

MEMORANDUM

DATE: June 10, 2016

TO: NPAIHB Delegates, Tribal Health Directors and Tribal Chairs

FROM: Joe Finkbonner, RPh, MHA, Executive Director

RE: **WEEKLY MAILOUT**

- Portland Area Indian Health Service Direct Service Tribes Meeting, July 6-7, 2016 in Tigard, OR
- NPAIHB Quarterly Board Meeting, August 9-11, 2016 in Omak, WA
- Indian Health Service Tribal Management Grant (deadline extended to June 17)
- NPAIHB Funding Opportunities Report
- 2016 Indian Health Service Pre-Partnership Session, June 27 2016 in Phoenix, AZ (Basic Training on CMS Programs: Medicaid, Medicare, Marketplace, and effective Outreach Strategies for American Indians and Alaska Natives)
- Department of Veterans Affairs (VA) asking tribes to provide their three to five priorities concerning VA (first tribal consultation June 29th in Spokane, WA)

Delegates and Tribal Health Directors:

- WEAVE-NW webinar series, June 28, 2016 re: Planting the seeds for a thriving community garden
- Good Health and Wellness in Indian Country Tribal Resource Digest

Portland Area Indian Health Service
 Direct Service Tribes Meeting
 July 6 & 7, 2016
 Location: 9000 SW Washington Square Rd, Tigard, OR 97223

Wednesday, July 6, 2016

9:00-9:30 a.m.	Welcome & Introductions	Dean M. Seyler, Area Director
	Invocation	Tribal Elder
9:30-10:00 a.m.	Area Director Update	Dean M. Seyler, Area Director
10:00-10:30 a.m.	Northwest Portland Area Indian Health Board	Joe Finkbonner, RPh, Executive Director, NPAIHB
10:30-10:45 a.m.	Break	
10:45a.m.-11:15am	Business Office <ul style="list-style-type: none"> • Affordable Care Act (ACA) • ICD10 Update • Centers for Medicaid and Medicare Services Facilities List (CMS) • Veterans Affairs Memorandum of Understanding (VA MOU/Billing) • Purchase and Referred Care (PRC) updates 	Peggy Ollgaard, Business Office Manager
11:15 a.m.-12:00 p.m.	Tribal Leader Comments <ul style="list-style-type: none"> • Queue • Government Performance Results Act (GPRA) 	CAPT Miles Rudd, MD, CMO/Deputy Director, PAIHS & Mary Brickell, DIRM, PAIHS
12:00-1:00 p.m.	Lunch (on your own)	
1:00-1:30 p.m.	1:1 Meeting	Dean M. Seyler, Area Director
1:30-2:00 p.m.	1:1 Meeting	Dean M. Seyler, Area Director

2:00-2:30 p.m.	1:1 Meeting	Dean M. Seyler, Area Director
2:30-3:00 p.m.	Break	
3:00-3:30 p.m.	1:1 Meeting	Dean M. Seyler, Area Director
3:30-4:00 p.m.	1:1 Meeting	Dean M. Seyler, Area Director
4:00 p.m.	Adjourn	

Portland Area Indian Health Service
Direct Service Tribes Meeting
July 6 & 7, 2016
Location: 9000 SW Washington Square Rd, Tigard, OR 97223

Thursday, July 7, 2016

8:30-8:35 a.m.	Opening Remarks	Dean M. Seyler, Area Director
8:35-9:00 a.m.	Direct Service Tribes National Update	Janice Clements, Warm Springs, Health & Welfare Committee, PAIHS Delegate to National DST Committee Michelle EagleHawk, ODSCT Deputy Director, IHS Headquarters
9:00-10:15 a.m.	Overview of Office of Environmental Health & Engineering <ul style="list-style-type: none">• Environmental Health Services (EHS)• Sanitation Facilities Construction (SFC)• Health Facilities Engineering (HFE)• Spokane District Office• Olympic District Office• Seattle District Office	Rich Truitt, PE Director, OEHE
10:15-10:30 a.m.	Break	
10:30-11:15 a.m.	Office of Administration and Management (OAM)	CAPT Ann Arnett, Executive Officer
11:15 a.m.-12:15 p.m.	Clinical Services <ul style="list-style-type: none">• Behavioral Health• Pharmacy & Electronic Health Record• Health Promotion/Health Education• Dental• Nursing• Laboratory Services• Optometry	Jon Merrell, OCS, Director
12:15-1:30 p.m.	Lunch (on your own)	

1:30-2:00 p.m.	<p>Portland Area Budget</p> <ul style="list-style-type: none"> • Fiscal Year 2016 Budget • Area Shares Methodology Presentation 	Sharlene Andrew, Director, DFM
2:00-2:30 p.m.	<p>Division of Information & Resource Management (IT)</p> <ul style="list-style-type: none"> • Information Technology Updates 	Jonathan Hubbard, Director, DIRM
2:30-3:00 p.m.	Improved Patient Care (IPC) Update	Jon Merrell, OCS Director
3:00-3:15 p.m.	Break	
3:15-4:30 p.m.	<p>Portland Area Chief Executive Officer Updates OTSUO</p> <ul style="list-style-type: none"> • Fort Hall Service Unit • Yakama Service Unit • Wellpinit Service Unit • Colville Service Unit • Warm Springs Service Unit • Western Oregon Service Unit 	<p>Terry Dean, Director,</p> <p>Shirley Alvarez Jay Sampson CAPT Marcus Martinez Colleen Cawston Carol Prevost, BSN CAPT Laura Herbison, RN</p>
4:30-4:45 p.m.	Questions & Answers	
4:45 p.m.	Adjourn	

NORTHWEST PORTLAND AREA INDIAN HEALTH BOARD

QUARTERLY BOARD MEETING

AUGUST 9-11, 2016

AT

12 TRIBES RESORT CASINO
28968 HIGHWAY 97
OMAK WA 98841

RESERVATIONS: 1.509.422.8500

Rooms are blocked under the group name of **"160807INDI"**. Hotel rooms are \$89/night plus taxes 8/7/2016 – 8/10/2016. *For those staying for the Stampede there are a **LIMITED** number of hotel rooms and the rates are \$169/night plus taxes (8/11 – 8/13/2016) at your own expense.* Please call by **July 1, 2016** to receive the group rate. Reservations received after this date will be accepted on a space available basis and at the regular room rate.

If you have any questions, please contact Lisa Griggs, Executive Administrative Assistant at (503) 416-3269 or email lgriggs@npaih.org

From: Seyler, Dean M (IHS/POR) [<mailto:Dean.Seyler@ihs.gov>]

Sent: Tuesday, June 07, 2016 1:36 PM

Subject: FW: ANNOUNCEMENT: IHS Tribal Management Grant - Deadline Extended to Friday June 17, 2016

Please be advised of the following update:

Indian Health Service – Tribal Management Grant: Fiscal Year (FY) 2016

Key Dates: **Application Deadline Date: Wednesday, June 17, 2016**
 Review Dates: June 24-July 1, 2016
 Earliest Anticipated Start Date: Thursday, September 1, 2016

Background: The FY 2016 Tribal Management Grant Program. The TMG Program is a competitive grant program that is capacity building and developmental in nature and has been available for Federally-recognized Indian Tribes and Tribal organizations (T/TO) since shortly after the passage of the ISDEAA in 1975. It was established to assist T/TO to prepare for assuming all or part of existing IHS programs, functions, services, and activities (PFSAs) and further develop and improve their health management capability. The TMG Program provides competitive grants to T/TO to establish goals and performance measures for current health programs; assess current management capacity to determine if new components are appropriate; analyze programs to determine if T/TO management is practicable; and develop infrastructure systems to manage or organize PFSAs.

Resources:

- [IHS Division of Grants Management](#)
- <http://www.grants.gov/web/grants/search-grants.html?keywords=TMG>



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\$\$\$ ~ Weekly Funding Opportunities Report ~ \$\$\$

Friday, June 09, 2016

To: Idaho Delegates, Oregon Delegates, Washington Delegates, Tribal Chairs and Tribal Health Directors

Greetings! The NPAIHB - Funding Opportunity is provided on the basis that when there is pertinent announcements that we are made aware of, received and researched for as part of our commitment to the health and well-being of our tribal members it is posted here for you. Every Friday, new posts will be available (unless there is nothing **"New"** **Funding Opportunity Information (is provided in this color code)**).

If you have a specific targeted goal, or urgent community needs and find yourself not knowing where to start looking our assistance is available anytime, and we would be very excited to assist you. Also, at the end of this announcement there are several funding organizations that do not have deadlines and do accept proposals all year round. Thank you for your time, please do not hesitate to contact me:

Tara Fox, Grant Specialist
E-mail: tfox@npaihb.org
Office Phone: (503) 416-3274



NIHCM Foundation Grant Program to Support Investigator-Initiated Research

DEADLINE: Interested researchers must submit a brief letter of inquiry (LOI) outlining their study idea by 5:00 PM EDT on July 11, 2016. Full (10-page) proposals will be invited from a small number of applicants in August and will be due in September 2016.

AMOUNT: NIHCM is making available up to \$250,000 for this funding cycle and expects to fund four to five studies from this amount. We are seeking high-value projects, and the efficiency of the proposed budget will be assessed relative to expected impact and project scope.

DESCRIPTION: To support innovative research that will advance the existing knowledge base in the areas of health care financing, delivery, management and/or policy. Studies must have strong potential to yield insights that can be used to have a positive impact on the U.S. health care system by reducing spending, improving quality of care, and/or expanding access to insurance coverage and health care services.

WEBSITE: <http://www.nihcm.org/categories/research-grants-application-information>

Factors Underlying Differences in Female and Male Presentation for Dental, Oral, and Craniofacial Diseases and Conditions (R01) – DHHS/NIH

DEADLINE: October 5, 2016

AMOUNT: See instructions

DESCRIPTION: The purpose of this funding opportunity announcement (FOA) is to



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encourage research on mechanisms underlying the manifestations of sex-based differences in Dental, Oral, and Craniofacial (DOC)-related diseases and conditions. Specifically, this initiative encourages studies aimed at understanding immune reactivity, genetic variation, environmental triggers, aging, and hormonal changes as they affect sex-based differences in DOC-related diseases and conditions including, but not limited to, Sjogrens Syndrome (SS), orofacial pain, temporomandibular joint (TMJ) disorder (TMD), salivary gland tumors, and human papillomavirus (HPV)-associated oropharyngeal cancers.

WEBSITE: <http://www.grants.gov/web/grants/view-opportunity.html?oppId=284201>

Detecting and Preventing Suicide Behavior, Ideation and Self-Harm in Youth in Contact with the Juvenile Justice System (R01) –DHHS/NIH

DEADLINE: October 5, 2016

AMOUNT: \$500,000

DESCRIPTION: This initiative supports research to test the effectiveness of combined strategies to both detect and intervene to reduce the risk of suicide behavior, suicide ideation, and non-suicidal self-harm (NSSI) by youth in contact with the juvenile justice system. Opportunities for detection and prevention start at early points of contact (e.g., police interaction, the intake interview) and continue through many juvenile justice settings (e.g., pre-trial detention, juvenile or family court activities, court disposition, placement and on-going care in either residential or multiple community settings.) This FOA invites intervention strategies that are designed to be delivered in typical service settings using typically available personnel and resources, to enhance the implementation of interventions that prove effective, enhance their future uptake in diverse settings, and thereby reduce risk of suicide and self-harm in this population.

WEBSITE: <http://www.grants.gov/web/grants/view-opportunity.html?oppId=284224>

~ COMMUNITY ~

The Donald Samull Classroom Herb Garden Grant

DEADLINE: Application deadline for 2016-17 academic year: October 1, 2016 with awards announced December 1, 2016.

