

MEMORANDUM

DATE: November 23, 2016

TO: Northwest Portland Area Indian Health Board (NPAIHB) Delegates, Tribal Health Directors and Tribal Chairs

FROM: Joe Finkbonner, NPAIHB Executive Director, RPH, and MHA

RE: Weekly NPAIHB "News and Information"

Beginning in December, the Northwest Portland Area Indian Health Board (NPAIHB) will be sending the Friday Post message to you using a mail-list manager called "Constant Contact". It will be time-saving for us to update our e-mail distribution lists.

So, the incoming message for you each Friday may look a little different, and we wanted to alert you to that so that you would know it is really coming from the NPAIHB office.

***To view a bulletin of interest, click on a title**

NPAIHB Delegates, Tribal Health Directors, Tribal Chairs

- ✦ NPAIHB weekly Funding Opportunities Report, Friday, November 25, 2016
- ✦ Funding Opportunity – Tribal Public Health and Climate Change
- ✦ Building Tribal Capacity for Climate Change Resilience and Public Health Programs Pre-Application Webinar
- ✦ Funding Opportunity – Insure Kids Now
- ✦ Save the Date – Region 10 Tribal Affairs Quarterly Call, December 1 at 10:30 a.m. PT (9:30 a.m. in Alaska; 11:30 a.m. in Idaho).

NPAIHB Delegates, Tribal Health Directors, Clinic Directors

- ✦ Learning Collaborative – Pediatric Integrated Care Collaborative (PICC), Applications due Friday, December 16th.
- ✦ Save the Date – Webinar, Federally Qualified Health Center (FQHC) Overview, December 6, 2016, 2:00 to 3:30 p.m., Eastern Time.

Oregon Tribal Health Directors, NPAIHB Delegates, Tribal Chairs

- ✦ Save the Date – BUDGET FORMULATION FY19 MEETING, November 29, 2016, Portland, Oregon



NORTHWEST PORTLAND AREA INDIAN HEALTH BOARD



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

Friday, November 25, 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



Administration for Community Living (ACL)/Administration on Aging (AoA) Older Americans Act (OAA), Title VI, Part A: Grants for Native Americans/Alaska Natives Programs; Part B: Grants for Native Hawaiian Programs; and Part C: Grants for the Native American Caregiver Support Program (available to American Indians, Alaska Natives, and Native Hawaiians).

DEADLINE: The deadline date for submission of applications is December 5, 2016.

AMOUNT: The ACL/AoA will accept applications for funding for a three-year project period, April 1, 2017 to March 31, 2020. In FY2015, funding for Title VI, Part A ranged from \$63,870 to \$157,414; Part C funding ranged from \$11,460 to \$47,263. Funding is based on the number of eligible elders age 60 and older living in your proposed service area on April 1, 2017. For those applying for Title VI, Parts A or B funding, you have the option to also apply for Part C. However, to apply for Part C, you must apply for both Part A or B and Part C. Applications submitted for Part C only, will not be reviewed.

DESCRIPTION: The ACL/AoA is responsible for administering Title VI of the OAA. Through this title, grants are awarded to Indian tribal, public, or non-profit organizations representing federally recognized Tribes, Alaskan Villages, and Native Hawaiians. Organizations must have the capacity to provide nutritional and supportive services to at least 50 AI/AN/NH elders age 60 and older under Parts A or B and caregiver support services under Part C. The goal of these programs is to support the independence and well-being of tribal elders living in their communities with services which are evidence-based and consistent with locally-determined needs.

The 1978 Amendments to the OAA created Title VI, Grants for Indian Tribal Organizations



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(ITO), to promote the delivery of supportive and nutritional services for Indian elders that are comparable to services provided under Title III of the OAA. Title III of the OAA, entitled Grants for State and Community Programs on Aging, is the nationwide program of supportive and nutritional service for persons age 60 and older of all ethnic groups, including AI/AN/NH Elders.

In the OAA Amendments of 1987, the name of Title VI was changed to Grants for Native Americans, and Part B, Native Hawaiian Programs, was added. Nutritional services and information and assistance services are required by the OAA. Required nutritional services include congregate meals and home-delivered meals. Other nutrition-related services could include diet counseling, nutrition education, sponsorship of Farmers Market programs, or distribution centers for food banks and charitable organizations. Home and community-based required supportive services include information and assistance, but these funds could also provide transportation, chore services, and many other services that contribute to the well-being of elders.

In the OAA Amendments of 2000, Part C, the Native American Caregiver Support Program was added. This program assists families, friends, or neighbors to care for an elder with a chronic illness or disability. The program helps tribes provide locally determined systems of support services for family caregivers of elders and for grandparents caring for grandchildren.

WEBSITE/LINK:

http://www.acl.gov/Funding_Opportunities/Announcements/docs/Title-VI/FY17-20TitleVIProgramAnnouncement_final.pdf

2016-2017 PEDIATRIC INTEGRATED CARE COLLABORATIVE - INDIAN HEALTH SERVICES (PICC) Strengthening the Role of Primary Care in Serving Children and Families Experiencing Trauma or Chronic Stress

DEADLINE: December 16th.

AMOUNT:

Participation is FREE and participants will receive:

- Coaching and support from national experts in trauma informed care
- Networking opportunities
- Trauma informed care tools and resources

DESCRIPTION: From 2013-2016, Johns Hopkins led three Learning Collaborative (LC) series to improve pediatric primary care's capacity to provide trauma services for children and families. By working with 27 sites, including two tribal, the LCs resulted in a trauma-informed care Toolkit. The next phase, funded by Indian Health Services, is intended to bring these efforts to tribal communities that are exposed to trauma or chronic stress.



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Trauma may include substance abuse, child abuse/neglect, interpersonal and community violence, high suicide rates, racism, and historical trauma.

WEBSITE/LINK: QUESTIONS - Please email completed applications to slarson@jhsph.edu

Spencer Foundation's Conference Grant -Conference Grants for Advancing Education Research Innovations in Measuring Educational Quality and Improvement

DEADLINE: The deadline for proposals is December 21, 2016 at 4 pm central standard time.

AMOUNT: This grant program supports conference proposals with budgets of \$50,000 or less.

DESCRIPTION: The Spencer Foundation's Conference Grant program is designed to provide support to scholars for small research conferences and focused symposia. The conference grant program intends to bring together researchers whose substantive knowledge, theoretical insight, and methodological expertise can be assembled in ways that build upon and advance best practices in education research. Through this grant program, the Foundation rotates the area of focus periodically to generate fresh ideas and perspectives on pressing educational challenges.

WEBSITE/LINK: <http://www.spencer.org/conference-grants-advancing-education-research>

Merck Foundation Bridging the Gap: Reducing Disparities in Diabetes Care

DEADLINE: Letter of Intent- The first step in the application process is to submit a letter of intent (LOI) by January 24, 2017, to bridgingthegap@rti.org. The LOI should be no longer than five pages (single-spaced, minimum 10-point font size), excluding the cover page.

Invited Full Proposals- Invited applicants will submit a full proposal by April 17, 2017.

AMOUNT: The Foundation can provide an eligible organization with a maximum grant not to exceed \$1.5 million for up to a 5-year period. Annual budgets for the proposed programs cannot exceed \$300,000 in any single year. The indirect rate for general administrative costs (which cannot include equipment) cannot exceed 15% of the total annual grant amount of up to \$300,000 per year. Grant funds cannot be used to displace or supplant existing funding for ongoing programs that address diabetes or health care disparities, as the intent is to build on and expand such programs or to create new ones. Additionally, grants are not intended to support research studies unrelated to the intervention evaluation.

Allowable and Unallowable Use of Funds - Grant funds may be used for the following purposes:

§ Project staff salaries and fringe benefits (Note: grant funding is not expected to provide fullstaff support)



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§ Project consultants, such as a local program evaluator

§ Other essential direct costs, including educational and training materials, limited equipment, general office materials and supplies, printing and copying, telephone, fax, and computer costs, postage and delivery, and data processing

§ Travel to program activities, including an annual meeting of Bridging the Gap grantees

§ Subcontracts (Note: same allowable and unallowable uses of funds apply).

DESCRIPTION: More than 29 million Americans are living with diabetes.¹ Serious complications and comorbidities occur among individuals whose disease is not controlled. These include blindness, end-stage renal disease, limb amputations, hypertension, hyperlipidemia, strokes, heart attacks, decreased functional status, and decreased quality of life.¹ Diabetes is estimated to cost \$176 billion in direct medical costs and \$245 billion in total costs in the United States each year.

² A disproportionate burden of diabetes-related disease and deaths occurs among vulnerable and underserved populations, ^{1,3,4} creating longstanding obstacles to health equity. (See Appendix A for additional information on diabetes disparities.) To help address these challenges, the Merck Foundation (the Foundation) announces a new initiative, Bridging the Gap: Reducing Disparities in Diabetes Care (“Bridging the Gap”). This initiative aims to improve access to high-quality diabetes care and reduce health disparities for vulnerable and underserved populations with type 2 diabetes in the United States. Bridging the Gap aims to promote health equity through intersectoral collaborations that bring together stakeholders from inside and outside the health care system to address disparities in health outcomes.

⁵⁻⁷ Intersectoral collaborations involve public and private organizations representing the health care sector and the social and environmental sectors—including food, education, housing, and social services—in designing and implementing interventions that address the medical determinants and the social determinants of health. Social determinants of health refer to factors external to the health care system that influence health, such as the neighborhood environment (for example, walkability) and access to healthy food options^{8,9} (see Exhibit 1). Intersectoral partnerships that address the social determinants of health are increasingly viewed as an approach to improve population health; that is, the health outcomes of a group of individuals and the distribution of outcomes within the group.

^{10,11} Because intersectoral collaborations to improve population health are new, no fixed approach exists for their development, implementation, or evaluation. The Centers for Medicare & Medicaid Services’ (CMS) recent Accountable Health Communities Model¹² is one example of an innovative approach to financing and delivery of health services that encourages clinical-community collaborations to address the social determinants of health for Medicare and Medicaid populations. Similarly, Bridging the Gap seeks to improve the care and outcomes of vulnerable and underserved populations within the context of their geographic location and to integrate health interventions with solutions that address the broader social determinants of health.

WEBSITE/LINK: http://www.msdrresponsibility.com/wp-content/uploads/2016/11/Bridging-the-Gap-Call-for-Proposals_FINAL_11.8.16a.pdf



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Hospice and Palliative Nurses Foundation

DEADLINE: July 1, 2017

AMOUNT: A single grant of up to \$15,000 will be awarded.

DESCRIPTION: The Hospice and Palliative Nurses Foundation, the charitable arm of the Hospice and Palliative Nurses Association, is accepting applications for its Certification Research Grant program.

The HPNF Certification Research Grant is intended to provide investigators with resources to conduct exploratory, pilot, or feasibility studies that will lead to larger scale projects linking certification with patient outcomes. Examples include collecting preliminary data about the distribution of certification qualifications among staff of different types of organizations or examining datasets from healthcare systems for patterns of staffing and outcomes. To be eligible, the principal investigator must be actively involved in some aspect of hospice and palliative care practice, education, or research; hold a master's or doctoral degree or be enrolled in a doctoral program; and have a project that is consistent with the purpose of the research grant. Preference will be given to HPNA members.

For complete program guidelines and application instructions, see the HPNF website.

WEBSITE/LINK: <http://hpnf.advancingexpertcare.org/research/research-grant-opportunities/>

FIELD INITIATED PROJECTS PROGRAM (DEVELOPMENT) - Department of Health and Human Services Administration for Community Living

DEADLINE: Feb 08, 2017 Electronically submitted applications must be submitted no later than 11:59 p.m., ET, on the listed application due date.

AMOUNT: \$200,000

DESCRIPTION: The purpose of the Field Initiated (FI) Projects program is to generate new knowledge through research or to develop methods, procedures, and rehabilitation technology that maximize the full inclusion and integration into society, employment, independent living, family support, and economic and social self-sufficiency of individuals with disabilities, especially individuals with the most severe disabilities. Another purpose of the FI Projects program is to improve the effectiveness of services authorized under the Rehabilitation Act of 1973, as amended. In carrying out a development activity under a FI Projects development grant, a grantee must use knowledge and understanding gained from research to create materials, devices, systems, methods, measures, techniques, tools, prototypes, processes, or intervention protocols, that are beneficial to the target population. Please note this will be the Funding Opportunity for FI Development proposals.

WEBSITE/LINK: <http://www.grants.gov/web/grants/view-opportunity.html?oppId=289877>

Planning Grant for Global Infectious Disease Research Training Program (D71)

DEADLINE: Letter of Intent Due Date(s) -30 days prior to the application due date. July, 27, 2017



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AMOUNT: Applications budgets are limited to \$46,000 (total direct costs). The maximum project period is 1 year.

DESCRIPTION: Infectious diseases continue to impose a tremendous health burden in resource-poor countries throughout the world, claiming millions of lives annually and inflicting severe morbidity that results in significant losses in economic productivity and social progress. Attempts to control infectious diseases endemic to low and middle income countries (LMICs) suffer due to an incomplete understanding of the pathogens, disease manifestations and transmission mechanisms, inadequate preventive measures and interventions, and insufficient health services and disease control efforts. A major barrier to improved treatment and control of infectious diseases is the lack of capacity to conduct locally relevant infectious disease research, often due to the scarcity of scientists and health professionals in LMICs with relevant research expertise. Therefore, the overall intent of this funding opportunity is to support a U.S.-LMIC collaborative planning process that will design a research training program to enhance capacity at LMIC institutions to conduct research directly related to prevention, treatment and control of infectious diseases causing major morbidity and mortality. Applications that include countries with little current research capacity are especially encouraged.

WEBSITE/LINK: [http://grants.nih.gov/grants/guide/pa-files/PAR-17-058.html# Section II. Award](http://grants.nih.gov/grants/guide/pa-files/PAR-17-058.html#_Section_II_Award)

Global Infectious Disease Research Training Program (D43)

DEADLINE: Letter of Intent Due Date(s) -30 days prior to the application due date. July, 27, 2017

AMOUNT: Applications budgets are limited to \$230,000 per year for new awards and \$276,000 per year for renewal awards (total direct costs). The maximum project period is up to 5 years.

DESCRIPTION: This Funding Opportunity Announcement (FOA) encourages applications for the Global Infectious Disease Research Training program from U.S. and LMIC research institutions. The application should propose a collaborative research training program that will strengthen the capacity of a LMIC institution to conduct infectious disease research that focuses on 1) major endemic or life-threatening emerging infectious diseases 2) neglected tropical diseases 3) infections that frequently occur as co-infections in HIV infected individuals or 4) infections associated with non-communicable disease conditions of public health importance in LMICs. FIC will support innovative research training programs that are designed to build sustainable infectious disease research capacity at an institution in an endemic LMIC. Sustainable infectious disease research capacity is known to require a critical mass of scientists and health research professionals with in-depth scientific expertise and complementary leadership skills that enable the institution to conduct independent, internationally-recognized infectious disease research relevant to the health priorities of their country.

WEBSITE/LINK: <http://grants.nih.gov/grants/guide/pa-files/PAR-17-057.html>



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2017 YOUTH GARDEN GRANT - KidsGardening

DEADLINE: December 15, 2016.

AMOUNT: A total of twenty programs will receive award packages. The top five programs will receive packages valued at \$750 that include plants, tools, seeds, a \$50 gift certificate for gardening supplies, and a KidsGardening curriculum package. Fifteen programs will receive a similar package valued at \$500.

