwayglv.org">cassaundraa@unitedwayglv.org</a></td>
<td>610.807.5704</td>
<td>Technical, Community TechKnowledge</td>
</tr>
<tr>
<td>Priscilla Rosado</td>
<td><a href="mailto:priscillar@unitedwayglv.org">priscillar@unitedwayglv.org</a></td>
<td>610.807.5731</td>
<td>Qualifications Process and Status</td>
</tr>
</tbody>
</table>
### APPENDIX A: UNITED WAY RESULTS FRAMEWORK

#### EDUCATION

<table>
<thead>
<tr>
<th>Strategy ID</th>
<th>Outcome</th>
<th>Outcome Strategy/ Quantity Measure</th>
</tr>
</thead>
<tbody>
<tr>
<td>ED–1a</td>
<td>Babies are born healthy.</td>
<td># of expectant mothers receiving health services</td>
</tr>
<tr>
<td>ED–1b</td>
<td>Families with young children will receive adequate supports.</td>
<td># of children ages 0–5 whose families receive parenting and child development education</td>
</tr>
<tr>
<td>ED–1c</td>
<td>Families with young children will receive adequate supports.</td>
<td># of children ages 0–5 whose families receive early literacy skills support</td>
</tr>
<tr>
<td>ED–1d</td>
<td>Early learning teachers of children ages 3–5 years will build skills to enhance age-appropriate development of children.</td>
<td># of teachers enrolled in skill building courses</td>
</tr>
<tr>
<td>ED–1e</td>
<td>Children ages 6 weeks–3 years receive a quality early learning experience.</td>
<td># of children ages 0–3 receiving quality early learning</td>
</tr>
<tr>
<td>ED–1f</td>
<td>Children, ages 4–5, will receive quality pre-k education.</td>
<td># of children ages 4–5 in quality pre-k programming</td>
</tr>
<tr>
<td>ED–2</td>
<td>Students will transition successfully into kindergarten.</td>
<td># of students entering kindergarten participating in summer readiness programming</td>
</tr>
<tr>
<td>ED–3a</td>
<td>Students k–third grade will remain positively engaged in school.</td>
<td># of students (k–third grade) participating in summer learning opportunities</td>
</tr>
<tr>
<td>ED–3b</td>
<td>Students k–third grade will remain positively engaged in school.</td>
<td># of students k–third grade participating in targeted academic interventions</td>
</tr>
<tr>
<td>ED–3c</td>
<td>Students k–third grade will remain positively engaged in school.</td>
<td># of students k–third grade participating in positive youth development programming throughout the school year</td>
</tr>
<tr>
<td>ED–3d</td>
<td>Students k–third grade will remain positively engaged in school.</td>
<td># of students k–third grade connected to mentors</td>
</tr>
<tr>
<td>ED–3e</td>
<td>Students k–third grade will remain positively engaged in school.</td>
<td># of students k–third grade and families participating in family literacy programming</td>
</tr>
<tr>
<td>ED–3f</td>
<td>Students k–third grade will remain positively engaged in school.</td>
<td># of students k–third grade and/or families receiving case management services</td>
</tr>
<tr>
<td>ED–3g</td>
<td>Students k–third grade will remain positively engaged in school.</td>
<td># of students k–third grade and/or families receiving behavioral health services</td>
</tr>
<tr>
<td>ED–4a</td>
<td>Students fourth–eighth grade are exposed to career-focused learning.</td>
<td>#/% middle school students involved in STEM supports</td>
</tr>
<tr>
<td>ED–4b</td>
<td>Students fourth–eighth grade will remain positively engaged in school.</td>
<td># of students fourth–eighth grade participating in summer learning opportunities</td>
</tr>
<tr>
<td>ED–4c</td>
<td>Students fourth–eighth grade will remain positively engaged in school.</td>
<td># of students fourth–eighth grade participating in positive youth development programming throughout the school year</td>
</tr>
<tr>
<td>ED–4d</td>
<td>Students fourth–eighth grade will remain positively engaged in school.</td>
<td># of students fourth–eighth grade participating in targeted academic interventions</td>
</tr>
<tr>
<td>ED–4e</td>
<td>Students fourth–eighth grade will remain positively engaged in school.</td>
<td># of students fourth–eighth grade connected to mentors</td>
</tr>
<tr>
<td>ED–4f</td>
<td>Students fourth–eighth grade will remain positively engaged in school.</td>
<td># of students fourth–eighth grade and families participating in family literacy programming</td>
</tr>
<tr>
<td>ED–4g</td>
<td>Students fourth–eighth grade will remain positively engaged in school.</td>
<td># of students fourth–eighth grade and/or families receiving case management services</td>
</tr>
<tr>
<td>ED–4h</td>
<td>Students fourth–eighth grade will remain positively engaged in school.</td>
<td># of students fourth–eighth grade and/or families receiving behavioral health services</td>
</tr>
</tbody>
</table>
Every program will identify and report on a single outcome strategy (with unique strategy ID), reading across the United Way Results Framework.