AMOUNT: The Herb Society of America will select ten (10) schools/classrooms to receive \$200 "Seed Money" to establish an herb garden (indoor or outdoor). The funds may be used for supplies such as soil, plant trays, containers, child or youth sized tools, etc. The school may need to seek additional funding and support from other sources. The Herb Society of America will provide the educational materials and herb seeds.

DESCRIPTION: The Herb Society of America, as a recipient of a bequest from the estate of Donald Samull, has established herb garden grants for teachers in grades 3 through 6. Mr. Samull was an elementary school teacher who used his love of herbs in the classroom with his 3rd-6th grade students. These grants will ensure that his tradition of using herbs with students will continue for years to come.



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Public and/or private 3rd through 6th grade teachers, with classes of a minimum of 15 students may apply for an herb garden grant.

The Herb Society of America will select ten (10) schools/classrooms to receive \$200 "Seed Money" to establish an herb garden (indoor or outdoor). The funds may be used for supplies such as soil, plant trays, containers, child or youth sized tools, etc. The school may need to seek additional funding and support from other sources. The Herb Society of America will provide the educational materials and herb seeds.

WEBSITE: <http://herbsociety.org/resources/samull-grant.html>

Family Travel Forum Teen Travel Writing Scholarship 2016

DEADLINE: All applications must be received no later than 11:59pm ET on July 13, 2016. Late entries will not be considered.

AMOUNT:

First Place: \$1,000

Second Place: \$500

Third Place: \$250

Leading travel insurance provider Allianz Global Assistance USA will also award the top three prize winners a "Go Bag" comprised of a GoPro, portable power pack and a passport holder with RFID protection

20 Honorable Mentions: Travel prizes including a subscription to Lonely Planet magazine which aims to inspire today's traveler through immersive storytelling, rich photography, practical advice and accessible travel ideas.

DESCRIPTION: Applicants must be ages 13-18 and attending grades 8-12.

Applicants must be attending junior high or high school in the United States or Canada, or an American international school abroad, or be enrolled in a U.S. homeschool program. Judging the FTF Teen Travel Writing Scholarship.

Travel blogs will be judged on originality, quality of expression, and a sense of place, as well as in accordance with standard rules of English grammar, mechanics and spelling. A panel of esteemed educators, professional writers and editors will make the final selection of winners.

All applicants will be contacted by email when the Judges have completed selecting the Semi-Final round of essays and posted them online. Please update your online Account Info if your email address changes during the scholarship period.

Only Finalists will be contacted for follow up documents to verify their eligibility.

WEBSITE: http://myfamilytravels.com/teen_travel_writing



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BEST BUY – COMMUNITY GRANT

DEADLINE: Complete the grant eligibility quiz online at <http://www.easymatch.com/bestbuygrant> between June 1-July 1, 2016.

Create a user profile and an organization profile.

Preview the required elements of the grant proposal.

Identify a Best Buy location near you at www.bestbuy.com/storelocator and enter the store or location number in the grant proposal.

Complete the grant proposal by 5 p.m. EDT on July 1, 2016.

Notification date: Sept. 15, 2016.

For more information: bestbuygrant@easymatch.com or 866-625-4350.

AMOUNT: Community Grants program, will award grants of up to \$10,000 to local and regional nonprofit organizations working to provide teens with places and opportunities to develop technology skills technology skills for a twenty-first-century economy.

DESCRIPTION: As technology becomes more ingrained in our society, Best Buy knows it is increasingly necessary for youth to develop the 21st-century skills that will set them up for future career success. Yet, we also know that a participation gap exists. Too many teens have little or no access to technology and, as a result, they fall behind their peers.

As a company, and through the Best Buy Foundation, we are on a mission to provide teens with places and opportunities to develop technology skills that will inspire future education and career choices.

We strive to leverage our local community presence, our technology resources and our talented employees to provide new and creative programs to serve our communities.

Best Buy Community Grants

The Best Buy Foundation will donate Community Grants to local and regional nonprofit organizations that provide teens with places and opportunities to develop 21st century technology skills that will inspire future education and career choices.

Examples of program activities include:

Computer programming

Digital imaging (photography, graphic design, videography)

Music production

Robotics

Gaming and mobile app development



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Community Grants are designed to support local efforts and are reviewed for consideration by Best Buy teams across the nation. The average grant amount is \$5,000 and will not exceed \$10,000.

Eligibility Criteria

Best Buy seeks applications from 501(c)(3) nonprofit organizations and public agencies that have tax-exempt status and are giving teens access to opportunities through technology. Minimum eligibility criteria include:

Organization must provide direct services to build technology skills in teens, ages 13-18

Eligible nonprofits may be a public or nonprofit community-based organization (for example, community center, school or library).

Location must be within 50 miles of a Best Buy store, Best Buy Mobile location, Best Buy Distribution Center, Best Buy Service Center or Best Buy's corporate campus. To find store locations, visit www.bestbuy.com/storelocator.

Organizations that have engaged Best Buy employee volunteers will receive special consideration.

Grants are awarded for one year. We invite grantees to re-apply based on program results, although there are no guarantees of multi-year grants. Previous grantees must submit a report before applying for subsequent funding.

Community-based, outside-of-school programs are eligible.

Organization must serve a diverse population in local or regional communities.

Organization must show positive results against a demonstrated community need and will be required to submit a grantee report.

Organizations within the Twin Cities seven-county metro area are eligible and can apply for Best Buy Foundation support through the Community Grants Program or Twin Cities Fund, but not both.

WEBSITE: <https://corporate.bestbuy.com/wp-content/uploads/2016/04/community-grant-rfp-2016.pdf>

<https://corporate.bestbuy.com/community-grants-page/>

IDAHO & WASHINGTON - ONLY

ASPCA Northern Tier Shelter Initiative Coalition Grants

DEADLINE: No Deadline

AMOUNT: Grant amounts will vary depending on project. A site visit may be required as part of the review process or as a condition of receiving the grant funds. Consultation services may be offered as part of a grant package.



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DESCRIPTION:

Priority will be given to coalitions working toward long-term, systemic, and sustainable community/regional improvements in animal welfare services. This may include (but not limited to) programs that:

Increase capacity to provide quality animal care and services by:

Improving protocols around vaccination on intake, disease spread prevention, decreased length of stay, physical and behavioral care of sheltered pets

Improving capacity to provide basic health services including spay/neuter and vaccines for animals at risk in the community.

Increase coalition live release rate via:

Fee-waived adoption programs and policies

High-volume adoption events

Foster programs

Relocation initiatives within the seven Northern Tier target states

Decrease shelter intake via:

Lost and found programs

Return to owner in the field

Pet retention assistance, such as safety net programs

Re-homing assistance

WEBSITE: <http://aspcapro.org/grant/2016/05/06/aspca-northern-tier-shelter-initiative-coalition-grants>

2016 JUNE

**Native Youth Initiative for Leadership, Empowerment, and Development (I-LEAD)-
Department of Health and Human Services/Administration for Children and Families
- ANA**

DEADLINE: Jun 13, 2016 Electronically submitted applications must be submitted no later than 11:59 p.m., ET, on the listed application due date.

AMOUNT: \$300,000

DESCRIPTION: The Administration for Native Americans (ANA), within the Administration for Children and Families (ACF), announces the availability of Fiscal Year (FY) 2016 funds for the Native Youth I-LEAD. This program will emphasize a comprehensive, culturally-appropriate approach to ensure that all young Native people can thrive and reach their full potential by fostering Native youth resilience, capacity building, and leadership. Native



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Youth I-LEAD will specifically focus on implementation of community programs that promote Native youth resiliency and foster protective factors such as connections with Native languages and Elders, positive peer groups, culturally-responsive parenting resources, models of safe sanctuary, and reconnection with traditional healing. Projects will also promote Native youth leadership development through the establishment of local models to instill confidence in Native youth of their value and potential, preparation of older youth to be role models for younger peers, and activities that foster leadership and skills-building. In addition, it is intended that Native youth must be actively involved during the planning and implementation phases of the projects to ensure that they are responsive to the needs of Native youth in the communities to be served and to ensure that youth remain engaged throughout the project period.

WEBSITE: <http://www.grants.gov/web/grants/view-opportunity.html?oppId=282436>

Assisted Outpatient Treatment Grant Program for Individuals with Serious Mental Illness - SAMHSA

DEADLINE: Thursday, June 16, 2016

AMOUNT: \$1,000,000

DESCRIPTION: The Substance Abuse and Mental Health Services Administration (SAMHSA), Center for Mental Health Services (CMHS) is accepting applications for fiscal year (FY) 2016 Assisted Outpatient Treatment Grant Program for Individuals with Serious Mental Illness (Short title: Assisted Outpatient Treatment [AOT]). This 4-year pilot program is intended to implement and evaluate new AOT programs and identify evidence-based practices in order to reduce the incidence and duration of psychiatric hospitalization, homelessness, incarcerations, and interactions with the criminal justice system while improving the health and social outcomes of individuals with a serious mental illness (SMI). This program is designed to work with families and courts, to allow these individuals to obtain treatment while continuing to live in the community and their homes. This pilot program was established by the Protecting Access to Medicare Act of 2014 (PAMA), Section 224, that was enacted into law on April 1, 2014. Within the Act, AOT is defined as “medically prescribed mental health treatment that a patient receives while living in a community under the terms of a law authorizing a state or local court to order such treatment.” Grants will only be awarded to applicants that have not previously implemented an AOT program. “Not previously implemented” means that even though the state may have an AOT law, the eligible applicant has not fully implemented AOT approaches through the courts within the jurisdiction that they are operating in. In addition, grants will only be awarded to applicants operating in jurisdictions that have in place an existing, sufficient array of services for individuals with SMI such as Assertive Community Treatment (ACT), mobile crisis teams, supportive housing, supported employment, peer supports, case management, outpatient psychotherapy services, medication management, and trauma informed care. A portion of the grant funding may be used to enhance the array of services. AOT (also known as involuntary outpatient commitment, conditional release, and other terms) involves petitioning local courts to order individuals to enter and remain in treatment within the community for a specified period of time. AOT is intended to facilitate the delivery of community-based outpatient mental health treatment services to individuals with SMI that are under court order as



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authorized by state mental health statute. The AOT grant program aligns with SAMHSA's Strategic Initiatives on Trauma and Justice and Recovery Support. For more information on SAMHSA's six strategic initiatives, you can visit <http://www.samhsa.gov/about-us/strategic-initiatives>. The AOT grant program is one of SAMHSA's services grant programs. SAMHSA intends that its services grants result in the delivery of services as soon as possible after award. Service delivery should begin by the 4th month of the project at the latest. AOT grants are authorized under Section 224 of PAMA. SAMHSA has consulted with the National Institute of Mental Health, the Department of Justice, the HHS Assistant Secretary of Planning and Evaluation and the Administration for Community Living on the FOA. This announcement addresses Healthy People 2020 Mental Health and Mental Disorders Topic Area HP 2020-MHMD and Substance Abuse Topic Area HP 2020-SA.

WEBSITE: <http://www.samhsa.gov/grants/grant-announcements/sm-16-011>

Health Center Program New Access Points (HRSA-17-009) Technical Assistance

DEADLINE: Must be completed and successfully submitted via Grants.gov by 11:59 pm ET on June 17, 2016.

AMOUNT: Subject to the availability of appropriated funds, HRSA anticipates awarding approximately \$50 million to support an estimated 75 New Access Point awards in Fiscal Year 2017. The maximum annual funding that can be requested in a NAP application is \$650,000.

