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The EMSC National Resource Center is one of two national centers whose purpose is to provide assistance to the public, professional groups, and state grantees on issues of importance in developing and sustaining an EMSC system. Both centers are jointly administered by the Department of Health and Human Services' Health Resources and Services Administration, Maternal and Child Health Bureau and the Department of Transportation's National Highway Traffic Safety Administration.

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Meeting the Needs of Children: A Guide to Funding EMSC Projects

Introduction

Emergency Medical Services for Children (EMSC) is a national initiative designed to reduce child and youth disability and death due to severe illness or injury. The ultimate goal of this program is to prevent childhood illness or injury. However, when prevention fails, EMSC seeks to ensure that all ill or injured children and adolescents receive state-of-the-art emergency medical care from emergency medical technicians (EMTs) and paramedics, emergency department personnel, and rehabilitation specialists, if needed.

Many opportunities exist to help state's fund an EMSC project or activity. For example, the Department of Health and Human Services (DHHS) runs an EMSC federal grant program, which enables states to address pediatric deficiencies within their emergency care system. In addition to federal support, states should investigate funding opportunities available through state, county, and local governments; foundations; and corporations. This guide is designed to help states identify, approach, and secure these funding prospects.

Question: Who could be against protecting children from injury? Against ensuring that children have access to quality emergency care and rehabilitation? Against the development of a more coherent or "seamless" system of health care for children?

- For legislators, supporting EMSC has moral and political value.
- For corporations, supporting EMSC has marketing and public relations value.
- For foundations and individuals, supporting EMSC is an opportunity to create legacy.

Federal Grant Funding Opportunities

The U.S. Congress first authorized funds for EMSC in 1984 (Public Law 98-555) as a categorical program with its own separate line item in the federal budget. Categorical programs stand in contrast to block or formula grant programs, which transfer funds to states with less federal guidance and less programmatic activity at the national level. The EMSC federal grant program is sponsored jointly by DHHS's Health Resources and Services Administration (HRSA), Maternal and Child Health Bureau (MCHB) and the Department of Transportation's (DOT) National Highway Traffic Safety Admin-

istration (NHTSA). To date, EMSC has influenced the health care children receive not only in emergency departments, ambulances, hospitals, and other medical settings, but also in schools, child care programs, and in the communities where children live and grow. Grants distributed by the EMSC Program fall into two categories:

1. State systems grants, including funds for program planning and implementation, as well as partnership grants, which support statewide institutionalization of EMSC activities subsequent to the initial planning and implementation phases; and
2. Targeted issue grants, which address an objective in the national EMSC Five-year Plan or some other need or concern identified by MCHB. These grants fund projects that have regional or national significance.

A state health department or university medical school may apply for EMSC funding and may be eligible to receive consecutive grants. However, because the funding is subject to change by Congress, it is uncertain whether or not there will be continuous federal support from year to year. Think of your EMSC grant as "startup" or "seed" money, and be prepared to explore alternative or supplementary sources of funding from the very beginning. For more information about EMSC grant opportunities, contact the EMSC National Resource Center at (202) 884-4927 or access the EMSC web site at www.ems-c.org. Once there, click on "Funding" then "EMSC Grant Application Guidance."

Organizations that do not qualify for EMSC funding or that are unsuccessful in obtaining an EMSC grant should consider the grant opportunities offered by other federal departments and agencies. Likewise, organizations that succeed in obtaining an EMSC grant but are interested in obtaining more money for their child health care initiatives are also eligible for additional federal funding.

Four federal agencies provide grants for projects relating, directly or indirectly, to the mission and goals of EMSC: DHHS, DOT, the Department of Justice (DOJ), and the Department of Education (DOE). Each agency's grant opportunities is described below.

Department of Health and Human Services

DHHS is the government's principal agency for protecting the health of all Americans and providing essential human services, especially for those who are least able to help themselves. The agency oversees 12 operating divisions (see Appendix A: Organizational

Chart for the Department of Health and Human Services). Below is a description of the funding opportunities offered by eight of these divisions.

The Health Resources and Services Administration. HRSA directs national health programs that improve the health of the U.S. by assuring quality health care to underserved, vulnerable, and special-need populations. HRSA is made up of 16 agencies including MCHB, which oversees the EMSC Federal Grant Program (see Appendix B: Organizational Chart for the Health Resources and Services Administration).

Five additional programs of interest to child health care advocates are administered by MCHB. These include:

- *Title V Block Grants.* This program transfers millions of dollars in matching funds to states for activities designed to: reduce infant mortality; increase childhood immunization rates; assure access of children to perinatal and primary care; and improve services for children with special health care needs. For more information, go to www.mchb.hrsa.gov/html/blockgrant.html.
- *Special Projects of Regional and National Significance (SPRANS) Grants.* Using 15% of the Title V appropriation, MCHB also administers an annual cycle of discretionary grants. These grants, commonly referred to as "SPRANS" grants, include funding for training, research, and Maternal and Child Health Improvement Projects (MCHIP's). For example, a partnership in injury prevention, in improving emergency care and discharge planning for children with special health care needs, or in assessing the impact of managed care and other health plans on children is well-suited to the shared concerns of the Title V and EMSC programs. For more information, go to www.mchb.hrsa.gov.
- *Community Integrated Service System (CISS) Grants.* Additional discretionary grants become available when the Title V block grant appropriation for a fiscal year exceeds \$600 million. These grants, referred to as "CISS" grants, include funding for home visitation, increased participation of obstetricians and pediatricians, integrated service delivery systems, maternal and child health centers for women and infants under the direction of a not-for-profit hospital, services for rural populations, and development or enhancement of community-based integrated services systems for children with special health care needs. For more information, go to www.mchb.hrsa.gov/html/divisions/html.
- *Traumatic Brain Injury (TBI) Grants.* TBI Demonstration Grants support activities by states to implement

statewide systems ensuring access to comprehensive and coordinated TBI services. These demonstration projects are successfully bringing together representatives of all relevant state agencies, disciplines, organizations, and consumers. There are two categories of grants: state planning grants and state implementation grants. For more information, contact the TBI Technical Assistance Center at (202) 884-6802.

- *Healthy Start Grants.* The goals of this initiative are to reduce infant mortality and improve maternal and infant health and well-being by targeting communities with high infant mortality rates and directing resources and interventions to improve access to, utilization of, and full participation in comprehensive maternal and infant care services. These grants aim to build a community-oriented, multi-faceted approach to integrate a variety of health care, social, and support services. Previous grant recipients have developed an aggressive program of outreach and case management to bring pregnant women into prenatal care early; increased the number of primary care and obstetrical providers available to low-income women in targeted areas; and linked health department, community health centers, state maternal and child health programs, community residents, and other groups in local consortia in a joint effort to identify problems and solutions to reduce the infant mortality rate by 50% within five years. For more information, refer to the Healthy Start web site at www.healthystart.net.

Twice a year HRSA publishes a Grants Preview that includes announcements for most of its funding programs. This document is available free of charge at www.hrsa.gov.

Administration for Children and Families. This agency supports numerous programs including the following: Temporary Assistance for Needy Children (TANF), child welfare services, foster care, child abuse and neglect, Head Start, Child Care and Development Fund, youth programs, developmental disabilities programs, and Native American programs. Contact the National Clearinghouse on Child Abuse and Neglect Information at (800) FYI-3366 for a copy of its resource packet on funding or visit the Administration for Children and Families' web site at www.acf.dhhs.gov.

Centers for Disease Control and Prevention. The Centers for Disease Control (CDC) and Prevention designates a significant amount of money for injury control research and demonstration projects as well as other areas of health and safety relevant to EMSC. Funding categories include: violence prevention, suicide prevention, HIV/AIDS research, injury prevention and control, school health promotion, tuberculosis infection control, and chronic disease prevention. CDC also provides some funding for conference

support. For more information, call (404)332-4561, visit CDC's web site at www.cdc.gov/funding.htm, or write to: Grants Management Branch, Centers for Disease Control and Prevention, Room 321, 255 E. Paces Ferry Road, NE, Atlanta, GA 30305.