<table>
<thead>
<tr>
<th>Quality Measure</th>
<th>Results Measure</th>
</tr>
</thead>
<tbody>
<tr>
<td>Home visitors will be nurses with at least an R.N. degree and pregnancy and prenatal experience.</td>
<td>#/% of babies born at a healthy birth weight</td>
</tr>
<tr>
<td>Must demonstrate a strong link in program model to improvement in knowledge of parenting and child development.</td>
<td>#/% of children whose families increase their knowledge of parenting and child development (measured by pre-post assessments)</td>
</tr>
<tr>
<td>Programs will demonstrate a program model that centers on skills needed for parent involvement in the early literacy stages.</td>
<td>#/% of children whose families increase their ability to read to their children (measured by pre-post assessments)</td>
</tr>
<tr>
<td>Facilitators will have a minimum of a bachelor's degree with knowledge of early childhood development and experience in training and early learning programing and/or be PQUAS certified.</td>
<td>#/% of children who are on target as measured by the PA Early Learning Standards on social skills or by the developmental milestones created by the Family and Early Intervention Partnership</td>
</tr>
<tr>
<td>Programs will maintain accreditation (STARS 3 or 4, NAEYC, Head Start, Pre-K Counts).</td>
<td>#/% of students demonstrating readiness for kindergarten as measured by school district skills screening tools</td>
</tr>
<tr>
<td>Must demonstrate strong link in program model to kindergarten preparedness.</td>
<td>#/% of students demonstrating readiness for kindergarten as measured by school district skills screening tools</td>
</tr>
<tr>
<td>Must align program with school curriculum and PA academic standards.</td>
<td>#/% of students demonstrating positive academic growth (based on United Way-approved assessment for summer learning)</td>
</tr>
<tr>
<td>Must align program with school curriculum and PA academic standards.</td>
<td>#/% of students demonstrating improvements in reading scores</td>
</tr>
<tr>
<td>Must align program with school curriculum and PA academic standards.</td>
<td>#/% of students demonstrating improvements in writing, reading and/or math based on available school assessments (Study Island, DIBELS, PVAAS, SFA, other)</td>
</tr>
<tr>
<td>Must align program with school curriculum and PA academic standards.</td>
<td>(1) #/% of students demonstrating improvements in their daily school attendance (2) #/% of students demonstrating improvements in behavior while at school</td>
</tr>
<tr>
<td>Must demonstrate a strong link in program model to improvements in student attendance.</td>
<td>(1) #/% of students demonstrating improvements in their daily school attendance (2) #/% of students demonstrating improvements in behavior while at school</td>
</tr>
<tr>
<td>Must align program with school curriculum and PA academic standards.</td>
<td>#/% of students proficient or above in math and science performance (use standard school assessments)</td>
</tr>
<tr>
<td>Must align program with school curriculum and PA academic standards.</td>
<td>#/% of students demonstrating positive academic growth (based on United Way-approved assessment for summer learning)</td>
</tr>
<tr>
<td>Must demonstrate a strong link in program model to improvements in student attendance.</td>
<td>(1) #/% of students demonstrating improvements in daily school attendance (2) #/% of students demonstrating improvements in behavior while at school</td>
</tr>
<tr>
<td>Must have current PA licensing and certifications in counseling and behavioral health.</td>
<td>(1) #/% of students demonstrating improvements in their daily school attendance (2) #/% of students demonstrating improvements in behavior while at school</td>
</tr>
<tr>
<td>Must demonstrate a strong link in program model to improvements in student attendance.</td>
<td>#/% of students demonstrating readiness for kindergarten as measured by school district skills screening tools</td>
</tr>
<tr>
<td>Must align program with school curriculum and PA academic standards.</td>
<td>#/% of students demonstrating improvements in math and science performance.</td>
</tr>
<tr>
<td>Must align program with school curriculum and PA academic standards.</td>
<td>#/% of children whose families increase their knowledge of parenting and child development</td>
</tr>
<tr>
<td>Must align program with school curriculum and PA academic standards.</td>
<td>#/% of students demonstrating improvements in writing, reading and/or math based on available school assessments (Study Island, DIBELS, PVAAS, SFA, other)</td>
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<tr>
<td>Must demonstrate a strong link in program model to improvements in student attendance.</td>
<td>#/% of students demonstrating improvements in their daily school attendance (2) #/% of students demonstrating improvements in behavior while at school</td>
</tr>
<tr>
<td>Must align program with school curriculum and PA academic standards.</td>
<td>#/% of students demonstrating improvements in reading scores</td>
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<td>Must demonstrate a strong link in program model to improvements in student attendance.</td>
<td>(1) #/% of students demonstrating improvements in their daily school attendance (2) #/% of students demonstrating improvements in behavior while at school</td>
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<tr>
<td>Must align program with school curriculum and PA academic standards.</td>
<td>#/% of children whose families increase their ability to read to their children (measured by pre-post assessments)</td>
</tr>
<tr>
<td>Must have current PA licensing and certifications in counseling and behavioral health.</td>
<td>(1) #/% of students demonstrating improvements in their daily school attendance (2) #/% of students demonstrating improvements in behavior while at school</td>
</tr>
</tbody>
</table>
## APPENDIX A: UNITED WAY RESULTS FRAMEWORK