DESCRIPTION: The purpose of the Health Center Program New Access Point (NAP) funding opportunity is to improve the health of the Nation's underserved communities and vulnerable populations by increasing access to comprehensive, culturally competent, quality primary health care services. NAP funding provides operational support for new primary health care service delivery sites (i.e., new access points). A new access point is a new service delivery site for the provision of comprehensive health care services. Applicants must propose at least one full-time, permanent new access point site that has primary medical care as its main purpose.

WEBSITE:

<http://bphc.hrsa.gov/programopportunities/fundingopportunities/NAP/index.html>

Basic Cancer Research in Cancer Health Disparities (R01) - Department of Health and Human Services/National Institutes of Health

DEADLINE: June 17, 2016

AMOUNT: \$250,000

DESCRIPTION: This Funding Opportunity Announcement (FOA) encourages grant applications from investigators interested in conducting basic, mechanistic research into the biological/genetic causes of cancer health disparities. These research project grants (R01) will support innovative studies designed to investigate biological/genetic bases of cancer disparities, such as (1) mechanistic studies of biological factors associated with cancer disparities, including those related to basic research in cancer biology or cancer prevention intervention strategies, (2) the development and testing of new methodologies and models, and (3) secondary data analyses. This FOA is also designed to aid and facilitate



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the growth of a nationwide cohort of scientists with a high level of basic research expertise in cancer health disparities research who can expand available resources and tools, such as bio specimens, cell lines and methods that are necessary to conduct basic research in cancer health disparities.

WEBSITE: <http://www.grants.gov/web/grants/view-opportunity.html?oppId=271593>

COMMUNITY ~PORTLAND, OREGON/ OREGON ONLY~

Detwiler Family Foundation

DEADLINE: Applicants should complete and return the Foundation Application Form (download below) along with a short project description of no more than two pages and relevant supporting material. The Detwiler Family Foundation receives applications on a rolling basis. All applications must be submitted by June 1, 2016. Grant award recipients will be notified by September 15, 2016.

AMOUNT: Awards typically range from \$5,000 to \$50,000.

DESCRIPTION: The Detwiler Family Foundation invites applications from those local organizations that are dedicated to enriching and improving the lives of children in our community. We strive to serve children dealing with significant life challenges by facilitating access to education and the arts.

WEBSITE:

<http://detwilerfamilyfoundation.org/home/grants/applicationrequirements/>

Community Development Block Grant Program for Indian Tribes and Alaska Native Villages - Department of Housing and Urban Development (HUD)

DEADLINE: Jun 14, 2016 Electronically submitted applications must be submitted no later than 11:59:59 p.m., ET, on the listed application due date.

AMOUNT: \$5,500,000

DESCRIPTION: (SEE WEBSITE.)

WEBSITE: <http://www.grants.gov/web/grants/view-opportunity.html?oppId=282983>

Crayola Invites Proposals from Elementary Schools for 2016 Creative Leadership Grants

DEADLINE: Applications should be sent to creativelyalive@crayola.com or faxed to 610-515-8781, Attn: Anita DeChellis. Applications will be accepted until 12:00 Midnight ET Monday, June 20, 2016 (the principal must be a member of NAESP).

AMOUNT: The school will receive \$2,500 and \$1,000 worth of Crayola products to develop an art-infused education creative capacity-building professional development program.



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DESCRIPTION: The 2016 program provides grants for innovative, creative leadership team building within elementary schools. Apply now for the opportunity to receive a grant for building your school's creative capacity. Each grant-winning school (up to 20 grants awarded) receives \$2,500 and Crayola products valued at \$1,000.

WEBSITE: <http://www.crayola.com/for-educators/ccac-landing/grant-program.aspx>

Community Connect Grant Program - Department of Agriculture Utilities Programs

DEADLINE: Jun 17, 2016

AMOUNT: \$100,000

DESCRIPTION: The Community-Oriented Connectivity Broadband Grant Program (Community Connect Grant Program) is designed to provide financial assistance to provide service at the Broadband Grant Speed in rural, economically-challenged communities where broadband service does not currently exist. Grant funds may be used to: (1) deploy service at the Broadband Grant Speed to critical community facilities, rural residents, and rural businesses, (2) construct, acquire, or expand a community center, and (3) equip a community center that provides free access to service at the Broadband Grant Speed to community residents for at least two years. Grants will be awarded on a competitive basis for entities to serve all premises in eligible rural areas at the Broadband Grant Speed to ensure rural consumers enjoy the same quality and range of broadband services as are available in urban and suburban communities.

WEBSITE: <http://www.grants.gov/web/grants/view-opportunity.html?oppId=283149>

Culture of Health Leaders- ROBERT WOOD JOHNSON

DEADLINE:

February 25, 2016 (1–2 p.m. ET)

Webinar for potential applicants of all four leadership programs. A recording is available here.

March 24, 2016 (2–3 p.m. ET)

Applicant webinar for the Culture of Health Leadership Program. Registration is required.

March 30, 2016 (12–1 p.m. ET)

Webinar for potential applicants of all four Change Leadership Programs.

Weblink: <https://cc.readytalk.com/r/sn9b7bexavet&eom>

Dial-In Number: (877) 795-5431

Conference ID/Passcode: 68548585

April 19, 2016 (3 p.m. ET)



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Deadline for receipt of full applications.

May 23–June 24, 2016

Semifinalist interviews and/or site visits (attendance required).

June 24, 2016

Deadline for receipt of semifinalist supplemental applications.

Mid-July 2016

Notification of awards.

September 1, 2016

Program begins. Stipend funding initiated for program participants.

September 25–28, 2016

Fall Institute in Princeton, N.J. (attendance required).

AMOUNT: The program will select up to 50 leaders for the 2016 cohort. Each leader will have access to up to \$20,000 per year for three years (total of up to \$60,000), as well as additional project funds to support their participation in the program and project-related activities. Leaders may also be eligible to receive additional financial support, if needed, through hardship and/or opportunity funds, to facilitate their participation in the program.

DESCRIPTION: The Culture of Health Leaders program will develop a large cadre of leaders from diverse sectors (e.g., public policy, business, technology, community development and planning, education, transportation, public health, health care, and others) to work with organizations, communities, health systems, and policymakers to build a Culture of Health in America. Over the course of the three-year program, each cohort of leaders will complete a leadership development curriculum, as well as individual and collaborative projects, that support the cultural shifts at the local, state, and national levels that are necessary for all people to have opportunities to achieve their best possible health and well-being.

WEBSITE: <http://www.rwjf.org/en/library/funding-opportunities/2016/culture-of-health-leaders.html>

COMMUNITY

Application process, eligibility announced for \$38 million Keepseagle grants distribution

Fast-track registration opens May 25, applications close June 24

WASHINGTON D.C. - Class counsel in the Keepseagle v. Vilsack settlement today announced details about the Native American Agricultural Fast Track Fund (NAAFTF), a one-time distribution of \$38 million in settlement funds. Awards from this fund will be made on a competitive basis to non-profit organizations, tribal programs and educational



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institutions which provide agricultural, business, technical or advocacy services to existing and aspiring Native American farmers and ranchers.

"Among the far-reaching benefits of the Keepseagle settlement is the means for organizations which have a track record of supporting Native American farmers and ranchers to deliver valuable assistance to promote their continued engagement in agriculture -- an important component of the economy in Indian Country," said Joseph M. Sellers, lead counsel for the plaintiff class. "The Fast Track Fund will make vital resources available to these important efforts by the end of this year."

The NAAFTF award process begins with a one-month period for letters of intent applications to be submitted to determine eligibility (after review, eligible applicants will be invited to submit full proposals). This first step starts May 25 at 12:00 p.m. MDT, when registration, application materials, and further process details and a timeline are made available at www.indianfarmclass.com/NAAFTF.aspx. An applicant must submit a letter-of-intent application no later than Friday, June 24, 2016, by 5:00 p.m. MDT. Technical assistance relating strictly to the application process will be available by dedicated phone and email contacts.

To be eligible, an applicant organization must document that it provided agricultural, business, technical or advocacy services to Native American farmers or ranchers between January 1, 1981, and November 1, 2010; is based in the United States; and is one of the following:

- 501(c)(3) tax-exempt organization
- 7871 designation as a non-profit organization chartered under the tribal law of a state or federally recognized tribe
- An educational institution described in 170(b)(1)(A)(ii)
- An instrumentality of a state or federally recognized tribe, designated under 7701(a)(40)

An applicant organization must propose its use of award funds to provide assistance designed to further Native American farming or ranching activities. Litigation, lobbying or political activities will not be eligible for funding.

The letter-of-intent application must include a description of the applicant organization, demonstrate eligibility through required documentation of a tribal or board resolution, the purpose for which funding is being sought, the applicant organization's total annual operating budget, total project costs (if applicable), and requested amount.

An advisory committee will review the letters-of-intent applications and issue an invitation to selected organizations for full proposals on July 28, 2016.

The process will be managed under the supervision of class counsel by Echo Hawk Consulting. Class counsel will make recommendations to the Court, based on input from the Advisory Committee. The Advisory Committee is comprised of six individuals with experience and expertise in the fields of Native American farming, ranching and philanthropy. All awards are subject to Court approval. Awards will range in size



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depending on an organizations or tribe's budget, focus and scope. NAAFTF will consider as well applications from intermediary organizations having existing, relevant grant programs which can be expanded through awards.

Background

On April 20, 2016, the U.S. District Court for the District of Columbia approved a modification to the Keepseagle settlement agreement, which included a process for the distribution of funds to cy press beneficiaries. The modification to the settlement also provides for additional damage awards to be paid to prevailing claimants. The remaining funds, approximately \$265 million, will go to a Trust that will distribute funds at the direction of an independent board of trustees for up to 20 years. NAAFTF is separate from the Trust, and is designed to ensure that a substantial portion of the remaining funds are distributed to qualifying organizations much more quickly than the Trust will be able to begin making grants.

NAAFTF was created to make awards to such organizations already involved in supporting Native American ranchers and farmers before the original Keepseagle settlement was agreed to in 2010.

The Court's order is open to appeal through June 20, 2016. If an appeal is filed, the grant process will be suspended until a decision on the appeal is rendered.

WEBSITE: <http://www.indianfarmclass.com/NAAFTF.aspx>

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Contact: Crystal Echo Hawk

Echo Hawk Consulting

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720.891.9118

2016 - JULY

ELTON JOHN AIDS FOUNDATION

DEADLINE: First-time applicants should complete an online letter of inquiry (LOI) form by 5 PM Eastern Standard Time on Monday, July 1, 2016. Grants will be awarded in October and December 2016. **NOTE:** Applications submitted after 5 PM on July 1, 2016 may not be reviewed. If you submitted a request before the deadline, EJAF staff will be in touch later this summer with further instructions. Due to the high volume of requests, we kindly ask for no phone calls regarding your request. Current Grantees will be contacted by the Foundation with instructions for submitting a renewal request. EJAF supports organizations working with people who are most affected by HIV in the Americas, defined as the United States, Canada, Mexico, the Caribbean, or Central or South America.

AMOUNT: See website.



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DESCRIPTION: GOALS: EJAF will fund organizations working toward one or more of the following goals:

- **WELLNESS:** Improving the health of people living with HIV or at risk or otherwise affected by HIV
- **RIGHTS:** Upholding the rights of people living with and affected by HIV
- **QUALITY OF LIFE:** addressing the social and economic needs of people living with and affected by HIV
- **RESILIENCE:** strengthening the skills and strategies of organizations and activists addressing HIV.