DESCRIPTION: Since 1982, KidsGardening has awarded Youth Garden Grants to 5,436 schools, nonprofits, and youth programs across the United States, contributing over \$2.9 million to youth gardening initiatives. The 2017 Youth Garden Grant program aims to support school and youth educational garden projects that enhance the quality of life for students and their communities. Any nonprofit, school, or youth program planning a new garden program or expanding an established one that serves at least fifteen youth between the ages of 3 and 18 is eligible to apply. The selection of winners is based on demonstrated program impact and sustainability.

WEBSITE/LINK: <https://www.kidsgardening.org/2017-youth-garden-grant/>

Promoting the Human Rights of Women and Girls, Persons with Disabilities, and LGBTI Persons Department of State Bureau of Democracy, Human Rights and Labor

DEADLINE: Jan 23, 2017

AMOUNT: \$400,000

DESCRIPTION: The Bureau of Democracy, Human Rights, and Labor (DRL) announces an open competition for organizations interested in submitting applications for a program that will advance an integrated, intersectional approach to advancing the human rights of women and girls; persons with disabilities, and; LGBTI persons. Competitive proposals will present unique opportunities and creative strategies for coordinated engagement across these three communities to combat structural forms of stigma and discrimination facing women and girls; persons with disabilities, and; LGBTI persons. Programs should focus on one country in any region, globally. Where appropriate, proposals should include government participation or take advantage of existing political will. Program proposals should be in accordance with the National Action Plan on Women, Peace, and Security, the United States Strategy to Prevent and Respond to Gender Based Violence, the norms and objectives of the U.N. Convention on the Rights of Persons with Disabilities (CRPD) and with President Obama's Memorandum to promote International Initiatives to Advance the Human Rights of Lesbian, Gay, Bisexual and Transgendered Persons.

WEBSITE/LINK:

<https://www.grantsolutions.gov/gs/preaward/previewPublicAnnouncement.do?id=58454>



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RUSSEL SAGE FOUNDATION - Social Inequality

DEADLINE: Letter of Inquiry Deadline - January 9, 2017 (11am PT) Invited Proposal Deadline - March 13, 2017 (11am PT) Funding Decision- June 2017

AMOUNT: Two-year grants of up to \$150,000 will be awarded to qualified organizations.

DESCRIPTION: One of the oldest American foundations, the Russell Sage Foundation was established by Mrs. Margaret Olivia Sage in 1907 for "the improvement of social and living conditions in the United States." In pursuit of this mission, the foundation now dedicates itself to strengthening the methods, data, knowledge, and theoretical core of the social sciences as a means of diagnosing social problems and improving social policies.

The foundation's program on Social Inequality supports research on the social, economic, political, and labor market consequences of rising economic inequalities in the United States. The program seeks Letters of Inquiry for investigator-initiated research projects that will broaden current understanding of the causes and consequences of rising economic inequalities. Priority will be given to projects that use innovative data or methodologies to address important questions about inequality.

Examples of the kinds of topics that are of interest include, but are not limited to, economic well-being, equality of opportunity, and intergenerational mobility; the political process and the resulting policies; psychological and/or cultural change; education; labor markets; child development and child outcomes; neighborhoods and communities; families, family structure, and family formation; and other forms of inequality.

WEBSITE/LINK: <http://www.russellsage.org/research/funding/social-inequality>

Research Using Linked Data to Understand Motor Vehicle Injury Among Older Adults Department of Health and Human Services Centers for Disease Control and Prevention – ERA

DEADLINE: Feb 13, 2017 Electronically submitted applications must be submitted no later than 5:00 p.m., ET, on the listed application due date.

AMOUNT: \$400,000

DESCRIPTION: Motor vehicle crashes are the second leading cause of unintentional injury death for adults aged 65 years and older. The Centers for Disease Control and Preventions National Center for Injury Prevention and Control (NCIPC) is soliciting investigator-initiated research that will help determine the utility of linked data for identifying risk factors, protective factors, and outcomes of motor vehicle crashes among older adults. A better knowledge of how motor vehicle crashes affect types of injuries and injury severity can increase the potential public health impact of motor vehicle crash prevention efforts. Effective data linkage models could be integrated into more comprehensive crash risk assessment and management strategies and, when adopted, help to decrease the rates of injuries and deaths among persons involved in motor vehicle crashes.

WEBSITE/LINK: <http://www.grants.gov/web/grants/view-opportunity.html?oppld=286671>



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Interventions for Health Promotion and Disease prevention in Native American Populations (R01)

DEADLINE: May 12, 2017, by 5:00 PM local time of applicant organization.

AMOUNT: Application budgets are not limited, but need to reflect the actual needs of the proposed project. The project period is limited to five years.

DESCRIPTION: The purpose of this funding opportunity announcement (FOA) is to develop, adapt, and test the effectiveness of health promotion and disease prevention interventions in Native American (NA) populations. NA populations are exposed to considerable risk factors that significantly increase their likelihood of chronic disease, substance abuse, mental illness, oral diseases, and HIV-infection. The intervention program should be culturally appropriate and promote the adoption of healthy lifestyles, improve behaviors and social conditions and/or improve environmental conditions related to chronic diseases, the consumption of tobacco, alcohol and other drugs, mental illness, oral disease, or HIV-infection. The intervention program should be designed so that it could be sustained within the entire community within existing resources, and, if successful, disseminated in other Native American communities. The long-term goal of this FOA is to reduce mortality and morbidity in NA communities. For the purposes of this FOA Native Americans include the following populations: Alaska Native, American Indian, and Native Hawaiian. The term 'Native Hawaiian' means any individual any of whose ancestors were natives, prior to 1778, of the area which now comprises the State of Hawaii.

WEBSITE/LINK: <http://grants.nih.gov/grants/guide/pa-files/PA-14-260.html>

2016 -NOVEMBER

Building Tribal Capacity for Climate Change Resilience and Public Health Programs Tribal Public Health and Climate Change

DEADLINE: November 30th, 2016

AMOUNT: up to three (3) Tribes with grants ranging from \$75,000 to \$89,000

DESCRIPTION: The National Indian Health Board (NIHB), with support from the Center for Disease Control and Prevention's Climate and Health Program in the National Center for Environmental Health, is pleased to announce a call for applications for a Building Tribal Capacity for Climate Change Resilience award. Designed to enhance the capacity of Tribes, this funding will provide up to three (3) Tribes with grants ranging from \$75,000 to \$89,000 for the opportunity to increase the level of programming, research, and/or coordination and communication between the Tribal programs, community, and key partners involved in addressing the health consequences of climate change. NIHB will assist in sharing lessons learned and best practices with the Tribal awardees, CDC's Climate and Health Program, Tribal Climate Change Workgroup members, and other key stakeholders.

The goals of the 2016-2017 Building Tribal Capacity for Climate Change project are:

- To reduce climate-related morbidity and mortality in Tribal Nations and communities;
- To build capacity to identify and assess climate-related health threats to Tribes;



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- To build climate and health adaptation capacity within Tribal governments;
- To increase collaboration and data sharing among the Tribes, the federal government, state/local governments, and other partners on issues of climate and health;
- To increase communication and information sharing about the health effects of climate change.

NIHB intends to award funds to up to three (3) Tribes for the establishment and implementation of climate change resiliency projects.

WEBSITE/LINK:

<https://drive.google.com/file/d/0B9MXdlXIB510b1NJeHlxdTBOeDg/view>

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/PAR-15-361.html>

COMMUNITY

Using Music to Teach Mathematics Grants –National Council of Teachers of Mathematics

DEADLINE: The application packet must be postmarked by November 4, 2016 . Faxed copies will not be accepted. Duplicate applications will not be considered. Lack of an applicant's signature will automatically disqualify the proposal.

AMOUNT: For 2017-18, grants with a maximum of \$3,000 each will be awarded to persons currently teaching mathematics in grades Pre-K-2 level.

DESCRIPTION: The purpose of this grant is to incorporate music into the elementary school classroom to help young students learn mathematics. This award is for individual classroom teachers* or small groups of teachers collaborating in one grade or across grade levels. Any acquisition of equipment must support the proposed plan but not be the primary focus of the grant. Proposals must address the following: the combining of mathematics and music; the plan for improving students' learning of mathematics; and the anticipated impact on students' achievement. (*The definition of a classroom teacher is an individual who spends half or more of his/her work time teaching in the classroom.)

The applicant must be a current (on or before October 14, 2016) Full Individual or E-



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Member of NCTM or teach in a school with a current (on or before October 14, 2016)

NCTM PreK-8 school membership and currently teach mathematics or collaborate with teachers of mathematics in grades PreK-2. Activities are to be completed between June 1, 2017, and May 31, 2018. Past recipients of this grant are ineligible to reapply. No person(s) may receive more than one award administered by the Mathematics Education Trust in the same academic year.

WEBSITE: <http://www.nctm.org/Grants-and-Awards/Grants/Using-Music-to-Teach-Mathematics-Grants/>

7-12 Classroom Research Grants -National Council of Teachers of Mathematics

DEADLINE: The application packet must be postmarked by November 4, 2016. Faxed copies will not be accepted. Duplicate applications will not be considered. Lack of an applicant's signature will automatically disqualify the proposal.

AMOUNT: Grants of up to \$6,000 will be awarded to support and encourage classroom-based research in precollege mathematics education.

DESCRIPTION: The research must be a collaborative effort involving a college or university mathematics educator (a mathematics education researcher or a teacher of mathematics learning, teaching, or curriculum) and one or more grade 7-12 classroom teachers. The project may include but is not restricted to research on curriculum development and implementation; involvement of at-risk or minority students; students' thinking about a particular mathematics concept or set of concepts; connection of mathematics to other disciplines; focused learning and teaching of mathematics with embedded use of technology; and/or innovative assessment or evaluation strategies. The research should lead to a draft article suitable for submission in the Mathematics Teacher Educator, Journal for Research in Mathematics Education, or in one of the NCTM school journals.

To be eligible, applicants must be a current Full Individual member or E-Member of NCTM if a 9-12 teacher, or someone who teaches at a college or university. Seventh- or eighth-grade teacher applicants may be current Full Individual or E-Members or teach at a school having a current NCTM Pre-K-8 school membership.

WEBSITE/LINK: <http://www.nctm.org/Grants-and-Awards/Grants/7-12-Classroom-Research-Grants/>

Assistance to Firefighters Grant (AFG) - FEMA

DEADLINE: The FY 2016 AFG Open Application Period Dates Will Be As Follows: 8AM ET OCTOBER 11 through 5PM ET NOVEMBER 18

AMOUNT: SEE WEBSITE. THERE IS COST SHARING.

DESCRIPTION: The primary goal of the Assistance to Firefighters Grant (AFG) is to meet the firefighting and emergency response needs of fire departments and nonaffiliated emergency medical service organizations. Since 2001, AFG has helped firefighters and other first responders to obtain critically needed equipment, protective gear, emergency vehicles, training and other resources needed to protect the public and emergency



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personnel from fire and related hazards. The Department of Homeland Security (DHS), Federal Emergency Management Agency's (FEMA), Grant Programs Directorate (GPD) is responsible for the implementation and administration of the Assistance to Firefighters Grant (AFG) Program. The purpose of the AFG Program is to enhance the safety of the public and firefighters with respect to fire and fire-related hazards by providing direct financial assistance to eligible fire departments, nonaffiliated EMS organizations, and State Fire Training Academies (SFTA) for critically needed resources to equip and train emergency personnel to recognized standards, enhance operational efficiencies, foster interoperability, and support community resilience.

WEBSITE/LINK: https://www.fema.gov/media-library-data/1472840920028-6ecc836fb21bf4152f3c06ec942564cb/FY16_AFG_NOFO_final_v3_09_01_2016.pdf

2016 - DECEMBER

Department of Health and Human Services National Institutes of Health Expanding Alcohol-Focused High-Priority Translational Research for HIV/AIDS (UH2/UH3) Synopsis 2

DEADLINE: Dec 02, 2016

AMOUNT: Applicants may request up to \$275,000 direct costs for the entire UH2 phase with no more than \$200,000 direct costs for any year of the UH2 phase. Applicants may request up to \$250,000 direct costs for the UH3 phase per year. Budget should reflect the actual needs of the proposed project. The scope of the proposed project should determine the project period. In the UH2 phase, the maximum project period is 2 years, and in UH3 phase, the maximum project period is 3 years for a total of 5 years.

DESCRIPTION: This Funding Opportunity Announcement (FOA) is a new initiative to support the development of highly innovative HIV/AIDS and alcohol-relevant high-priority research (see NOT-OD-15-137) suitable for advancing the translation of basic biological and behavior science research into clinical practice through improved interventions for prevention and treatment among HIV+ individuals. Specifically, the FOA solicits applications for projects to adapt, apply, and validate existing or emerging behavioral and/or biological technologies into a new generation of patient-focused intervention to improve the treatment of alcohol-related problems among HIV+ individuals.

WEBSITE/LINK: <http://www.grants.gov/web/grants/view-opportunity.html?oppId=289074>

Garrett Lee Smith (GLS) Campus Suicide Prevention Grant

DEADLINE: Wednesday, December 7, 2016

AMOUNT: Up to \$102,000 per year. Up to 3 years

Cost Sharing/Match Required?: Yes

Proposed budgets cannot exceed \$102,000 in total costs (direct and indirect) in any year of the proposed project. Annual continuation awards will depend on the availability of funds, grantee progress in meeting project goals and objectives, timely submission of required data and reports, and compliance with all terms and conditions of award.



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Friday, November 25, 2016

DESCRIPTION: The Substance Abuse and Mental Health Services Administration, Center for Mental Health Services is accepting applications for fiscal year (FY) 2017 Garrett Lee Smith (GLS) Campus Suicide Prevention grants. The purpose of this program is to facilitate a comprehensive public health approach to prevent suicide in institutions of higher education. The grant is designed to assist colleges and universities in building essential capacity and infrastructure to support expanded efforts to promote wellness and help-seeking of all students. Additionally, this grant will offer outreach to vulnerable students, including those experiencing substance abuse and mental health problems who are at greater risk for suicide and suicide attempts.

WEBSITE/LINK: <http://www.samhsa.gov/grants/grant-announcements/sm-17-003>

Grants to Expand Substance Abuse Treatment Capacity in Adult Treatment Drug Courts and Adult Tribal Healing to Wellness Courts

DEADLINE: Monday, December 12, 2016

AMOUNT: Up to \$325,000 per year X 3 years

DESCRIPTION: The Substance Abuse and Mental Health Services Administration (SAMHSA), Center for Substance Abuse Treatment (CSAT), is accepting applications for fiscal year (FY) 2017 Grants to Expand Substance Abuse Treatment Capacity in Adult Treatment Drug Courts and Adult Tribal Healing to Wellness Courts. The purpose of this program is to expand and/or enhance substance use disorder treatment services in existing adult problem solving courts, and adult Tribal Healing to Wellness courts, which use the treatment drug court model in order to provide alcohol and drug treatment (including recovery support services, screening, assessment, case management, and program coordination) to defendants/offenders. Grantees will be expected to provide a coordinated, multi-system approach designed to combine the sanctioning power of treatment drug courts with effective substance use disorder treatment services to break the cycle of criminal behavior, alcohol and/or drug use, and incarceration or other penalties. Priority for use of grant funds should be given to addressing gaps in the continuum of treatment for individuals in these courts who have substance use disorders or co-occurring substance use and mental disorder (COD) treatment needs. Grant funds must be used to serve people diagnosed with a substance use disorder as their primary condition. SAMHSA will use discretion in allocating funding for these awards, taking into consideration the specific drug court model (Adult Treatment Drug Courts and Adult Tribal Healing to Wellness Courts), as appropriate, and the number of applications received per model type.