Health Care Financing Administration. The Health Care Financing Administration (HCFA) administers the Medicare and Medicaid programs. Along with HRSA, HCFA also runs the Children's Health Insurance Program, a program expected to cover close to 10 million uninsured children in the United States. HCFA is also concerned about quality improvement as it relates to all three programs administered by its agency. More information about HCFA's programs can be found at www.hcfa.gov.

Indian Health Service. Programs supported by Indian Health Service (IHS) are creative and collaborative in their approach to meeting the unique health needs of American Indian and Alaska Native children and their families. Particular emphasis is on providing family-centered care and on partnership efforts with tribal health organizations to provide accessible and acceptable MCH services to women, infants, and children. More information can be found on the IHS web site at www.ihs.gov.

National Institutes of Health. The National Institutes of Health (NIH) has devoted millions of dollars to specialized research affecting pediatric health. This EMSC-related research is usually conducted by a university medical school or children's hospital, but state agencies are also frequently listed as eligible applicants. NIH is comprised of 25 separate institutes and centers, including: the National Cancer Institute; the National Heart, Lung and Blood Institute; the National Institute of Child Health and Human Development; the National Institute on Drug Abuse; the National Institute of Mental Health; the National Institute of Nursing Research; the National Library of Medicine, and the National Center for Research Resources. For more information, read the *NIH Guide to Grants and Contracts*, which is available online at www.nih.gov.

Substance Abuse and Mental Health Services Administration. Through its Center for Mental Health Services, Center for Substance Abuse Prevention, and Center for Substance Abuse Treatment, the Substance Abuse and Mental Health Services Administration (SAMHSA) provides grants specifically for mental health issues and substance abuse prevention. Since a significant portion of EMS runs are alcohol- or drug-related, it makes sense to consider grant opportunities through one of these centers. In addition, three special offices are relevant for EMSC: the Office on AIDS, the Office for Women's Services, and the Office of Managed Care.

For more information about current funding opportunities through SAMHSA, search online at www.samhsa.gov or contact the National Clearinghouse for Alcohol and Drug Information at (800) 729-6686.

Hint: Generally, an EMSC project will need to form a partnership or consortium with other state agencies or eligible organizations to compete for funding from federal agencies. Grant reviewers often consider joint ventures to have a greater likelihood of success. Form partnerships with your state offices for EMS, MCH, Highway Safety, Medicaid, Education, Rural Health, Family Services and/or with an academic research facility. Explore thoroughly the level of openness to collaboration within your state.

Before submitting a proposal, ask the grant-making agency for clarification of its goals and needs. In the case of discretionary grants, you should contact the federal program officer or grants management office of the funding agency prior to development of the grant proposal to find out whether your idea suits the agency's priorities, interests, and requirements. Finally, take time to review all of the criteria set forth in the published request for applications.

Department of Transportation

The federal EMS organization is housed within DOT's NHTSA and therefore has many grant opportunities that are relevant to EMSC. Child passenger safety programs and injury prevention are just two examples of issues that NHTSA funds. Section 402 is a block grant program administered by NHTSA with the aim of reducing "traffic accidents, deaths, injuries and property damage". For more information, access NHTSA's web site at www.nhtsa.dot.gov.

Department of Justice

Within DOJ, there are several offices that fund programs of interest to the EMSC community: the Office of Juvenile Justice and Delinquency Prevention, the Bureau of Justice Assistance, Office of Victims of Crime, American Indian and Alaska Native Affairs Office, and the Office for State and Local Domestic Preparedness Support. Most funding supports violence prevention initiatives. For more information, access www.ncjrs.org/fedgrant.htm or call the National Criminal Justice Reference Service at (800) 851-3420.

Department of Education

DOE provides some funding for school health initiatives, violence and drug prevention programs, or for efforts to improve services for children with disabilities. For example, DOE sponsors the Safe and Drug-Free Schools program. For more information, access www.ed.gov.

Staying in the Loop with Federal Funding

In addition to calling or writing the grant-making agencies listed above, the federal government publishes two highly informative funding resources, the *Federal Register* and the *Catalogue of Federal Domestic Assistance*. Both are designed to help organizations remain current with prospective federal funding opportunities. In

addition, the EMSC National Resource Center recommends its *Grants Alert*.

Federal Register

The *Federal Register* posts funding announcements daily and is available online at www.access.gpo.gov. Once there, click on “Federal Register” and type in the key words and dates of interest. Some examples of key words to try include: emergency, trauma, health care, injury, violence, children, disability, rehabilitation, and primary care. If you prefer, ask a grants management official, development officer, librarian, student, or volunteer to review the *Register* with your interests in mind. Be sure to provide this person with an orientation to your project’s specific needs and objectives. When you find an announcement of interest to you, request a copy of the agency’s grant guidance or application kit.

Catalogue of Federal Domestic Assistance

Twice a year, advance notices for federal grant programs are published in the *Catalogue of Federal Domestic Assistance*. This catalogue is easy to use and is available at most major public libraries or at libraries designated by the federal government as depositories. For a list of federal depository libraries, write to: Chief, Library Division, Superintendent of Documents, Stop SSL, Washington, DC 20402. The catalogue is also available online at www.cfda.gov.

For a small service charge, the Federal Assistance Programs Retrieval Service (FAPRS) offers keyword searches of the federal programs described in the catalogue. For more information, call (800) 669-8331. To conduct key word searches of your own, order the CD-ROM version of the catalogue for \$100/year from the General Services Administration at (202) 401-8135. A subscription to the printed catalogue is also available by writing to the Government Printing Office, Superintendent of Documents, Washington, DC, 20402 or call (202) 512-1800. Note that most state governments and universities already have a subscription to the catalogue. Before ordering, check with your grants management or development office.

EMSC Grants Alert

Published monthly by the EMSC National Resource Center, *Grants Alert* lists privately and publicly funded grants available for health care-related projects. The descriptions include the amount of available funding, eligibility stipulations, priority or focus, submission deadlines, and contact information.” *Grants Alert* is available free of charge by accessing the EMSC web site at www.ems-c.org.

State, County, and Local Government Funding Opportunities

Depending on the latitude conferred by your state’s legislative or executive branches, your EMS agency may be “preauthorized” to revise its budget to support EMSC and to retain EMSC staff. If not, several states have enacted legislation to authorize and/or appro-

priate funds for EMSC. Currently, states with some form of EMSC legislation include: Arkansas, California, Colorado, Florida, Hawaii, Illinois, Kentucky, Louisiana, Maryland, Nebraska, New Hampshire, New Jersey, Ohio, Oklahoma, Puerto Rico South Carolina, Tennessee, Texas, Rhode Island and Utah. Call the EMSC National Resource Center for copies of model legislation and for information about the legislative process. Passage of state legislation almost always requires the support and advocacy efforts of a broad-based coalition inclusive of professional and consumer-based organizations.

Agencies in state government other than EMS may be willing to award a grant or sign a contract in support of EMSC. Your state offices for maternal and child health, injury control, and/or children with special health care needs, for example, may offer support in the areas of immunization, injury prevention, primary care, children with special health care needs, and health care financing issues.

Your governor’s highway safety office, through its Section 402 funds, may also provide support. EMS is specifically named as one of nine national program priorities authorized to receive a share of Section 402 funds. Some other authorized priorities are: occupant protection, pedestrian safety, bicycle safety, motorcycle safety, and speed control. Several EMSC projects have already received Section 402 grants to purchase equipment, develop training materials, and conduct seminars. In addition, there are Section 410 funds, available through the same office, which are earmarked for efforts to reduce alcohol-related traffic injuries (see *Catalogue of Federal Domestic Assistance*, 20.601).

Depending on the objectives of your EMSC project, you may want to approach your state agencies of education, Medicaid, child abuse prevention, rural health, or juvenile justice for financial support. Another option to consider is that of selling EMSC products and services, particularly injury prevention and training programs, to agencies in county and municipal government. Advise jurisdictions in which you already have a presence that you would like to continue to provide services, but that you will need financial support. Let jurisdictions in which you do not have a presence know that you would like to expand services to their area, but need funding. For example, local health departments might purchase a resource package developed by your project or subscribe to a training and technical assistance service you are able to provide.