ACTIVITIES: EJAF will fund a wide range of activities and costs. We value programs that:

- Are led by and based in the communities being served;
- Are advocating for improved government health policies and funding;
- Are piloting or scaling up innovative programs to promote health and rights;
- Can show a history of activism, creativity, and urgency in working to address and curtail the HIV epidemic; and
- Are grounded in evidence about where and among whom HIV infections are happening, and evidence about the best interventions to help people avoid infection or, if HIV-positive, to live healthy lives.

POPULATIONS: EJAF encourages grant applicants to be clear about who is intended to benefit from funded activities, how they will benefit, and how they are involved in the design and implementation of the program. EJAF will prioritize grants to organizations working with one or more key affected populations, listed below. These populations face increased vulnerability to HIV infection due to biological and structural factors, and can face barriers to accessing quality health and social services.

WEBSITE: http://philanthropynewsdigest.org/rfps/rfp6689-elton-john-aids-foundation-seeks-letters-of-intent-for-hiv-aids-projects?utm_campaign=rfps%7C2016-05-25&utm_source=pnd&utm_medium=email

Food Protection Task Force (FPTF) and Integrated Food Safety System (IFSS) Project Grant Program (R18) - Department of Health and Human Services/Food and Drug Administration

DEADLINE: Letter of Intent Due Date(s): May 20, 2016 for July 1, 2016 application due date. July 1, 2016, by 11:59 PM Eastern Time.

AMOUNT: \$10,000

DESCRIPTION: This Funding Opportunity Announcement (FOA), issued by the Food and Drug Administration under the support for Research Demonstration and Dissemination



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Projects (R18), is to solicit applications from organizations that propose to develop, test, and evaluate food safety and food defense health service activities and to foster the application of existing knowledge for the control of categorical and food related diseases and illnesses. Grantees will also organize Food Protection Task Force meetings and support related research activities, foster communication, cooperation and collaboration within the States among federal, state, local, tribal and territorial food protection, public health, agriculture, and regulatory agencies.

WEBSITE: <https://grants.nih.gov/grants/guide/rfa-files/RFA-FD-16-039.html>

Building Capacity of the Public Health System to Improve Population Health through National, Nonprofit Organizations, financed in part by 2016 Prevention and Public Health Funds - Department of Health and Human Services/Centers for Disease Control - OSTLTS

DEADLINE: Jul 03, 2016 Electronically submitted applications must be submitted no later than 11:59 p.m., ET, on the listed application due date.

AMOUNT: \$100,000 X 26 awards

DESCRIPTION: CDC announces a supplemental funding opportunity for the 25 national, nonprofit organizations that were awarded under the CDC-RFA-OT13-1302 Funding Opportunity Announcement (FOA). This supplemental funding opportunity permits the awardees to strengthen the infrastructure and improve the performance of governmental and nongovernmental components of the public health system through the provision of capacity-building assistance (CBA). In 1988; the Institute of Medicine (IOM) published a landmark report, *The Future of Public Health*. It was the first national report to call attention to the need to address America's fragmented and seriously underfunded public health system. Although the report acknowledges the multiple stakeholders engaged in the public health enterprise, its recommendations focused on strengthening governmental public health departments as they represent the mainstay of the public health system. The call for a transformed, invigorated public health system continues into the 21st century, as the challenges for governmental public health have not ceased (IOM, 2012a, 2011; Robert Wood Johnson Foundation, 2012; Trust for America's Health, 2008). Challenges such as economic recessions, persistently underfinanced and fragmented public health infrastructure, and the shifting public health needs threaten governmental public health's capacity to achieve the recommended transformation and address the broad health and safety needs of the American public. These challenges also weaken its capacity to: 1) meet the ambitious Healthy People 2020 and National Prevention Strategy goals; 2) effectively perform the ten essential public health services; and 3) address the nation's future health challenges, such as rising health care costs and the health needs of a growing older adult population). Such challenges demonstrate the urgency of improving performance, accountability, and value of America's governmental public health and the overall public health system. In addition, public health will benefit from effective integration with primary care in areas such as community engagement, aligned leadership that bridges disciplines and jurisdictions, sustainability by establishing a shared infrastructure, and sharing and collaborative use of data and analysis. A robust program that adequately invests in capacity building assistance will contribute significantly in transforming the public health system and its various components to cover a broad range of challenges and needs. In general, CBA activities are expected to result in an increase in the quality,



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quantity, efficiencies, and/or cost effectiveness of public health services and related outcomes, and ultimately in public health improvement. For the purpose of this Funding Opportunity Announcement (FOA), the public health system refers to activities undertaken within the formal structure of government and the associated efforts of private and voluntary organizations and individuals; (IOM, 1988). Specifically, the purpose of this program is to ensure the provision of CBA to optimize the quality and performance of public health systems, the public health workforce, public health data and information systems, public health practice and services, public health partnerships, and public health resources. This FOA defines capacity building as the development and strengthening of human and organizational resources and systems. It involves enhancing the performance of functions, problem-solving, and achievement of objectives at individual, institutional and societal levels. CBA encompasses activities such as technical assistance, training, information sharing, technology transfer, materials development, or funding that enables an organization to better serve its population or to operate in a more comprehensive, responsive, and effective manner. Capacity building is expected to assist governmental and nongovernmental public health in fulfilling the mission of protecting and promoting health in their communities and effectively performing essential public health services. This FOA provides funding for CBA activities with target populations under three headings: Category A: Governmental Public Health Departments; Category B: Workforce Segments across Governmental Public Health Departments; and Category C: Other Governmental and Nongovernmental Public Health Components. The applicants CBA program is expected to demonstrate measurable progress among governmental and nongovernmental components of the public health system towards two or more of the following outcomes: 1) increased adoption of new or proven business improvements leading to management and administrative efficiencies or cost savings; 2) increased availability and accessibility of continuing education and training focused on public health competencies and new skills, including the use of experience-based internships and fellowships; 3) increased incorporation of core public health competencies into employee position descriptions and performance evaluations; 4) increased integration of state-of-the-art technology into data collection and information systems; 5) increased implementation of evidence-based public health programs, policies, and services; 6) improved capacity to meet nationally established standards, such as those for health department accreditation; 7) establishment and maintenance of diverse public health partnerships for meaningful cooperation and achievement of evidence-based public health strategies and interventions, such as the CDC Winnable Battles; and 8) improved quality, availability, and accessibility of public health education materials, training, and evaluation tools and resources. The FOA program strategies and related activities represent major national recommendations for CBA. The strategies are also based on the CDC Office for State, Tribal, Local, and Territorial Support's priorities, program experiences, and evidence-based recommendations from national reports published by federal councils and national public health organizations: U.S. Department of Health and Human Services, Healthy People 2020, IOM, and the National Prevention Strategy. These capacity-building program strategies and related activities are designed to position components of the public health system to fulfill their mission in protecting and promoting population health in the United States, United States territories, and Tribal nations. Applicants may propose to address one or more of the six program strategies and identifying corresponding activities. The activities should be proposed on the basis of the priority needs of the target population: 1) Public Health Systems and Organizational Improvement; 2) Public Health Workforce; 3) Public Health Data and Information Systems; 4) Public Health Practice and Services; 5) Public Health Partnerships; and 6) Public Health Resources, Communication and Evaluation.



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WEBSITE: <http://www.grants.gov/web/grants/view-opportunity.html?oppId=283455>

Community Health Projects Related to Contamination at Brownfield/Land Reuse Sites - Department of Health and Human Services/Centers for Disease Control - ATSDR

DEADLINE: Jul 05, 2016 Electronically submitted applications must be submitted no later than 11:59 p.m., ET, on the listed application due date.

AMOUNT: \$150,000

DESCRIPTION: The ATSDR Community Health Projects (CHP) Related to Contamination at Brownfield/Land Reuse Sites purpose is to increase responsive public health actions by promoting healthy and safe environments and preventing harmful exposures related to contamination at Brownfield/Land Reuse Sites. Brownfields are defined by the U.S. Environmental Protection Agency (EPA) as "property, the expansion, redevelopment, or reuse of which may be complicated by the presence or potential presence of a hazardous substance, pollutant, or contaminant". Land reuse site is any property that is being redeveloped for a different purpose from their former use. EPA estimates that there are over 450,000 Brownfield sites in the United States. Addressing public health concerns and issues associated with restoration of contaminated properties is essential. ATSDR's mission is to serve the public through responsive public health actions to promote healthy and safe environments and prevent harmful exposures. Sites such as Brownfield/Land Reuse sites may have potentially harmful exposures from contamination from previous site uses. Community health projects that address impacts of contamination at Brownfield/Land Reuse sites further ATSDR's public health mission to promote healthy and safe environments and prevent harmful exposures. These projects will have a particular emphasis on identifying health issues prior to redevelopment and/or assessing changes in community health associated with reuse plans and redevelopment.

WEBSITE: <http://www.grants.gov/web/grants/view-opportunity.html?oppId=283485>

Affordable Care Act Tribal Personal Responsibility Education Program for Teen Pregnancy Prevention- Family and Youth Services Bureau

DEADLINE: 07/08/2016

AMOUNT:

Estimated Total Funding: \$3,436,600

Expected Number of Awards: 10

Award Ceiling: \$700,000 Per Budget Period



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Award Floor: \$300,000 Per Budget Period

Average Projected Award Amount: \$400,000 Per Budget Period

Anticipated Project Start Date: 09/30/2016

Length of Project Periods:

Length of Project Period: 60-month project with five 12-month budget

DESCRIPTION: The Administration for Children and Families (ACF), Administration on Children, Youth and Families (ACYF), Family and Youth Services Bureau (FYSB) announces the availability of funding in the form of discretionary, competitive grants to Indian Tribes and tribal organizations to support the development and implementation of comprehensive, teen pregnancy prevention programs. The Personal Responsibility Education Program (PREP) emphasizes a medically accurate approach, replicating effective programs or elements of programs that have been proven -- on the basis of rigorous, scientific research -- to change behavior. Behavioral changes may include delaying sexual activity, increasing condom or contraceptive use for sexually active youth, or reducing pregnancy. The inclusion of "adulthood preparation subjects" -- to help youth in their transition to young adulthood -- is also a key element of this program. Consultation with Indian Tribes and Tribal organizations, as required by the authorizing legislation, will inform the development of the Tribal PREP program.

WEBSITE: http://www.acf.hhs.gov/grants/open/foa/files/HHS-2016-ACF-ACYF-AT-1130_0.htm#c.d.section.III1073

Capacity Building Grants – National Alliance for Grieving Children

DEADLINE: Proposals will be accepted through July 11th, 2016

AMOUNT: \$10,000

DESCRIPTION: New York Life in partnership with NAGC will offer 20 childhood bereavement organizations a one-time, \$10,000 capacity-building grant under the Grief Reach program RFP. We are looking for organizations that have identified a need and seek funding to help them operate more effectively at an organizational level by addressing their organizational strengths and weaknesses and proposing goals that are achievable in a 12-month period with the funds allocated.

Proposals should fit one of the five major categories listed below:

Planning activities: organizational assessments; strategic planning; fund development; communications/marketing; recruiting or maintaining volunteer support; business planning.

Staff/board development: leadership training; defining the role of the board; recruitment of new board members; strengthening governance.

Strategic relationships/collaboration: technical assistance; consultant support; restructuring; mergers; or business planning.



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Internal operations: improvements to financial management, human resources, or volunteer management; development of evaluation systems and training; facility planning.

Technology improvements: improving IT capacity through upgrades to hardware and software; networking; updating websites; and staff training to optimize use of technology.

