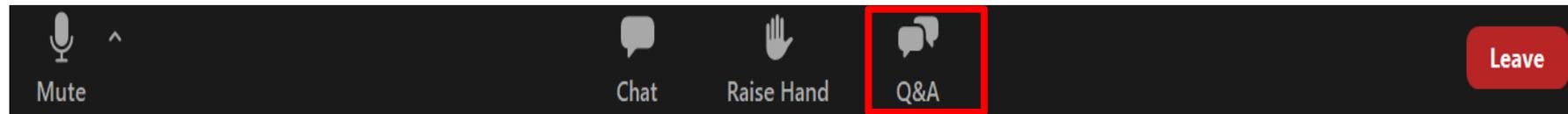


# Practical Grant Writing Strategies

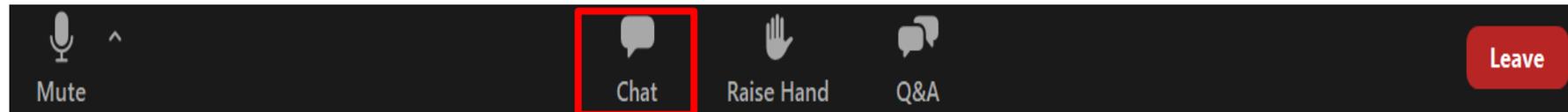
Pamela Baston, MPA, MCAP, CPP  
Technical Expert Lead (TEL)  
JBS International

# Submitting Questions and Comments

- Submit questions by using the Q&A feature. To open your Q&A window, click the Q&A icon on the bottom center of your Zoom window.



- If you experience any technical issues during the webinar, please message us through the chat feature or email [RCORP-TA@jbsinternational.com](mailto:RCORP-TA@jbsinternational.com).



*This product was supported by the Federal Office of Rural Health Policy (FORHP), Health Resources and Services Administration (HRSA), U.S. Department of Health and Human Services (HHS). The information, conclusions and opinions expressed in this product are those of the authors and no endorsement by FORHP, HRSA, or HHS is intended or should be inferred.*



# Pre-Work

# When should you start working on a funding proposal?

**Answer: The minute your program identifies an unmet need (or wish list).**

- Submission timeframes are often quite brief (often 10 days to 6 weeks).
- There is a predictable format for many grants and proposals.
- So... ideally, long before a grant or proposal opportunity becomes available, position your program for success!



# Pre-application

- Create tables (Health/BH disparities, incidence/prevalence/costs, trends etc.) and templates (timelines, org. charts, job descriptions, letters of commitment, MOUs, key staff bios), etc.
- Mine data sources (don't forget client perception of care surveys, waiting lists, key informant interviews, quotes from previous funders), etc.
- Keep a running list of needs/gaps/testimonials and org. awards.
- Charts that provide DETAILED demographics/info about pop(s). of focus; descriptions and testimonies from pop. of focus
- Description of catchment area(s)
- Description of org. quals.
- Define your competitive advantages (what makes your org/group stand out?).
- Create library/repository for these items so they can be retrieved easily and quickly.



# Pre-application

- Become a grant reviewer:
  - Local, state, federal, private foundation, etc.
- Strengthen/enhance relevant partnerships.
- Follow emerging issues in your community and at state, national, and international levels.
- Leverage your own work/deliverables and lessons learned.
- Review past solicitations and awards (funder grant archives, Google, etc.).
- Identify grant team members (include pop. of focus reps. and an evaluator) and begin with logical assignments (test your team) and deadlines.
- Establish small rewards for grant work (time off, telework, time, food, spa treatments, etc.).



# Be authentic

- Whatever you brag about in your grant should be evidenced in your organization's or group's website (e.g., diversity, easy access, etc.), policies, practices, and other examples that reflect the work you do.



# Registration



- Ensure your SAM.gov and Grants.gov registrations and passwords are current immediately! HRSA will not approve deadline extensions for lack of registration. Registration in all systems, including SAM.gov and Grants.gov, may take up to 1 month to complete.
- Participate in any TA webinar(s).



# Read and highlight

- Read the entire grant announcement (NOFO) before you begin.
- Use a highlighter to document critical information regarding deadlines (times/zones and date), page limits, font size and spacing, themes, eligibility, goals/priorities, etc.

