
Request For Proposals

Implementation Partner for the Thriving Providers Project in Los Angeles County, CA

A direct cash transfer demonstration project for home-based child care providers.

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Submit responses to info@homegrownchildcare.org

by 3:00 PM ET on July 9, 2024

1. Introduction

Home Grown, in partnership with the Los Angeles County Children and Families First – Proposition 10 Commission (aka First 5 LA), is soliciting proposals from organizations to implement the [Thriving Providers Project \(TPP\)](#) in Los Angeles (LA) County, California.

TPP is a direct cash assistance demonstration project for [home-based child care](#) (HBCC) providers. The LA County implementation site of TPP will provide regular, unconditional, unrestricted cash transfers to HBCC providers, specifically Family, Friend and Neighbor (FFN) providers caring for children ages birth to 5 years, over a course of 12-24 months. These cash transfers are leveraged to enhance existing or new programs and services for HBCC offered by community-based organizations.

Home Grown will select an Implementation Partner in LA County to complete activities, further defined in the Scope of Work outlined in Section 4, during the Planning and Implementation Phases of the project.

Implementation Partner qualifications include:

- Existing relationships with FFN providers and established resource delivery to the FFN community.
- Ability to embed the TPP direct cash initiative as an additional service and, ideally, use participation in the TPP to further relationship building with FFN providers.
- Capacity to lead recruitment for the TPP, determine eligibility for the project, complete application intake, provide case management and benefits counseling to applicants, be the primary point of contact for providers, and support implementation of evaluation data collection.
- Ability to work closely with the TPP national project team consultants and staff to implement the project in LA County and provide regular reports to funders, including First 5 LA, and key stakeholders about the progress of the project.
- Alignment with Home Grown’s stated Agreements outlined in Section 3.

TPP will provide the selected Implementation Partner a planning grant, provide a technology platform to allow participants to apply for and receive cash transfers, offer expert technical assistance consultation around opportunities for policy change, evaluate the impact of the project on participants, support fundraising to match local funding for direct cash transfers and be an overall partner in helping you to succeed.

For more details on how The Thriving Provider Projects works across the U.S, see [Appendix A: More about the Thriving Providers Project](#).

2. Background

Most young children, especially infants and toddlers, are cared for in home-based child care (HBCC). HBCC refers to child care provided in a home, as an alternative to a center or institutional setting. There are many types of HBCC. Some providers have been licensed, and others have not. Generally, HBCC can be categorized as either: Family, Friends, and Neighbor (FFN) care, a broad term encompassing many types of caregivers, typically those who have a previous relationship with the children for whom they care; or as Family Child Care (FCC), also known as Family Child Care Homes or Family Day Care Homes. FCC caregivers provide care out of a private residence, typically as a business. There are two types of FCC facilities – those that are licensed and those that are not licensed.

HBCC is the preferred setting for: Black and Latinx families, for rural families, for families with nontraditional or unpredictable work schedules, and those with low-incomes. Home-based child care providers and caregivers are essential community anchors. And yet, the financial conditions of these providers are precarious. Most FFN caregivers, when paid, earn \$7,420 annually for offering care and 40% of caregivers rely on at least one other job besides child care to make ends meet. FCC providers, who on average work 56 hours a week, earn \$29,377 a year and 30% rely on at least one other job.

The Thriving Providers Project is organized by [Home Grown](#), a national collaborative of funders committed to improving the quality of and access to home-based child care (HBCC). The TPP believes that by providing unrestricted, unconditional, ongoing direct cash transfers to HBCC providers, we can inform policy changes that improve how early childcare educators are compensated and, ultimately, valued.

Please see [Appendix B: The Thriving Providers Project Theory of Impact](#) to understand the project's goals and intended outcomes.

3. Agreements

TPP Implementation Partners are asked to agree to the following project values as they participate in the initiative and to use the values as principles that guide decision-making and local program design.