Your capacity building project should have an impact on your organization first, then on the clients your organization serves. In thinking about capacity building needs, an organization may ask:

Does this activity allow my whole organization to operate more effectively, or does it have a limited effect on a program or initiative? For example, improving fundraising skills affects the entire organization over a long period. However, having a fundraising dinner for a program only affects that program for that fiscal year.

Which major operational areas need attention and will help the organization grow and achieve its mission? For example, there may be a need for financial management software, a donor database, and upgraded communications materials. Not being able to do them all, an organization must select one that is going to move them forward strategically.

Is there a bottleneck in the organization that is stalling growth? For example, an organization may need to recruit new volunteers, but not have a way to reach the local community, such as a website.

WEBSITE: <https://childrengrieve.org/index.php?q=capacity-building-grants>

National Institute for Health Care Management Foundation (NIHCM) Foundation Seeks Letters of Inquiry for Healthcare Management Research Projects

DEADLINE: Interested researchers must submit a brief letter of inquiry (LOI) outlining their study idea by 5:00 PM EDT on July 11, 2016. Applications are welcome at any time prior to that deadline. LOIs must conform to the required structure and must be submitted using NIHCM's online entry system (see below). Full (10-page) proposals will be invited from a small number of applicants in August and will be due in September 2016. NIHCM will announce the grant winners in November 2016 for project start dates as early as January 2017.

AMOUNT: \$250,000

DESCRIPTION: NIHCM Foundation supports innovative investigator-initiated research with high potential to inform improvements to the U.S. health care system. Projects must advance the existing knowledge base in the areas of health care financing, delivery, management and/or policy. During the first four years of the program, we have awarded over \$950,000 to support 16 studies.

WEBSITE: <http://www.nihcm.org/grants/research-grants>

Improving Access to Care: Using Community Health Workers to Improve Linkage and Retention in HIV Care - Department of Health and Human Services/Health Resources and Services Administration

DEADLINE: Jul 12, 2016



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AMOUNT: \$2,000,000

DESCRIPTION: This announcement solicits applications for fiscal year (FY) 2016 to support a single organization that will serve as the Technical Assistance and Evaluation Center (TAEC) for a new initiative entitled Improving Access to Care: Using Community Health Workers to Improve Linkage and Retention in HIV Care. The goal of this three year cooperative agreement is to increase the utilization of community health workers (CHW) to improve access to and retention in health care; and to improve health outcomes for people living with HIV (PLWH) by strengthening the health care workforce, building healthier communities, and achieving health equity among racial and ethnic minority populations. The project will focus on assisting HIV medical care provider sites, particularly those funded by the Ryan White HIV/AIDS Program (RWHAP), with the support needed to integrate CHWs into an HIV multidisciplinary team model through training, direct technical assistance, and collaborative learning sessions. The TAEC will provide three levels of training and/or technical assistance (TA) comprising Direct TA, Webinars/Webcasts, and Learning Collaborates. Direct TA will be provided to up to ten (10) RWHAP medical provider sites serving racial/ethnic minority populations in geographic locations with low rates of retention and/or viral suppression as reported in the 2014 Ryan White Services Report (RSR). The selected sites will also receive a sub award to support the development and implementation of their CHW program. The sites will be required to demonstrate need, interest, and capacity to sustain a CHW program during and after the project ends, and to fully cooperate with the TAEC in the multi-site evaluation. In consultation with the Health Resources and Services Administration (HRSA) HIV/AIDS Bureau (HAB), the TAEC will be responsible for identifying the RWHAP medical provider sites to receive both the direct TA and a sub award, and for administering the sub awards. The RWHAP medical provider sites will be selected by the TAEC, in consultation with HAB, based on a pre-established set of criteria to include: Identified Need - States/Jurisdictions with low retention rates or low viral suppression rates, among racial/ethnic minority populations, based on 2014 RSR data, with attention to African American and Latinos, including subpopulations, such as young MSM, youth, and substance users, as applicable. Geographic Distribution - An attempt will be made to apply equitable geographic distribution across the United States to include both rural and urban settings. Interest and Organizational Commitment/Capacity - Demonstrated interest and capacity to develop and implement a CHW program. Sites will be required to demonstrate their ability and capacity to maintain a sustainable CHW model beyond the project period and the receipt of the initial TA provided by this cooperative agreement. Selected RWHAP sites may not allocate sub awarded funds from this project to support a personnel salary in its entirety. Focus will be given to the selection of RWHAP medical provider sites that will support the incorporation of CHWs as part of an HIV multidisciplinary team model. Sites must also demonstrate their capacity and willingness to participate fully in the multi-site evaluation required for this project. RWHAP funded recipient or sub recipient organizations meeting these criteria are eligible to be considered for a sub award from the TAEC to implement a CHW program within an HIV medical care model intended to serve the priority populations outlined by the TAEC. The TAEC will be responsible for the development and release of an application and awards to RWHAP recipient or sub recipient medical provider sites. The TAEC will develop and conduct webinars/webcasts for any HIV medical provider interested in gaining knowledge related to the development of a CHW program, with a focus on integrating CHWs into HIV multidisciplinary care and treatment teams. Webinars/webcasts will also be utilized to increase the knowledge of any HIV medical provider with an interest in developing and/or strengthening a CWH component within their model of care The



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TAEC will also coordinate the formation and implementation of at least one learning collaborative with several learning sessions. Learning collaborates aim to capitalize on participants' knowledge and skills with the principle that knowledge can be created within a group where members actively interact by sharing experiences and evaluating one another's ideas. The goal of the learning collaborative(s) will be the development of recipient/medical provider capacity around the use of CHWs to promote sustainability of CHW models. The collaborative(s) will provide a venue for various stakeholders, medical providers and CHWs, to share and provide information and training on various components in the development and implementation of an effective CHW model, including: the integration of CHWs into HIV multidisciplinary teams; building capacity of medical providers for an integrated CHW component; and discussing challenges and lessons learned from the implementation of CHW models. At the conclusion of each collaborative learning session, participants will be provided action steps to be implemented prior to the next learning session, essentially giving each agency an outline for building capacity. SMAIF funds may be used to pay stipends to organizations with successful CHW programs to lead the collaborative(s). The TAEC will also be responsible for the development and implementation of an evaluation component to assess the effectiveness of project activities and the effectiveness of the CHW programs developed by the sites receiving direct TA. Finally, the TAEC will be responsible for producing A CHW Implementation Guide, which will include: (a) available CHW resources; (b) lessons learned from both learning collaborates and direct TA sessions; (c) information on the various components required for the development and integration of an effective CHW program into an HIV primary care model; and (d) an evaluation tool to assess CHW programs in HIV care and treatment settings.

WEBSITE: <http://www.grants.gov/web/grants/view-opportunity.html?oppId=283484>

The Oregon Community Foundation

DEADLINE: July 15 for a Board decision in early November.

AMOUNT: Average award \$20,000 but a typical award range of \$5,000 to \$50,000.

DESCRIPTION: The Oregon Community Foundation is accepting applications for its Community Grants program, which provides funding for capacity building, capital projects, and/or bridge funding for organizations or programs which support creative and sustainable solutions that address the common needs and aspirations of all Oregonians.

The Community Grants Program is a broadly accessible, responsive statewide grants program. Its long-term goals are to strengthen the social fabric of our communities and improve life in Oregon. More immediate goals are to respond to evolving, community-identified needs and to build civic leadership and engagement.

Guiding Principles

- We believe that creative and sustainable solutions come from people who work in partnership to address common needs and aspirations.
- We give high priority to investments that create positive, substantive change and attempt to resolve problems at their source.



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- We recognize and respect Oregon's diverse regions and populations, and we seek to advance equity, diversity and inclusion through our programs.

WEBSITE:

http://www.oregoncf.org/Templates/media/files/grants/community_grants/Community%20Grant%20guidelines.pdf

Jenny Kitsen Patient Safety Award

DEADLINE: AAKP is now accepting applications for the next grant cycle. The deadline for grant applications for the 2017 calendar year is July 31, 2016.

AAKP is pleased to support the Renal Physicians Association and the National Renal Administrators Association; recipients for the 2015/2016 grant cycle.

AMOUNT: \$5,000

DESCRIPTION: The Network of New England Board of Director selected AAKP as the recipient of an endowment to establish the Jenny Kitsen Patient Safety Award. The Award funds an annual lecture that advances patient safety by exploring innovation in health systems management.

The endowment supports an annual lecture or presentation that advances patient safety. Patients who undergo dialysis treatment have an increased risk for getting a health care-associated infection (HAI). Hemodialysis patients have weakened immune systems, which increase their risk for infection, and they sometimes require frequent hospitalizations and surgery where they might acquire an infection.

Among the organizations eligible to apply for the Award are 501(c)(3) and 501(c)(6) organizations, public and government agencies, and many other organizations and institutions.

WEBSITE: <https://www.aakp.org/community/programs-events/jenny-kitsen-patient-safety-awar>

2016 AUGUST

Health Services Research on Minority Health and Health Disparities (R01) - Department of Health and Human Services/National Institutes of Health

DEADLINE: August 9, 2016 by 5:00 PM local time of applicant organization. Applicants are encouraged to apply early to allow adequate time to make any corrections to errors found in the application during the submission process by the due date.

AMOUNT: (See Announcement)

DESCRIPTION: The purpose of this Funding Opportunity Announcement (FOA) is to encourage innovative health services research that can directly and demonstrably contribute to the improvement of minority health and/or the reduction of health disparities at the health care system-level as well as within clinical settings.



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WEBSITE: <http://www.grants.gov/web/grants/view-opportunity.html?oppId=283498>

Ageing Research to Address Health Disparities (Admin Supplement) - Department of Health and Human Services/National Institutes of Health

DEADLINE: Aug 10, 2016

AMOUNT: \$250,000 (4 awards)

DESCRIPTION: This Funding Opportunity Announcement (FOA) announces the availability of administrative supplements to support aging research that addresses disparities in health, including preclinical, clinical, social and behavioral studies.

WEBSITE: <http://grants.nih.gov/grants/guide/pa-files/PA-16-225.html>

2016-SEPTEMBER

Health Promotion Among Racial and Ethnic Minority Males (R01)

DEADLINE: Sep 7, 2016

AMOUNT: SEE AMOUNT

DESCRIPTION: This initiative seeks applications from applicants that propose to stimulate and expand research in the health of minority men. Specifically, this initiative is intended to: 1) enhance our understanding of the numerous factors (e.g., sociodemographic, community, societal, personal) influencing the health promoting behaviors of racial and ethnic minority males and their subpopulations across the life cycle, and 2) encourage applications focusing on the development and testing of culturally and linguistically appropriate health-promoting interventions designed to reduce health disparities among racially and ethnically diverse males and their subpopulations age 21 and older.

WEBSITE: <http://www.grants.gov/web/grants/view-opportunity.html?oppId=239793>

2016-OCTOBER

WILD ONE LORRIE OTTO SEEDS FOR EDUCATION GRANT PROGRAM

DEADLINE: Grant applications due October 15th.

AMOUNT: Cash grants under \$500 are available for plants and seeds, and in-kind donations from Nursery Partners can help stretch these dollars.

DESCRIPTION: Would you like to Attract songbirds and butterflies to your schoolyard with wildflowers and native grasses. Add opportunities for hands-on science in biology, ecology and earth science. Reduce energy consumption and improve storm water management; enhance sustainability and green-school certification. Teachers and students across the US are expanding learning opportunities by enhancing their schoolyards with butterfly gardens, nature trails, prairies, woodland wildflower preserves, and similar projects. These



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projects enrich the learning environment and provide aesthetic and environmental benefits.

By planning, establishing and maintaining such projects, students learn valuable life skills – including patience and teamwork. They can engage parents and the wider community in a project they can point to with pride for years to come.

WEBSITE: <http://www.wildones.org/seeds-for-education/sfe/>

The Role of Health Policy and Health Insurance in Improving Access to and Performance of Cancer Prevention, Early Detection, and Treatment Services

DEADLINE: Application Deadline: April 1 and October 15

AMOUNT: This RFA will use the Research Scholar Grant mechanism budget instructions.*

*See the Research Scholar Grants Policies and Instructions for a detailed description of the Society’s priority focus on health equity research in the Cancer Control and Prevention Research Grants Program and budget instructions.

Award Period

Direct Cost Cap Per Year	Indirect Cost Cap Per Year
Less than 4 years \$200,000	20%
4 years \$165,000	20%
5 years \$200,000	20%

DESCRIPTION: A call for research that evaluates the impact of the many changes now occurring in the healthcare system with a particular focus on cancer prevention, control, and treatment. Efforts focusing on improving access to care may also impact inequities that contribute to health disparities. New health public policy initiatives such as the new federal and state marketplaces that have expanded insurance coverage, as well as Medicaid expansion in some states, create natural experiments ripe for evaluation. Research to be funded by this RFA should focus on the changes in national, state, and/or local policy and the response to these changes by healthcare systems, insurers, payers, communities, practices, and patients.

A clear understanding of these changes can help clinicians, health systems, public health and public policy professionals, patient and consumer advocates and providers to identify and guide needed improvements in cancer prevention and control and health care and health more broadly. Findings from this research may also inform advocacy and policy development by the American Cancer Society Cancer Action Network (ASC CAN) in the context of meaningful health care reform by assessing outcomes related to the structure of the health system on availability, administrative simplicity, adequacy, and affordability of coverage, referred to as the 4 A’s, which make up the Society and ACS CAN’s framework for reform.



NORTHWEST PORTLAND AREA INDIAN HEALTH BOARD



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We are keenly interested in supporting rapid learning research to study the effects of health policy changes on patients, providers, and health systems. This includes but is not limited to:

- Facilitators and barriers to care;
- Unintended consequences;
- Differential experiences and outcomes of patients seeking or receiving care;
- Best practice models for quality care; and,
- Economic Impact

Specific examples of potential research areas that may be applicable include the following, organized by the 4 A's of meaningful healthcare reform:

1. Availability

- Investigate factors impacting equity in cancer prevention, diagnostic, treatment, and survivorship services across populations based on availability of health insurance coverage, type of coverage, affordability, and health care setting.
- Compare and contrast access and outcomes by state to provide new knowledge pertaining to how insurance coverage or lack of coverage (including lack of expanded Medicaid coverage) impacts cancer screening, diagnostic, treatment, or palliative care services.
- Evaluate the impact of expanding health insurance coverage for previously uninsured or underinsured persons.

2. Affordability

- Compare and contrast variations in health insurance benefit packages (including services, Rx formularies, and cost-sharing) on health care costs and the resulting impact on cancer prevention, diagnosis, treatment, and palliative and support care services.
- Examine how tobacco rating is impacting the affordability of and access to insurance coverage.
- Compare and contrast changes in health risk pool distribution and their impact on health care costs, health insurance enrollment and access pre- and post-implementation of the Affordable Care Act of 2010.
- Test methods to improve the efficiency of health insurance coverage and utilization.
- Compare and contrast models for improving high quality patient-centered care such as Patient Centered Medical Homes, Accountable Care Organizations, and patient and provider incentives to encourage guideline-concordant care.



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3. Adequacy

- Compare and contrast the implementation of health insurance marketplaces to assess their impact to access to needed services and choice of providers, and on the adoption and completion of cancer screening, diagnostic, treatment, and palliative and supportive care services.
- Compare and contrast the transparency of key information (e.g., network providers, formularies, etc.) and the extent to which this information is provided in a consumer-friendly manner.

4. Administrative simplicity

- Assess the effectiveness of strategies to educate consumers about healthcare benefits and their impact on the adoption and completion of cancer screening, diagnostics and treatment services.
- Conduct dissemination and implementation research of evidence-based strategies supporting patients in overcoming administrative barriers related to health insurance to facilitate the adoption and completion of cancer screening, diagnostic, treatment or palliative and supportive care services.

Acceptable study designs: We encourage investigators to submit innovative proposals using an array of study designs which may include interventional or non-interventional research such as case control studies, cohort studies, clinical trials, comparative effectiveness research, dissemination and implementation research, cross-sectional studies, ecological, or mixed methods research. For example:

- Mixed-method studies utilizing secondary analysis and original data collection.
- Conduct primary data collection in the form of surveys, key informant interviews, focus groups or other methods to capture patient level experiences and their perceived solutions.
- Make creative use of primary and secondary data sources (such as CMS data)⁹ to capture both demographic and outcome data, establish robust data bases, and create registries or methods for data standardization across large data sources

WEBSITE:

<http://www.cancer.org/research/applyforaresearchgrant/granttypes/rfa-role-healthcare-insurance-cancer>



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2016 -NOVEMBER

FAHS-BECK FUND FOR RESEARCH AND EXPERIMENTATION -A Fund Established with The New York Community Trust: FACULTY/POST-DOCTORAL RESEARCH GRANT PROGRAM

DEADLINE: The Fund observes two funding cycles annually. The deadlines are 5 p.m. Eastern Time April 1 and November 1, unless the deadline falls on a weekend, in which case the deadline will be the following Monday at 5 p.m. Applications must be received (not postmarked) by the deadline.

AMOUNT & DESCRIPTION: Grants of up to \$20,000 are available to help support the research of faculty members or post-doctoral researchers affiliated with non-profit human service organizations in the United States and Canada. Areas of interest to the Fund are: studies to develop, refine, evaluate, or disseminate innovative interventions designed to prevent or ameliorate major social, psychological, behavioral or public health problems affecting children, adults, couples, families, or communities, or studies that have the potential for adding significantly to knowledge about such problems. The research for which funding is requested must focus on the United States and/or Canada or on a comparison between the United States and/or Canada and one or more other countries.

WEBSITE:

[http://www.fahsbeckfund.org/pdf files/CURRENT Post Doctoral Guidelines 01.12.15.pdf](http://www.fahsbeckfund.org/pdf_files/CURRENT%20Post%20Doctoral%20Guidelines%2001.12.15.pdf)

NIOSH Centers of Excellence for Total Worker Health® (U19)

DEADLINE: November 30, 2016

AMOUNT: The maximum amount (total cost) for each application is \$1.3 million for the first 12-month project period. For 5 years.

DESCRIPTION: The purpose of this Funding Opportunity Announcement (FOA) is to provide funding for Centers of Excellence for Total Worker Health®. Support of this program will further advance an emerging field of science and practice and address the needs of the 21st century workforce by means of research, intervention, and outreach activities.

WEBSITE: <http://grants.nih.gov/grants/guide/pa-files/PA-15-361.html>



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NO DEADLINE - GRANT RESOURCE INFORMATION:

Evidence for Action: Investigator-Initiated Research to Build a Culture of Health

DEADLINE:

Informational Web Conferences:

Lessons Learned from a Year of Evidence for Action Grant Reviews

February 18, 2016 from 1:30-2:30 p.m. ET (10:30-11:30 a.m. PT)

Registration is required.

Archived Web Conferences

Informational Web Conferences were scheduled for June 3, 2015 and July 22, 2015
Recordings for both events are now available.

June 3, 2015 web conference recording available here.

July 22, 2015 web conference recording available here.

Timing: **Since applications are accepted on a rolling basis**, there is no deadline for submission. Generally, applicants can expect to be notified within 6-8 weeks of their LOI submission. Applicants invited to the full proposal stage will have 2 months to submit their proposal once they receive notification. Full proposal funding decisions will generally be made within 6-8 weeks of the submission deadline.

AMOUNT: Approximately \$2.2 million will be awarded annually. We expect to fund between five and 12 grants each year for periods of up to 30 months. We anticipate that this funding opportunity will remain open for at least a period of three years; however, decisions about modifications to the program and the duration of the program will be made by RWJF at its sole discretion.

DESCRIPTION: Evidence for Action: Investigator-Initiated Research to Build a Culture of Health is a national program of RWJF that supports the Foundation's commitment to building a Culture of Health in the United States. The program aims to provide individuals, organizations, communities, policymakers, and researchers with the empirical evidence needed to address the key determinants of health encompassed in the Culture of Health Action Framework. In addition, Evidence for Action will also support efforts to assess outcomes and set priorities for action. It will do this by encouraging and supporting creative, rigorous research on the impact of innovative programs, policies and partnerships on health and well-being, and on novel approaches to measuring health determinants and outcomes.

WEBSITE: http://www.rwjf.org/en/library/funding-opportunities/2015/evidence-for-action-investigator-initiated-research-to-build-a-culture-of-health.html?rid=3uOaFeLLcJROtLce2ecBeg&et_cid=469879



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Changes in Health Care Financing and Organization: Small Grants

DEADLINE: Grants are awarded on a rolling basis; proposals may be submitted at any time.

AMOUNT: This solicitation is for small grants of \$100,000 or less.

DESCRIPTION: Changes in Health Care Financing and Organization (HCFO) supports research, policy analysis and evaluation projects that provide policy leaders timely information on health care policy, financing and organization issues. Supported projects include:

examining significant issues and interventions related to health care financing and organization and their effects on health care costs, quality and access; and

exploring or testing major new ways to finance and organize health care that have the potential to improve access to more affordable and higher quality health services.

Eligibility and Selection Criteria

Researchers, as well as practitioners and public and private policy-makers working with researchers, are eligible to submit proposals through their organizations. Projects may be initiated from within many disciplines, including health services research, economics, sociology, political science, public policy, public health, public administration, law and business administration. RWJF encourages proposals from organizations on behalf of researchers who are just beginning their careers, who can serve either individually as principal investigators or as part of a project team comprising researchers or other collaborators with more experience. Only organizations and government entities are eligible to receive funding under this program.

Preference will be given to applicants that are either public entities or nonprofit organizations that are tax-exempt under Section 501(c) (3) of the Internal Revenue Code and are not private foundations as defined under Section 509(a).

Complete selection criteria can be found in the Call for Proposals.

WEBSITE: <http://www.rwjf.org/en/grants/funding-opportunities/2011/changes-in-health-care-financing-and-organization--small-grants.html>

The National Children's Alliance

Deadline: <http://www.nationalchildrensalliance.org/>

Amount: See website

Description: The National Children's Alliance has a Request for proposals to help support the development of CACs and Multidisciplinary Teams. NACA encourages all tribal communities to apply. They can offer FREE technical support to help you with your application.

➤ Common Wealth Fund



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The Commonwealth Fund encourages and accepts unsolicited requests on an ongoing basis. The Fund strongly prefers grant applicants to submit letters of inquiry using the online application form. Applicants who choose to submit letters of inquiry by regular mail or fax should provide the information outlined in a two- to three-page document.

They fund:

- **Delivery System Innovation and Improvement**
- **Health Reform Policy**

➤ **Health System Performance Assessment and Tracking**

<http://www.commonwealthfund.org/Grants-and-Programs/Letter-of-Inquiry.aspx>

➤ **Kaboom! Invites Grant Applications to Open Previously Unavailable Playgrounds**

Deadline: KaBOOM! is inviting grant applications from communities anywhere in the United States working to establish joint use agreements to re-open playground and recreational facilities previously unavailable due to safety and upkeep concerns. (No specific deadline.)