Foundation Funding Opportunities

Foundations exist solely to give away money, and many of them are likely to view EMSC as a worthy cause. EMSC has identified five primary foundation categories:

- Independent or family foundation, established by an individual or family for charitable purposes, such as the Robert Wood Johnson Foundation;
- Corporate foundation, created to coordinate most or all of a corporation’s charitable giving, such as the Mobil Foundation;
- Operating foundation, dedicated to raising money and

support for a single organization such as a university, hospital, or nonprofit; the "Make-a-Wish" Foundation, for example;

- Community foundation, established to meet the charitable needs of a state, region, county, or metropolitan area, such as the Cleveland Foundation; and
- Conversion foundation, established to meet the needs of the community once a non-profit hospital converts to a for-profit status.

Many can be identified through a computerized database. In addition, check to see if a library near you carries these standard directories:

- *National Guide to Funding in Health*
- *National Guide to Funding for Children, Youth, and Families*
- *Foundation Directory*
- *Foundation Reporter*
- A state-specific foundation directory

EMSC grantees should call the EMSC National Resource Center for a list of prospects for foundation support under each category.

More information about each of these can be found in Appendix G, Bibliography. The *Foundation Reporter*, published by the Taft

EMSC Case Studies in Fundraising

California. The state legislature appropriated funds for EMSC program implementation. The EMSC coordinator position is also funded through state legislation.

Colorado. State trauma legislation authorizes the health department to solicit and receive grants and donations in support of EMSC. Even without federal funds, the health department has continued to maintain staffing for EMSC activities.

Florida. This state's legislature recently appropriated \$200,000 for a technical assistance panel to conduct statewide EMSC program planning and assessment.

Hawaii. EMSC receives a share of the state EMS budget.

Iowa. The state injury prevention "Love our Kids" license plate provides revenue for EMS.

Louisiana. This state's EMSC legislation authorized the hiring of a full-time EMSC coordinator using a portion of the EMS budget and allows for the solicitation of public and private funds for EMSC.

Maryland. EMSC receives a share of the state EMS budget. The project has also received Section 402 funding from the Governor's Highway Safety Office in support of purchasing training equipment.

New Hampshire. EMSC received \$7,500 from the Governor's Highway Safety Office to support six pediatric trauma care courses.

New Jersey. The state's legislature recently appropriated \$150,000 for EMSC. In some years the appropriation has been as high as \$300,000.

New York. EMSC received \$10,000 from the New York chapter of the American Public Health Association to conduct injury prevention pilot programs.

North Carolina. EMSC has been awarded foundation grants in excess of \$1 million from the Duke Endowment. The purpose

of these grants is to implement a statewide injury prevention campaign in the schools. EMSC is pursuing funding from other foundations and North Carolina EMSC is the leading example for this approach to fundraising.

Ohio. EMSC received financial support from the state MCH office to conduct its original EMSC needs assessment.

Oklahoma. This project has received \$53,000 from the Governor's Highway Safety Office (Section 402 funds) to conduct Bystander Care training. The state's legislature passed a law establishing an EMSC Resource Center and authorizing the center to solicit public and private funds. The project also generates revenue by charging registration fees for some courses.

South Dakota. The governor's Highway Safety Office, through its Section 402 funds, paid for production of an educational slide set used by this EMSC project.

Texas. The state's legislature enacted an EMSC law, but there has been no appropriation to date. However, EMSC is authorized to solicit public and private funds.

Utah. Primary Children's Hospital continues to provide two full-time employees for statewide EMSC training activities. This is an excellent example of a public-private partnership.

West Virginia. The state's health department has set aside \$60,000 for addressing EMSC/pediatric trauma care needs and concerns.

Wisconsin. One of the state's targeted issue grants succeeded in securing \$100,000 for a youth violence prevention and treatment initiative. Currently they are working with the Kiwanis clubs, Children's Miracle Network, and several insurance organizations as potential resources for components of the EMSC program.

Wyoming. A grant from the PTA is supporting the completion of a statewide survey of ambulances for pediatric equipment.

Group, provides an index of foundations that have a history of or are open to contributing money to emergency/ambulance services and/or to children's health and hospitals. Check to see if any are headquartered in your state. However, keep in mind that it is best to utilize more than one fundraising resource.

The Foundation Center is a national nonprofit organization based in New York City that researches and disseminates detailed information about funding sources. You should be able to find directories such as those listed above at a library near you that serves as a "cooperating collection" for the Foundation Center. A list of the Foundation Center's publications and cooperating collections are accessible online at www.fdncenter.org or call the Center at (800) 424-9836.

Exploring the Legalities of Foundation Funding

To receive foundation support, an EMSC project may need to establish a 501(c)(3) organization or identify itself with a nonprofit organization that can serve as the applicant for and recipient of a foundation grant. Universities, hospitals, and associations that house or otherwise support your project already have nonprofit status, as do some EMS agencies. Work with these nonprofit organizations to increase the level or share of funding from foundations that is being allocated for EMSC needs. In some cases, a state agency may solicit and receive a foundation grant. If your project is housed in the state government, check with your offices of General Counsel or Secretary of State. Additional information about your Office of Secretary of State is available by contacting the National Association of Secretaries of State at (606) 244-8173.

Corporate Funding Opportunities

Your project may receive funding or other kinds of support through divisions of a corporation such as: corporate giving, marketing, public relations, government affairs, or human resources. Many corporations already have a history of contributing to child health initiatives.

EMSC is an excellent prospect for a statewide, cause-related marketing campaign. Cause-related marketing enables a company to link itself with a charitable or social cause in a way that advances public support for the cause and contributes to increased sales of the company's product.

An example of a cause-related marketing campaign would be the donation to your project of a penny for every gallon of gas sold by a petroleum distributor or the donation of pediatric equipment and supplies to ambulances and emergency departments by an insurance company. In either scenario, the company would be authorized by you to promote itself as "an official sponsor". Explain to the company's marketing or public relations staff what you see as the benefits of sponsorship. For more information about cause-related marketing, order the two publications from Cone Communications listed in the bibliography.

It is important to be conscious of the ways in which a partnership with a corporation may imply acceptance of a product or of a marketing strategy. An EMSC project would want to think twice, for

example, about soliciting support from a beer manufacturer, tobacco distributor, or a company that has recently experienced public scandal. Some examples of good prospects for corporate support are: utility and phone companies, insurance companies, large banks, pharmaceutical companies, automakers, and the manufacturers and distributors of petroleum products.

EMSC grantees should ask the EMSC National Resource Center to conduct a computerized search for prospective corporate sponsors or check their local library for these standard directories:

- *Corporate Giving Directory*
- *National Directory of Corporate Giving*
- *Register of Corporation Directors and Executives*
- directories published by state and local Chambers of Commerce
- the telephone yellow pages

Taft's *Corporate Giving Directory* provides an index of corporations that have a history of or are open to contributing to emergency/ambulance services or to children's health and hospitals. However, as noted above, it is best not to rely on only one directory.

On an annual basis, special issues of *Business Week*, *Forbes*, and *Fortune* magazines provide detailed information about the most profitable corporations in the United States. These corporations may be interested in making a large contribution to your project. If you have a particular corporation in mind, check out its web site to learn more about its mission and marketing strategies.

Ask your state or local Chamber of Commerce for the opportunity to present a proposal to its board. The Chamber may offer direct funding, in-kind services, technical assistance in securing other funding, or a volunteer to serve as chair of your EMSC fundraising task force. Bring with you a short proposal and budget that spell out the needs and objectives of your project. Use EMSC case studies (compelling stories) and statistics to make your case. Call the EMSC National Resource Center for a contact at your state Chamber of Commerce or call the Council of State Chambers of Commerce at (202) 484-8103.