WEBSITE/LINK: <http://www.samhsa.gov/grants/grant-announcements/ti-17-001>

State and Regional Primary Care Association (PCA) Cooperative Agreements Department of Health and Human Services Health Resources and Services Administration

DEADLINE: Dec 12, 2016

AMOUNT: \$53,600,000 X 52 awards



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DESCRIPTION: This announcement solicits applications for State and Regional Primary Care Association (PCA) Cooperative Agreements[1] to provide training and technical assistance (T/TA) to existing and potential Health Center Program award recipients and look-alikes (hereafter referred to as health centers).[2] The Health Resources and Services Administration (HRSA) is seeking to fund up to 52 organizations to provide T/TA directly and through collaborative partnerships to support health centers in providing comprehensive, high quality primary health care and improving the health of individuals and communities, consistent with the goals of the Department of Health and Human Services' (HHS) National Quality Strategy.[3] [1] As authorized under section 330(l) of the Public Health Service Act, as amended (42 U.S.C 254b). [2] Health Center Program award recipients are organizations funded under Section 330(e), (g), (h), and/or (i) of the Public Health Service Act, as amended. Health Center Program look-alikes are organizations with look-alike designation per Sections 1861(aa)(4)(B) and 1905(l)(2)(B) of the Social Security Act (42 U.S.C. 1395x(aa)(4)(B) and 42 U.S.C. 1396d(l)(2)(B)(iii)). [3] More information on the National Quality Strategy is available at <http://www.ahrq.gov/workingforquality/>.

WEBSITE/LINK: <http://www.grants.gov/web/grants/view-opportunity.html?oppId=284907>

HRSA-17-058 National Training and Technical Assistance Cooperative Agreements (NCAs) Department of Health and Human Services Health Resources and Services Administration

DEADLINE: Dec 12, 2016

AMOUNT: \$18,500,000 X 19

DESCRIPTION: This announcement solicits applications for National Training and Technical Assistance Cooperative Agreements (NCA)[1] to provide training and technical assistance (T/TA) to existing and potential Health Center Program award recipients and look-alikes (hereafter referred to as health centers).[2] The Health Resources and Services Administration (HRSA) is seeking to fund approximately 19 organizations to provide T/TA directly and through collaborative partnerships to support health centers in providing comprehensive, high quality primary health care and improving the health of individuals and communities, consistent with the goals of the Department of Health and Human Services' (HHS) National Quality Strategy.[3] [1] As authorized under section 330(l) of the Public Health Service Act, as amended (42 U.S.C 254b). [2] Health Center Program award recipients are organizations funded under Section 330(e), (g), (h), and/or (i) of the Public Health Service Act, as amended. Health Center Program look-alikes are organizations with look-alike designation per Sections 1861(aa)(4)(B) and 1905(l)(2)(B) of the Social Security Act (42 U.S.C. 1395x(aa)(4)(B) and 42 U.S.C. 1396d(l)(2)(B)(iii)). [3] More information on the National Quality Strategy is available at <http://www.ahrq.gov/workingforquality/about.htm#develnqs>

WEBSITE/LINK: <http://www.grants.gov/web/grants/view-opportunity.html?oppId=284908>

Rural Health Research Dissemination Cooperative Agreement Department of Health and Human Services Health Resources and Services Administration

DEADLINE: Dec 14, 2016



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Friday, November 25, 2016

AMOUNT: \$135,000 X 1

DESCRIPTION: This announcement solicits applications for the Rural Health Research Dissemination Cooperative Agreement. The purpose of this program is to disseminate and market rural health services research funded by the Federal Office of Rural Health Policy (FORHP) to diverse audiences, such as decision makers and rural stakeholders at national, state, and community levels, with the goal of informing and raising awareness of key policy issues important to rural communities. FORHP primarily funds health services research through our Rural Health Research Center (RHRC) cooperative agreement. The successful applicant for this program will develop and maintain a website which includes the entire body of research funded by FORHP and allows that research to be easily and freely accessible to the public. The successful applicant will also develop and maintain strategies to effectively disseminate this research through a variety of mechanisms including (but not limited to) a listserv, social media accounts, presentations and exhibits at national conferences, and webinars.

WEBSITE/LINK: <http://www.grants.gov/web/grants/view-opportunity.html?oppId=288377>

Connecting Kids to Coverage Outreach & Enrollment Funding

DEADLINE: Potential Applicant Teleconference Information: December 7, 2016 from 2:00 to 3:00 pm EST.

Important Application Dates

December 14, 2016 - Letter of Intent Due

January 17, 2017 - Proposals Due

May 17, 2016 - Anticipated Award Date

AMOUNT: Awards will be in the form of cooperative agreements, ranging in size from \$250,000 to \$500,000 over a two-year period.

DESCRIPTION: The Centers for Medicare & Medicaid Services (CMS) announced a funding opportunity to support innovative outreach strategies aimed at increasing the enrollment and retention of eligible American Indian/Alaskan Native (AI/AN) children in Medicaid and CHIP, emphasizing activities tailored to communities where AI/AN children and families reside and enlisting tribal and other community leaders and tribal health and social services programs that serve eligible AI/AN children and families.

WEBSITE/LINK: <https://www.insurekidsnow.gov/initiatives/connecting-kids/funding/index.html>



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Ryan White HIV/AIDS Program Part B AIDS Drug Assistance Program Training and Technical Assistance Department of Health and Human Services Health Resources and Services Administration

DEADLINE: Dec 15, 2016

AMOUNT: \$500,000

DESCRIPTION: This announcement solicits applications for Ryan White HIV/AIDS Program (RWHAP) Part B AIDS Drug Assistance Program (ADAP) Training and Technical Assistance program. The purpose of this funding is to build the capacity of ADAPs through tools and technical assistance to maximize the impact of ADAPs in improving the health outcomes of people living with HIV in a changing health care environment. In collaboration with HRSA, the funded entity will provide technical assistance to RWHAP Part B recipients to strengthen ADAP administrative structures and operations, and to strengthen the capacity of ADAPs to implement and administer medication assistance and health insurance assistance programs to optimize client health outcomes. The funded entity will also be responsible for conducting on-going assessment of RWHAP Part B recipients' technical assistance needs related to ADAP and adapting technical assistance to changing needs. The applicant must clearly demonstrate that the applicant brings the experience and expertise needed to provide technical assistance and training to the State/Territory Health Departments' RWHAP Part B ADAP programs. An ADAP is a State/Territory-administered program authorized under Part B of the Ryan White HIV/AIDS Program that provides FDA-approved medications to low-income individuals with HIV disease who have limited or no coverage from private insurance, Medicaid, or Medicare. ADAP funds may also be used to purchase health insurance for eligible clients and for services that enhance access to, adherence to, and monitoring of drug treatments. Patient eligibility is determined by the State or Territory and includes verification of HIV status, and that the applicant meets financial and residency eligibility criteria. ADAPs are required to recertify client eligibility at least every six months. This cooperative agreement supports the primary goals of the National HIV/AIDS Strategy (NHAS).

WEBSITE/LINK: <http://www.grants.gov/web/grants/view-opportunity.html?opId=289537>

Laura and John Arnold Foundation Accepting Proposals for Ideas to Improve Mental Health Research

DEADLINE: Letters of Intent must be received no later than December 15, 2016. Upon review, selected applicants will be invited to submit a full proposal.

AMOUNT: SEE WEBSITE.

DESCRIPTION: The core objective of the Laura and John Arnold Foundation is to address the nation's most pressing and persistent challenges using evidence-based, multidisciplinary approaches.

As part of this mission, LJAF is seeking Letters of Interest from organizations and scholars with innovative ideas for how to improve the state of mental health research, including clinical psychology and psychiatry research. The foundation is particularly interested in strategies for incentivizing the registration of trials and the full reporting of results through



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ClinicalTrials.gov, encouraging greater sharing of data and code, and eliciting the disclosure of information about trials that is normally hidden (e.g., protocols and clinical study reports). Preference will be given to projects that promote the use of randomized controlled trials as a method of independently evaluating clinical psychology interventions and programs.

To be eligible, applicants must be recognized as tax-exempt under Section 501(c)(3) of the Internal Revenue Code.

WEBSITE/LINK: <http://www.arnoldfoundation.org/wp-content/uploads/RI-LOI-Mental-Health-FINAL.pdf>

_ OREGON ONLY _

Meyer Memorial Trust - Nonprofit Sector Support: 2016 Requests for Proposals

DEADLINE: Due: 5 p.m., Wednesday, December 7, 2016

AMOUNT: Meyer welcomes applications for grants up to \$75,000 for one year of funding and anticipates awarding a total of up to \$1 million under this RFP.

DESCRIPTION: This funding opportunity is intended to build strong, cross-sector networks and communities that work to advance equity and large scale systems change by building the capacity of leaders within organizations, networks and within and across communities.

This RFP supports Meyer's priority of building and supporting healthy social sector organizations and networks with a high capacity for social change, innovation, adaptation, collaboration, diverse leadership and robust operations.

WEBSITE/LINK: https://mmt.org/sites/default/files/inline-files/LeadershipDevelopmentRFP-FINALEDIT_0.pdf

Capacity Builder Funding Opportunity

DEADLINE: 5 p.m., Wednesday, December 7, 2016

AMOUNT: Meyer welcomes applications for grants up to \$140,000 for two years of funding, with additional support for participation in a Learning Collaborative and anticipates awarding \$1 million under this RFP.

DESCRIPTION: This funding opportunity is intended to build strong capacity builder organizations that, in turn, support nonprofit and other social sector organizations to effectively achieve their missions and integrate equitable strategies that result in improved outcomes for communities. This RFP supports Meyer's priority of building and supporting healthy social sector organizations and networks with a high capacity for social change, innovation, adaptation, collaboration, diverse leadership and robust operations.

WEBSITE/LINK: https://mmt.org/sites/default/files/inline-files/CapacityBuilderRFP-FINALEDITED_0.pdf



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Planning and Developing Infrastructure to Improve the Mental Health and Wellness of Children, Youth and Families in American Indian/Alaska Natives (AI/AN) Communities (Short Title: Circles of Care VII)- Department of Health and Human Services, Substance Abuse and Mental Health Services Administration

DEADLINE: Tuesday, December 20, 2016

AMOUNT: Up to \$418,000 per year x 3 years

DESCRIPTION: The Substance Abuse and Mental Health Services Administration, Center for Mental Health Services is accepting applications for fiscal year (FY) 2017 Planning and Developing Infrastructure to Improve the Mental Health and Wellness of Children, Youth and Families in American Indian/Alaska Natives (AI/AN) Communities (Short Title: Circles of Care VII) grants. The purpose of this program is to provide tribal and urban Indian communities with tools and resources to plan and design a holistic, community-based, coordinated system of care approach to support mental health and wellness for children, youth, and families. These grants are intended to increase the capacity and effectiveness of mental health systems serving AI/AN communities. Circles of Care grantees will focus on the need to reduce the gap between the need for mental health services and the availability and coordination of mental health, substance use, and co-occurring disorders in AI/AN communities for children, youth, and young adults from birth through age 25 and their families.

WEBSITE/LINK: <http://www.samhsa.gov/grants/grant-announcements/sm-17-002>

Circles of Care VII: Planning and Developing Infrastructure to Improve the Mental Health and Wellness of Children, Youth, and Families in American Indian/Alaska Natives (AI/AN) Communities

DEADLINE: Tuesday, December 20, 2016

AMOUNT: Up to \$418,000 per year X Up to 3 years

DESCRIPTION: The Substance Abuse and Mental Health Services Administration, Center for Mental Health Services is accepting applications for fiscal year (FY) 2017 Planning and Developing Infrastructure to Improve the Mental Health and Wellness of Children, Youth and Families in American Indian/Alaska Natives (AI/AN) Communities (Short Title: Circles of Care VII) grants. The purpose of this program is to provide tribal and urban Indian communities with tools and resources to plan and design a holistic, community-based, coordinated system of care approach to support mental health and wellness for children, youth, and families. These grants are intended to increase the capacity and effectiveness of mental health systems serving AI/AN communities. Circles of Care grantees will focus on the need to reduce the gap between the need for mental health services and the availability and coordination of mental health, substance use, and co-occurring disorders in AI/AN communities for children, youth, and young adults from birth through age 25 and their families.

WEBSITE/LINK: <http://www.samhsa.gov/grants/grant-announcements/sm-17-002>



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American Physical Therapy Association Seeks Applications for Health Policy and Administration Projects

DEADLINE: DECEMBER 31, 2016

AMOUNT: One or two grants of up to \$15,000 will be awarded to new physical therapist investigators or established investigators who are embarking on a research agenda in the areas of physical therapist practice, leadership, administration, or education. Grants may be renewable (no-cost extension) for up to a year.

DESCRIPTION: The American Physical Therapy Association is seeking applications for projects that stimulate, encourage, and support research activities that enhance the body of knowledge related to health policy, clinical administration, global health, and the use of technology in physical therapy. The program is administered by the association's Section on Health Policy & Administration.

To be eligible, applicants must be an APTA Health Policy & Administration section member. Collaborative research with non-section members is permissible as long as the principal investigator is a member of the Section on HPA. See the APTA website for complete program guidelines and application instructions.

WEBSITE/LINK: <http://www.aptahpa.org/?page=34>

HEALTH POLICY & ADMINISTRATION GRANT PROGRAM

DEADLINE: Midnight, December 31, 2016

AMOUNT: 1-2 research grant awards of up to \$15,000 are available to Section members to assist with a 1-year research study that investigates a question or questions of importance to health policy or clinical administration. Grants may be renewable (no-cost extension) for up to 1 year.

DESCRIPTION: The purpose of the Section Health Policy and Administration Grant Program is to stimulate, encourage and support research activities that enhance the body of knowledge related to health policy, clinical administration, global health, and the use of technology in physical therapy. The grants provide funding to assist new physical therapist investigators, or established investigators who are embarking on a new research agenda in these areas of physical therapist practice, leadership, administration, or education. Through this grant program, the Section hopes to encourage the development of proposals that will seek financial support from external agencies.

WEBSITE/LINK: <http://www.aptahpa.org/page/HPAGrant>

The Gerber Foundation

DEADLINE: DECEMBER 1, 2016 (CONCEPT PAPERS)

AMOUNT: Grants of up to \$350,000 will be awarded for research focused on issues faced



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by care providers that, when implemented, will improve the health, nutrition, and/or developmental outcomes for infants and young children.

DESCRIPTION: The Gerber Foundation is accepting concept papers for health and/or nutrition-related research projects having a significant impact on issues facing infants and young children from birth to three years of age. Projects may include etiologic mechanisms of disease; new, improved, or less invasive diagnostic procedures; reduction or elimination of side effects; alleviation of symptoms; new, improved or less invasive therapies, care, or treatments; dosage or dosing requirements or mechanisms for drugs, nutrient supplementation, or other therapeutic measures (under or overdosing); and preventative measures.

Priority is given to projects offering a substantial promise of meaningful advances in prevention and treatment of diseases and those with broad applicability to the general population on a regional or national level.

Organizations recognized as tax exempt under Section 501(c) (3) of the Internal Revenue Code are eligible to apply. In addition, organizations must be determined not to be private foundations under Internal Revenue Code Section 509.