- **Value Caregivers and Communities:** We value caregivers, their opinions, and the work they do. We believe that caregivers should be adequately compensated for their work, even when the families of children they care for cannot afford to pay. We trust caregivers to make decisions for themselves and seek to give them power and agency to do so. We

will affirm the assets and strengths of each community. We will make space to elevate the voice of participants in decision making. We trust in caregiver and parent reports on the well-being of themselves and their children.

- **Commitment to Equity:** We aim to promote racially and economically equitable communities. We acknowledge that America’s history of racism, discrimination, prejudice and bias has disenfranchised and marginalized segments of our society, denying them access to basic rights, social goods, and the means to build wealth.
- **Leverage Guaranteed Income (GI) Best Practices:** Use the principles of GI (unconditional, unrestricted, cost-effective, minimal administrative burdens) to demonstrate sufficient pay for providers.
- **Mitigate Unintended Negative Consequences:** Whenever possible, anticipate where DCTs may lead to negative consequences like income/benefits cliff. Acknowledge those risks and make a plan to address them.
- **Learn by Doing:** We aim to continuously test, learn, iterate and to be practical and pragmatic in our project design.
- **Open Source:** Our learnings and resources will be freely available to practitioners, funders, providers and policymakers.

4. Scope of Work

The role of the Implementation Partner will require continued collaboration with Home Grown staff members, First 5 LA, the payment distribution platform vendor, and research partners. The Implementation Partner is expected to dedicate at least one full time equivalent employee (1.0 FTE) to serve as the project manager. The Project Manager will be responsible for completing the key Planning and Implementation Phase activities outlined below, overseeing the day-to-day implementation of the project, and coordinating with other Implementation Partner staff members, strategic partners or subcontracted vendors who may be responsible for communications, financial management, fundraising (as needed), advocacy, recruiting, screening, onboarding FFN providers to participate in the LA County TPP or have expertise in benefits counseling.

Thus, in addition to the 1.0 FTE dedicated to project management, the selected Implementation Partner may consider dedicating an additional 2-3 part-time staff or part time subcontracted vendors. Scopes of work for subcontracted vendors may require prior approval from Home Grown and First 5 LA.

Required Activities

Planning Phase

1. Convene stakeholders, beneficiaries, and representatives from similar initiatives in facilitated discussions around project design.
2. Meet with Home Grown staff and consultants monthly (minimum 4-6 hrs) to prioritize key planning activities and to complete work products of the planning phase.
3. Review materials shared in preparation for monthly meetings and complete key project tasks following monthly meetings.
4. Share data, insight and experiences to support planning and design goals with Home Grown and First 5 LA during the planning phase.
5. Develop the following Planning Phase work products to guide the Implementation Phase:
 - a. Project Management Timeline with Tasks assigned to Key Decision Makers
 - b. Eligibility Criteria, Enrollment Application
 - c. Implementation Budget
 - d. Benefits Counseling Approach, Recruitment Approach
 - e. Project Design Document informing adoption of TPP Theory of Impact and Evaluation Plan
6. Contribute to the process led by First 5 LA to develop a Policy Landscape Assessment.

Implementation Phase

1. Convene (or co-convene) stakeholders, beneficiaries, and representatives from similar initiatives in facilitated discussions around project design.*
2. Meet with Home Grown staff and consultants monthly (minimum 1-2 hrs) to update on implementation phase activities.
3. Recruit, screen for eligibility, conduct benefits counseling, and enroll cohort participants.*
4. Liaise with the payment platform vendor to ensure timely execution of bi-monthly payment process. Troubleshoot user payment issues and ensure timely reconciliation.
5. Hold relationships with pilot participants, triage questions about TPP participation and relay to appropriate TPP project partners.