Exploring the Legalities of Corporate Funding

EMSC projects housed in state government should check with their office's of general counsel or secretary of state regarding the legal parameters for corporate fundraising. Ask whether your state agency may receive a corporate grant as a public-private partnership or whether authorizing legislation is needed to solicit and receive corporate funds. Perhaps your project may not receive a direct grant, but may receive donated resources and other support: finished publications, equipment and supplies, technical consultation, and volunteers. You may, for example, be able to give a corporation a list of the pediatric equipment and supplies needed by ambulance companies and emergency departments within your state, as determined by a statewide needs assessment. The corporation would then provide direct support to the organizations in

question. Perhaps a corporation can produce injury prevention resource kits for schools or information packets for families of children with special health care needs. The corporation could donate these items to the state or distribute them directly to those who will use them.

Other Funding Opportunities

Most organizations advancing a worthy cause need to diversify their funding stream. They need to expand beyond a single source of funding or, if long-term funding appears secure, they need to explore other options to prepare for unexpected change or growth. In addition to government, foundation, and corporate support, here are some other financing strategies that may be of benefit.

Create an independent non-profit for EMSC in your state.

This is a viable option if your project is not secure as a program of state government, a university or college, a state association, or a health care organization. Your general counsel's office, a tax attorney, or your state bar association can help you get started as a nonprofit. Information is also available from your state nonprofit association. Note the textbook on nonprofit startup by Anthony Mancuso, cited in the bibliography. Your EMSC nonprofit could serve as a statewide resource center or as the champion of a statewide training, public education, or prevention campaign.

Nonprofit organizations whose primary mission is to secure passage of legislation apply under section 501 (c)(4) rather than section 501 (c)(3) of the Internal Revenue Service (IRS) code. If your Advisory Committee wants to implement programs and to secure passage of legislation, it may be helpful to file under both sections of the IRS code - establishing "sister" organizations, with separate accounting and fundraising mechanisms.

Approach individual donors. Most contributions to worthy causes are made by individuals. This support from individuals is solicited in a variety of ways - through participation in special events, the sale of products, subscriptions, tuition and fees, memberships, direct mail, telethons, and planned giving programs. Planned giving has become a hot trend in fundraising. The trust department of a bank may be able to assist you in identifying wealthy individuals who are interested in charitable giving and in acquiring a tax shelter. Estate planning attorneys may also know of some interested clients. Additional information is available from the National Committee on Planned Giving, 310 Alabama Street, #210, Indianapolis, IN 46204; (317) 269-6274.

Hold special events. Fundraisers may include dinners, marathons, health fairs, comedy shows, raffles, antique sales, and auctions. Such events often capture the attention of the media and of large donors. They can also be fun, if well planned and executed. Consider organizing a special kickoff event for a statewide "Campaign for Kids."

Sell products. Selling EMSC products may bring in additional

revenue and heighten visibility. Products to be sold could include laminated pediatric assessment cards, training materials, injury prevention slides and reports, and public education posters. More generic items include cookbooks, calendars, coffee mugs, perishable goods, long distance calling cards, pins, and T-shirts. Some products might be sold at a health fair, for example. Ask a corporation or voluntary organization to underwrite the production of these items and/or to provide volunteers to help sell the product. Explore whether you might sell advertising space in any of your publications. Examples of product fundraising strategies are available from the Association of Fund Raisers and Direct Sellers, Department L, Suite 500-G, 5775 Peachtree-Dunwoody Road, Atlanta, GA 30342; (404) 252-3663. Remember to consult your general counsel's office for any legal considerations.

Charge tuition or service fees. If you need to recover costs, consider charging or increasing tuition and registration fees for the trainings and seminars your office conducts. In addition, ask local health departments or businesses to support these classes through scholarships for the students.

Involve community organizations. A community-based organization such as Kiwanis; Women's Rotary; Junior League; Parent-Teacher Association; and Elks, Moose, or Lions clubs may be willing to raise money, thus helping to maintain or expand your project. They might, for example, manage and staff a special event. Call the EMSC National Resource Center for contacts in these voluntary organizations.

Consider direct mail. Direct mail, effectively packaged and tested, can be an excellent source of long-term revenue for EMS and for EMSC. However, direct mail usually requires significant up-front capital for purchasing mailing lists, hiring a consultant, and identifying or establishing a nonprofit vehicle to receive the funds. It also demands a willingness to wait for the donor base to grow large enough to make an adequate return. An easier approach is to partner with an organization in your state that already has a direct mail program - a university, hospital, association, or other nonprofit. EMSC then becomes an outreach program of the adopting organization. A signed agreement specifies how income raised through the direct mail program will be shared and spent. Information about direct mail fundraising is available from the Direct Mail Fundraisers Association, 445 W. 45th Street, New York, NY 10036; (212) 489-4929 and from the National Federation of Nonprofits, 815 15th, N.W., Washington, DC, 20005; (202) 628-4380.

Join the Combined Federal Campaign (CFC). In 1991, five million federal employees gave \$204 million through 480 local CFC-affiliated campaigns. Although a majority of CFC campaigns are organized by local United Way affiliates, most of the donations go to charities not affiliated with the United Way. Your state government and major employers in the state may have similar workplace campaigns that could allocate a share of proceeds to EMSC.

To get the address for your Local Federal Coordinating Committee, contact the Office of Personnel Management, Office of CFC Operations, 1900 E Street, NW, Washington, DC 20415.

Explore United Way designation. The United Way is a major source of funding for health and human services. However, the focus of most projects funded through the United Way is at the community rather than the state level. An EMSC project working primarily within a county or metropolitan area may be eligible. Each United Way organization has its own bylaws and policies. Some have governing boards representative of the community that decide how funds received will be allocated. Others allow donors to designate contributions to organizations listed on the appeals. Still others allow donors to write in a nonprofit charity of their choice. For more information about becoming a United Way designee, call (800) 411-UWAY or visit www.unitedway.org.

Request a share of fines/taxes. In states such as Ohio, remarkable levels of funding have been generated for EMS through fines levied upon traffic violations. EMSC could be designated as a recipient of some of these funds by special formula. New taxes on vehicle registrations or driver's license permits or a share of current levies on these items are another option. For examples of states using fines and levies to support EMS, see *Guide to Funding Alternatives for Fire and Emergency Medical Services Departments*, cited in the attached bibliography.

Solicit in-kind donations. In addition to grants and individual contributions, ask for in-kind donations such as office space, staff support, use of equipment, expert consultation, finished publications, and volunteers. Your success in securing donations such as these will make the project more appealing to funders, politicians, the media, and the general public.

Additional Facts and Tactics for Fundraising

Creating A Special Account for Fundraising Activities

Determine whether a member organization of your EMSC Advisory Committee may set up a special account to receive funds for EMSC needs and activities. These funds would be managed by the member organization, with oversight by its own Board and by the EMSC Advisory Committee. In this scenario, state government and federal grant resources would not be diverted to fundraising, to the extent that this is prohibited, and moneys raised would be used for expenses other than those already covered by federal or state funds. They might be used, for example, to expand the reach and scope of the EMSC program, to transfer the project out of state government, if necessary and applicable, or to continue programmatic activities under the care of some other organization once federal and/or state funding has been exhausted.

State law may prohibit direct transfer of funds from such a special account to an agency in state government (e.g., to EMS or MCH). But be sure to explore whether your office may receive

payment for the products and services it provides. Ask your general counsel's office, secretary of state's office, state bar association, or a tax attorney to assist you in clarifying the legal details.

Taking Advantage of the University Setting

EMSC projects housed at universities should be able to fundraise as much as they want, as long as the moneys raised are not used for expenses already covered by federal or state grants and as long as the development department of the university is supportive of the effort. Provide your development department with a list of your project's needs and objectives and a budget. Ask for suggestions regarding funding options and strategies.

Creating A Fundraising Task Force

Consider establishing a task force to write additional grant proposals or to develop an overall strategy for securing the resources needed to address objectives not currently supported by federal or state funds. The task force should include representatives from a health care agency or association, a community or voluntary organization, and a corporation. Take advantage of the fact that coalitions striving to meet the health care needs of children are attractive to public and private funders. If there is concern about competing for grants among members of the EMSC Advisory Committee or about potential conflicts of interest, ask a business leader or representative from a community organization to chair the task force. You may also be able to secure assistance from a local fundraising executive. To help you identify a local executive, contact the National Society of Fundraising Executives at (703) 684-0410.

Affiliating the Project

Consider affiliating your project with the state chapter of an association, such as the American Academy of Pediatrics, the American College of Emergency Physicians, the Emergency Nurses Association, or the American Hospital Association. This chapter would "adopt" your project, serving as its nonprofit vehicle, or would assume long-term responsibility for one or more objectives previously addressed by your project, thereby helping to institutionalize the effort.

An alternative would be to affiliate permanently with a university or college. The university would serve as the nonprofit vehicle for EMSC and could list EMSC as "one of its many programs" in fundraising appeals. This strategy could generate additional revenue and public support for the university.

Similar to a partnership with a state association, university or college, your project may affiliate permanently with some other health care organization in the state such as a children's hospital, a nonprofit EMS agency, or a managed care plan. This health care organization could then identify EMSC as "one of its many programs" in fundraising appeals or marketing campaigns. A managed care plan, for example, may have much to gain in its public relations efforts through affiliation with EMSC.

Affiliation may imply transfer of the project or of project objectives from a state agency such as EMS or MCH to a private non-

profit in the state. It is also possible, however, that the reverse will occur. If your project is now housed at a university or hospital, the state EMS or MCH agency may adopt your project and provide it with financial support through a contract or grant or may offer it a permanent home in state government. However, expansion of the EMS or MCH office with additional full time employees may require passage of authorizing legislation.

Besides affiliation with state government or with a nonprofit, your project may become the outreach program of a for-profit corporation or of a consortia of businesses, such as the state Chamber of Commerce. If exploring this route, ask for a three- to five-year commitment.

A Step-by-step Guide to Securing Financial Support

Step 1: Budget Time

Four to six hours per month should be dedicated to the fundraising process. This includes time spent conducting research, networking with prospective funders, and writing and submitting grant proposals. Match your fundraising efforts to EMSC needs, problems, and objectives, as these become clear to you. Keep in mind that there is often a three to six month period between the submission of a grant proposal, review and approval, and the actual transfer of funds.

Step 2: Create A Set of Resource Files

Set up a system to file information about funding sources, contacts, and grant application forms. Keep a separate file for documenting project achievements or outcomes. Files for new ideas and materials to attach to grant proposals, such as press clips, resumes, and strategic plans will also be helpful.

Step 3: Call the EMSC National Resource Center

EMSC grantees should contact the EMSC National Resource Center for assistance with researching prospective funding sources and with technical support in developing a strategy for survival or for expansion of current project activities. The Center also offers input on how to make ideas appealing to funders and provides written comment on grant proposals.

Step 4: Establish A Task Force

Invite leaders in your state who care about children to participate in the fundraising process. Ask a corporate leader or representative of a voluntary organization to chair an EMSC fundraising task force. Include a development officer or professional fundraiser who is willing to assist pro bono or at a low price. Identify a consumer or parent who has a compelling story to write a letter of support or to participate in appointments with funders. Keep in mind that members of your task force or of your broader network may have ideas about fundraising options, may have personal contacts with funding sources, and/or a willingness to introduce you to a funder or to approach the funder personally on your behalf.

Step 5: Develop A Strategic Plan

Use available data and your experience in EMSC to determine the mission, goals, and objectives of your project for the next two to three years. Define the scope of the project, including populations to be served, aspects of the child health continuum to be addressed, products to be developed, and partnerships to be formed. Ask your Advisory Committee, a special task force, or a focus group to help you create this strategic plan. Solicit their ideas for a two- to three-page concept paper describing what your project hopes to accomplish and the resources you will need to succeed (see Appendix C: Chart for Identifying Resources). Draft a budget and solicit input and feedback from key players in the state whose support you will need.

Step 6: Research the Options

Begin by determining the type(s) of funder you wish to work with (see Appendix D: Identifying Prospective Sources and Strategies for Fundraising). Once identified, conduct a thorough search of the funder's web site (see Appendix E: Securing Additional Information). Ask your task force to review materials provided by the EMSC National Resource Center on funding prospects in your state. See if the development staff of a hospital, university, or association has any suggestions or is able to provide you with information about funders.

Explore the Foundation Center's cooperating collection near you or the development section of a major library in your state to familiarize yourself with available computerized databases, CD-ROM programs, and directories. A number of resources are available that make searching for funders by key words and by location very easy, such as:

- FC Search (The Foundation Center);
- *Prospector's Choice* (The Taft Group);
- Orca's Sources of U.S. Foundations;
- Oryx's Grants Database; and
- *Guide to Grants* (The Chronicle).

These programs enable you to select funders by state, subject area, total assets, and amount of funds given annually. There is also an online database search program called "DIALOGUE". To subscribe to this database, contact Knight-Ridder Information at (800) 3-DIALOGUE [334-2564] or visit a major university or public library in your state that already subscribes to DIALOGUE. If time is a problem, ask an intern, administrative assistant, or volunteer to help.

Develop a list of prospective sponsors. You should have at least ten candidates, but may well need as many as 20 to 40 prospects to be successful. Make certain that your project matches the giving interests and practices of the funder. Most agencies, foundations, and corporations publish information about their areas of interest, limitations and restrictions, deadlines for submission, and guidelines for making initial contact. Take a look at the 990PF tax form filed by foundations of interest to you. These tax forms provide detailed information about the foundation's recent giving history

and are available at branch offices of the Foundation Center, from the IRS, or from your state attorney general's office.

Step 7: Approach the Funder

Follow the guidelines published by each funder, determine how you are going to approach each – by telephone, letter of intent, appointment, or formal application – and who is going to take the lead.

An introductory call. The first telephone contact may be made by an Advisory Committee member – a pediatric surgeon, an association's state chapter president, or a corporate leader, for example. The individual explains why he or she is calling, briefly describes the mission and goals of the EMSC project, asks about the possibility of submitting a project summary or full proposal, and/or requests an appointment to gain initial feedback.

A letter of intent. Some funders do not want to be called and prefer or require a letter of intent. This pitch letter is usually no longer than two to three pages in length and describes your organization, the need to be addressed or problem to be solved, your project's anticipated outcomes, how the program will be carried out, and how much money it will cost. It also asks for permission to submit a full proposal (if required), indicates when you will be following up with the funder, and provides contact information for resolving any questions. Finally you should thank the funder for consideration of your request. Note that, in general, corporations tend to prefer these short straightforward letter proposals, while foundations and government agencies tend to require lengthier proposals with greater detail.

Appointment with the funder. You or someone in your EMSC network may be able to secure an appointment with a funder. Treat this opportunity as a command performance and prepare well. The appointment may begin with some informal conversation, but be sensitive to the funder's time. You may want to bring an expert with you and/or a consumer who has had an EMSC-related experience. Introduce any participants. Share the mission, goals, and accomplishments of your current project. Describe activities that are currently supported and explain the needs that remain unmet. Show that your proposal is unique and likely to have an impact. Note the collaboration and partnering it will entail. Share supporting or clarifying documents. Encourage questions and dialogue and ask for feedback. Respond to the funder's concerns and inquire about the next step in the application process.

Once you have made your initial contact, and the funder has expressed interest in your work or a willingness to consider your request, ask for the funder's annual reports, informational brochures, and grant guidelines and applications to assist you in tailoring your proposal to the grant-maker's mission and interests.