WEBSITE/LINK: <http://www.gerberfoundation.org/pd-research/research>

Pearson Early Career Grant - The American Psychological Foundation (APF) and Pearson

DEADLINE: December 31, 2016

AMOUNT: \$12,000 to support early career psychologists to work in an area of critical social need.

DESCRIPTION: The Pearson Early Career Grant encourages early career clinicians to work in an area of critical societal need. Pearson partnered with APF to ensure psychology addresses critical needs in society. The program's goals are to support psychology's efforts to improve areas of critical need in society, including but not limited to innovative scientifically based clinical work with serious mental illness, serious emotional disturbance, incarcerated or homeless individuals, children with serious emotional disturbance (SED) and adults with serious mental illness (SMI); and to encourage early career psychologists to devote their careers to under-served populations.

WEBSITE: <http://www.apa.org/apf/funding/pearson.aspx?tab=1>

-COMMUNITY-

FY 2017 - AmeriCorps State and National Grants

DEADLINE: Applicants are strongly encouraged to submit a Notification of Intent to apply for this competition, but it is not required. Notifications of Intent to Apply should be filed by Wednesday, December 7, 2016.



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The deadline for applications to the 2017 NOFO is Wednesday, January 18, 2017 at 5:00 p.m. Eastern Time. Organizations that propose to operate in only one state must apply through the Governor-appointed State or Territory Commissions. Each state and territory administers its own selection process and puts forward to CNCS the applicants it selects to compete for funding. State applicants must contact their State Commissions to learn about their state or territory processes and deadlines which may be significantly before the CNCS deadlines and may have additional requirements.

AMOUNT: SEE APPLICATION GUIDELINES

DESCRIPTION: In the FY 2017 AmeriCorps competition, CNCS seeks to prioritize the investment of national service resources in:

Disaster Services - improving community resiliency through disaster preparation, response, recovery, and mitigation

Economic Opportunity - increasing economic opportunities for communities by engaging opportunity youth, either as the population served and/or as AmeriCorps members

Education - improving student academic performance in Science, Technology, Engineering, and/or Mathematics (STEM)

Environment - 21st Century Service Corps

Healthy Futures - Reducing and/or Preventing Prescription Drug and Opioid Abuse

Veterans and Military Families - positively impacting the quality of life of veterans and improving military family strength

Governor and Mayor Initiatives

Programming that supports My Brother's Keeper

Multi-focus intermediaries that demonstrate measurable impact and primarily serve communities with limited resources and organizational infrastructure, i.e. rural and other underserved communities

Safer communities

Evidence Based Intervention Planning Grants

Encore Programs

A separate Notice of Federal Funding Opportunity for Indian Tribes for either fully operational or planning grants will be released later in the Fall with an application deadline of Spring 2017.

WEBSITE/LINK: <http://www.nationalservice.gov/build-your-capacity/grants/funding-opportunities/2017/amicorps-state-and-national-grants-fy-2017>

2017 JANUARY



Friday, November 25, 2016

Cooperative Agreements for Expansion and Sustainability of the Comprehensive Community Mental Health Services for Children with Serious Emotional Disturbances

DEADLINE: Tuesday, January 3, 2017

AMOUNT: \$15,045,000 X 5-15 awards

Anticipated Award Amount: Up to \$3 million per year for state applicants; up to \$1 million for political subdivisions of states, territories, Indian or tribal organizations.

Length of Project: Four years

Cost Sharing/Match Required?: Yes

Proposed budgets cannot exceed \$3,000,000 for state applicants and \$1,000,000 for political subdivisions of states, tribes, tribal organizations, and territories total costs (direct and indirect) in any year of the proposed project. Annual continuation awards will depend on the availability of funds, grantee progress in meeting project goals and objectives, timely submission of required data and reports, and compliance with all terms and conditions of award.

DESCRIPTION: The Substance Abuse and Mental Health Services Administration, Center for Mental Health Services (CMHS), is accepting applications for fiscal year (FY) 2017 Cooperative Agreements for the Expansion and Sustainability of the Comprehensive Community Mental Health Services for Children with Serious Emotional Disturbances (Short title: System of Care (SOC) Expansion and Sustainability Cooperative Agreements). The purpose of this program is to improve behavioral health outcomes for children and youth (birth-21) with serious emotional disturbances (SED) and their families. This program will support the widescale operation, expansion, and integration of the SOC approach by creating sustainable infrastructure and services that are required as part of the Comprehensive Community Mental Health Services for Children and their Families Program (also known as the Children's Mental Health Initiative or CMHI).

This cooperative agreement will support the provision of mental health and related recovery support services to children and youth with SED and those with early signs and symptoms of serious mental illness (SMI), including first episode psychosis (FEP), and their families.

The SOC Expansion and Sustainability Cooperative Agreements will build upon progress made in developing comprehensive SOC across the country by focusing on sustainable financing, cross-agency collaboration, the creation of policy and infrastructure, and the development and implementation of evidence-based and evidence-informed services and supports. Other activities supported will include the implementation of systemic changes, training, and workforce development.

The CMHI provides an excellent example of SAMHSA's Theory of Change (<http://store.samhsa.gov/product/PEP14-LEADCHANGE2>). Based on data demonstrating improved outcomes for children, youth, and families, service system improvements, and a positive return on investment, CMHI has been successful in moving the SOC approach from a demonstration program towards a more widescale adoption of the SOC values and



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principles. The goal is to continue these efforts to ensure that this approach becomes the primary way in which mental health services for children and youth with SED are delivered throughout the nation.

The SOC Expansion and Sustainability Cooperative Agreements program closely aligns with SAMHSA's Recovery Support Strategic Initiative (<http://www.samhsa.gov/about-us/strategic-initiatives>).

The SOC Expansion and Sustainability Cooperative Agreements are authorized under Sections 561-565 of the Public Health Service Act, as amended. This announcement addresses Healthy People 2020 Mental Health and Mental Disorders Topic Area HP 2020-MHMD.

WEBSITE/LINK: <http://www.samhsa.gov/grants/grant-announcements/sm-17-001>

Department of Health and Human Services National Institutes of Health Model Continuums of Care Initiative (MCCI) for Women and Girls at Risk and Living With HIV/AIDS and Harmful Alcohol and Associated Comorbidities Planning Cooperative Agreement (U34) Synopsis 2

DEADLINE: Jan 04, 2017

AMOUNT: \$225,000

DESCRIPTION: The purpose of the Model Continuums of Care Initiative (MCCI) for Women and Girls at Risk and Living with HIV/AIDS and Harmful Alcohol and Associated Comorbidities Initiative is to promote the development and evaluation of integrated multilevel interventions to reduce alcohol consumption as a key approach to preventing new infections and enhancing treatment adherence in communities in the U.S. where racial and ethnic minority women bear a disproportionate share of the HIV/AIDS disease burden. Using the U34 Planning Cooperative Agreement mechanism and a community-based participatory research approach, MCCI will support implementation and operations research to: 1) Improve screening and early engagement in care; 2) Enhance retention in care; 3) Improve medication adherence; and 4) Address the role of alcohol in the adoption of female-controlled HIV prevention strategies as they become available for implementation (i.e., microbicides, PrEP). Results of this research will provide the evidence base for the development of more effective systems of care for women and girls at risk and living with HIV, including pregnant mothers who engage in risky drinking and other substance use.

WEBSITE/LINK: <http://www.grants.gov/web/grants/view-opportunity.html?oppId=289085>



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Department of Health and Human Services National Institutes of Health Model Continuums of Care Initiative (MCCI) for Women and Girls at Risk and Living With HIV/AIDS and Harmful Alcohol and Associated Comorbidities Planning Cooperative Agreement (U34) Synopsis 2

DEADLINE: Jan 04, 2017

AMOUNT: \$225,000

DESCRIPTION: The purpose of the Model Continuums of Care Initiative (MCCI) for Women and Girls at Risk and Living with HIV/AIDS and Harmful Alcohol and Associated Comorbidities Initiative is to promote the development and evaluation of integrated multilevel interventions to reduce alcohol consumption as a key approach to preventing new infections and enhancing treatment adherence in communities in the U.S. where racial and ethnic minority women bear a disproportionate share of the HIV/AIDS disease burden. Using the U34 Planning Cooperative Agreement mechanism and a community-based participatory research approach, MCCI will support implementation and operations research to: 1) Improve screening and early engagement in care; 2) Enhance retention in care; 3) Improve medication adherence; and 4) Address the role of alcohol in the adoption of female-controlled HIV prevention strategies as they become available for implementation (i.e., microbicides, PrEP). Results of this research will provide the evidence base for the development of more effective systems of care for women and girls at risk and living with HIV, including pregnant mothers who engage in risky drinking and other substance use.

WEBSITE/LINK: <http://www.grants.gov/web/grants/view-opportunity.html?opId=289085>

Department of Health and Human Services National Institutes of Health Collaborative Research in HIV/AIDS, Alcohol, and Related Comorbidities (U01) Synopsis 2

DEADLINE: Jan 04, 2017

AMOUNT: \$500,000

DESCRIPTION: This Funding Opportunity Announcement (FOA), "Collaborative Research in HIV/AIDS, Alcohol, and Related Comorbidities (U01)" encourages new research into the identification, analysis, and treatment of HIV/AIDS and associated comorbidities impacted by alcohol use (e.g., Hep C, TB, Depression, HAND, other associated substance use, including medication polypharmacy) by fostering collaborations between NIAAA-supported investigators and those currently unaffiliated with the NIAAA HIV/AIDS research activities.

WEBSITE/LINK: <http://www.grants.gov/web/grants/view-opportunity.html?opId=289096>

Community Action Grants - American Association of University Women (AAUW)

DEADLINE: August 1–January 15

AMOUNT: The program offers one-year grants of up to \$7,000 to support community-based projects and two-year grants of up to \$10,000 to provide start-up funds for new



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projects that address the particular needs of the community and develop girls' sense of efficacy through leadership or advocacy opportunities.

DESCRIPTION: The American Association of University Women strives to promote equity and education for women and girls. Since the organization's founding in 1881, AAUW members have examined and taken positions on the fundamental issues of the day — educational, social, economic, and political.

AAUW is accepting applications for its Community Action Grants Program, an annual program that provides funds to individuals, AAUW branches, and AAUW state organizations as well as local community-based nonprofit organizations for innovative programs and non-degree research projects that promote education and equity for women and girls.

Project topic areas are unrestricted but should include a clearly defined activity that promotes education and equity for women and girls. Special consideration will be given to projects focused on the achievements of K-12 girls and community college women in science, technology, engineering, or math.

To be eligible, individual applicants must be women who are citizens or permanent residents of the United States. Nonprofit organizations must be based in the U.S. And projects must have direct public impact, be nonpartisan, and take place within the U.S. or one of its territories.

WEBSITE/LINK: <http://www.aauw.org/what-we-do/educational-funding-and-awards/community-action-grants/>

Medicare Access and CHIP Re-authorization Act Department of Health and Human Services Centers for Medicare & Medicaid Services

DEADLINE: Jan 17, 2017 All applications must be submitted electronically and be received through <http://www.grants.gov> by 3:00 p.m. Eastern Daylight time on January 17th, 2017 to be considered on time.

AMOUNT: \$500,000 X 12 awards

DESCRIPTION: Outreach and Enrollment Cooperative Agreements Focused on Increasing Health Care Enrollment of American Indian and Alaska Native Children.

WEBSITE/LINK: <http://www.grants.gov/web/grants/view-opportunity.html?oppId=290093>

Web-based Approaches to Reach Black or African American and Hispanic/Latino MSM for HIV Testing and Prevention Services - Department of Health and Human Services Centers for Disease Control and Prevention - ERA

DEADLINE: Jan 17, 2017 Electronically submitted applications must be submitted no later than 5:00 p.m., ET, on the listed application due date.

AMOUNT: \$850,000



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DESCRIPTION: The purpose of this funding opportunity announcement (FOA) is to identify the most effective internet-based strategies to increase HIV testing among black or African American and Hispanic/Latino MSM.

WEBSITE/LINK: <http://www.grants.gov/web/grants/view-opportunity.html?oppId=285253>

HRSA-17-081 Maternal and Child Environmental Health Network Department of Health and Human Services Health Resources and Services Administration

DEADLINE: Jan 20, 2017

AMOUNT: \$1,200,000

DESCRIPTION: This announcement solicits applications for the Maternal and Child Environmental Health Network. The purpose of this program is to decrease maternal and child morbidity and mortality associated with pre-and post-natal environmental exposures. One organization will be funded that will implement and support a network of national and regional teratogen information service (TIS) counseling centers. A teratogen is defined as an agent that may induce abnormal embryo or fetal development when administered during pregnancy.[1] This program is intended to be a resource for women of reproductive age, their partners and healthcare providers, with an emphasis on vulnerable and hard-to-reach populations.[2] For the purpose of this program, “post-natal exposure” refers to infants who are receiving breast milk. [1] The Teratology Society. (2010). Teratology Primer 2nd ed. Retrieved from <http://www.teratology.org/primer.asp> on September 27, 2016. [2] Vulnerable and hard to reach populations are defined as women living in medically underserved areas, or who are otherwise at-risk, for example, migrant workers, non-English speaking women, young women, those of lower socio-economic status (SES) and education, or who do not have insurance.

WEBSITE/LINK: <http://www.grants.gov/web/grants/view-opportunity.html?oppId=289618>

USDA FNS TIG FY 17 Department of Agriculture - Food and Nutrition Service

DEADLINE: Jan 25, 2017

AMOUNT: \$2,000,000

DESCRIPTION: The 2016 Consolidated Appropriations Act, Public Law 114-113 December 18, 2015, authorized funding to be used for grants to States for the purpose of developing or improving current automated information systems used to operate and manage the Child Nutrition Programs (CNPs). The United States Department of Agriculture (USDA) Food and Nutrition Service (FNS) has approximately \$4.4 million available in fiscal year (FY) 2017 to be used for grants under this funding. This Request for Applications (RFA) invites State agencies that administer the CNPs to apply for grant funding to implement innovative technology solutions that will improve program accountability, data accuracy, program performance measurement, and the capacity to identify and target error-prone areas (locations or program functions) within and across the CNPs at the State and Local Educational Agency (LEA) or Sponsor Organization (SO) levels. The Child Nutrition Technology Innovation Grant (CN TIG) funds will be available on a competitive basis to



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State agencies administering the CNPs (i.e., National School Lunch Program, School Breakfast Program, Child and Adult Care Food Program, and Summer Food Service Program). FNS is offering two types of CN TIGs: Planning Grants and Implementation Grants. States may apply for either a Planning Grant or an Implementation Grant, as described within this RFA, but not both under this 2017 RFA solicitation.

WEBSITE/LINK: <http://www.grants.gov/web/grants/view-opportunity.html?oppId=289748>

2017 FEBRUARY

Paralyzed Veterans of America Education Foundation Invites Proposals for Innovative Educational Projects

DEADLINE: February 1, 2017

AMOUNT: The foundation supports one-year projects with a maximum of \$50,000; conferences and symposia are supported up to a maximum of \$15,000.

DESCRIPTION: Paralyzed Veterans of America advocates for better health care and benefits for paralyzed veterans, aids in their search for a truly satisfying career, and provides them with a path to adventure through adaptive sports. Through its charitable arm, the Paralyzed Veterans of America Education and Training Foundation, the organization supports educational projects that benefit, serve, and enhance the quality of life of individuals with spinal cord injury/disease, their families, and caregivers.