Amount: Let's Play Land Use grants of \$15,000 and \$30,000 will support creation of joint-use agreements between local governments and school districts that address cost concerns related to safety, vandalism, maintenance, and liability issues to re-open previously unavailable playgrounds and recreational facilities.

The \$15,000 grants will support the opening of at least four playgrounds in cities with populations of less than 100,000 people. The \$30,000 grants will support the opening of at least eight playgrounds in larger communities.

Description: Grants can be used for training and technical assistance, utilities and other building related to the extra use of the facility, legal fees, contract security

services, and marketing campaigns related to the joint-use agreement. Grant recipients must commit to opening the playgrounds within twelve months of the grant decision.

Complete grant application guidelines are available on the KaBOOM! website:

http://kaboom.org/about_kaboom/programs/grants?utm_source=direct&utm_medium=surl

➤ **Meyer Memorial Trust**

Deadline: Monthly (Except January, April and August)

Amount: Range generally from \$40,001 to \$300,000 with grant periods from one to two (and occasionally three) years.

Description: Responsive Grants are awarded for a wide array of activities in the areas of human services, health, affordable housing, community development, conservation and



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environment, public affairs, arts and culture and education. There are two stages of consideration before Responsive Grants are awarded. Initial Inquires are accepted at any time through MMT's online grants application. Applicants that pass initial approval are invited to submit full proposals. The full two-step proposal investigation usually takes five to seven months. <http://www.mmt.org/program/responsive-grants>

➤ **Kellogg Foundation Invites Applications for Programs that Engage Youth and Communities in Learning Opportunities**

Deadline: No Deadline

Amount: No Amount Specified

Description: The W.K. Kellogg Foundation is accepting applications from nonprofit organizations working to promote new ideas about how to engage children and youth in learning and ways to bring together community-based systems that promote learning. The foundation will consider grants in four priority areas: Educated Kids; Healthy Kids; Secure Families; and Civic Engagement.

Educated Kids: To ensure that all children get the development and education they need as a basis for independence and success, the foundation seeks opportunities to invest in early child development (ages zero to eight) leading to reading proficiency by third grade, graduation from high school, and pathways to meaningful employment.

Healthy Kids: The foundation supports programs that work to ensure that all children grow and reach optimal well-being by having access to fresh, healthy food, physical activity, quality health care, and strong family supports.

Secure Families: The foundation supports programs that build economic security for vulnerable children and their families through sustained income and asset accumulation.

Civic Engagement: The foundation partners with organizations committed to inclusion, impact, and innovation in solving public problems and meeting the needs of children and families who are most vulnerable.

See the Kellogg Foundation Web site for eligibility and application guidelines.

http://foundationcenter.org/pnd/rfp/rfp_item.jhtml?id=411900024#sthash.8WbcfIRk.dpuf

• **W.K. Kellogg Foundation**

Deadline: The Kellogg Foundation does not have any submission deadlines. Grant applications are accepted throughout the year and are reviewed at their headquarters in Battle Creek, Michigan, or in our regional office in Mexico (for submissions focused within their region).

Amount: NO LIMIT (Please read restrictions/What they won't fund.)



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Description: What to Expect Once they receive your completed online application, an automated response, which includes your WKKF reference number, will be sent to you acknowledging its receipt. Their goal is to review your application and email their initial response to you within 45 days. Your grant may be declined or it may be selected for further development.

As part of review process you may be asked to submit your organization's financial reports and/or IRS Form 990. While this information may be required, it is not intended to be the overall determining factor for any funding. You will not be asked to provide any financial reports or detailed budget information during this initial submission. They will only request this information later if needed as part of the proposal development.

If you would like to speak with someone personally, please contact the Central Proposal Processing department at (269) 969-2329. <http://www.wkkf.org/>

✚ AHRQ Research and Other Activities Relevant to American Indians and Alaska Natives

<http://www.ahrq.gov/research/findings/factsheets/minority/amindbrf/index.html>

Community Grant Program- WALMART

DEADLINE: The 2016 grant cycle begins Feb. 1, 2016 and the application deadline to apply is Dec. 31, 2016. **Application may be submitted at any time during this funding cycle. Please note that applications will only remain pending in our system for 90 days.**

AMOUNT: Awarded grants range from \$250 to \$2,500.

DESCRIPTION: Through the Community Grant Program, our associates are proud to support the needs of their communities by providing grants to local organizations.

WEBSITE: <http://giving.walmart.com/apply-for-grants/local-giving>

SCHOLARSHIP:

The Meyerhoff Adaptation Project -

The Meyerhoff Scholars Program is open to all high-achieving high school seniors who have an interest in pursuing doctoral study in the sciences or engineering, and who are interested in the advancement of minorities in the sciences and related fields. Students must be nominated for the program and are most typically nominated by their high school administrators, guidance counselors, and teachers. Awards range from \$5,000 – \$22,000 per year for four years.

The Meyerhoff Selection Committee considers students academic performance, standardized test scores, recommendation letters, and commitment to community service. Scholars are selected for their interests in the sciences, engineering, mathematics, or computer science, as well as their plans to pursue a Ph.D. or combined M.D./Ph.D. in the sciences or engineering. Reviewing the freshman class profile may provide an idea of the kinds of students who are admitted to UMBC and the Meyerhoff Scholars Program.



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Applicants are expected to have completed a strong college preparatory program of study from an accredited high school. The minimum program of study should include:

English: four years

Social Science/History: three years

Mathematics*: three years

Science: three years

Language other than English: two years

*Students are strongly recommended to have completed four years of mathematics, including trigonometry, pre-calculus, and/or calculus.

Eligibility Criteria

To be considered for the Meyerhoff Scholars Program, prospective students must have at least a “B” average in high school science or math courses, and many applicants have completed a year or more of calculus. Preference is given to those who have taken advanced placement courses in math and science, have research experience, and have strong references from science or math instructors. In recent years, a strong preference has been given to those students interested in the Ph.D. or M.D./Ph.D. (over the M.D.).

Students must meet all eligibility requirements:

Minimum of 600 on the Math component of the SAT

Cumulative High School GPA of a 3.0 or above

Aspire to obtain a Ph.D. or M.D./Ph.D. in Math, Science, Computer Science, or Engineering

Display commitment to community service

Must be a citizen or permanent resident of the United States

WEBSITE:

<http://meyerhoff.umbc.edu/how-to-apply/benefits-and-eligibility/>

~ONLY FOR WASHINGTON STATE UNIVERSITY~

First Scholars – The Suder Foundation

DEADLINE:

AMOUNT: The goal of the First Scholars program is to help first-generation college students succeed in school, graduate, and have a life complete with self-awareness, success and significance. Scholars receive personalized support, including a four-year renewable scholarship of \$5,000. The program is open to incoming first-time, full-time freshmen whose parents have no more than two years of education beyond high school and no post-secondary degree.



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DESCRIPTION: The First Scholars™ Program is available to incoming first-time, full-time freshmen whose parents have no more than two years of education beyond high school and no post-secondary degree. Participation in First Scholars™ includes a four-year renewable scholarship, half disbursed in the fall semester and half disbursed in the spring semester. Students can receive the award depending on eligibility requirements for a total of 4 years if program requirements are met.

This scholarship is open to Washington residents who enroll at Washington State University - Pullman full-time during the 2016-2017 academic year. The program requires that the recipients live on campus in a specified residence hall for the 2016-2017 academic year, and outside of the family home the following three academic years in order to renew the scholarship.

First-generation students represent a cross-section of America and college campus demographics. First Scholars come from diverse cultural, socioeconomic, geographic and family backgrounds and experiences. First-gen students are found in all departments and colleges of virtually every major public university across the country. Our affiliate universities have an average 30-50% first-gen enrollment and the number keeps rising. However, the average national graduation rate for first-generation students is only 34%, compared with 55% for the general student population.

WEBSITE: <http://firstscholars.wsu.edu/>

Education Award Applications -The American College of Psychiatrists

DEADLINE: June 30

AMOUNT: (SEE WEBSITE)

DESCRIPTION: The Award for Creativity in Psychiatric Education is open to any creative/innovative program for psychiatric education that has been in operation for at least two years, and has been a part of a U.S. or Canadian approved psychiatric residency training program. Trainees may include: medical students, residents, other physicians, allied mental health professionals, or members of the community. The Committee selects an awardee in the fall; all applicants are notified of the Committee's decision by November 15.

WEBSITE: <http://www.acpsych.org/awards/education-award-applications-deadline-december-1>

VETERANS

VFW Accepting Applications From Veterans for Emergency Financial Assistance

DEADLINE: Open

AMOUNT: Grants of up to \$5,000 will be awarded to active and discharged military service members who have been deployed in the last six years and have run into unexpected financial difficulties as a result of deployment or other military-related activity or natural disaster....



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DESCRIPTION: As the nation's largest organization of combat veterans, we understand the challenges veterans, service members and military families can face and believe that experiencing financial difficulties should not be one of them. That's the premise behind the VFW's Unmet Needs program.

Unmet Needs is there to help America's service members who have been deployed in the last six years and have run into unexpected financial difficulties as a result of deployment or other military-related activity. The program provides financial aid of up to \$5,000 to assist with basic life needs in the form of a grant -not a loan- so no repayment is required. To further ease the burden, we pay the creditor directly.

Since the program's inception, Unmet Needs has distributed over \$5 million in assistance to qualified military families, with nearly half of those funds going directly toward basic housing needs.

The needs of our veterans, service members and their families should never go unmet. Let us offer you a hand up when you need it!

Please review the Unmet Needs eligibility criteria to see if you or someone you know qualifies for a grant through the Unmet Needs program.

WEBSITE:

http://www.vfw.org/UnmetNeeds/?gclid=CjwKEAIAhPCyBRctwMDS5tzT03gSIADZ8VjRw5RxJw1br5NTowrY1NFzylowGtdvOagXa3LHyYK_PRoCB4Hw_wcB

2016 IHS Partnership Conference

Phoenix, Arizona | June 28-30, 2016

Hosted by
Office of Information Technology and
Office of Resource Access and Partnerships

Pre-Conference Session

Basic Training on CMS Programs: Medicaid, Medicare, Marketplace, and Effective Outreach Strategies for American Indians and Alaska Natives

Monday, June 27, 2016

10:00 a.m.—3:00 p.m.

JW Marriott Phoenix Desert Ridge Resort & Spa
Saguaro East Room

Intended Audience: Staff in need of initial or refresher training on the basic elements of Medicaid, Medicare, and Marketplace programs. This training is open to interested staff from the IHS, tribal governments, tribal health programs operated under P.L. 93-638, tribal organizations, and urban Indian health programs.

To register, please send an email to Rachel.Ryan@cms.hhs.gov with the following information.

Subject of email: **CMS Training 6/27**. In the body of the email, please provide:

Name, Organization or Tribal Affiliation, State, and E-mail Address.



May 19, 2016

Dear Tribal Leader:

How the Department of Veterans Affairs (VA) delivers benefits and services for Veterans is growing and changing rapidly. In this environment of change, VA is more committed than ever to fulfilling its tribal consultation policy, which includes strengthening VA's relationship with tribes and consulting with tribal governments on all VA policies and actions that may impact tribes and Veterans across Indian Country.

VA wants to ensure that the needs of American Indian and Alaska Native Veterans and the priorities of tribal governments are part of these changes, now and in the future. To that end, VA is seeking input from tribal leaders **on the top 3 to 5 priorities that tribes have for serving Veterans in Indian Country**. Once identified, these priorities may be used to assist with the collaborative development of an **Indian Country Veterans Affairs policy agenda**, which will inform tribal governments, VA, members of Congress, and other Veteran-serving partners in coming years.