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES

# HRSA

Health Resources & Services Administration

Federal Office of Rural Health Policy  
Rural Strategic Initiatives Division

## *Rural Communities Opioid Response Program - Implementation*

**Funding Opportunity Number:** HRSA-21-088  
**Funding Opportunity Type:** New  
**Assistance Listings (CFDA) Number:** 93.912

### NOTICE OF FUNDING OPPORTUNITY

Fiscal Year 2021

**Application Due Date: March 12, 2021**

*Ensure your SAM.gov and Grants.gov registrations and passwords are current immediately!  
HRSA will not approve deadline extensions for lack of registration.  
Registration in all systems, including SAM.gov and Grants.gov,  
may take up to 1 month to complete.*

**Issuance Date: December 21, 2020**

**NOTE: A Frequently Asked Questions document will be available for applicants after the conclusion of the Technical Assistance webinar.**

Lea Carroll  
Public Health Analyst, Federal Office of Rural Health Policy  
Telephone: (301) 443-3799  
Email: [ruralopioidresponse@hrsa.gov](mailto:ruralopioidresponse@hrsa.gov) for program specific questions.

Please contact the Grants Management Specialist on page 43 of the NOFO for budget related questions.

Authority: 42 U.S.C. 912(b)(5) (§ 711(b)(5) of the Social Security Act)



# Starting considerations

## Assigning page limits:

Divide page limits into assigned review points (if page limits per section are not allocated by funder).

Sample:

- **Criterion 1: Need (20 points)**
- **Criterion 2: Response (35 points)**
- Criterion 3: Evaluative Measures (10 points)
- Criterion 4: Impact (10 points)
- **Criterion 5: Resources/Capabilities (20 points)**
- Criterion 6: Support Requested (5 points)



# Starting considerations

## Assigning page limits:

Divide page limits into assigned review points (if page numbers per section are not allocated by funder).

Sample: 10 pages/100 points =

- Criterion 1: 20 points = 2 pages
- Criterion 2: 35 points = 3.5 pages
- Criterion 3: 10 points = 1 page
- Criterion 4: 10 points = 1 page
- Criterion 5: 20 points = 2 pages
- Criterion 6: 5 points = .5 page

Total 10 pages (just an example) – If a HRSA proposal, it will likely be much longer, but typically less than 80 pages including the abstract, project and budget narratives, attachments, and letters of commitment and support required in the Application Guide and this NOFO.



# Fatal Criteria:

## Due Date/Time (and Time Zone)

- Consider use of colorful markers to identify key content from the NOFO/RFA for quick reference.
  - Pink or red can denote fatal flaws.
- **2. APPLICATION SUBMISSION REQUIREMENTS**
  - Applications are due by **11:59 PM (Eastern Time) on December 10, 2019.**



# Budget implication example

- Green marker can denote items with budget implications.
- The funding restrictions for this project are as follows:  
No more than **20 percent** of the total grant award for the budget period may be used for data collection, performance measurement, and performance assessment, including incentives for participating in the required data collection follow.
- Be sure to identify these expenses in your proposed budget.



# Consider use of a preface/intro line (counts toward page limits)

- **Introduction:** *"I'm not afraid of going to war ... I'm afraid of coming back home."* This quotation from a 25-year-old Operation Iraqi Freedom veteran with post traumatic stress disorder (PTSD) expresses the sentiments shared by far too many veterans coming home from war. These veterans often experience a surreal transition back to an uncertain future that too often ends in a debilitating process that leads to homelessness.
- There is an African proverb that states *"When spider webs unite, they can tie up a lion."* This proverb reinforces the notion that Herculean tasks can be accomplished when the forces involved unite their strengths and work together. We propose to unite the strengths of our collaborative to demonstrate and measure through rigorous evaluation, whether the integration of a range of defined treatment services and supports....