The foundation awards grants in five categories: consumer, caregiver, and community education; professional development and education; research utilization and dissemination; assistive technology; and conferences and symposia. Projects seeking funding should be designed to improve the quality of life for individuals with SCI/D, educate consumers about the consequences of and complications associated with SCI/D, improve the knowledge and skills of SCI/D healthcare professionals, and/or prevent the occurrence and complications of new SCI/D.

WEBSITE/LINK:

[http://www.pva.org/site/c.ajIRK9NJLcJ2E/b.6305829/k.6E40/PVA Education Foundation.htm](http://www.pva.org/site/c.ajIRK9NJLcJ2E/b.6305829/k.6E40/PVA_Education_Foundation.htm)

Development and Evaluation of Sports Concussion Prevention Strategies Department of Health and Human Services Centers for Disease Control and Prevention - ERA

DEADLINE: Feb 16, 2017 Electronically submitted applications must be submitted no later than 5:00 p.m., ET, on the listed application due date.

AMOUNT: \$550,000 X 2 awards

DESCRIPTION: The purpose of this research is to either (a) develop and pilot test a new intervention OR (b) rigorously evaluate an existing intervention that targets young athletes participating in sports programs. Interventions should be social and behavioral in nature and can represent either primary prevention or secondary prevention of sports-related concussion. Primary prevention interventions aim to prevent sports-related concussions



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before they occur, while secondary prevention interventions aim to reduce the impact of concussions that have already occurred. Information gleaned from this research can inform mechanisms for change in the culture of youth sports and support multi-stakeholder approaches to promoting a positive (preventive) culture of sport to mitigate negative norms, beliefs, mores, and policies that may increase risks of concussion among young athletes.

WEBSITE/LINK: <http://www.grants.gov/web/grants/view-opportunity.html?oppId=286689>

2017 MARCH

Department of Health and Human Services Office of the Assistant Secretary for Health Announcement of Anticipated Availability of Funds for Family Planning Services Grants (Oregon entire state) Synopsis 3

DEADLINE: Mar 01, 2017 No Explanation

AMOUNT: \$100,000

DESCRIPTION: This announcement seeks applications from public and private nonprofit entities to establish and operate voluntary family planning services projects, which shall provide family planning services to all persons desiring such services, with priority for services to persons from low-income families. The Title X statute specifies that local and regional public or private nonprofit entities may apply directly to the Secretary for a Title X family planning services grant under this announcement. Funding of applications that propose to rely on other entities to provide services will take into consideration the extent to which the applicant indicates it can provide the required services and best serve individuals in need throughout the anticipated service area. For applicants that will not provide all services directly, the applicant must document the process and selection criteria it will use for providing an opportunity to receive subawards to qualified entities eligible to receive federal funds in providing services throughout the service area to meet the needs of project beneficiaries. Family planning services include clinical family planning and related preventive health services; information, education, and counseling related to family planning; and, referral services as indicated. Applicants should use the Title X legislation, applicable regulations, legislative mandates, current Program Guidelines (issued in 2014), OPA Program Policy Notices, program priorities, and other key issues included in this announcement to guide them in developing their applications.

WEBSITE/LINK: <http://www.grants.gov/web/grants/view-opportunity.html?oppId=287996>

Department of Health and Human Services Office of the Assistant Secretary for Health Announcement of Anticipated Availability of Funds for Family Planning Services Grants (Washington entire state) Synopsis 3

DEADLINE: Mar 01, 2017 No Explanation

AMOUNT: \$100,000



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DESCRIPTION: This announcement seeks applications from public and private nonprofit entities to establish and operate voluntary family planning services projects, which shall provide family planning services to all persons desiring such services, with priority for services to persons from low-income families. The Title X statute specifies that local and regional public or private nonprofit entities may apply directly to the Secretary for a Title X family planning services grant under this announcement. Funding of applications that propose to rely on other entities to provide services will take into consideration the extent to which the applicant indicates it can provide the required services and best serve individuals in need throughout the anticipated service area. For applicants that will not provide all services directly, the applicant must document the process and selection criteria it will use for providing an opportunity to receive subawards to qualified entities eligible to receive federal funds in providing services throughout the service area to meet the needs of project beneficiaries. Family planning services include clinical family planning and related preventive health services; information, education, and counseling related to family planning; and, referral services as indicated. Applicants should use the Title X legislation, applicable regulations, legislative mandates, current Program Guidelines (issued in 2014), OPA Program Policy Notices, program priorities, and other key issues included in this announcement to guide them in developing their applications.

WEBSITE/LINK: <http://www.grants.gov/web/grants/view-opportunity.html?oppId=287981>

Department of Health and Human Services Office of the Assistant Secretary for Health Announcement of Anticipated Availability of Funds for Family Planning Services Grants (Idaho entire state) Synopsis 3

DEADLINE: Mar 01, 2017 No Explanation

AMOUNT: \$100,000

DESCRIPTION: This announcement seeks applications from public and private nonprofit entities to establish and operate voluntary family planning services projects, which shall provide family planning services to all persons desiring such services, with priority for services to persons from low-income families. The Title X statute specifies that local and regional public or private nonprofit entities may apply directly to the Secretary for a Title X family planning services grant under this announcement. Funding of applications that propose to rely on other entities to provide services will take into consideration the extent to which the applicant indicates it can provide the required services and best serve individuals in need throughout the anticipated service area. For applicants that will not provide all services directly, the applicant must document the process and selection criteria it will use for providing an opportunity to receive subawards to qualified entities eligible to receive federal funds in providing services throughout the service area to meet the needs of project beneficiaries. Family planning services include clinical family planning and related preventive health services; information, education, and counseling related to family planning; and, referral services as indicated. Applicants should use the Title X legislation, applicable regulations, legislative mandates, current Program Guidelines (issued in 2014), OPA Program Policy Notices, program priorities, and other key issues included in this announcement to guide them in developing their applications.

WEBSITE/LINK: <http://www.grants.gov/web/grants/view-opportunity.html?oppId=287980>



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Household Transmission of Influenza Viruses in the Community - Department of Health and Human Services, Centers for Disease Control and Prevention - ERA

DEADLINE: Mar 01, 2017 Electronically submitted applications must be submitted no later than 5:00 p.m., ET, on the listed application due date.

AMOUNT: \$500,000 X 3 awards

DESCRIPTION: Households constitute up to 30% of influenza virus transmission and monitoring influenza in households is important to track how influenza spreads among close contacts and to understand the clinical spectrum of influenza infection and disease. The purpose of this project is to enroll households with confirmed influenza and follow household contacts for up to two weeks to estimate the secondary infection risk and factors associated with risk of infection. This study will also estimate the effectiveness of the influenza vaccine in preventing influenza infection from close contacts. These findings are important to improve prevention and control of seasonal influenza, but also to be better prepared in the event of a future influenza pandemic.

WEBSITE/LINK: <http://www.grants.gov/web/grants/view-opportunity.html?oppld=285280>

Pilot Studies to Detect and Prevent Suicide Behavior, Ideation and Self-Harm in Youth in Contact with Juvenile Justice System (R34)

DEADLINE: March 16, 2017

AMOUNT: \$225,000

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/LINK: <http://www.grants.gov/web/grants/view-opportunity.html?oppld=284225>

2017 APRIL

Runnerclick Scholarship

DEADLINE: No later than April 30, 2017

AMOUNT: \$2000



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DESCRIPTION: First a little about Runnerclick. We aim to bring you reviews on the latest and greatest from brands such as Brooks, Asics, Adidas, Nike, Saucony and many others. We also review and blog about a lot more than just running shoes, such as GPS watches, shoes made for walking, trails, standing or zumba – the list goes on.

We also offer a growing running blog with contributions from sport familiar writers, where you will find great pointers on how to successfully achieve a healthy, get rid of plantar fasciitis and active lifestyle, as well as further enhance the one you may already lead. Although our content is mostly aimed at runners of all experience levels, we believe that the information that our writers provide could be helpful to all, in general.

We feel that maintaining a healthy lifestyle, and remaining active in sports as well as other outdoor activities can be beneficial in building a strong mind and good character through sportsmanship. That is why we are proud to announce the Runnerclick scholarship, awarded to three qualified applicants each year, for an amount of \$2000 (two thousand U.S. Dollars) to each of the three winners.

We are happy to help with the growth and education that will turn out more healthy and productive members of our society, also keeping alive an athletic and competitive traditions as we develop.

We encourage anyone who is interested to apply, however there are a few necessary requirements that must be fulfilled in order to be seriously considered for one of the three annual awards. Below you will find a more specific breakdown of the scholarship details, as well as the requirements for eligibility and guidelines for your essay. If you decide to apply, you'll just need to completely follow the steps below to submit your application.

Good luck!

WEBSITE/LINK: <http://runnerclick.com/runnerclick-scholarship/>

2017 JUNE

Regional Partnership Grants to Increase the Well-Being of, and to Improve the Permanency Outcomes for, Children Affected by Substance Abuse in American Indian/Alaska Native Communities \ Department of Health and Human Services Administration for Children and Families - ACYF/CB

DEADLINE: Jun 06, 2017 Electronically submitted applications must be submitted no later than 11:59 p.m., ET, on the listed application due date.

AMOUNT: \$600,000 X 6 awards

DESCRIPTION: The purpose of this forecasted funding opportunity announcement (FOA) is to provide competitive grant funds for projects of up to 5 years, authorized by the Child and Family Services Improvement and Innovation Act (Pub. L. 112-34). This Act includes a targeted grants program (section 437(f)) that directs the Secretary of Health and Human Services to reserve funds for regional partnership grants (RPGs) to improve the well-being of children affected by substance abuse. These targeted grants will be awarded to regional partnerships that provide, through interagency collaboration and integration of programs and services and activities that are designed to increase the well-being of, improve



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permanency outcomes for, and enhance the safety of children who are in out-of-home placements or are at risk of entering out-of-home placements as a result of a parent's or caretaker's substance abuse. Native communities face service delivery issues that are complicated by several barriers such as, lack of early intervention for American Indian/Alaska Native (AI/AN) communities, distances to services, and lack of access to programs and services. The goal of the program, services, and activities supported by these funds is to improve the well-being of children and families affected by parental substance abuse in AI/AN communities. Per the legislative requirements, RPGs are required to select and report on performance indicators and evaluation measures to increase the knowledge that can be gained from the program. Partnerships will: Use specific, well-defined, and evidence-based programs and/or promising practices that are also trauma-informed and targeted to the identified population; Conduct an evaluation that is sufficiently rigorous to contribute to the evidence base on service delivery, outcomes and costs associated with the project's chosen interventions; Participate in the national cross-site evaluation, which includes an implementation and partnership study, an outcomes study, and an impact study. PLEASE SEE ALSO FORECAST FOR REGIONAL PARTNERSHIP GRANTS TO INCREASE THE WELL-BEING OF, AND TO IMPROVE THE PERMANENCY OUTCOMES FOR, CHILDREN AFFECTED BY SUBSTANCE ABUSE.

WEBSITE/LINK: <http://www.grants.gov/web/grants/view-opportunity.html?oppId=288214>

2017 - FORECASTED GRANTS

Community Approaches to Reducing Sexually Transmitted Diseases (CARS)

Department of Health and Human Services

Centers for Disease Control - NCHHSTP

DEADLINE: Apr 01, 2017 Electronically submitted applications must be submitted no later than 5:00 p.m., ET, on the listed application due date.

AMOUNT: \$312,500

DESCRIPTION: The Centers for Disease Control and Prevention (CDC) announces the availability of Fiscal Year (FY) 2017 funds for a cooperative agreement with organizations with demonstrated experience and capacity of implementing community engagement methods (e.g. community-based participatory research) and multi-sector partnerships to promote sexual health, advance community wellness, influence sexual health behavior and practices, and reduce STI disparities. In accordance with the Healthy People 2020 Goals for the nation, this FOA focuses on reducing the proportion of adolescents and young adults with Chlamydia trachomatis infections, reducing Chlamydia rates among females aged 15-44 years, reducing gonorrhea rates, reducing sustained domestic transmission of primary and secondary syphilis, congenital syphilis, GC incidence, and reducing the proportion of young adults with genital herpes infection due to herpes simplex type 2. The new FOA provides support in five focus areas. These focus areas are: (1) implementation of community engagement methods (e.g. community-based participatory research) to achieve health equity; (2) identification and implementation of systems and environmental change strategies that (a) promote sexual health and support healthy behaviors and (b) facilitate community-clinical linkages to build support for interventions to prevent and reduce STI



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disparities; (3) enhancement and sustainability of partnerships; (4) support for communication strategies to promote STD program successes and leverage additional resources for STI control and prevention; and (5) evaluation of the efficacy of this approach and intervention implementation. Measureable outcomes are: 1. Community Engagement: Community members actively participate in and are satisfied with Community Advisory Board (CAB); perceived power among CAB members; community social determinants of health priority are identified; community involved in design of interventions to reduce STD disparities; increased linkages with and access to target groups. 2. Identification and implementation of system and environmental strategies: Existing clinical resources identified; community priorities and effective community-designed interventions are implemented, evaluated, and sustained; positivity and treatment rates from community events and STD screenings are documented; decrease in exposure to social disorder (e.g., presence of trash, lack of community cooperation); decrease in risky sexual behavior; decrease in STD disparities; 3. Multi-sectorial partnerships: New and stable partnerships are formed; partner resources and influence are used to implement, evaluate, and community-designed interventions; 4. Communication: Increased awareness of STD disparities and sexual health issues through mixed-modal communication methods including social media; increased access to and use of community health resources and support services by target groups most impacted by STD disparities; increased access to and use of educational opportunities by target groups; implementation of effective health equity and sexual health communication methods. This FOA is designed to begin on September 30, 2017 and replaces FOA PS14-1406

WEBSITE/LINK: <http://www.grants.gov/web/grants/view-opportunity.html?oppId=290103>

2017- MAY

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: May 16, 2017

AMOUNT: \$10,000 x 20

DESCRIPTION: This Funding Opportunity Announcement (FOA), issued by the Food and Drug Administration under the support for Research Demonstration and Dissemination 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/LINK: <http://www.grants.gov/web/grants/view-opportunity.html?oppId=283029>

2017 JUNE



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2017 - FORECASTED GRANTS

Occupational Safety and Health Research (R01) - Department of Health and Human Services, Centers for Disease Control and Prevention - ERA

DEADLINE: Jun 05, 2017 Electronically submitted applications must be submitted no later than 5:00 p.m., ET, on the listed application due date.

AMOUNT: \$400,000 X 16 awards

DESCRIPTION: The purpose of this grant program is to develop an understanding of the risks and conditions associated with occupational diseases and injuries, to explore methods for reducing risks and for preventing or minimizing exposure to hazardous conditions in the workplace, and to translate significant scientific findings into prevention practices and products that will effectively reduce work-related illnesses and injuries.

WEBSITE/LINK: <http://www.grants.gov/web/grants/view-opportunity.html?oppId=290108>

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.



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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

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.



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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**

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.



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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 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.



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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.8WbcfRk.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.)

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



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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.

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



NORTHWEST PORTLAND AREA INDIAN HEALTH BOARD



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

Friday, November 25, 2016

*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.

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.



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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....

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.