### FOOD ACCESS

<table>
<thead>
<tr>
<th>Strategy ID</th>
<th>Outcome</th>
<th>Outcome Strategy/Quantity Measure</th>
<th>Quality Measure</th>
<th>Results Measure</th>
</tr>
</thead>
<tbody>
<tr>
<td>FA–1</td>
<td>Individuals will receive nutrition education</td>
<td># of individuals participating in nutrition courses</td>
<td>Model must be strongly linked to a result in improved nutrition habits for participants.</td>
<td>Families reporting increase in fruit and vegetable consumption</td>
</tr>
<tr>
<td>FA–2a</td>
<td>Individuals have emergency food needs met</td>
<td>(1) # of individuals picking up/receiving emergency food at a pantry; (2) # of people receiving the food (family/community members)</td>
<td>All pantries must adhere to Choice Guidelines, as set forth by Second Harvest Food Bank and Health Bureau.</td>
<td>n/a for emergency services</td>
</tr>
<tr>
<td>FA–2b</td>
<td>Individuals have emergency food needs met</td>
<td># individuals served in a soup kitchen</td>
<td>Must be in compliance with Federal food safety inspection.</td>
<td>n/a for emergency services</td>
</tr>
<tr>
<td>FA–2c</td>
<td>Individuals requiring at-home support will receive food services</td>
<td>#/% of individuals receiving meal delivery in their homes</td>
<td>Food and Beverage License issued by the Dept. of Agriculture as a result of annual inspection; Serv Safe certification; Meals must meet 1/3 of the RDA recommendations and our menus are submitted to the State for review on an annual basis to insure compliance; Drivers must have a valid PA License and we check PA Driving Records on an annual basis to insure no violations have occurred.</td>
<td>(1) Individuals requiring at-home support will improve their nutritional health; (2) customers reporting that they are now able to get prepared, healthy meals so they can stay in their homes</td>
</tr>
</tbody>
</table>

### EMERGENCY SERVICES

<table>
<thead>
<tr>
<th>Strategy ID</th>
<th>Outcome</th>
<th>Outcome Strategy/Quantity Measure</th>
<th>Quality Measure</th>
<th>Results Measure</th>
</tr>
</thead>
<tbody>
<tr>
<td>ES–1</td>
<td>Individuals receive services in the event of a disaster.</td>
<td># of individuals receiving disaster relief services</td>
<td>Program provider has completed training for disaster services response.</td>
<td>n/a</td>
</tr>
<tr>
<td>ES–2a</td>
<td>Individuals have emergency housing needs met.</td>
<td># of individuals receiving housing-based legal services</td>
<td>Provider is a licensed lawyer or paralegal.</td>
<td>n/a</td>
</tr>
<tr>
<td>ES–2b</td>
<td>Individuals have emergency housing needs met.</td>
<td># of individuals receiving emergency shelter services</td>
<td>Relevant Emergency Food and Shelter Program (EFSP) eligibility</td>
<td>n/a</td>
</tr>
<tr>
<td>ES–3a</td>
<td>Individuals receive violence and crisis intervention services.</td>
<td># of individuals receiving shelter services</td>
<td>Shelter is a confidential location with 24-hour staff coverage.</td>
<td>n/a</td>
</tr>
<tr>
<td>ES–3b</td>
<td>Individuals receive violence and crisis intervention services.</td>
<td># of individuals receiving violence and crisis intervention support</td>
<td>Program provider has completed appropriate specialized training.</td>
<td>n/a</td>
</tr>
</tbody>
</table>
Every program will identify and report on a single outcome strategy (with unique strategy ID), reading across the *United Way Results Framework.*

