



**MARCH OF DIMES  
Greater Oregon Chapter  
Community Grant Program**

**2010 Request for Proposals  
Letter of Intent Application**

**GRANT SCHEDULE**

Letters of Intent Due	12/14/2009
Full Proposal Invitations	01/22/2010
Full Proposals Due	03/05/2010
Notification of Awards	April, 2010
Project Year	May 2010 to April 2011

## **PURPOSE**

The March of Dimes is a national voluntary health agency whose mission is to improve the health of babies by preventing birth defects, premature birth and infant mortality. Founded in 1938, the March of Dimes funds programs of research, community services, education and advocacy to save babies.

Launched in 2003, the March of Dimes Prematurity Campaign is a multiyear, multimillion-dollar research, awareness and education campaign to help families have healthier babies. The campaign includes: 1.) funding research to find the causes of premature birth, 2.) educating women about risk reduction strategies, including the signs and symptoms of premature labor, 3.) providing support to families affected by prematurity, 4.) expanding access to health care coverage so that more women can get early and adequate prenatal care, 5.) helping health care providers learn ways to help reduce the risk of early delivery, and 6.) advocating for access to insurance to improve maternity care and infant health outcomes.

As part of this effort, the Greater Oregon Chapter community grants program is designed to invest in priority projects that further the March of Dimes mission, support national campaign objectives, and further our strategic goal of reducing disparities in birth outcomes.

Proposals will be accepted from organizations with the capacity, competence and experience to accomplish project goals and objectives. Priority will be given to projects that meet one or more of the following criteria: a) help reduce disparities in premature birth; b) are evidence-based; c) include measurable outcomes. Projects may focus on consumers and/or health care providers. The March of Dimes does not fund billable health care provider services.

## **ELIGIBILITY**

In order to be eligible to receive a March of Dimes chapter grant, an organization must be an incorporated not-for-profit 501(c)(3) or for profit organization or government agency. The March of Dimes does not award grants to individuals. Applicants must disclose any conflict of interest due to representation by their organization on the chapter's Program Services Committee or Board of Directors.

The applicant must provide services in Oregon or SW Washington (Clark, Cowlitz, Wahkiakum or Skamania counties). Chapter community grants are approved for a one year period. Grant amounts generally range from \$10,000 to \$20,000.

<p>Up to three smaller grant awards will be considered in the \$500.00 to \$3,000 range. These small grants are considered Chapter Community Awards. Please note in the Letter of Intent if you are applying for a Chapter Community Grant or a Chapter Community Award (\$500-\$3,000).</p>
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## **LETTER OF INTENT FORMAT**

The first step in the application process is to submit a Letter of Intent. The letter is limited to **two pages** and must address the following eight questions:

1. Which of the funding priorities is the project addressing?
2. Who is the target audience?
3. How many people will the project reach?
4. What are the measurable objectives?
5. How will project success be evaluated?
6. What impact will the project have?
7. What is the amount of funding requested?
8. What are the major budget categories?

Proposals must address at least one of the funding priorities listed below. (see priorities at the end of document). Indicate in the Letter of Intent which priority you are addressing 1-5.

An original and one copy of the Letter of Intent must be received in the chapter office by 12/14/ 2009. Please also attach a page with your organization's name and mailing address, and the phone, fax and e-mail of a contact person.

## **REVIEW AND NOTIFICATION**

A multi-disciplinary Program Services Committee will review the Letters of Intent. Applicants selected to submit a full proposal will be notified by 01/22/2010. Full proposals will be due to the chapter by 03/05/2010. Please be advised that Letters of Intent and proposals are non-binding.

### **Please Note:**

March of Dimes Chapter Community Grants do not fund scientific research projects. For information about research grants funded by the March of Dimes national office, please refer to the March of Dimes Web site at [marchofdimes.com](http://marchofdimes.com), or e-mail the Office of Research and Grants Administration at [researchgrants@marchofdimes.com](mailto:researchgrants@marchofdimes.com). Chapter community grants do not fund the purchase of medical equipment or childbirth education.

*For a list of allowable and unallowable expenses, please contact us.*

### **For Additional Information or technical assistance Contact:**

Joanne Rogovoy, State Director of Program Services  
March of Dimes  
Greater Oregon Chapter  
1220 SW Morrison #510  
Portland, Oregon 97205  
503-222-9434 ext. 14  
[jrogovoy@marchofdimes.com](mailto:jrogovoy@marchofdimes.com)

## FUNDING PRIORITIES

1. Providing or enhancing **preconception health** education and/or services. For a list of 14 specific risk areas, go to [www.marchofdimes.com/professionals/19695.asp](http://www.marchofdimes.com/professionals/19695.asp). For more information, see the National Preconception Curriculum and Resources Guide for Clinicians at [www.mombaby.org/beforeandbeyond/](http://www.mombaby.org/beforeandbeyond/)
2. Providing or enhancing **risk reduction** education and/or services. Risk reduction projects include, but are not limited to:
  - Providing smoking cessation education and/or services. Preference should be given to prenatal health education and information/referral services that utilize the "5 A's" counseling approach. For more information, go to [www.acog.org/from\\_home/departments/smoking/smokingslides.ppt](http://www.acog.org/from_home/departments/smoking/smokingslides.ppt)
  - Increasing health education and information/referral services available to pregnant women who use alcohol or other drugs.
  - Focusing on preterm birth recurrence prevention such as education about “17P” (17 $\alpha$  hydroxyprogesterone caproate) treatment for women who have had a previous singleton preterm birth).
  - Enhancing care through the CenteringPregnancy® model of group prenatal care. For more information, go to [www.centeringhealthcare.org](http://www.centeringhealthcare.org)
  - Focusing on quality improvement programs that address late preterm birth through systems that ensure compliance with ACOG guidelines regarding elective labor inductions and c-sections performed prior to 39 weeks.
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3. Implementing disparity-related community programs that aim to decrease **racial and ethnic disparities** in birth outcomes. This may include March of Dimes programs like Stork’s Nest®, Project Alpha and Becoming a Mom/Comenzando bien®.
4. Increasing pregnant women’s **participation in state or local maternal child health programs** (e.g. Medicaid, SCHIP, WIC) through enhanced outreach, education and public awareness.
5. Enhancing the availability, quality and utilization of **genetics services** and/or other patient services related to preventable birth defects.