# Statement of Need: Samples

# Address EACH Subsection

## **Criterion 1: NEED (20 points) – Corresponds to Section IV’s “Introduction” and “Needs Assessment”**

-The extent to which the applicant clearly states the service area counties and/or rural census tract and summarizes the characteristics and needs of the target rural population and service area(s) in the “Introduction” section of the Program Narrative;

-The quality and extent to which the applicant organization clearly and succinctly summarizes the goals of the proposed project and the consortium’s approach and capacity to meet those goals, including their history of collaborating to address SUD/ODD;

-The extent to which the applicant organization demonstrates that the population it proposes to serve includes subpopulations (rural ethnic and racial minorities and/or other vulnerable populations) that have historically suffered from poorer health outcomes, health disparities, and other inequities compared to the rest of the target population; MORE...



# Crosswalk back to Section IV

INTRODUCTION -- Corresponds to Section V's Review Criterion #1 – “Need”

- This section should clearly and succinctly summarize the overarching goals of the proposed project; provides the target rural service area counties and/or rural census tracts; the characteristics and needs of the target population and service area; the consortium's proposed approach to meeting those needs; and the consortium's history of collaborating to address SUD/ODU in a rural area and capacity to implement the proposed project.

NEEDS ASSESSMENT -- Corresponds to Section V's Review Criterion #1 –“Need”

- This section outlines the needs of the target population. Data used to complete this section should derive from appropriate sources (e.g., local, state, tribal, and federal) and reflect the most recent timeframe available... MORE
- Use the following headings in this section as you complete your narrative:
  - “RCORP Core Measures”
  - “Population Demographics”
  - “SUD/ODU Prevalence”
  - “Existing SUD/ODU Services and Programs”
  - “Gaps and Unmet Needs”



# Sample Need Intro #1

- In the shadows of Atlanta's skyscrapers, its monuments to wealth and success, lies Crestview, a modest but proud African American community struggling for its very survival and for a bright future for its children. Hope for a bright future is hard to come by, and even harder to hang on to, when you are greeted each day by neighborhood graffiti that says, "*Welcome to Hell.*"



## Sample Need Intro #2

One of our communities of focus, Liberty City, is in the northern part of our county (see photo right). Liberty City is arguably Miami's most dangerous neighborhood, often described as the county's inner-city epicenter of poverty, gun violence, and race riots ever since the I-95 interstate spliced the neighborhood's streets in the 1960s.



# Sample Need Intro #2 cont.

- A 2012 documentary focused on the community, “Liberty City: Miami—the Good, the Bad, and the Ugly,” shows the city’s dilapidated buildings, broken signs, and toys on corners of streets as memorials for those who had been slain.
- A young mother reports she and her baby were almost hit during a shoot-out on the next block. She describes the sound of bullets from a "chopper," slang for an AK-47 assault rifle, hitting metal gates, instilling crippling fear in children and adults alike.
- Follow with additional needs data and actual stats.



# Sample Need Intro #3

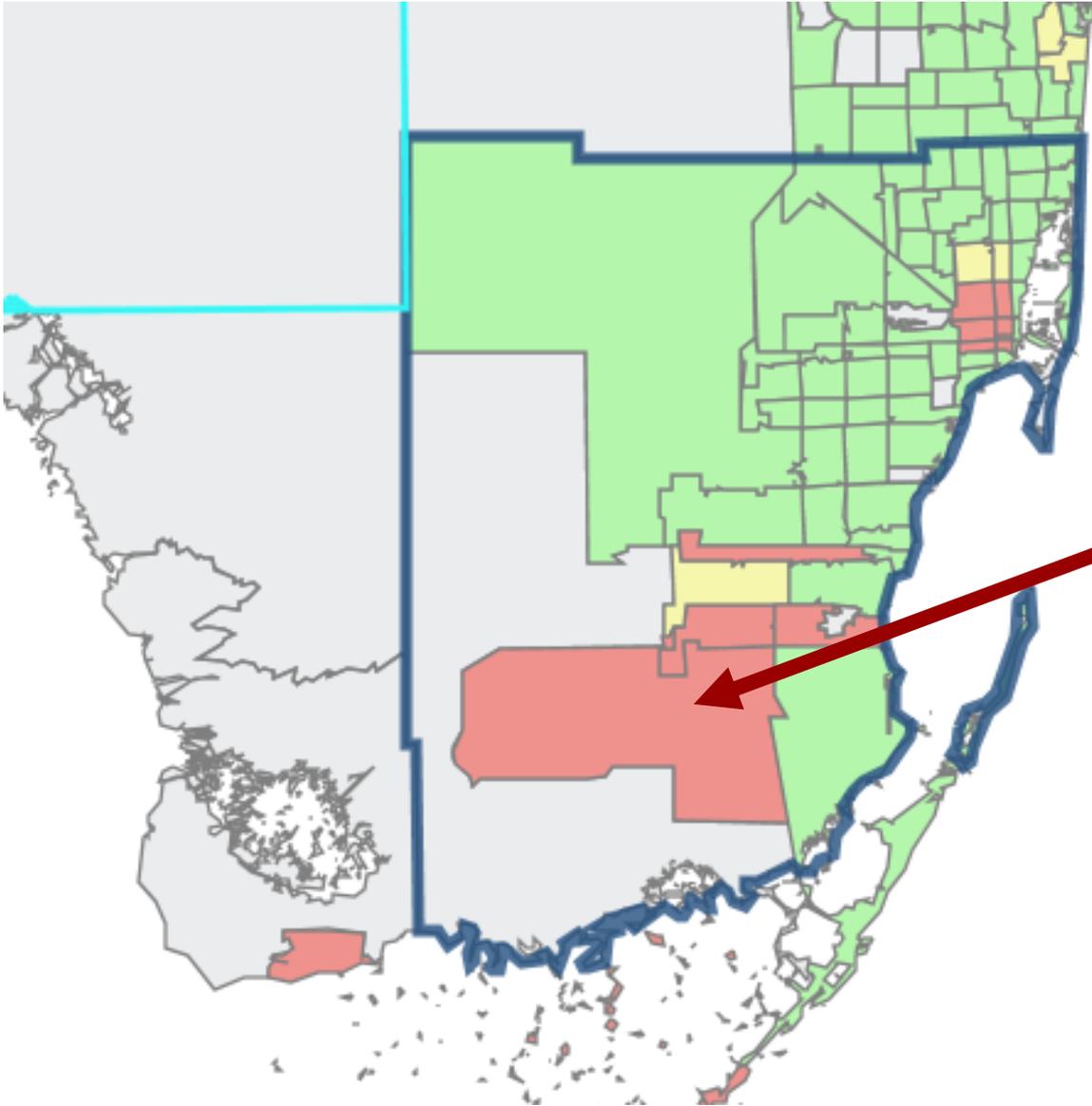
On the other end of our large county is another traumatized community of focus, South Dade, including Homestead, which was once composed of proud farming communities and the gateway to the Florida Keys. Hurricane Andrew and other economic hardships have converged to drastically change the Homestead community to one in which crime and break-ins have gone up drastically. The predominantly black residents describe falling asleep to the sounds of gunfire, sirens, and helicopters.



# Sample Need Intro #3

*“In the last year, our vehicles have been broken into over a dozen times, gang tags now get put on signs, fences, playgrounds and even some of the houses. People throw their trash everywhere, allow their pets to run free and teenagers loudly roam the neighborhood at all hours of the day and night. Then we have those that drive through the neighborhood blasting their radios so loud it's easily heard inside people's homes. It's not uncommon to listen to people having parties, blasting music until 1-2 am on the weekends and at times during the week.”*





**Map/Chart 4:**  
Geo map of highest teen births. Arrow points to our proposed community of focus.



# Sample Need Intro #3 cont.

- A local strip mall and several bars in the area known for high-risk behavior hire “ficheras”—women who attract men into their establishments for dancing, sexual favors, alcohol and drugs, and unprotected sex.
- On a standardized scale rating violent crime, Homestead is a 90 as compared to the U.S. average of 41.4. About 30% of Homestead residents live below poverty level.
- Continue with additional needs data and stats.



# Sample Need Stats (Supporting Population of Focus Selection)

<b>Percentage (%) of Students Who:</b>	<b>Black Females</b>	<b>Black Males</b>	<b>Hispanic Females</b>	<b>Hispanic Males</b>
Ever had sexual intercourse	41.8	50.5	40.3	49.9
Had sexual intercourse for the first time before age 13	2.5	16.8	2.0	9.7
Were never taught in school about AIDS or HIV infection	18.7	20.0	22.3	21.8
Had sexual intercourse with 4 or more persons (in life)	11.6	29.6	9.5	21.0



# Sample Need Stats

In 2013, the teen birth rate among non-Hispanic Black girls age 15-19 was more than twice as high as the teen pregnancy rate among non-Hispanic White teen girls age 15-19. The chart reflects this overrepresentation of teen births to young Black mothers in Miami-Dade (Blacks/AA are 19% of the County population but 65% of chlamydia cases and 43% of teen pregnancies). The chart at right reflects sexual behavior disparities.