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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=CjwKEAiAhPCyBRctwMDS5tzT03gSJADZ8VjRw5RxJw1br5NTowrY1NFzylowGtdvOagXa3LHyYK PRoCB4Hw wcB>

RWJF: Submit a Pioneering Idea Brief Proposal - Throughout the year, we welcome Pioneering Ideas Brief Proposals that can help us anticipate the future and consider new and unconventional perspectives and approaches to building a Culture of Health.

DEADLINE: Open

AMOUNT: See site

DESCRIPTION: The goal of the Pioneering Ideas Brief Proposal funding opportunity is to explore; to look into the future and put health first as we design for changes in how we live, learn, work and play; to wade into uncharted territory in order to better understand what new trends, opportunities and breakthrough ideas can enable everyone in America to live the healthiest life possible.

While improving the status quo is vital to the health and well-being of millions of Americans now, the Pioneering Ideas Brief Proposal opportunity reaches beyond incremental changes to explore the ideas and trends that will influence the trajectory and future of health. Ultimately, we support work that will help us learn what a Culture of Health can look like—and how we can get there.

What is a Pioneering Idea?

Good question! We don't want to provide a checklist that limits your thinking—or ours. We do want to give you as clear a picture as we can about the kinds of proposals we hope to see, so you can best assess whether submitting an idea through our Pioneering Ideas Brief Proposal process is the right next step for you. Our application form allows you to introduce your idea; if it seems to be a fit for our portfolio we will reach out for more information.

We share some examples below of Pioneering Ideas we have funded in the past to give you a sense of where we've been. Keep in mind that ultimately, we need you to challenge us, and to tell us where we should be going and what ideas have the most potential to



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transform the way we think about health. As you review the examples below, you may notice some shared themes or characteristics which:

Challenge assumptions or long-held cultural practices.

Take an existing idea and give it a new spin—or a novel application.

Offer a new take or perspective on a long-running, perplexing problem.

Apply cutting-edge ideas from other fields to health.

Explore the potential for emerging trends to impact our ability to build a Culture of Health.

WEBSITE/LINK: http://www.rwjf.org/en/how-we-work/submit-a-proposal.html?rid=CR0RfoW1kVrIxFKudcSYjL9Zh7yWU63VdhdaVE2UAc&et_cid=639126

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.

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



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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/aspcanorthern-tier-shelter-initiative-coalition-grants>

Healthy Native Babies Outreach Stipend Application

DEADLINE: Applications will be accepted on a rolling basis as funds are available.

AMOUNT: \$1500

DESCRIPTION: The Healthy Native Babies Project, a project of the Eunice Kennedy Shriver National Institute of Child Health and Human Development (NICHD), has created culturally appropriate materials with safe infant sleep messages for American Indian and Alaska Native communities. These materials can be tailored for local communities by selecting various photos, graphic designs, and phrases in Native languages from the Healthy Native Babies Project Toolkit Disk. Outreach stipends are available for printing customized outreach materials to disseminate in your community. Recipients must be from one of the following Indian Health Service (IHS) Areas: Alaska, Bemidji, Billings, Great Plains, and Portland. Information on IHS Areas can be found at: <https://www.ihs.gov/locations/>.

WEBSITE/LINK: <http://files.constantcontact.com/913a319f001/8e50ceae-d3be-462e-be3d-3216455225bc.pdf?ver=1470849886000>

Good Sports Accepting Applications for Sports Equipment **Program**

DEADLINE: *ROLLING FUNDING*

AMOUNT: While the equipment, apparel, and footwear received through the program are free, recipients are expected to pay shipping and handling costs, which amount to roughly 10 percent of the donation value, with a maximum fee of \$1,500.

DESCRIPTION: Good Sports helps lay the foundation for healthy, active lifestyles by providing athletic equipment, footwear, and apparel to disadvantaged young people nationwide. By working closely with teams, coaches, and community leaders across the United States, the organization is able to focus on the respective needs of each individual program and help offset the main factors causing the greatest challenges.



NORTHWEST PORTLAND AREA INDIAN HEALTH BOARD



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Friday, November 25, 2016

Good Sports is accepting applications from organizations and schools for equipment, apparel, and footwear for a wide range of sports. Organizations that are approved will have access to equipment, apparel, and footwear inventory for a two-year period. During that time, organizations can make up to six separate donation requests — as long as need is well documented, donations will be granted. There is no need to resubmit a full application again during the two-year period.

To be eligible, applicants must directly serve youth between the ages of 3 and 18; serve youth in an economically disadvantaged area; be located in North America (the U.S. and Canada); and operate an organized sport, recreational activity, or fitness program that offers consistent and structured opportunity for play to large groups of children. Schools must apply as a whole; applications for individual programs within a school will not be considered. Donation requests for short-term events such as sports camps and tournaments or to individual athletes will not be considered.

Applications are reviewed on a rolling basis. It is recommended, however, that organizations apply at least eight weeks prior to the start of their particular season or program to ensure the desired equipment can be accessed and shipped on time.

WEBSITE/LINK: <https://www.goodsports.org/apply/>

Good Sports Accepting Applications for **Athletic Equipment** Grants

DEADLINE: *ROLLING FUNDING*

AMOUNT: You will be required to sign a release form and pay a shipping and handling fee with each donation. This will always equal 10% of the total retail value of the items; for example, if the total value of your items equals \$2,000, you will be asked to provide \$200, etc.

DESCRIPTION: Good Sports in Quincy, Massachusetts, is a nonprofit whose mission is to increase youth participation in sports, recreation, and fitness activities.

To that end, the organization provides sports equipment, apparel, and footwear to youth organizations offering sports, fitness, and recreational programs to youth in need.

To be eligible, organizations must directly serve youth between the ages of 3 and 18 in an economically disadvantaged area; be located in North America (U.S. and Canada); and operate an organized sport, recreational activity, or fitness program that offers consistent and structured opportunity for play to large groups of children. Winning organizations may make up to six equipment requests within a two-year period. Winners will be responsible for operational costs, including equipment shipping, up to \$1,500.

WEBSITE/LINK: <http://www.goodsports.org/apply/>

National Indian Health Board



Funding Opportunity: Tribal Public Health and Climate Change

Applications Due November 30th, 2016

Building Tribal Capacity for Climate Change Resilience and Public Health Programs
Request for Applications

Download the Request for Applications (RFA)
[HERE](#)

NIHB held a pre-application webinar on November 9th, 2016
The link to view the recording of that webinar is [here](#)
Slides are available [here](#)

The National Indian Health Board (NIHB), with support from the Center for Disease Control and Prevention's Climate and Health Program in the National Center for Environmental Health, is pleased to announce a call for applications for a Building Tribal Capacity for Climate Change Resilience award. Designed to enhance the capacity of Tribes, this funding will provide up to **three (3) Tribes with grants ranging from \$75,000 to \$89,000** for the opportunity to increase the level of programming, research, and/or coordination and communication between the Tribal programs, community, and key partners involved in addressing the health consequences of climate change. NIHB will assist in sharing lessons learned and best practices with the Tribal awardees, CDC's Climate and Health Program, Tribal Climate Change Workgroup members, and other key stakeholders.

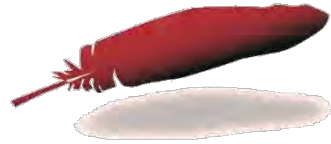
The goals of the 2016-2017 Building Tribal Capacity for Climate Change project are:

- To reduce climate-related morbidity and mortality in Tribal Nations and communities;
- To build capacity to identify and assess climate-related health threats to Tribes;
- To build climate and health adaptation capacity within Tribal governments;
- To increase collaboration and data sharing among the Tribes, the federal government, state/local governments, and other partners on issues of climate and health;
- To increase communication and information sharing about the health effects of climate change.

NIHB intends to award funds to up to three (3) Tribes for the establishment and implementation of climate change resiliency projects. The request for applications (RFA) can be downloaded, completed as a Word document, then turned into a PDF for submission. **Completed applications are due to NIHB via email by 11:59 PM EDT on Wednesday November 30th, 2016.**

Contact Brianna Carrier for addition questions at: bcarrier@nihb.org
Learn more at NIHB's [Climate Ready Tribes](#) page

National Indian Health Board | www.nihb.org
910 Pennsylvania Avenue SE | Washington, DC 20003 | Phone: 202-507-4070
[Join Our Mailing List](#)



Building Tribal Capacity for Climate Change Resilience and Public Health Programs

Pre-Application Webinar

Call-in toll-free number (US/Canada)

1-877-668-4493

Access code: 736 604 604

Webinar Protocols

- Please keep your phone on mute
- Save questions until the Q&A portion
 - Questions can be submitted to **NIHBJamie** in the WebEx chat box



Presentation Overview

- 4:00-5:00

- 1. Tribal Public Health and Climate Change**
- 2. Review the Request for Applications (RFA)**
- 3. Environmental Summits**
- 4. Q&A**
- 5. Contact Information**
- 6. Resources**

The RFA can be downloaded [here](#)



Introduction

Robert Foley, M. Ed

Chief Program Officer, National Indian Health Board

Brianna Carrier, MPA, M.Ed

Public Health Program Coordinator, National Indian Health Board

Main contact for “Climate-Ready Tribes”



National Indian Health Board

Purpose: To advocate on behalf of all federally recognized American Indian and Alaska Native Tribes to ensure the fulfillment of the trust responsibility to deliver health and public health services as assured through treaties, and reaffirmed in legislation, executive orders and Supreme Court cases.

Mission Statement: One Voice affirming and empowering American Indian and Alaska Native Peoples to protect and improve health and reduce health disparities.



RFA Overview

- **Funding Amount:** \$75,000-\$89,000
- **Funding Mechanism:** MOAs with funds attached
- **Anticipated Number of MOAs to be Issued:** 3
- **Funding Period:** Approximately December 5th, 2016-December 31st, 2017

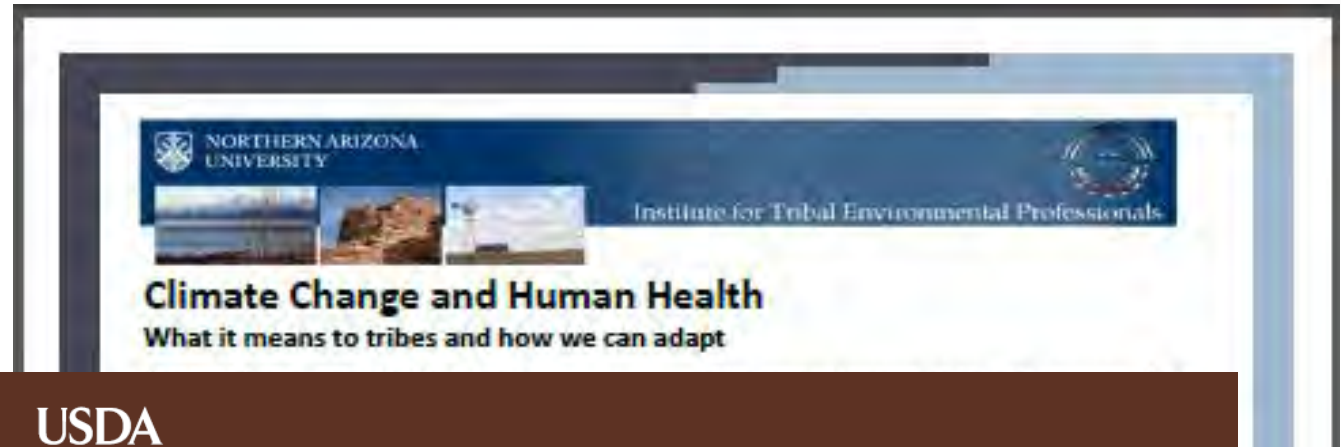
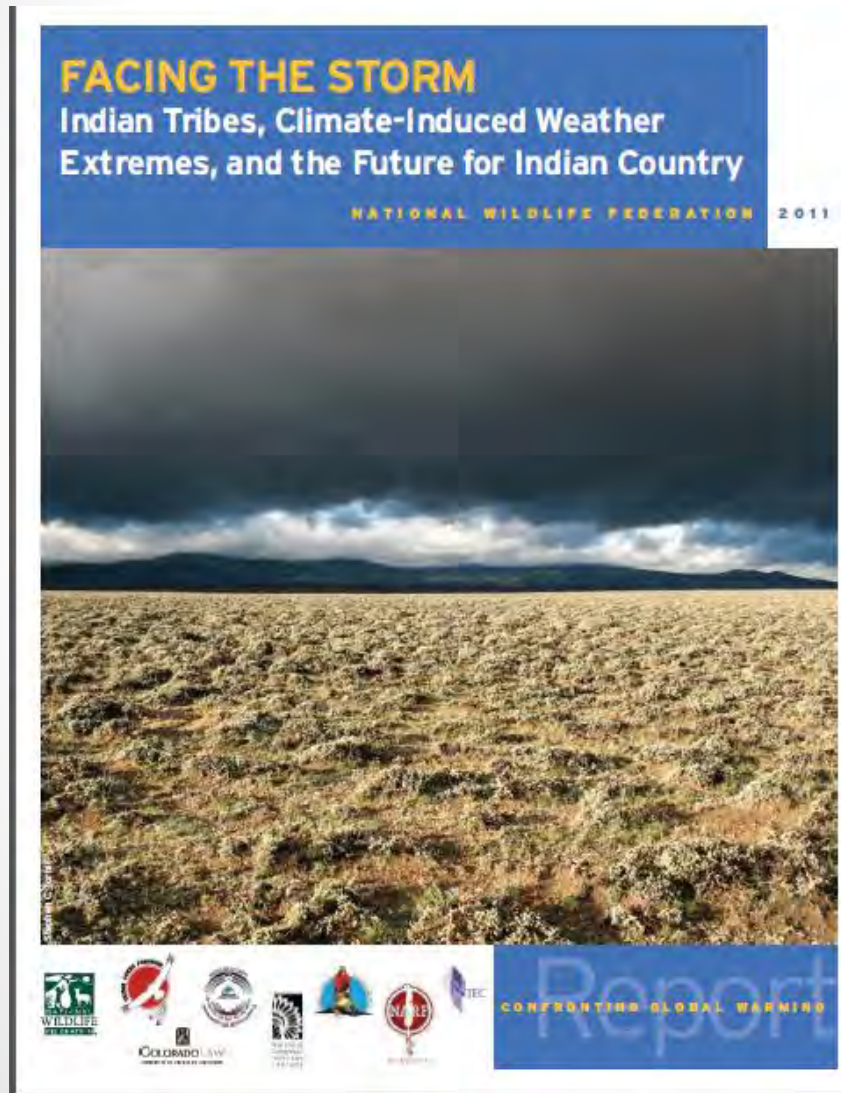


2016-2017 Project Goals

- To reduce climate-related morbidity and mortality
- To build capacity to identify and assess climate-related health threats
- To build adaptation capacity
- To increase collaboration and data sharing
- To increase communication and information sharing



Climate Change and Public Health

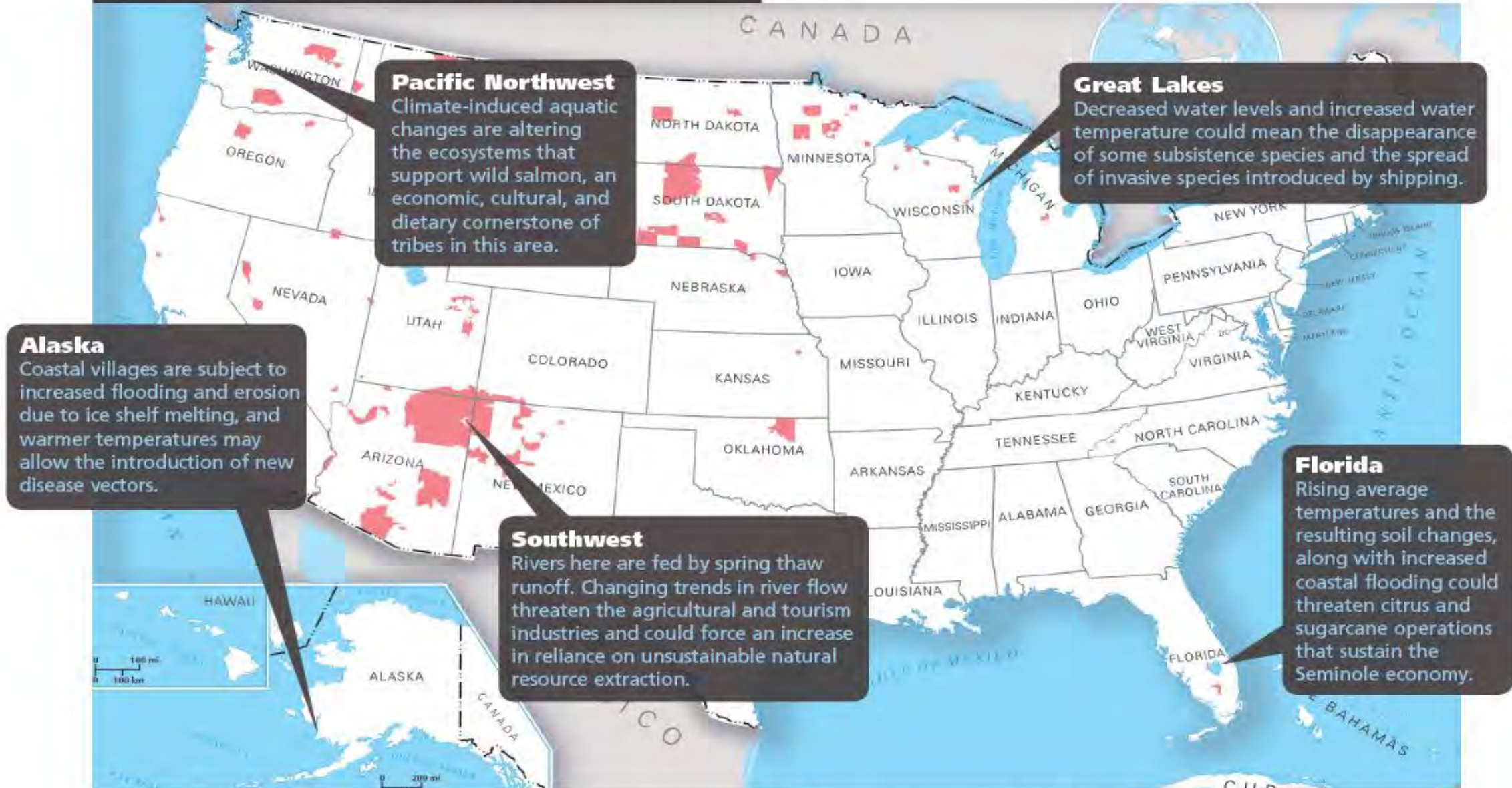


USDA
United States Department of Agriculture

Climate Change Through an Intersectional Lens: Gendered Vulnerability and Resilience in Indigenous Communities in the United States

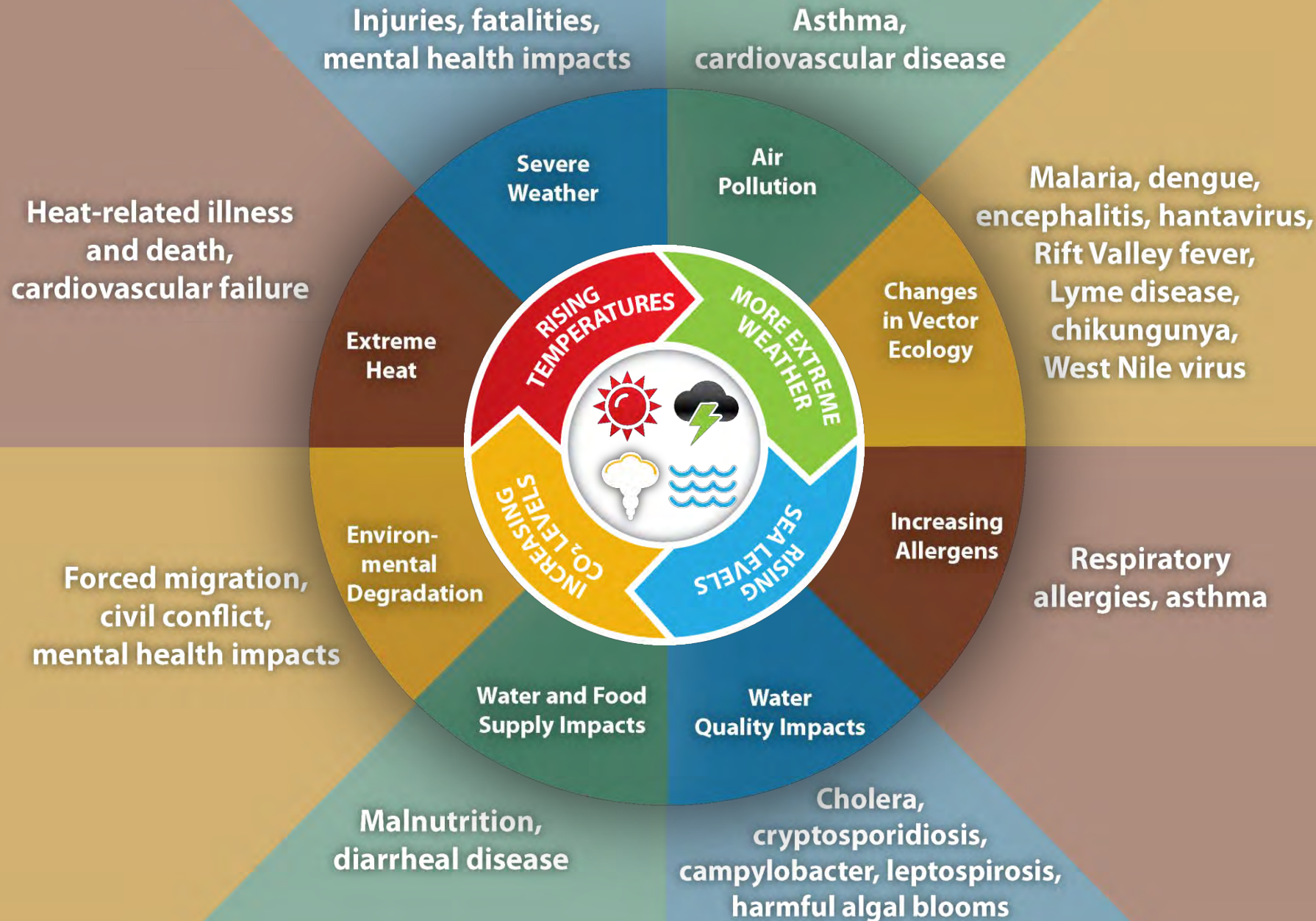
Kirsten Vinyeta, Kyle Powys Whyte, and Kathy Lynn

Climate Change Affects Tribes Nationwide



Tribal lands are indicated in pink. Sources: map—www.nationalatlas.gov; climate change effect predictions—Hanna JM. 2007. Native communities and climate change: protecting tribal resources as part of national climate policy. Boulder, CO: Natural Resources Law Center / NWF. 2007. Overview of recent research: effects of global warming on the Great Lakes [fact sheet]. Ann Arbor, MI: National Wildlife Federation.

Impact of Climate Change on Human Health



The Request for Applications

Climate and Health Program in the National Center for Environmental Health (NCEH)

- to increase the level of
 - **programming**
 - **research**
 - **coordination**
 - **communication**

between the Tribal programs, community, and key partners involved in addressing the **health consequences of climate change.**



Eligibility

Applicants must be:

- Public health or environmental health professional or related program manager or program **from a federally recognized American Indian or Alaska Native Tribe**

Must be able to:

- Include a letter of commitment or a Tribal resolution
- Dedicate staff and the resources necessary to complete all approved activities.



Expectations and Deliverables

Building Resilience Against Climate Effects

1. Use CDC's Building Resilience Against Climate Effects (BRACE) framework as a guide to developing a project.



Expectations and Deliverables

Sample activities could include, but are not limited to:

- Create a climate adaptation plan or strategy.
- Provide training to health agency personnel on relevant climate change topics.
- Collaborate and hold meetings/workshops with community members and key stakeholders.
- Plan or implement a specific intervention.
- Develop and implement an educational campaign on climate and health.



Expectations and Deliverables

2. Provide written mid-year and final reports that include a
 - project description
 - activities
 - outcomes
 - contacts and collaborations
 - issues/concerns
 - recommendations for improvement of the project

**Evaluation method and updated performance measures



Expectations and Deliverables

3. Participate in one in-person meeting and/or site visit.
4. Participate in monthly technical assistance and project progress calls with NIHB.
5. Compile findings, promising practices and lessons learned for distribution to other Tribes, Tribal organizations, and key stakeholders.
6. Submit findings and lessons learned for a session proposal at a relevant conference in 2017



Completed Applications Include:

- *Part I* (required): Contact Information
- *Part II* (required): Project Narrative
- *Part III* (required): Finance
- *Part IV* (required): Letter of commitment or Tribal resolution
- *Appendices* (Logic model and recommended items)



The Workplan

Objective 1:			
Expected Outcome 1:			
Activities	Deadline	Deliverables	Person Responsible
Activity 1.1			
Activity 1.2			
Activity 1.3			
Objective 2:			
Expected Outcome 2:			
Activities	Deadline	Deliverables	Person Responsible
Activity 2.1			
Activity 2.2			
Activity 2.3			
Objective 3:			
Expected Outcome 3:			
Activities	Deadline	Deliverables	Person Responsible
Activity 3.1			
Activity 3.2			
Activity 3.3			

- **Objective:** SMART. May have several. All should relate to increasing tribal capacity to face public health challenges from climate change
- **Outcome:** What anticipated change as a result of achieving objectives?
- **Activity:** Tasks to accomplish objectives. Will have more than 1 per objective.
- **Deadline:** Within December 31st, 2017
- **Deliverable:** What will be handed to NIHB to demonstrate progress?



The Logic Model

Project Snapshot: Required

Measure/Evaluation: How will you know that you are successful?

- *Not necessary for every activity

Template: Logic Model

Statement of Need:				
Goal:				
Strategy and Objectives:				
Inputs	Activities	Deliverables	Outcomes	Measure/Evaluation

Award Process

NIHB will administer these funds with the Tribal sites through a memorandum of agreement (MOA).

NIHB will release **50%** of the total award to Tribal sites upon the signing of the MOA

NIHB will release **25%** of the total award upon submission of a mid-year report

The remaining **25%** will be released to the Tribal site upon submission of the final report and any designated project deliverable.



Application Process

- NIHB must receive a complete, electronic copy of the application by **11:59 PM Eastern Time on November 30, 2016.**
- Please submit the required two (2) PDFs application to bcarrier@nihb.org
- Please do not exceed page limit
- Only e-mail submissions will be accepted



Timeline

- November 7th: RFA released
- November 30th: Applications Due
- December 2nd: Award Notifications (e-mail)
- December 31st, 2017: End of projects



Save the Dates

Climate and Health Summit

- February 14th-16th, 2017 in Atlanta, GA
 - Abstracts due November 14th
 - Register by January 4th, 2017



A vertical poster for the National Tribal Public Health Summit. At the top, it features the logos for the National Indian Health Board and the local host, the Alaska Native Health Board. The main title "SAVE THE DATE" is in large, bold, white letters on a blue background. To the right, it says "National Indian Health Board's 8th Annual National Tribal Public Health Summit". Below this, "SUMMIT HIGHLIGHTS:" is followed by a list of topics: "A New Summit Track: Environmental Health!", "Tribal Public Health Accreditation Readiness", "Health Impact Assessment Training", and "Listening Sessions & Tribal Consultations with the New Administration". The background of the poster is a scenic landscape of snow-capped mountains and a lake. At the bottom, it says "ANCHORAGE, ALASKA" and "JUNE 6-8, 2017" in large, bold, white letters.



Questions



Speak or use the chat box for
questions

Please remember to mute
individual phones



Resources

Reports

- IPCC 2013/2014
https://www.ipcc.ch/publications_and_data/publications_and_data_reports.shtml
- National Climate Assessment 2014 <http://nca2014.globalchange.gov/downloads>
 - <http://nca2014.globalchange.gov/report/sectors/indigenous-peoples>
- U.S. Global Change Research Program: Climate and Health Assessment 2016
<https://health2016.globalchange.gov/>
- Extreme Weather and Climate Change in Indian Country
<https://www.nwf.org/Wildlife/Threats-to-Wildlife/Global-Warming/Global-Warming-is-Causing-Extreme-Weather/Extreme-Weather-in-Indian-Country.aspx>

Websites

- <https://www.cdc.gov/climateandhealth/default.htm>
- <https://www.apha.org/topics-and-issues/environmental-health/partners/think-tank>
- <http://www7.nau.edu/itep/main/tcc/>





Thank you!

Any additional questions can be directed to Brianna Carrier at
bcarrier@nihb.org



Good Morning,

I hope this is not a duplicate email, but a great funding opportunity for your community. Please go to link and details of the funding is outlined.

A new cooperative agreement funding opportunity was posted from CMS and as promised we are sharing the link below that your organizations may want to consider.

<https://www.insurekidsnow.gov/initiatives/connecting-kids/funding/index.html>

V/R,

Rhonda Martinez-McFarland, FNP-BC, ARNP | CDR, U.S. Public Health Service | Native American Contact, Seattle Regional Office for Medicaid & Child Health Insurance Program | Centers for Medicare & Medicaid Services | 701 Fifth Ave, Suite 1600 | Seattle, WA 98104
Office: (206) 615-2267 | fax: (443) 380-7528 | e-mail: rhonda.martinez-mcfarland@cms.hhs.gov



CONFIDENTIALITY NOTICE

This e-mail may contain information that is privileged, confidential, or otherwise exempt from disclosure under applicable law. If you are not the addressee or it appears from the context or otherwise that you have received this e-mail in error, please advise me immediately by reply e-mail, keep the contents confidential, and immediately delete the message and any attachments from your system.

Priya Helweg | Office of External Affairs | Office of the Regional Administrator | Centers for Medicare & Medicaid Services | Seattle Regional Office | 📞: (206) 615-2598 | ✉️: priya.helweg@cms.hhs.gov

SAVE THE DATE

Thursday December 1, 2016

Please save the date for the next Region 10 Tribal Affairs Quarterly Call, scheduled for **Thursday December 1 at 10:30 am PT (9:30 am in Alaska; 11:30 am in Idaho)**. A summary of HHS Region 10's Top 10 issues from our 2016 Annual Tribal Consultation are attached. I hope you will join me for the conversation.

Below is the proposed agenda.

