



Colorado Chapter Grants Program

2010 Request for Applications for March of Dimes - CenteringPregnancy® Initiative

Application Guidelines

Colorado Chapter
Community Grants Program
1325 South Colorado Blvd., Suite B-508
Denver, Colorado 80222

Scott Matthews
Director of Program Services
303-305-1218
smatthews@marchofdimes.com

Purpose

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

In 2003, the March of Dimes launched a national campaign to address the increasing rate of premature birth. The campaign includes: 1) funding research to find the causes of premature birth; 2) educating families about the warning signs of premature labor and what can be done to prevent it; 3) expanding access to health care coverage so that more women can get prenatal care; and 4) helping health care providers learn ways to reduce the risk of early delivery. For information about how you and your organization can become more involved with this campaign, contact the Colorado Chapter at www.marchofdimes.com/colorado.

The March of Dimes champions the health of all babies. Our prematurity campaign is committed to reducing the number of infants that are born too soon, which often results in birth defects and babies dying within the first year of their lives.

In the past, the Colorado Chapter has provided grant funding to projects under a broad array of topics. These projects have provided opportunities for many special goals to be met by a number of community agencies. The March of Dimes is proud to have partnered with these organizations.

Chapter-Directed Mission Investment

Beginning in 2010, Chapter grants will be in the form of a concentrated partnership initiative. The Chapter plans to develop **three-year partnerships** with organizations selected to participate in this project. Our mission investment will focus on CenteringPregnancy® which is a group care model that is designed to improve the overall health outcomes of mothers and babies. More detailed information regarding this model is available at www.centeringpregnancy.org.

Through this focused approach, we seek to improve birth outcomes, increase prenatal care utilization and improve the quality of prenatal education for pregnant women in Colorado. This Request for Applications serves as the basis for selecting providers of prenatal care that can demonstrate the aptitude and competency to further the **CenteringPregnancy®** initiative.

Although this initiative is an opportunity for a three year partnership, funding beyond 2010 is contingent upon successful, measured progress of meeting required project objectives during the current year and upon the availability of March of Dimes funding.

Information about CenteringPregnancy®

CenteringPregnancy® is a group prenatal care model developed by Sharon Schindler Rising, MSN, CNM, FACNM and certified through the Centering Healthcare Institute; whereby, care is taken out of private examination rooms and conducted in a space sufficient in size to accommodate a group of 8 to 12 women. In that space, women receive their basic prenatal assessment, share concerns informally with other women, and discuss together content related to childbearing and parenting. These sessions are led by two skilled group leaders who also coordinate the assessment component. One leader must be a health care provider, usually a nurse midwife or nurse practitioner. The groups ideally consist of 8 to 12 women at common stages of gestation. The sessions are designed to last two hours with the first 30 minutes being used for assessment and the remaining time for education.

Please note that **CenteringPregnancy®** groups are not prenatal classes. They are interactive group sessions, with very little didactic communication, that empower pregnant women to take an active role in their health and to provide support to other members of the group.

Assessment

Women enter a group after their initial prenatal nursing/medical evaluation. At each session the standard prenatal assessment (fundamental weight, heart tones) is completed in the group setting, on a mat or low table in one corner of the room. While one woman has her individual time with the practitioner on the mat, the other participants are charting their blood pressure, weight, completing self-assessment sheets that will be used during the education component, enjoying refreshments, etc. Unless a woman develops medical problems she would not have to re-enter an exam room until 38-40 weeks gestation. Women participate actively by checking their own weight and blood pressure and recording on their chart. While on the mat, each woman has individual time to share problems and concerns with a practitioner, and to evaluate the health status of the baby.

Education

A general curriculum is defined with handouts, worksheets, and suggested visual aids. All of the handouts are available in both English and Spanish. Topic areas include:

- Nutrition
- Exercise/relaxation
- Childbirth preparation
- Pregnancy problems
- Infant care and feeding
- Postpartum issues
- Communication and self-esteem
- Comfort measures
- Sexuality
- Abuse issues
- Parenting

The education process occurs through a facilitated discussion format. Note: Group sessions may be altered to focus on specific needs identified by the women/couples.

Support

A stable group allows for building of trust among the members. The **CenteringPregnancy®**, program begins early in pregnancy and continues through the early postpartum period. Women/couples become invested in each other and build a community as a result of their interactions. This leads to increased support and decreased feelings of isolation. