

**Youth and Adolescent Physical Activity Grant  
Proposal Cover Sheet**

*Due November 13th, 2015 by 5 p.m.*

Please submit the entire completed proposal to Eden Bezy via email at [ebezy@isdh.in.gov](mailto:ebezy@isdh.in.gov)

<b>Proposal Contact Person</b>	
Name:	Position:
Organization Name:	
Address:	
Phone Number:	Email:
<b>Fiscal Contact (the individual that signs financial documents)</b>	
Name:	Position:
Address:	
Phone Number:	Email:
<b>Type of Application (check one)</b>	
Community Development/Training Implementation Both	

# Youth & Adolescent Physical Activity Grant Proposal Narrative

## Proposal Instructions and Procedures – Indiana State Department of Health

### 1) Introduction

The Indiana State Department of Health Division of Nutrition and Physical Activity is pleased to announce the availability of funding to organizations who are able to **provide professional development, training, technical assistance, and/or implementation and programming to increase physical activity in youths age 6-17.**

#### A. Background:

Title V Maternal and Child Health Services Block Grant, dispersed to grantees from 59 states and jurisdictions, seeks to improve the health and wellbeing of women, particularly mothers, and children. The Indiana State Department of Health (ISDH) Maternal and Child Health Division (MCH) is Indiana's recipient of these funds. Transformational changes have been made to the MCH Services Block Grant intended to drive improvements throughout the program. One of these changes is the adoption of new national performance measures, including: "increase the percentage of youth ages 6-11 who are physically active 60 minutes a day" and "increase the percentage of adolescents who are physically active 60 minutes a day." In cooperation with the Maternal and Child Health Division, the Division of Nutrition and Physical Activity (DNPA) at ISDH will administer programming to achieve these two new goals for Title V. The following application serves as a request for projects to fulfill these goals.

#### B. Need:

a. ISDH is seeking vendors to complete the following:

- **Training and community development:** Using practice and evidence based strategies, vendors will conduct community trainings aimed to teach organizations how to increase access to and engagement in physical activity in youth and adolescents ages 6-17 *through policy, systems and environmental change*. Examples include (but are not limited to): Health and Physical Activity Standards (HEPA), Comprehensive School Physical Activity Program (CSPAP).

#### **AND/OR**

- **Implementation:** Using practice and evidence based strategies, vendors will implement programs and policy change to increase access to and engagement in physical activity in youth and adolescents ages 6-17 in before, during and after school settings. Examples include (but are not limited to): CATCH, SPARK, Safe Routes to School, Playworks, and increasing PE/PA time in schools.

#### **Please refer to:**

1. [The CDC Guide to Strategies to Increase Physical Activity in the Community](#)
2. [LetsMove.Gov](#)
3. [The Community Guide](#)

- 2) **Application:** Please answer the following questions related to the work you have done in the past and the proposed project for this funding.

**General questions (ALL applicants must answer):**

1. Please provide a brief background of your organization and why it's well positioned to provide services/training in the community.
2. Define your intervention population.
  1. Please include: geographic area served.
  2. Number of youth/adolescents targeted for reach.
  3. Age range of targeted population.
  4. Ethnic and racial breakdown of service area.
3. Describe your organization's experience in working with youth and/or adolescents, OR increasing capacity of professionals working with youth and/or adolescents.
4. Describe examples of past successes of improving wellness and physical activity of youth and/or adolescents.
5. Who are some key community partners (including individuals or organizations) who have assisted your organization with wellness initiatives? Please provide descriptions of successful collaborations.
6. Please include how your organization will consider adaptive physical activity strategies for children with special healthcare needs.

**Training/Community Development Application (maximum funding: \$5,000)**

*Only applicants applying for the training/community development funding of this grant need to respond to the following questions.*

1. Describe which practice or evidence based standards or training you plan on utilizing.
  1. Be sure to explain why you believe the training you chose would be a good fit for your community.
  2. Please cite the evidence of success for the training. (*i.e. The Community Guide, published literature*)
2. Describe how you will ensure that community members not directly affiliated with your organization will be able to attend the training event.
3. Describe the intended audience and potential reach of your proposed training.
4. Describe the intended outcomes of the trainings and how you intend to measure the impact.
  1. How do you define success for this project?

**Implementation Application (maximum funding: \$15,000)**

*Only applicants applying for the implementation funding of this grant need to respond to the following questions.*

1. Describe which practice or evidence based program you plan on utilizing.
  1. Be sure to explain why you believe the program you chose would be a good fit for your community.
  2. Please cite the evidence of success for the intervention. (*i.e. The Community Guide, published literature*)
2. Describe how you will ensure that community members not directly affiliated with your organization will be able to benefit from the implemented program.
3. Describe the intended audience and potential reach of your proposed program.
4. Describe the intended outcomes of the program and how you intend to measure the impact.
  1. How do you define success for this project?

C. Eligibility

Any organization who currently works directly with youth and adolescents ages 6-17 or alongside an organization who works directly with youth and adolescents ages 6-17 may apply.

*Note: applications cannot be considered for populations of focus ages 5 and under*

\*This proposal can include other wellness efforts, but needs to focus on physical activity best practice strategies.

D. Important Dates for the Proposal

Proposal due date: **November 13<sup>th</sup> by 5:00 p.m.**

Project Timeline: **January 1, 2016 to September 30, 2016**

E. Other important dates at this time

**Notification of award will be given by December 4<sup>th</sup>, 2015.**

II. Proposal Preparation General Instructions

A. Selection Process and Funding Amounts

An independent review team comprised of public health experts will review each application objectively, based on scoring tool.

B. Proposal Packet

Please make sure the following items are included in the submitted proposal packets. Proposals with missing items will not be considered.

\_\_\_\_\_ Proposal Cover Sheet

\_\_\_\_\_ Proposal Narrative

\_\_\_\_\_ Proposed Budget

C. Answers to Proposal Questions

Questions pertaining to this Request for Proposal (RFP) may be submitted to Eden Bezy via email ([ebezy@isdh.in.gov](mailto:ebezy@isdh.in.gov)) or phone (317-233-7726).

D. Submission Procedures

Proposals must be in 11-point, Calibri font with one inch margins, 1.5 line spacing. Proposal narrative must be 15 pages or less if applying for one project, or 20 pages or less if applying for both the training/community development AND the intervention projects. The cover sheet and budget do not count toward the page limit. Proposals must be emailed to Eden Bezy at [ebezy@isdh.in.gov](mailto:ebezy@isdh.in.gov) by 5 p.m. on November 13<sup>th</sup>, 2015. Proposals that are received after the deadline will not be accepted. All applicants meeting the proposal deadline will be notified of award decisions by December 4<sup>th</sup>, 2015.

Please keep the following in mind as you prepare your proposal:

- Sufficient pre-existing resources must be in place such that there is a reasonable likelihood of success with child/adolescent wellness initiatives.
- Evidence that community partnerships are in place.
- The applicant demonstrates sustainability of program goals.
- The applicant currently collects data on nutrition, physical activity, and obesity, or is willing to collect data on all of the physical activity and obesity measures with assistance from the Indiana State Department of Health.
- Applicants are able to apply for either or both grant components and may include both in one application. (For example: a vendor could provide both professional development and an intervention, which can be reflected on one application document and the same budget).
- One organization may apply for multiple affiliated sites in the same application.
  - An increase in funding levels may be approved for interventions implemented at multiple sites.

<b>FY16</b>	
<b>Expense</b>	<b>Cost</b>
Personnel	
Fringe	
Travel (# of miles * .40/mile)	
Equipment	
Supplies	
Contractual	
Consultant	
Other:	
Total	