6. Liaise with Stanford Early Childhood Evaluation and Learning team. Co-facilitate conversation with Stanford for pilot participants about the Evaluation and Learning activities to ensure pilot participants understand the goal and scope of TPP evaluation so that they have the opportunity to make decisions about participating in the evaluation with informed consent. Offer thought partnership to Stanford Evaluation team's continuous quality improvement process for TPP evaluation and learning approaches. Share pilot participant feedback on data collection methods and tools to ensure evaluation appropriateness. Offer thought partnership to TPP project team on analysis of regular pilot data. Implement strategies to engage pilot participants in evaluation activities and to meet project goals for participation and response rates.
7. Support/Lead the Communication and Policy Strategy for TPP. Use TPP data to influence key policy makers and implement communication strategies to reach key audiences. Liaise with Home Grown and consultants around communications and policy strategy of local pilot.*
8. Implement an Exit Strategy, designed with stakeholder input, to ensure pilot participants are prepared for the conclusion of the TPP pilot.*
9. Share data, insight and experiences to support implementation and design goals with Home Grown and First 5 LA.

*Aspects of these Activities may be appropriate for subcontracted vendors engaged by the Implementation Partner. Additional activities may be considered for subcontracting based on applicant organizational capacity and landscape needs, pending review by Home Grown and First 5 LA.

5. Additional Qualifications

- Serving FFN providers who care for children ages birth to five years.
- Alignment with TPP's Theory of Impact.
- Experience working with home-based child care providers; particularly those serving low-income, immigrant, or rural families of color.
- Demonstrated ability to deliver program services in participants' preferred language.
- Demonstrated ability to build trust among program participants and the larger community.
- Demonstrated familiarity with local, state and federal policy issues related to child care.
- Ability for dedicated staff to meet regularly with Home Grown staff or its partners; expected frequency is a minimum of twice per month and up to once per week leading up to launch.



6. How to Submit A Response

Please submit your proposal electronically to info@homegrownchildcare.org by **3:00 PM ET on July 9, 2024**. Late proposals will not be accepted.

The proposal has a **10-page limit** (excluding the documents requested in #8 below) and should be submitted as a single .pdf file, with the subject line: "(Name of Organization) Response to RFP: LA County TPP Implementation Partner".

There is an information session about this RFP scheduled for **June 10, 2024, at 12:30 PM ET**. Registration is required ([click here to register](#)).

Please email any questions regarding the RFP to info@homegrownchildcare.org by **3:00 PM ET on June 17, 2024**. Responses to FAQs will be available on the [Thriving Providers Project website](#).

Submittal Requirements

Submitted proposals should contain the information outlined below. Wherever possible, concrete evidence demonstrating the organization's capacity through past successes and alignment with TPP Agreements should be included. Please include the underlined headings below in your proposal document.

1. Cover Letter: Identify the applicant organization (name, mailing address, website) and include the name, title, and contact information (mailing address, phone number, and email address) of the person whom Home Grown should contact regarding the application.
2. Organization Description & Structure: Please include the following Information about your organization:
 - a. History and mission.
 - b. Number of staff members (full and/or part time) in your organization.
 - c. Demographic information for board and senior staff members.
 - d. Description of relationships with HBCC providers and examples of relevant projects that serve HBCC providers.

3. FFN Landscape:
 - a. Describe the FFN providers you currently serve. Include demographics, geography (zip codes), key strengths, and needs.
 - b. Describe the children/families they serve. Include numbers, demographics, geography (zip codes) and ages.
 - c. Describe the ways in which you currently connect with them? What services are you offering to them?
4. Leveraging Direct Cash Transfers:
 - a. How do you anticipate direct cash transfers would impact the FFN providers you serve?
 - b. Based on how you described the FFN landscape in your community in Question 3, please list the existing or new initiative(s) that your organization or strategic partners offer that the cash transfers could accompany.
 - c. Detail the operations and timeline of how you envision using the direct cash transfers. For example, perhaps you wish to offer cash transfers to the network of FFN providers you support or perhaps you wish to start a new network and use cash transfers as an additive incentive (but not required) to participate.
 - d. Describe how you will incorporate provider voice and leadership in your planning and implementation of this work.
5. Overcoming Anticipated Challenges:
 - a. What challenges do you anticipate encountering while carrying out the Planning Phase and Implementation Phase activities described in Section 4 – Scope of Work?
 - b. How do you propose addressing these challenges? Please be specific and share examples. Include what, if any, strategic partners or subcontracted vendors you anticipate engaging to help address the challenges and what, if any, technical assistance from Home Grown you would prioritize (see [Appendix D: Home Grown National Infrastructure Summary of Services](#)).
6. Anticipated Funding Sources: Describe any sources of funding (philanthropic or public) in which you could (or have) pursue(d) to fund the implementation of the TPP.
7. Provider Referrals: Provide names, contact information (email address and phone number), and language preference for two FFN providers that can share their experience