**Miami-Dade County Births to Mothers  
Ages 0-19 by Race, 2006-2013**

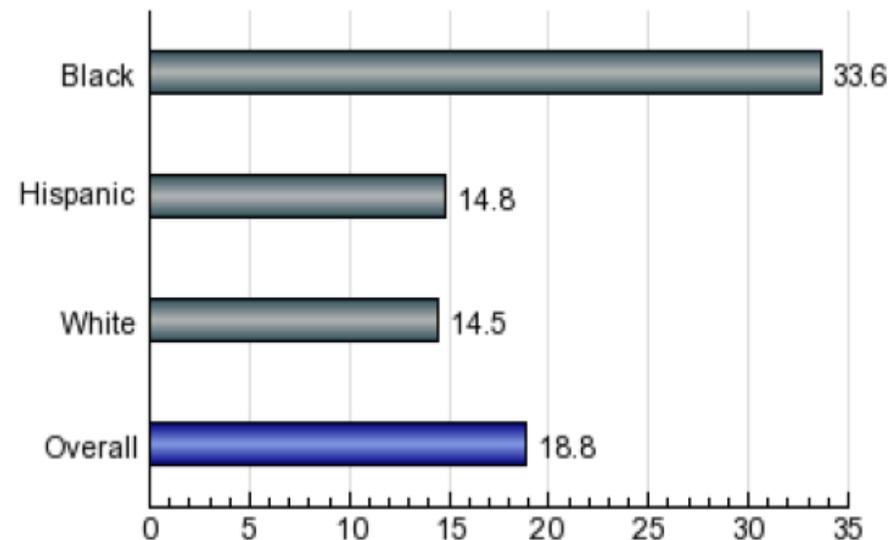


Chart 2: Source:<sup>11</sup>

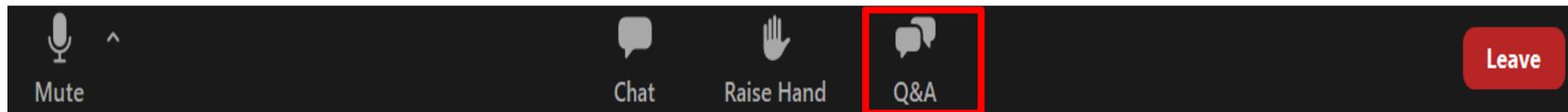


# Submitting Questions and Comments



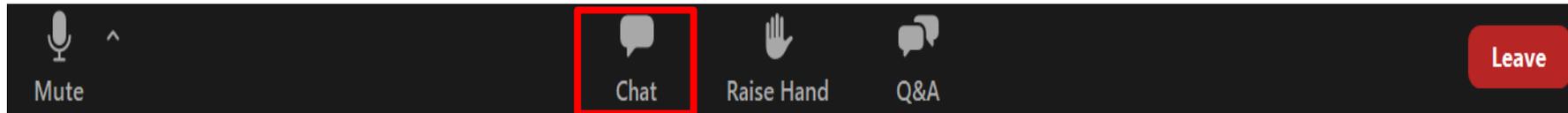
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# Webinar Evaluation Survey

- Please take 2-3 minutes to fill out the webinar evaluation survey.
- To locate the survey link, check the chat box located at the bottom of your Zoom window.



- Click the link to open the evaluation in your internet browser.

*Your feedback provides important information to JBS TA that helps future RCORP webinars!*

*Thank you!*



# Thank you

The purpose of RCORP is to support treatment for and prevention of substance use disorder, including opioid use disorder, in rural counties at the highest risk for substance use disorder.

**Contact Information:**  
**Pamela Baston, MPA, MCAP, CPP**  
**JBS International**  
**828.817.0385**

**RCORP-TA**

RURAL COMMUNITIES OPIOID RESPONSE PROGRAM - TECHNICAL ASSISTANCE