A formal application. A grant proposal may be written by a staff member, consultant, development officer, corporate leader, or volunteer. It should follow the funder's grant guidelines and use the

funder's application forms. Most applications, including federal grant guidances, are available online. Although each funder has different requirements, a good proposal should include most of the following:

- **A cover letter** no longer than one to two typed pages that acknowledges your previous contact or linkage with the funder, describes your organization, provides a concise explanation of the project to be funded, summarizes the needs to be met and results to be achieved, states the amount requested, and provides names and telephone numbers of individuals who can answer questions.
- **A title page** that provides the name of the organization requesting the funds, a one-sentence name for or description of the project, and the submission date of the proposal.
- **A table of contents** should present the format of the proposal in outline form, indicate subheadings, provide page numbers, and follow the progression required by the funder.
- **An executive summary** no longer than one to three typed pages that includes the need or problem to be addressed, who will benefit from the project and how, the strategies and methods that will be used to address the need, the level of funding and

Additional Helpful Tips for Writing Grant Proposals

- Start with an outline.
- Allocate enough time for research, editing, and fine tuning.
- Follow the funder's directions scrupulously, including those for format and length of the proposal.
- Have your chief financial person review the budget.
- Get input from other qualified individuals.
- If possible, ask for preliminary feedback from the funder and incorporate his or her suggestions.
- Use compelling statistics and stories.
- Communicate confidence and a concern for your constituents.
- Don't ramble!
- Avoid professional or technical jargon and write out acronyms at first use.
- Secure all required signatures.
- Check spelling and grammar and make sure the funder's names and titles are correct.
- Use a font size that is easy to read or that meets the funder's guidelines.
- Use bindings that allow pulling out and copying of pages.

other resources needed to achieve project goals and objectives, the organization's unique ability to perform the work entailed, and an evaluation plan.

□ **A statement of need** that includes the history or context for the project; three to five impressive statistics and other recent data; a few illustrative and compelling stories; and tables, graphs, press clips, and a literature review (perhaps provided as appendices). Remember that the statement of need serves as the rationale for funding. It should be convincing and factual, but not overstate the urgency of the needs. Include gaps you have identified in the current systems or programs.

□ **A project description** that discusses goals, objectives, management or action plan, and evaluation process (see Appendix F: Project Description— The Heart of Your Proposal).

□ **A budget** no longer than one to two pages that provides information about personnel costs (salaries, fringe benefits, consultant fees, contracts), non-personnel costs, calculations for overhead, expenses (rent, telephone, fax, postage, printing, copying, computer hardware and software, equipment, supplies, registration and subscription fees, travel), the source for and estimated value of in-kind contributions, and the source for and amount of matching funds you expect to receive. Please note that some private sector funders have specific guidelines for indirect cost allowances. Requirements for federal government agencies can be found in circulars published by the Office of Management and Budget. For additional details about these circulars see Appendix J: Bibliography.

□ **A concluding statement** no longer than one to two paragraphs that summarizes the importance and value of the effort; reminds the funder that the grant will allow you to meet needs, solve problems, test a theory, change a system, or develop a product; and indicates how the project might benefit or serve as a model for other government agencies or private organizations. For example: A common pattern might be "with the help of (the funder), our coalition will be able to accomplish (the outcomes)."

□ **Appendices** that may include a short history of your organization; an Advisory Committee list; resumes and curricula vitae of staff and consultants; sample job descriptions for staff to be hired; abstracts of key research studies and special reports; statistical charts and graphs; a literature review; press clippings; examples of products previously developed; brochures for past special events; sample evaluation instruments; letters of support; a copy of a nonprofit status determination letter from the IRS; an Equal Opportunity Employer (EOE) statement; a budget rationale, explaining each line item in the budget; a recent financial statement or audit; and assurances or certifications required by the funder. Remember to be careful about overwhelming a prospective funder. Provide only items that are required by the funder or that will strengthen the proposal.

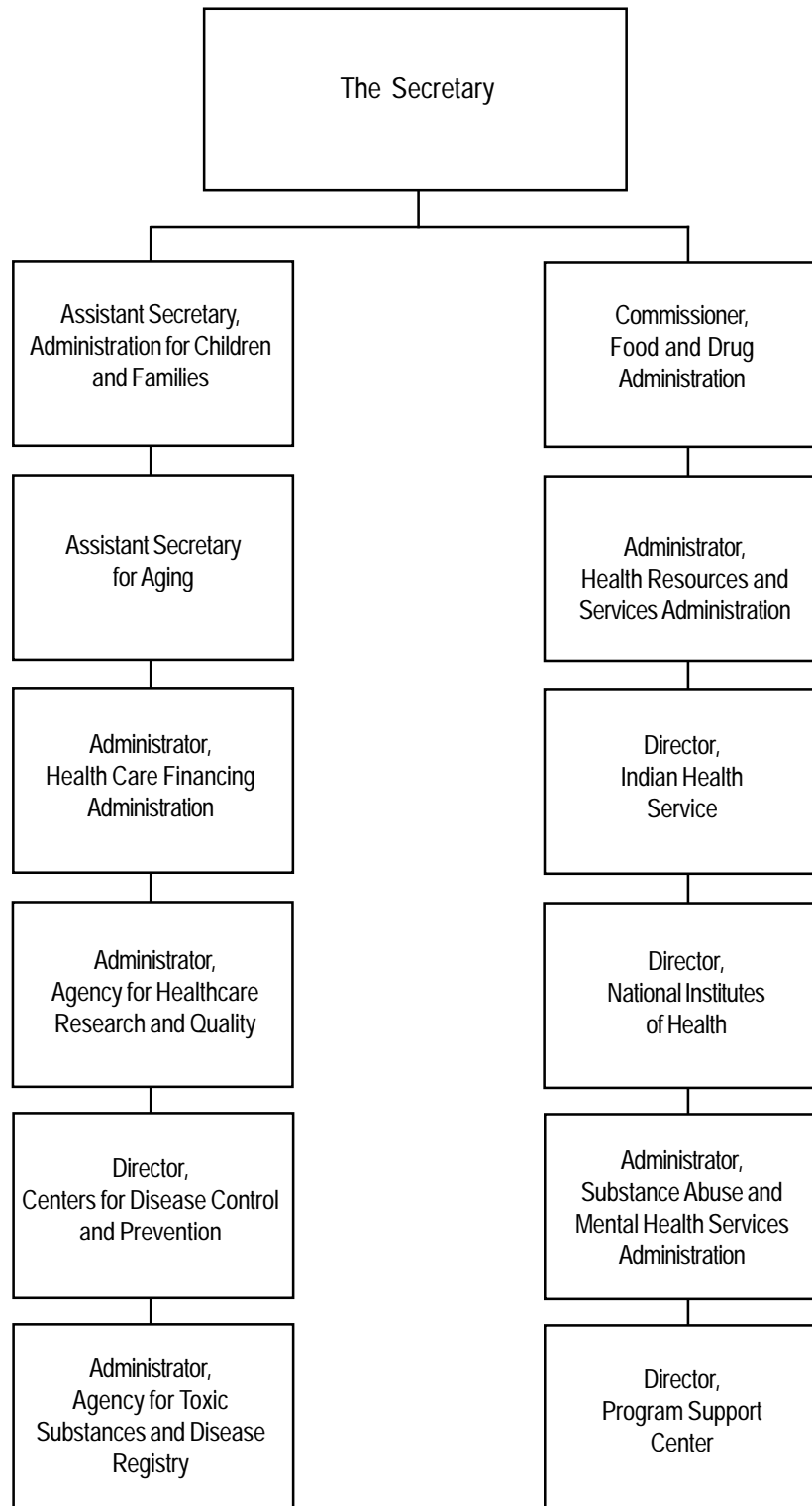
Once the proposal has been submitted, call the funder to confirm that the materials were received. Ask about the time frame for review (if not known already) and if any additional materials are needed. If the proposal is rejected, thank the funder for the opportunity to submit, and indicate that you would welcome feedback on the proposal. Be sure to ask if you might reapply at a later date.

Step 8: Recognize and Thank

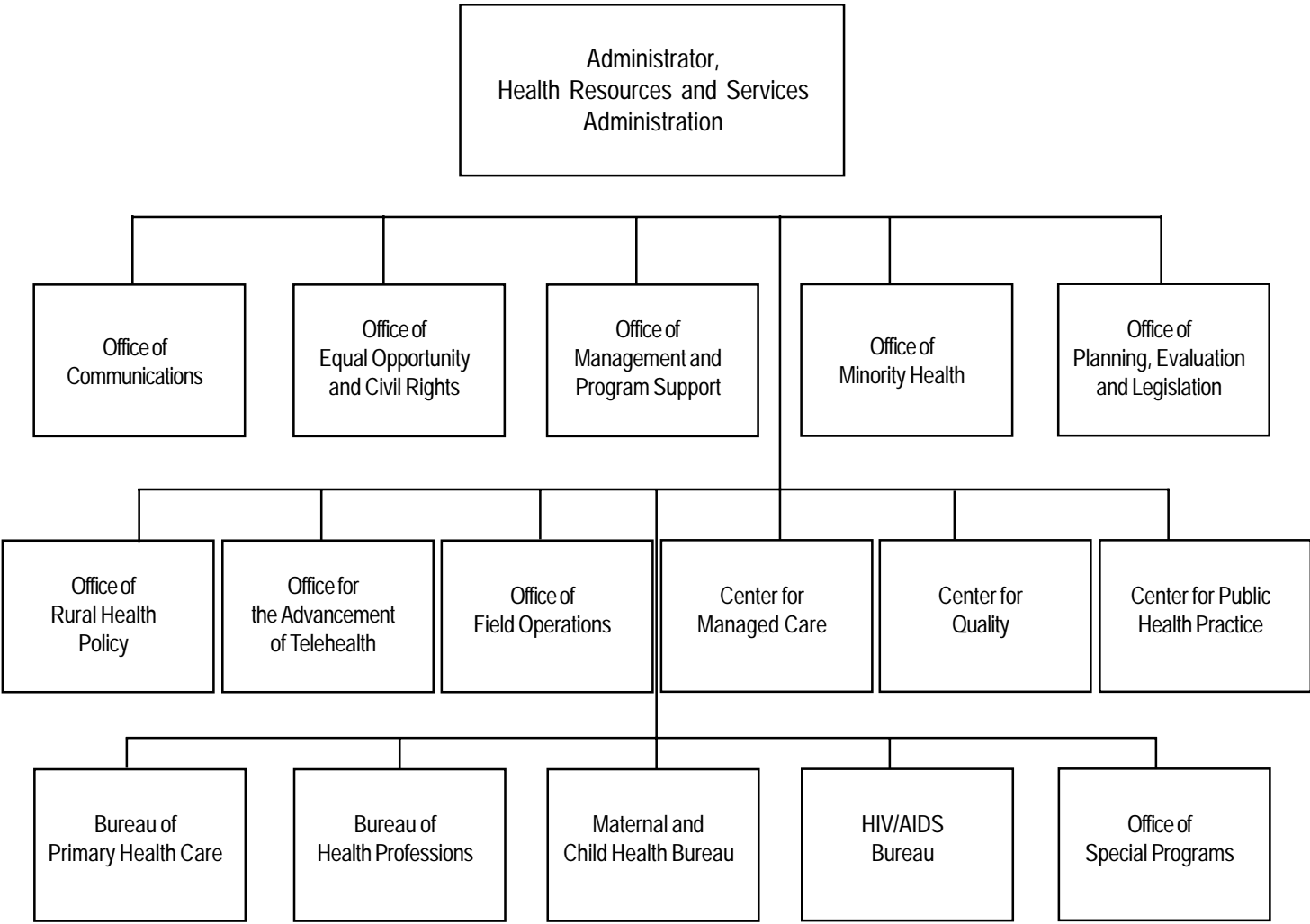
If the proposal is accepted, send a thank you note and call the grant-maker to express your appreciation as soon as you receive the news. Acknowledge the funder in news releases, articles, brochures, advertisements, audio-visual productions, presentations, and interviews. Take time to thank anyone who helped you in the fundraising process.

Send the funder regular updates on your project's progress, including reports, newsletters, brochures, or products developed. Monthly or bimonthly contact of some type is strongly encouraged. A quarterly meeting, if appropriate and feasible, may be of value. Some contact of an informal nature may also be beneficial, such as inviting the funder to a special event associated with the project or to an update over lunch. It is important for you to take the time to demonstrate that the grant is resulting in measurable outcomes and that the money is being spent judiciously.

Appendix A: Organizational Chart for the Department of Health and Human Services



Appendix B: Organizational Chart for the Health Resources and Services Administration



Use copies of this chart to organize and complete your fundraising plan.

| Resources Needed to Succeed ("needs or wish list"; include dollar amounts if applicable) | Strategies for Securing these Resources | Who will take the lead (staff member, task force member, collaborator, consultant, volunteer) | Deadlines |
|--|--|---|------------------|
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Appendix D: Identifying Prospective Sources and Strategies for Fundraising

Check off the fundraising options that you believe should be explored. Ask your Advisory Committee, a fundraising task force, or a development professional to help with the brainstorming process.

Government Sources and Strategies

- Funding from federal agencies
- Funding from agencies in state government
- Funding from county and municipal governments
- State legislation
- Percentage share of fines/taxes

Private Sector Sources and Strategies

- Foundation funding
- Corporate funding
- Individual donors
- Combined Federal Campaign
- United Way designation
- Volunteer organization
- In-kind donations
- Planned giving
- Establish independent nonprofit
- Affiliate the project

Other Sources and Strategies

- Special events
- Product sales
- Tuition/service fees
- Direct mail
- Phone bank
- Hire fundraising consultant

Appendix E: Securing Additional Information

Determine which of the following web sites and computer database programs need to be explored, which organizational resources need to be contacted, and which publications you wish to review or purchase.

Web sites

- www.mchb.hrsa.gov (Maternal and Child Health Bureau)
- www.cdc.gov/funding.htm (Centers for Disease Control and Prevention)
- www.nih.gov (National Institutes of Health)
- www.ncjrs.org/fedgrant.htm (Department of Justice)
- www.ed.gov/money.html (Department of Education)
- www.acf.dhhs.gov (Administration for Children and Families)
- www.samhsa.gov (Substance Abuse and Mental Health Services Administration)
- www.access.gpo.gov (Federal Register)
- www.ahrq.gov (Agency for Healthcare Research and Quality)
- www.foundationcenter.org (Foundation Center)
- www.taftgroup.com (Taft Group)
- www.unitedway.com (United Way of America)
- www.uschambers.org/mail/state.htm (Chamber of Commerce)
- www.whitehouse.gov/WH/EOP/OMB/html/circulars (Office of Management and Budget)

Computerized Database Search Programs

- DIALOGUE (online search program)
- FC Search (CD-ROM program)
- Prospector's Choice (CD-ROM program)

Organizational Resources

- EMSC National Resource Center, (202) 884-4927
- Federal Assistance Programs Retrieval Service (Catalogue of Federal Domestic Assistance), (800) 669-8331
- CDC's Grant Information Line, (404) 332-4561
- National Criminal Justice Reference Service, (800) 851-3420
- National Clearinghouse on Child Abuse and Neglect Information, (800) 394-3366
- National Clearinghouse for Alcohol and Drug Information, (800) 729-6686
- Foundation Center, (800) 424-9836
- Taft Publishing/The Gale Group, (800) 877-TAFT [8238]
- National Council of State Chambers of Commerce, (202) 484-5222
- National Society of Fundraising Executives, (703) 684-0410
- National Committee on Planned Giving, (317) 269-6274
- Association of Fund Raisers and Direct Sellers, (404) 252-3663
- National Federation of Nonprofits, (202) 628-4380
- United Way of America, (800) 411-UWAY [8929]
- Knight-Ridder Information, Inc., (800) 3 -DIALOGUE [342-2564]

Publications

Identify any publications cited in the bibliography (see Attachment J) that you want to review or purchase.

Appendix F: A Project Description – The Heart of Your Proposal

The information provided below is designed to assist you in writing a winning project description.

Program goals should state in broad terms the desired results of your project. For example: “To reduce the number of children injured in playground accidents in Suffolk County.”

Measurable program objectives should state the desired outcomes in concrete terms. For example: “During the next five years, our coalition of health and education professionals, business leaders, child care providers, churches, and voluntary organizations will reduce, by 50%, the number of reported playground injuries to children under the age of 12 who reside in Suffolk County.” Notice that the objective is written to answer the following questions:

- .. What will be accomplished? What outcomes are anticipated?
- .. What population will be served?
- .. Who are the responsible agents?
- .. When will it be accomplished?
- .. To what extent will it be accomplished? What will be the impact in quantifiable terms?
- .. How well will it be accomplished? What will be the impact in qualitative terms?
- .. Where will it be accomplished?