receiving services from or otherwise engaging with your organization. These providers may be contacted by Home Grown as part of the application review process.

8. Required Documents (These do **NOT** count towards the proposal's 10-page limit):
 - a. An organizational chart.
 - b. Current year operating budget.

7. Evaluation Criteria & Next Steps

Applicant submissions to this RFP will be assessed for evidence of **organizational capacity** to successfully integrate and deliver TPP.

Home Grown has a values-driven mission and strives to partner with aligned organizations. Therefore, submissions will also be evaluated using the following criteria derived from the Agreements outlined in Section 3:

- **Value Caregivers and Communities**
- **Commitment to Equity**
- **Leverage Guaranteed Income (GI) Best Practices**
- **Mitigate Unintended Negative Consequences**
- **Learn by Doing**
- **Open Source**

After evaluation of the RFP submissions, Home Grown intends to invite select applicants for virtual interviews.

Please note that once chosen, the selected Implementation Partner must provide the following documentation prior to signing a contract:

- Form W-9.
- Most recent balance sheet, profit & loss statement, and current fiscal year operating budget; audited preferred but not required.
- Proof of insurance: Commercial General Liability, Business Auto Liability, and Workers' Compensation.

8. Timeline

June 4, 2024	RFP Released
June 10, 2024 @ 12:30PM ET	Information Session (click here to register ; registration required)
June 17, 2024 by 3:00PM ET	Submit Questions
July 9, 2024 by 3:00PM ET	RFP Submission Deadline
Week of July 22-26, 2024	Virtual Interviews (by invitation only)
August 9, 2024	Make Offer
September 1, 2024	Anticipated Contract Start Date

Appendix A: More About The Thriving Providers Project

The Thriving Providers Project (TPP) is implemented across multiple cities, counties, and states. Each site is implemented by a community-based organization (CBO) that has existing trusted relationships with home-based child care providers. The CBO uses cash transfers as a tool to enhance their existing programs or services for home-based child care providers. Home Grown offers the CBO funding to prepare and plan for how to leverage direct cash transfers, an “out-of-the-box” direct cash assistance payment platform, monitoring and evaluation support, expertise on ensuring outcomes map to an aligned long-term policy agenda and more.