### HEALTHY AGING

<table>
<thead>
<tr>
<th>Strategy ID</th>
<th>Outcome</th>
<th>Outcome Strategy/Quantity Measure</th>
<th>Quality Measure</th>
<th>Results Measure</th>
</tr>
</thead>
<tbody>
<tr>
<td>HA–1a</td>
<td>At-risk older adults stay healthy in their homes.</td>
<td># of older adults participating in programming for those with chronic disease</td>
<td>Staff has a Chronic Care Professional certificate or is a licensed health professional (nurse, doctor).</td>
<td>#/% of older adults improving key indicators for chronic disease (BMI, sugar levels, cholesterol levels)</td>
</tr>
<tr>
<td>HA–1b</td>
<td>At-risk older adults stay healthy in their homes.</td>
<td># of older adults participating in fall prevention programming</td>
<td>Program is delivered by one of the following Nurse Practitioner/PA, Registered Nurse, Physical Therapist Occupational Therapist, Social Worker.</td>
<td>#/% of older adults avoiding a fall in the past year</td>
</tr>
<tr>
<td>HA–1c</td>
<td>At-risk older adults stay healthy in their homes.</td>
<td># of older adults participating in fitness programming</td>
<td>Instructor must be one of the following: Certified Exercise Instructor, Exercise Sci/Phys Ed degree/Occupations Therapist/Physical Therapist.</td>
<td>#/% of older adults increasing their fitness scores</td>
</tr>
<tr>
<td>HA–1d</td>
<td>At-risk older adults stay healthy in their homes.</td>
<td># of older adults receiving handyman services</td>
<td>All providers are registered with the state attorney general.</td>
<td>#/% of older adults increasing home safety as a result of service</td>
</tr>
<tr>
<td>HA–2a</td>
<td>At-risk older adults receive support to stay in their homes.</td>
<td># of older adults receiving transportation assistance</td>
<td>Licensed by the PA Public Utility Commission as a PUC Regulated Motor Carrier.</td>
<td>(1) #/% of older adults able to stay in their homes (using Instrumental/Activities of Daily Living tool) (2) #/% of caregivers feeling a reduction in stress</td>
</tr>
<tr>
<td>HA–2b</td>
<td>At-risk older adults receive support to stay in their homes.</td>
<td># of older adults receiving grocery shopping services</td>
<td>Background checks are done on all prospective volunteers; Volunteers must have valid PA License and their own personal car insurance.</td>
<td>(1) #/% of older adults able to stay in their homes (using Instrumental/Activities of Daily Living tool) (2) #/% of caregivers feeling a reduction in stress</td>
</tr>
<tr>
<td>HA–2c</td>
<td>At-risk older adults receive support to stay in their homes.</td>
<td># of older adults receiving in-home support services</td>
<td>Home Health Aides – Licensed by the PA Department of Health as a Home Health Care agency.</td>
<td>(1) #/% of older adults able to stay in their homes (using Instrumental/Activities of Daily Living tool) (2) #/% of caregivers feeling a reduction in stress</td>
</tr>
<tr>
<td>HA–2d</td>
<td>At-risk older adults receive support to stay in their homes.</td>
<td># of older adults receiving out-of-home support services</td>
<td>Adult Day Services – Licensed by the PA Department of Aging as an Adult Day Services agency.</td>
<td>(1) #/% of older adults able to stay in their homes (using Instrumental/Activities of Daily Living tool) (2) #/% of caregivers feeling a reduction in stress</td>
</tr>
</tbody>
</table>
APPENDIX B: GLOSSARY OF TERMS

2-1-1: A free, confidential phone line available to everyone in the United States with calls answered by accredited and trained operators; information given about food banks; shelters; clothing; rent and utility; physical and mental health resources; employment support; support for older adults and persons with disabilities; support for children, youth and families; and much more.

Activities of Daily Living (ADL): Routine activities that people need to do daily to stay in their own home, including eating, bathing, dressing, toileting, and transferring (moving from one location to another).