A management or action plan identifies how each objective will be accomplished. It should answer the following questions:

- .. How is your organization uniquely qualified to achieve these objectives?
- .. With whom will your organization partner or collaborate?
- .. What are your project milestones?
- .. Who will administer the project? (Advisory Committee? Task Force? Paid staff or consultants? Volunteers?)
- .. What other resources will be brought to bear? (In-kind contributions? Publications? Special events?)
- .. Does the project reflect the cultural diversity of your geographic area?
- .. What will you do to ensure positive results?
- .. Does data exist to support your methodologies and approaches?
- .. How will the project be institutionalized to ensure permanence?

For example: “Our task force is a special initiative under the umbrella of the Suffolk County Children’s Welfare League (SCCWL). The League recently compiled statistics on the number of young children injured in car accidents in the county. Based on that data, the organization launched a public service campaign to educate

parents and other care givers about the importance and correct use of car seats.

“Based on this experience, we propose to establish an improved baseline data collection system for playground injuries. The system will be developed during year one of the grant. It will include survey responses from schools, day care centers, EMS providers, and hospital emergency departments. In year two of the grant, we will launch a public education campaign on playground safety. In years three and four, we will implement the playground renovation project. In the fifth year, we will conduct a second survey to ascertain the effectiveness of the safety campaign and playground renovations.

“Our project will be guided by a steering committee comprised of the Suffolk County school superintendent, the head of pediatric care for Medford General Hospital, SCCWL’s director, the head of the Suffolk County Boys and Girls Clubs, and the county medical director. We will have a paid staff director and will receive office space, administrative support, and data collection services at no cost from SCCWL. The local branch of a nationwide toy store will provide partial, in-kind support for the public education campaign. Members of our local Kiwanis Clubs will volunteer their time and “muscle” for the playground renovations. We anticipate that SCCWL will absorb this program at the end of the five-year grant period.”

An evaluation plan shows that you will be accountable for results and that the value of the funder’s investment will be clearly demonstrated. It should answer the following questions:

- .. What data or information will be collected?
- .. What tools, instruments, or processes will be used to collect the data?
- .. When and by whom will the data be collected and analyzed?
- .. How will the results of this effort be reported and disseminated?
- .. How will the success of the project be measured?

Example: “A questionnaire will be used to survey elementary schools, day care centers, recreation departments, local youth organizations, and hospital emergency rooms in Suffolk County regarding the number and type of child playground injuries for the previous calendar year. SCCWL polling service will tabulate and analyze the data received.

“Based on the results, a public service campaign that includes flyers, posters, and safety guidelines will be distributed to all facilities with playgrounds in the county. Playgrounds with the highest number of injuries will be targeted for renovation. We will measure success by a substantial reduction in playground injuries in years four and five of the grant.”

Appendix G: Bibliography

This bibliography is based on information currently available. Addresses and telephone numbers for publishers as well as editions of publications may have changed. Contact the EMSC National Resource Center at (202) 884-4927 for assistance or to report new information.

Overviews

A Guide to Funding Alternatives for Fire and Emergency Medical Services Departments, 1993. FEMA Publication FA-141, United States Fire Administration, PO Box 10274, Washington, DC 20024.

Discover Total Resources: A Guide for Nonprofits. Community Affairs, Mellon Bank, One Mellon Bank Center, Pittsburgh, PA 15258-0001; (412) 234-3275.

Successful Fundraising: A Complete Handbook for Volunteers and Professionals, 1993. Contemporary Books, Two Prudential Plaza, Suite 1200, Chicago, IL 60601-6790; (312) 540-4500.

An Advocate's Guide to Fundraising. Publication's Department, Children's Defense Fund, 25 E Street, NW, Washington, DC 20001; (202) 628-8787.

Strategic Planning for Public and Nonprofit Organizations: A Guide to Strengthening and Sustaining Organizational Achievement, 1995. Jossey-Bass Publishers; (415) 433-1740.

Writing A Grant Proposal

Winning Grants Step By Step: Support Centers of America's Complete Workbook for Planning, Developing, and Writing Successful Proposals. Mim Carlson, Jossey-Bass, Inc. Publishers, 350 Sansome Street, San Francisco, CA 94104; (415) 433-1740.

Teach Yourself to Write Irresistible Fundraising Letters. Precept Press, Inc., 160 East Illinois Street, Chicago, IL 60611; (800) 225-3775.

The Foundation Center's Guide To Proposal Writing, 1993. Foundation Center, 79 Fifth Avenue, New York, NY, 10003-3076; (800) 423-9863.

Federal Funding

The EMSC Grants Alert. EMSC National Resource Center; www.ems-c.org. This document contains federal and foundation funding pertinent to EMSC.

Catalogue of Federal Domestic Assistance. Government Printing Office, Superintendent of Documents, Washington, DC, 20402; (202) 512-1800; www.cfda.gov. Library of Congress Number:

73-600118. Technical support available from Federal Domestic Assistance Catalogue Staff, General Services Administration, Reporters Building, Room 101, 300 7th Street, SW, Washington, DC 20407; (202) 708-5126 or (800) 669-8331. (Subscription to CD-ROM version available at (202) 401-8135).

Federal Register. Government Printing Office, Superintendent of Documents, Washington, DC 20402. Search online at <http://access.gpo.gov>.

NIH Guide to Grants and Contracts. Published electronically at gopher://gopher.nih.gov.

Federal Support for Nonprofits, 3rd Edition, 1996. The Taft Group, 835 Penobscot Building, 645 Griswold Street, Detroit, MI 48226; (800) 877-TAFT.

Guide to Federal Funding for Governments and Nonprofits. Government Information Services, 4301 N. Fairfax Drive, #875, Arlington, VA 22203-1627; (703) 528-1000. GIS also publishes a *Guide to Federal Funding for Hospitals and Health Centers*.

Cost Principles Applicable to Grants and Contracts with State and Local Governments. Office of Management and Budget, Circular A-87.*

Uniform Administrative Requirements for Grants and Cooperative Agreements to State and Local Governments. Office of Management and Budget, Circular A-102.*

Cost Principles for Nonprofit Organizations. Office of Management and Budget, Circular A-122.*

Uniform Administrative Requirements for Grants and Other Agreements with Institutions of Higher Education, Hospitals, and Other Nonprofit Organizations. Office of Management and Budget, Circular A-110.*

*All Office of Management and Budget circulars are available through a fax on demand service at (202) 395-9068. Downloadable versions are also available via the Internet at www.whitehouse.gov/OMB/circulars/index.html.

Foundation Funding

Coming of Age: Findings from the 1998 Survey of Foundations Created by Health Care Conversions, 1999. Grantmakers in Health, Washington, DC.

FC Search: The Foundation Center's Database on CD-ROM, 1999. Foundation Center, 79 Fifth Avenue, New York, NY, 10003-3076; (800) 424-9836.

Prospector's Choice, 1999. The Taft Group, 835 Penobscot Building, 645 Griswold Street, Detroit, MI, 48226-4094; (800) 877-TAFT.

The Foundation Directory, 1999. Foundation Center, 79 Fifth Avenue, New York, NY, 10003-3076; (800) 424-9836. Additional information is available in *The Foundation Directory, Part 2* and in *The Foundation Directory Supplement*. All three are usually available at the Foundation Center's cooperating collections in every state.

Foundation Reporter, 1997. The Taft Group, 835 Penobscot Building, 645 Griswold Street, Detroit, MI 48226; (800) 877-TAFT.

Foundation Giving: A Yearbook of Facts and Figures on Private, Corporate, and Community Foundations. Foundation Center, 79 Fifth Avenue, New York, NY, 10003-3076; (800) 424-9836.

Health Policy Grantmaking: A Report on Foundation Trends, 1998. Foundation Center, 79 Fifth Avenue, New York, NY, 10003-3076; (800) 424-9836.

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