Roles & Responsibilities of Parties Involved

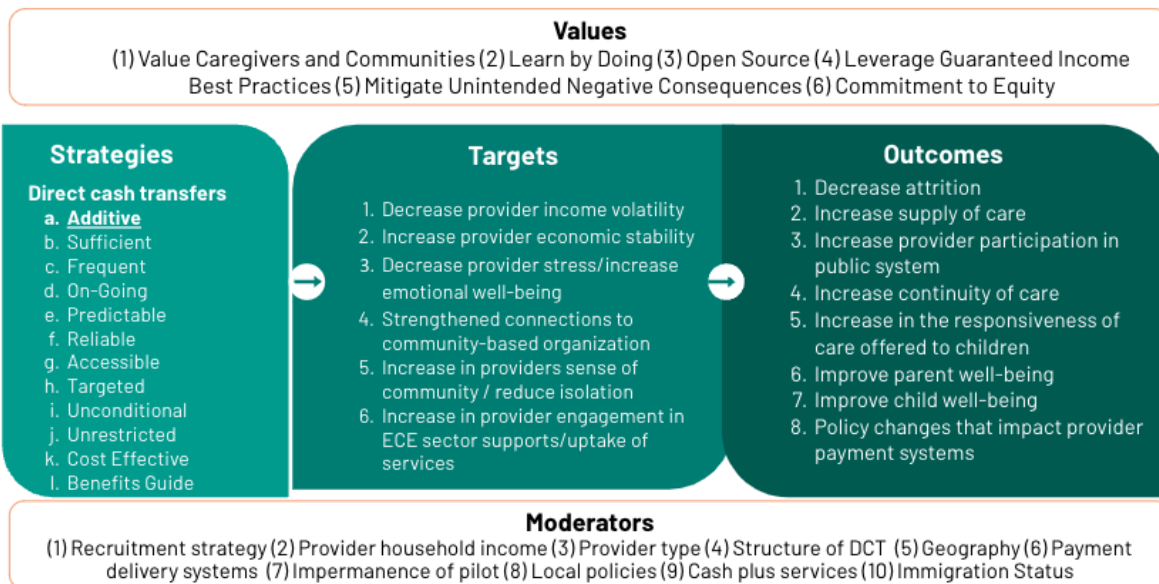
Entity	Roles & Responsibilities
Home Grown	<ul style="list-style-type: none"> ● Provides funding to CBO to plan and prepare ● Funds CBO use of payment platform ● Funds programs monitoring and evaluation activities ● Aggregates best practices across programs and facilitates peer learning amongst CBO partners ● Supports CBO to fundraise (as needed) ● Gathers learnings to inform policy
Community Based Organization	<ul style="list-style-type: none"> ● Determines how cash transfers compliment existing or new programs/services ● Determines structure of program (amount, duration, etc.) within defined parameters ● Chooses provider eligibility criteria from set of predetermined options ● Recruits providers ● Supports providers to apply and enroll ● Designs an exit strategy ● Develops strategy to mitigate loss of public benefits (i.e. seeks exemptions, establishes hold harmless fund, etc.)

	<ul style="list-style-type: none"> • Offers advice or tools on mitigating loss of public benefits
<p>Payment Platform</p>	<ul style="list-style-type: none"> • Builds application • Processes applicants • Verifies eligibility • Distributes cash • Monitors application status • Trains community based organizations to use platform • Takes proactive steps to minimize tax liability on recipients • Offers advice or tools on mitigating loss of public benefits • Develops and manages mechanism to minimize fraud

Appendix B: Theory of Impact

[Home Grown](#) uses a Theory of Impact (TOI) to articulate how the [Thriving Providers Project](#) will have an impact on family, friends or neighbor caregivers and newly licensed family child care providers. The Theory of Impact is used to guide decisions related to program design, implementation, and evaluation. It is this framework that determines what data will be collected and analyzed throughout the national pilot and in each replication community.

TPP Theory of Impact



Values are the overall principles that guide decision making and program design. Home Grown’s TPP is a program that above all, aims to:

- Value Caregivers and Communities:** We value caregivers, their opinions, and the work they do. We believe that caregivers should be adequately compensated for their work, even when the families of children they care for can not afford to pay. We trust caregivers to make decisions for themselves and seek to give them power and agency to do so. We will affirm the assets and strengths of each community. We will make space to elevate the voice of participants in decision making. We trust in caregiver and parent reports on the well-being of themselves and their children.

- **Learn by Doing:** We aim to continuously test, learn, iterate and to be practical and pragmatic in our program design.
- **Open Source:** Our learnings and resources will be freely available to practitioners, funders, providers and policymakers.
- **Leverage Guaranteed Income Best Practices:** Use the principles of guaranteed income (unconditional, unrestricted, cost-effective, minimal administrative burdens) to demonstrate sufficient pay for providers.
- **Mitigate Unintended Negative Consequences:** Whenever possible, anticipate where direct cash transfers may lead to negative consequences like income/benefits cliff. Acknowledge those risks and make a plan to address them.
- **Commitment to Equity:** We aim to promote racially and economically equitable communities. We acknowledge that America’s history of racism, discrimination, prejudice and bias has disenfranchised and marginalized segments of our society, denying them access to basic rights, social goods, and the means to build wealth.