Welcome:	Susan Johnson, Regional Director
Updated Top Ten Issues:	All
2017 Region 10 Tribal Consultation	All
Agency Updates:	<ul style="list-style-type: none">• Chris Mandregan, IHS*• Jenny Holladay, Program Specialist, ACF• John Hammarlund, Regional Administrator, CMS*• David Meacham, Associate Regional Administrator, CMS• Rhonda Martinez-McFarland, Native American Contact, CMS*• Sharon Turner, Regional Administrator, HRSA• David Dickinson, Regional Administrator, SAMHSA*• Shelly Zylstra, Aging Services Program Specialist, ACL
Regional Update:	RD Johnson
Adjourn:	RD Johnson
Call-in Number:	1-877-693-8948
Participant Pass Code:	3752434

**Invited*

I hope you will be able to participate, and I look forward to talking with you.

Regards,
Susan



SAVE THE DATE

Federally Qualified Health Center (FQHC) Overview

Date: Tuesday December 6, 2016

Time: 2:00 - 3:30 pm, Eastern Time (ET)

Call-in Number: (877) 309-2074

Webinar link: <http://www.cmsitustrainings.net>

The Centers for Medicare & Medicaid Services (CMS) will host a webinar entitled “**Federally Qualified Health Center (FQHC) Overview**” on **Tuesday, December 6, 2016 from 2:00 – 3:30 pm, ET.**

This webinar will include information on how to enroll as an FQHC, covered services, billing, Credit Balance Reports, Cost Reports, Medicare updates and more.

Presenters:

Gail Atnip
IHS/VA Liaison
JH Provider Outreach and Education Specialist
Novitas Solutions, Inc

and

Kim Robinson
VA/IHS/RHC/FQHC Liaison
Provider Outreach and Education Specialist
Novitas Solutions (formerly Highmark Medicare Services)

Instructions to register for the webinar

- Go to the website www.cmsitustrainings.net
- Enter your email address, First and Last names in the dialog box
- Next click on “Continue” near the bottom of the box. You will be registered and receive an email with the link to the webinar.
- Follow the instructions in the email to join webinar from the CMS ITU Trainings Center.

Registration URL: <https://attendee.gotowebinar.com/register/3277367464131046914>

Participants can use their telephone or computer mic & speakers (VoIP).

United States (Toll-free): 1 877 309 2074

United States: +1 (213) 929-4221

Audio PIN: Shown after joining the webinar

Attendee - muted

Access Code: 991-622-147

Do you care for children **affected by trauma or chronic stress**?
Are you dedicated to **increasing the quality and accessibility of child trauma services**?
Would you like to **improve overall trauma-informed integrated care** in your community?

If so, this Learning Collaborative opportunity may be for you!

The **Pediatric Integrated Care Collaborative (PICC)** works with national experts, primary care providers, mental health professionals, and families to increase the quality and accessibility of child trauma services by integrating behavior and physical health services in Native communities.

For this Learning Collaborative (Dates TBD), we are looking for provider settings that serve children and:

- 1) already have mental health services on-site – OR--
- 2) have a mental health partner they are interesting in working with.

Participation requires a team of 5-6 individuals (e.g., families, mental health, and primary care) interested in improving trauma informed care.

Participation is FREE and participants will receive:

- Coaching and support from national experts in trauma informed care
- Networking opportunities
- Trauma informed care tools and resources

The Learning Collaborative will include two in-person meetings (Location TBD) plus telephone calls and ongoing support.

Want to apply or have other questions? Contact Susan Larson (410-502-5969; slarson@jhsph.edu) or Dr. Larry Wissow (410-614-1243; lwissow@jhsph.edu.) for an application or further information.

Applications due Friday, December 16th.

Please feel free to share widely with your colleagues.

This PICC is funded by Indian Health Services; it is based at the Center for Mental Health Services in Pediatric Primary Care, part of the Johns Hopkins School of Public Health.

PEDIATRIC INTEGRATED CARE COLLABORATIVE – INDIAN HEALTH SERVICES (PICC) 2016-2017

*Strengthening the Role of Primary Care in Serving Children and Families
Experiencing Trauma or Chronic Stress*

Due: **December 16th**

Please email completed applications to slarson@jhsph.edu

Questions? We are here to help!

Please contact Susan Larson:

Address: 624 N. Broadway (office # 751) Baltimore, MD 21205

Email: slarson@jhsph.edu

This Learning Collaborative aims to:

1. Increase accessibility of services for Native American communities by integrating trauma-informed behavioral health services with primary care,
2. Improve the quality of child trauma services for Native American communities by integrating behavioral and physical health services to increase mental wellness, overall functioning and quality of life for children and families, and
3. To customize, adapt and evaluate a Toolkit's recommended structures, resources and processes for the unique needs of Native American communities.

Learning Collaborative Application Packet

Part 1 contains a summary of the application process and key dates, and describes participation in this Learning Collaborative and necessary resources.

Part 2 contains application materials. Program organizers will use applicants' responses to tailor the program to best meet participants' needs. The content of your response is more important than the format in which it is presented (i.e., narrative, bulleted lists).

Application Process Summary and Key Dates

Monday, November 21, 2016

- Informational Conference Call (Optional)
 - Time: 12:00-1:00 EST (60 minutes)
 - Toll-free conference line: 1-888-651-5908; participant pass code: 269242.
- Prior to this time, questions can be emailed to Susan Larson at slarson@jhsph.edu

Friday, December 16, 2016 (5:00 PM EST)

- Deadline for submission of LC application
 - Questions welcome prior to the deadline.
 - E-mail completed application to Susan Larson at slarson@jhsph.edu
 - You will receive a confirmation of receipt within one business day of submission.

Friday, December 23, 2016

- Notification to teams.
- Between the submission deadline and this date there may be discussions/questions/dialog among the organizers and interested participants.

January - April, 2017

- Conference calls or Webinars to start the LC process.
- Launch assignments, including organizational self-assessment, baseline evaluation, and priority setting.
- Ongoing availability of organizers for assistance, discussion.

Late April, 2017 (exact date & location to be arranged before start of Collaborative)

- Learning Session 1

Early August, 2017 (exact date & location to be arranged before start of Collaborative)

- Learning Session 2
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Part 1:

Background and Overview

Collaborative Requirements and Guidelines

OVERVIEW:

From 2013-2016, Johns Hopkins led three Learning Collaborative (LC) series to improve pediatric primary care's capacity to provide trauma services for children and families. By working with 27 sites, including two tribal, the LCs resulted in a trauma-informed care Toolkit. The next phase, funded by Indian Health Services, is intended to bring these efforts to tribal communities that are exposed to trauma or chronic stress. Trauma may include substance abuse, child abuse/neglect, interpersonal and community violence, high suicide rates, racism, and historical trauma.

Specific Learning Collaborative Goals

- Children and families have access to **services** and supports that prevent exposure to trauma and develop resiliency;
- Children and families are **screened** for exposure to trauma and trauma-related problems;
- Children and families with positive screens are **referred** to and receive mental health services that address their concerns in timely ways;
- Families feel they have had their trauma issues **addressed** with primary care and mental health providers in culturally responsive and sensitive ways;
- Primary care and mental health providers effectively **collaborate, communicate, and coordinate** children's and families' care.

Learning Collaborative Change Framework

The Learning Collaborative uses a "change framework" with five areas that are targeted to develop effective integrated care. Participating teams will identify priorities within each of these areas, choose and adapt strategies to meet these priorities, and develop ways of measuring progress.

1. Creating a trauma-, health-, and relationship-informed health system
2. Involving families in program development, implementation, and evaluation
3. Collaborating and coordinating with existing services including resources outside of the medical setting such as traditional healers, church counselors, Elders and community health workers
4. Promoting resilience through primary prevention of trauma and stress
5. Identifying, assessing and addressing trauma-related physical and mental health needs.

About the Collaborative Approach

The collaborative approach draws its strength from the creation and empowerment of multi-disciplinary and trans-organizational teams. The Learning Collaborative creates an opportunity for teams to form, use protected time to plan, and benefit from networking with others teams. ***The work is conducted over nine months, during which team members come together in person two times, on phone conferences monthly, and via an online Collaborative site.***

Benefits and Costs Associated with Participation

Team members will receive training, coaching, and consultation support from the LC planning team, national faculty, and other consultants via the two in-person Learning Sessions, phone conferences, and the online Collaborative website. Participation in this Collaborative will hopefully result in long-term relationships among teams that continue to support this work. Teams will be welcome to share the LC Toolkit with other sites.

Teams will be expected to commit the time necessary to make changes in their settings as indicated in the Collaborative Change Framework (described below).

COLLABORATIVE REQUIREMENTS AND GUIDELINES:

A. Core Team:

The **Core Team** will:

- Meet at least twice per month
- Participate on all Collaborative conference calls (roughly one per month)
- Actively use the online Collaborative extranet site
- Evaluate the fit of the Toolkit adaptation for their community
- Collect and share required monthly metrics
- Attend both in-person Learning Sessions

Ideally, the **Core Team** would be comprised of at least 5 individuals with the following focus areas:

- **Senior Leader:** High-level administrator from the local IHS service unit, tribal clinic, or primary care practice; responsible for providing leadership, support, and advocacy for the team. Someone who has a relationship with a mental or behavioral health counterpart.
- **Day-to-Day Manager:** High-level manager from the local IHS service unit, tribal clinic, or primary care practice. This person must have easy access to the Senior Leader and will have primary responsibility for overseeing and guiding all work in this project.
- **Trauma Experience:** At least one member of the team should have direct experience providing trauma services for children, adolescents and families.

- **Primary Care Expertise:** At least one member of the team should have direct experience providing primary care services for children and adolescents.
- **Family Advocate:** A service user who will represent family perspective and needs. Ideally, will have experience with family engagement strategies.

B. Extended Team (optional, but strongly encouraged over course of participation)

The make-up and size of the **Extended Team** will be decided by each Core Team. The Extended Team would meet roughly every other month to support the evaluation, implementation, and spread of changes selected by the Core Team. They are strongly encouraged to attend conference calls and use the project website, but they will not attend the in-person Learning Sessions. The goal of this team is to “extend” the work of the Core Team.

Members of the Extended Team should have experience with and a commitment to improving outcomes for children and families who have been or are at risk of being exposed to trauma. The most effective Extended Teams have diverse representation and include individuals from the agency’s administrative teams (e.g., Quality Improvement, Data Management, front desk staff), as well as additional family members, mental health/trauma clinicians, primary care providers, nurses, care coordinators, leaders from the local communities, other service providers, community partners, and interagency partners.

C. Sharing Monthly Progress

Teams will be sharing LC-related updates on a monthly basis. The purpose of collecting benchmarks is for each team to reflect on their progress. A small number of benchmarks (e.g., the number of pediatric patients screened for trauma) may be compared across teams, but the information collected will be primarily team-specific (note that none of the shared benchmarks contains any identifying information). Teams will regularly assess and report whether their changes are resulting in the progress they are hoping to see with guidance and technical assistance from project staff.

Part 2: Application Process Summary and Key Dates Learning Collaboration Application

Learning Collaborative Application

The information requested below will help us tailor the LC to participants’ needs. Our hope is that in answering the questions, participants will be taking their first steps toward the LC goals.

Feel free to be brief in answering; however, the “text boxes” in the pages below will expand if you have more to say. Provide information in whatever way is easiest for you --the content of your response is more important than the format in which it is presented.

Primary Care/Trauma Center Information				
Name of Lead Agency (Primary Care):				
Trauma/MH Partner Name:				
Primary Care age group served (select all that apply)	<input type="checkbox"/> Infant	<input type="checkbox"/> Toddler	<input type="checkbox"/> Pre-school/ Kindergarten	<input type="checkbox"/> Other Please specify: _____
MH/Trauma Partner age group served (select all that apply)	<input type="checkbox"/> Infant	<input type="checkbox"/> Toddler	<input type="checkbox"/> Pre-school/ Kindergarten	<input type="checkbox"/> Other Please specify: _____
Contact Information				
Key Contact at Primary Care Site:				
Title:			Organization:	
Phone:	Fax:	Email:		

Part 1. Agency Description & Proposed LC Team Composition.

Agency Overview

Briefly describe the current structure and focus of the primary care site.
(e.g. information about your staff and patient population in terms of: number of providers, other staff onsite, organizational structure, partnerships with mental health/trauma centers, access to trauma-informed care, ages served, population demographics, types of trauma exposure, etc.).

Who is the proposed Senior Leader?

Please include name, title, and a brief description of this person’s experience and commitment to the goals of this LC. Tell us how this person is situated in the organization to implement change.

Who is the proposed Day-to-Day Manager?

Please include the name, title, and a brief description of this person’s experience and commitment to the goals of this Collaborative. Also describe the relationship/regular interactions between the proposed Day-to-Day Manager and the proposed Senior Leader.

Who is your Core Team?

Please include the names, current position, experience, and unique contribution each individual can provide and how these contributions will impact the team’s success.

Part 1. Agency Description & Proposed LC Team Composition.

Extended Team Membership

Please explain the names, roles, number and types of organizational representatives, family members, and community partners you plan to include in your Extended Team. If possible, tell us about what makes you optimistic that such a group can be organized and become effective to help support this work.

Partnerships and Collaborations

Describe how the primary care site, the trauma/mental health partner, community partners, and other mental health agencies currently collaborate to best meet the needs of the children and families you serve.

Benchmarks and Evaluation

Identify the types of benchmarks that you currently track or believe that you could track to review physical and mental health outcomes for the children and families you serve. This information may be qualitative (e.g., INSERT) and/or quantitative (e.g., INSERT). Describe existing efforts your site has made to communicate or use these benchmarks with staff, partners, the community, and families.

Barriers, Challenges, and Opportunities

Name up to four of the most significant barriers or challenges you anticipate while participating in this Collaborative. For each, please describe how you might try to address it. Your answers help us develop the actual in-person Learning Sessions.

Part 2. Agency/Center and Staff Commitment

Agency/Site Goals and Reasons for Participation

What does your agency/site hope to achieve by participating in this LC? (e.g. goals for the staff, agency, or children and families you serve) How do the goals for this LC align with other current programs, projects, or priorities for your agency/site?

Staff Training

Describe how your agency/site currently provides training to staff and supports implementation of new skills or procedures. Are there prior training efforts that you felt were particularly successful or that might complement the LC goals (e.g. training on prevention, social-emotional development, trauma, primary care, working with families, etc.)?

Part 3. Organizational Capacity

Note: For this section you can answer questions generally or with an example of an activity

Engaging and Supporting Families

Describe how your agency/site currently engages families as partners in either clinical services or in advising/priority setting for the organization as a whole.

Support for Staff and Organizational Changes

Describe a major change that you or one of the partners on your team has undergone in recent years (preferably within the last five years) that required what you consider a shift in 'organizational culture.' Discuss how this change impacted leadership, staff, and the children/families you serve. Provide specific examples of what challenges this culture shift raised and how staff were able to support this change.

Part 3. Organizational Capacity

Part 4. Additional Information

If the Key Contact listed on the cover sheet is not the author of this application, please provide the following information:

Name of primary person completing application (Author's title, affiliation, and e-mail address)

Names of other individuals who contributed to the completion of this application

BUDGET FORMULATION FY19 MEETING

NOVEMBER 29, 2016 | 8:30 a.m.—3:00 p.m.
Embassy Suites by Hilton
7900 NE 82nd Ave
Portland, Oregon

This meeting is for Tribes and Indian Health Service to come together to exchange information and determine the health priorities for the FY19 Portland Area Indian Health Service budget submission. More details to follow.

Questions? Call CAPT Ann Arnett (503) 414-5555 or e-mail ann.arnett@ihs.gov



Our Mission... to raise the physical, mental, social, and spiritual health of American Indians and Alaska Natives to the highest level.