To gather this input, VA plans to hold two tribal consultation sessions in 2016.

The first consultation will take place **Wednesday, June 29, 2016, at 5:15 p.m.** at the Spokane Convention Center, at 334 W. Spokane Falls Blvd., Spokane, WA 99201. This session is held **in conjunction with the National Congress of American Indians (NCAI) Mid-Year Conference**, taking place June 27–30, 2016, in Spokane, WA.

The second consultation will be scheduled later this year. VA will send a second letter to confirm this session when the date and time are finalized.

VA also invites written comments on the consultation topics, particularly for tribal leaders and representatives who may be unable to attend the consultation meetings in person. Written comments may be submitted as follows:

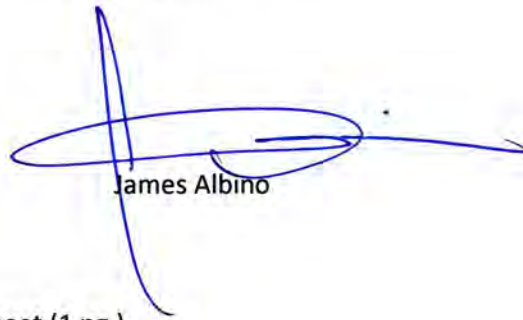
Email: tribalgovernmentconsultation@va.gov

Mail: U.S. Department of Veterans Affairs
Office of Intergovernmental Affairs (075F)
810 Vermont Avenue, NW, Suite 915G
Washington, DC 20420

Written comments should be submitted **no later than October 7, 2016**. For questions, please contact VA's Office of Tribal Government Relations at 202-461-7400 or at the email address above.

VA will compile all 2016 testimony received into a tribal consultation report to be disseminated in 2017. VA wishes to thank tribal leaders for their continued support, input, and engagement as we continue our work to honor and serve American Indian and Alaska Native Veterans.

Sincerely,

A handwritten signature in blue ink, consisting of a large, stylized loop followed by a horizontal stroke and a long tail extending to the right.

James Albino

Enclosures: Priorities for Veterans fact sheet (1 pg.)

What are your priorities for Veterans across Indian Country?

May 2016

VA wants to know the top 3–5 priorities that tribes have for serving and engaging Veterans. We are gathering input on your priorities for Veterans to help create an **Indian Country Veterans Affairs policy agenda**, which will inform tribal governments, VA, members of Congress, and other Veteran-serving partners in coming years.

This list shows the issues and priorities VA has worked to address in recent years.

What are your priorities for serving Veterans in your community? Use the list below to identify your top 3–5 priorities, or add new issues of your own.



Access to medical care

In Indian Country and for other rural areas, VA is using telehealth to expand access to care: <http://www.telehealth.va.gov/>



Suicide prevention

VA and IHS are continuing outreach to share resources and information about preventing suicide among Native Veterans.



VA and tribal or IHS facilities working together

The 2010 VA-IHS memorandum of understanding defined many ways VA and IHS can cooperate. VA has reimbursed almost \$40 million to IHS and tribal health facilities for direct care to Veterans.



VA supporting traditional providers and treatments

Some VA medical centers have added traditional treatments, like sweat lodges, for Veterans.



Treatment for PTSD and mental health

VA is using telemental health care to reach Native Veterans with PTSD and other mental health care needs:

<http://www.ruralhealth.va.gov/native/programs/telemental-services.asp>



Transportation

VA's Beneficiary Travel program reimburses mileage for travel to VA health care:

http://www.va.gov/HealthBenefits/vtp/highly_rural_transportation_grants.asp



Housing

VA's Native American Direct Loan program helps Native Veterans get low-cost home loans: <http://www.benefits.va.gov/homeloans/nadl.asp>



Understanding benefits

VA holds training summits, benefit fairs, and other events in Indian Country to help spread the word about benefits for Native Veterans.



Homelessness

VA implemented HUD-VASH, a housing voucher program, on tribal lands: <http://www.va.gov/homeless/hud-vash.asp>



Benefits for families

Some benefits are available for spouses, children, and survivors of Veterans: <http://explore.va.gov/spouses-dependents-survivors>.



Employment/vocational rehab

Homeless Veteran Reintegration Program grants are available to tribes: <http://www.benefits.va.gov/vocrehab/index.asp>



Tribal consultation, listening sessions, town hall meetings

VA consults with tribes before any action that significantly affects tribal resources, rights, or lands. VA uses listening sessions and other meetings to supplement formal consultations



Tribal Veterans Representatives

Tribal Veterans Representatives (TVRs) help connect Native Veterans with VA and other community organizations: <http://www.ruralhealth.va.gov/native/programs/tribal-veterans.asp>

VA wants to hear from you. What do you think are the most important issues for Veterans living in Indian Country? Choose from the issues above, or add new priorities of your own.

My Priorities for Veterans

1. _____
2. _____
3. _____
4. _____
5. _____

Complete this form and email it back to tribalgovernmentconsultation@va.gov or send it to:

U.S. Department of Veterans Affairs, Office of Intergovernmental Affairs (075F)
810 Vermont Avenue, NW, Suite 915G, Washington, DC 20420

At a consultation, you can give it directly to any VA representatives.

Learn More About VA

Learn more about any of these programs at va.gov/tribalgovernment or www.ebenefits.va.gov/ebenefits/

Email the VA Office of Tribal Government Relations at tribalgovernmentconsultation@va.gov

Find the Office of Tribal Government Relations regional specialist for your state at va.gov/tribalgovernment/locations.asp

WEAVE-NW

Webinar Series

Topic: Planting the Seeds for a Thriving
Community Garden

Date: June 28th, 2016

Time: 1:00-2:00pm (PST)

Summary:

Please join us for this webinar that will highlight tribal community gardens! Presenters will discuss their successes, challenges, and helpful tips to enhance your community garden.

Registration Link:

<https://ideanw.adobeconnect.com/e9jjaip7cpb/event/registration.html>



If you have questions, please contact:

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TRIBAL RESOURCE DIGEST

2016 - Issue 72



Photo Courtesy of the Yellowhawk Youth Lacrosse League

Welcome to the Centers for Disease Control and Prevention's (CDC) tribal resource digest for the week of June 6, 2016. The purpose of this digest is to help you connect with the tools and resources you may need to do valuable work in your communities.

The digest serves as your personal guide to repositories of open and free resources where you can find content to enrich your program or your professional growth. Please note that CDC does not endorse any materials or websites not directly linked from the CDC website. Links to non-Federal organizations found in this digest are provided solely as a courtesy. CDC is not responsible for the content of the individual organization web pages found at these links.

If you have comments or suggestions about this weekly update, please email Hannah Cain at kzq3@cdc.gov with the words "TRIBAL DIGEST" in the subject line.

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I. ARTICLES

Native Americans move to frontlines in battle over voting rights

This article delves deeper into the issues that many Native Americans face when trying to vote. 17 states have passed new voting restrictions that have sparked lawsuits and accusations that black, Hispanic, and other minority voters could be disenfranchised. There have been 5 federal lawsuits involving Native Americans since the Supreme Court decision to allow states to pass these restrictions.

Read the full article here: [Alaska News | May 31, 2016 | Native Americans move to frontlines in battle over voting rights](#)

Closing Gaps in Native American Health

Wisconsin Council on Children and Families

Health Issue Brief // Spring 2016



Communities of color often face greater health challenges that lead to larger health disparities between them and their white peers. This is especially true for the Native American community. Health indicators for Native Americans in Wisconsin are far worse than the **health metrics for the state's white** residents. The alarming disparities are deep-rooted and will not be easy to solve, but it's time to get serious about closing the huge gaps in health and life expectancy in Wisconsin.

One factor in the enormous health disparities is that the federal government has not honored its commitment to provide adequate funding for Indian Health Services (IHS). However, a recent change in federal policy for reimbursing Medicaid costs for Native Americans could significantly increase funding for and accessibility to health services for Native Americans in our state.

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Whether the increased funding makes a dent in the extreme disparities in health for Native Americans in Wisconsin will depend on whether state officials, Indian Health Services, and private health care providers work together to close gaps in services and improve care coordination.

The full article can be found here: [Closing Gaps in Native American Health - WCCF](#) and is also attached to the Tribal Digest-Issue 72 e-mail

II. RESOURCES

New Infographic that helps with public confusion over salt intake

Center for Science in the Public Interest Releases Infographic to Address Public Confusion about Salt

The Center for Science in the Public Interest, in collaboration with the American Heart Association, developed the [infographic](#) "Confused About Salt?" to help with public confusion about salt intake. This infographic gives basic information on the facts of salt consumption, visually depicts where sodium reduction initiatives are in place globally, and identifies key methodological issues in studies that report conflicting results.

Best Practices for Care Coordination

The transition to value-based care has led to many hospitals and health systems taking a more active role in care coordination. This team-based approach to care requires organizations to work with primary care physicians, payers and other providers to ensure that after discharge, patients receive the necessary care once they are referred to post-acute settings. It requires healthcare providers to develop strategies for care coordination and effective communication, so the continuum of care doesn't become a game of telephone. This special report examines best practices for care coordination to ensure patients receive the right care, in the right place and at the right time. [Fierce Healthcare](#)

Control is their goal: Million Hearts Recognizes the 2015 Hypertension Control Champions

18 Champions are being recognized for achieving high rates of blood pressure control for their patients. The 2015 Hypertension Control Champions used evidence-based strategies and patient engagement to help their patients achieve blood pressure control rates at or above the Million Hearts target of 70 percent. The 18 Champions, ranging from small practices to large health care systems throughout the U.S., provide care to nearly 1.5 million adults. [CDC](#) | [Million Hearts](#)

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III. WEBINARS, TRAININGS, AND CONFERENCES

First Annual Conference on Native American Nutrition

September 26-27, 2016

Mystic Lake Casino Hotel, Prior Lake, Minnesota

Tribal leaders, Native and non-Native practitioners, researchers, public health experts, and others are invited to exchange Indigenous and academic scientific knowledge; discuss current practices; listen to, connect with, and learn from each other; and candidly explore ways to overcome the existing obstacles to greater understanding. Additionally, the conference aims to identify new areas of potential research, practical application, advocacy, and collaboration on Native dietary health and food systems.

Read more here: [First Annual Conference on Native American Nutrition - Seeds of Native Health](#)

IV. FUNDING OPPORTUNITIES

USDA, Community Connect Grants

This program helps fund broadband deployment into rural communities where it is not yet economically viable for private sector providers to deliver service.

Eligible areas include rural areas that lack any existing broadband speed of at least 4 Mbps downstream and 1 Mbps upstream (download plus upload) is eligible.

Application due: June 17, 2016

For more information: [Community Connect Grants | USDA Rural Development](#)

Health Center Program, New Access Points Technical Assistance Funding Opportunity

The purpose of the Health Center Program New Access Point (NAP) funding opportunity is to improve **the health of the Nation's underserved communities and vulnerable** populations by increasing access to comprehensive, culturally competent, quality primary health care services. NAP funding provides operational support for new primary health care service delivery sites (i.e., new access points). A new access point is a new service delivery site for the provision of comprehensive health care services. Applicants must propose at least one full-time, permanent new access point site that has primary medical care as its main purpose.

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Application deadline: June 17, 2016

More information can be found here: [Health Center Program New Access Points \(HRSA-17-009\) Technical Assistance](#)

V. CONTACT INFORMATION

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