Strategies are the direct actions of the project teams (i.e. the inputs) that will ultimately drive change.

Home Grown seeks to demonstrate that implementing the following **strategies** through providing direct cash transfers to family, friends or neighbor caregivers and newly licensed family child care providers will create our desired impact:

- Additive: Cash transfers are leveraged to enhance community based organizations existing or new programs and services for home-based child care providers.
- Sufficient: The amount of the direct cash transfer given to providers must be a consistent amount anywhere between \$300-\$1,250 a month but is sufficient enough for a provider to weather a financial shock or when combined with earnings from caring for children, be above the current local reimbursement rate for child care.
- Frequent: Direct cash transfers are delivered anywhere from weekly to monthly, ideally 2 times per month.
- On-going: Direct cash transfers are delivered over the course of at least 12 months, ideally 18 months or longer
- Predictable: Direct cash transfers arrive at consistent intervals (i.e. the last friday of the month)

- Reliable: Recipients can feel confident that the direct cash transfers will consistently arrive, with little to no effort (i.e. no need to submit an invoice, provide paperwork, etc.)
- Accessible: Application, screening process, delivery of direct cash transfers are simple, easily accessible, taking no longer than 15 minutes to complete. The organizations recruiting and screening participants communicate effectively and actively work to build trust.
- Targeted: Participants are intentionally recruited from communities most likely to benefit from a DCT and through a trusted source.
- Unconditional Cash: There are no behavioral conditions for receiving the direct cash transfers (e.g. providers do not need to attend training, respond to surveys, etc.)
- Unrestricted: There are no restrictions for how the direct cash transfers can be spent.
- Cost Effective: The cost to deliver the cash transfers is less than the total amount of cash transfers and/or similar interventions.

Targets are the immediate results of implementing the strategies. For example, we hypothesize that the strategies above will enable providers to experience less income volatility.

Having a predictable fixed income, may result in more stability – giving them the bandwidth to think beyond meeting their basic needs each week. Above all, this stability is likely to reduce stress and improve overall well-being. Likewise, we believe that intentionally recruiting providers through organizations that have trusted relationships and are already offering services to the community will increase the uptake of those services. Cash transfers can be leveraged as a tool by community based organizations to increase their capacity and strengthen their relationships to providers.

In summary, we believe the above strategies are likely to lead to the following targets:

- A decrease in provider income volatility
- An increase in provider economic stability
- A decrease in provider stress and/or an increase in emotional well-being
- Strengthened connections to community-based organization
- An increase in providers' sense of community
- An increase in provider engagement in early care and education sector supports and/or increased uptake of services offered

Outcomes are the long-term changes we anticipate seeing once the targets have been achieved. You can think of the path between strategies, targets, and outcomes as a set of dominoes.

As a result of the targets listed above, Home Grown expects that providers, families and the system that supports child care providers will experience sustained positive outcomes. For example, a provider may no longer need to hold multiple jobs to make ends meet. As a result they can offer more hours of care and more consistent care to families. This continuity of care not only supports a child’s learning and development, but is likely to create stability and predictability in the life of the parent – leading to steady employment, which in turn decreases family stress. The additional income from direct cash transfers may make it more likely for a provider to be able to invest in improving their home learning environment by purchasing things like books, materials, food, etc. More importantly, by reducing the constant stress that comes with income volatility, a provider is likely to have an increased capacity to engage in resources offered by the public child care infrastructure. They might have the bandwidth to pursue professional development, licensing, quality improvements, or get access to public funding sources. They are likely to have an increased capacity to be a responsive and engaged caregiver. If these outcomes are achieved, we believe it is likely to provide sufficient rationale to influence policy changes that improve the systems to compensate home-based child care providers. In sum, Home Grown expects the outcomes of the Thriving Providers Project are likely to be:

- A decrease in provider attrition and/or an increase in the supply of available care.
- An increase in providers’ participation in public systems (i.e. the federal food program, CACFP or child care subsidies, CCDF)
- An increase in the continuity of care experienced by families
- An increase in the responsiveness of care offered to children
- An increase in parental well-being
- An increase in child well-being
- Policy changes that impact provider payment systems

We recognize that there are nuances in each pilot site that may impact the expected outcomes described in the theory of impact. Moderators are these conditions that may affect how change occurs.