Area Agency on Aging (AAA’s): Private, not-for-profit entities operated through the county government and designated by the Older Americans Act to advocate, plan, coordinate and fund a system of elder support services in their respective planning and service areas.

BMI: Body Mass Index, which is a measure for human body shape based on an individual’s mass and height.

CFSP: Certified Food Service Professional is the most important industry certification for food service professionals; the CFSP program provides a more knowledgeable, better-qualified and more motivated team.

Chronic Absenteeism: Missing 10% or more of a school year – approximately 18 days a year, or two days every month.

Collective Impact: The commitment of a group of community stakeholders from different sectors to a common agenda for solving a specific social problem with initiatives involving a centralized infrastructure, a dedicated staff and a structured process that leads to a common agenda, shared measurement, continuous communication, and mutually reinforcing activities among all participants.

Food Deserts: Geographic locations with limited access to nutritious foods.

Food Insecurity: Consistent inability to access nutritious and adequate amounts of food necessary for a healthy life.

Handyman Services: A preventative environmental intervention that ensures older adults live in a safe environment free of hazards. It includes interior maintenance services such as the installation of light bulbs, grab bars, raised toilet seats, house numbers for identification in emergencies, ceiling fans, exterior door locks, and smoke alarms. It can also include minor repairs that take less than three hours, including winterization, minor electrical repair, fixing broken steps, minor plumbing repair and replacement of broken handrails. The intervention is widely recognized as an effective intervention, championed by groups such as Community Aging in Place, Advancing Better Living for Elders (CAPABLE) and our local Area Agencies on Aging.

Homemaker/Health aide: A trained person who comes to an older adult’s home to help them perform necessary daily duties; for older adults who need assistance with activities of daily living, or particularly when their caregiver is experiencing burden from caregiving.

Results Framework: A delineation of the outcomes that should be measured by an organization including outcomes and indicators, allowing organizations to define their mission/program impact statement and then choose outcomes most relevant to that statement.


Indicators: Measures that quantify the achievement of results.
**Instrumental Activities of Daily Living (IADL):** Activities that people do once they are up and dressed that support an independent life style, including cooking, driving, using the telephone or computer, shopping, keeping track of finances and managing medication.

**Likert Scale:** An evaluative rating method, measuring either positive or negative response to a statement. For example, 1 = Poor; 5 = Satisfactory; 7 = Excellent.

**Older Adults:** Persons age 65+.

**Outcomes:** Conditions of well-being stated in plain language.

**Positive Youth Development:** Programs focused on the development of assets and competencies in all young people.

**Qualified Partner Agency:** An organization assessed annually by United Way of the Greater Lehigh Valley that meets the minimum governance, financial health, ethics, and legal requirements needed to ensure any financial investment with the agency would be managed correctly. This includes having an active 501(c)3 status, an independent audit by an auditing firm, maintaining necessary insurances, and healthy debt and cash flow ratios.

**Respite Services:** The provision of short-term, temporary relief to those who are caring for family members who might otherwise require permanent placement in a facility outside the home.

**Results Based Accountability (RBA):** A disciplined way of thinking and taking action used to improve quality of life in communities, as well as to improve the performance of programs; a simple, plain language approach to measurement that puts the focus on the ends and works backward to the means.

**SNAP:** Supplemental Nutrition Assistance Program that offers nutrition assistance to eligible, low-income individuals and families, and provides economic benefits to communities.

**Students:** Refers to students identified by school staff as struggling with attendance, behavior, and/or academic issues.

**Targeted Academic Intervention:** Provides support at the school level for students performing below grade-level expectations.

**United Way Alliance on Aging:** A volunteer organization convened by United Way of the Greater Lehigh Valley to address the needs of older adults in the community.

**United Way Community Schools:** At the center of a national movement to improve academic achievement by removing all barriers to learning, Community Schools are designed to transform schools into the hub of their neighborhood by organizing a wide array of programs and services in the school so students and families can get their needs met in one place.

**WIC:** Women, Infants and Children program that provides Federal grants to states for supplemental foods, health care referrals and nutrition education for low-income pregnant, breastfeeding and non-breastfeeding postpartum women, and to infants and children up to age 5 who are found to be at nutritional risk.
Appendix B: Endnotes

1. RBA is a term coined by Mark Friedman, author of the book “Trying Hard is Not Good Enough.” United Way has used this results-based framework to evaluate performance since 2008.

2. Pennsylvania Department of Education.


5. Households making less than 200% of the Federal Poverty Income guidelines.


8. Defined as public school pre-K, Head Start, or PA Pre-K Counts.