The ToI assumes that those receiving direct cash transfers are primarily under-resourced family, friends, and neighbor caregivers and newly licensed family child care providers who serve low-income families. The outcomes are likely to change if the target populations differ across pilot sites. Similarly, the outcomes may be impacted by the amount, frequency, and duration of the direct cash transfers, as well as the pilot site's ability to efficiently deliver cash transfers. Lastly, there is a chance that knowing that the cash aid will end at some point may actually increase a provider's stress and future uncertainty. Naming these moderators up front helps evaluators anticipate differences in data and analyze the further variables affecting change. In summary, the moderators are:

- Recruitment strategy
- Provider household income
- Provider type
- Structure of direct cash transfer
- Geographic location
- Payment delivery system
- Impermanence of pilot
- Local policies
- Additional services offered alongside cash
- Immigration Status

Appendix C: Proposed Structure of TPP

Amount	Somewhere between \$330-\$1200/month, most likely \$500/month
Frequency	2x a month
Duration	Anywhere from 12-24 months, mostly likely 18 months
Eligibility	<ul style="list-style-type: none"> ➤ Family, friends, neighbor or newly licensed family child care provider currently caring for children <ul style="list-style-type: none"> ■ verified by self-report or by guardian/CBO attestation ■ and/or if licensed, verified by an upload of license # or manual/automatic look up in the state database ➤ Resides in a certain location (state, county, etc)
Number of Recipients	Anywhere from 25-150 at each site for a total, with up to a total of 570 recipients by the end of year three.
Number of sites	Up to 7 total program partners, roughly 1-4 a year.

Appendix D: Home Grown National Infrastructure Summary of Services

Name	Description	Service Provider	Scope
Replication Toolkit	Step-by-step guide to plan, design and execute the TPP	Home Grown	Unlimited access
Design Technical Assistance (Design TA)	Advice on the planning, design and execution of the TPP.	Home Grown	4-6 hours a month
Policy Strategy Technical Assistance	Access to a tool that maps local policies affecting provider pay in your area , analysis of local landscape assessment and TA on strategic planning for policy reform.	Home Grown Policy Partners	Unlimited access to tool + 3 hours of Urban Institute technical assistance over the duration of the pilot
Evaluation & Data Collection	Use of the TPP evaluation and data collection plan, regular readouts on data and trends, and technical assistance from the Stanford Graduate School of Education to advise you on site specific considerations	Stanford Graduate School of Education (i.e. Stanford evaluation team)	32 hours of technical assistance over the duration of the pilot

	and develop a plan to address them		
Payment Delivery Platform	Use of an end-to-end technology platform to screen applicants and deliver direct cash transfers.	Beam	Opportunity to modify applications, access data and reports, etc.
Peer Learning	Access to curated opportunities, facilitated to learn from other TPP pilot sites.	Home Grown	Regularly during Planning and Implementation Phase
Communications & Branding	Use of the TPP communication toolkit including tools and guidance for promoting the local pilot, crafting messaging campaigns and advancing the strategic policy agenda. As needed consultation from the Home Grown communications team. Co-branding of the local pilot as part of the Thriving Providers Project and inclusion on the TPP website. Home Grown amplification of local communication in national communication channels.	Home Grown	N/A

<p>Funding & Fundraising Support</p>	<p>Matching funds to support the planning and execution of the local pilot. Support with additional local funder engagement, including TPP materials for convening funders to advance additional fundraising efforts as needed.</p>	<p>Home Grown/First 5 LA</p>	<p>Site specific</p>
<p>Benefits Education and Mitigation Support</p>	<p>Access to Benefits Toolkit. As needed consultation from TA expert in Benefits Education for GI pilots.</p>	<p>Home Grown Consultants</p>	<p>As needed</p>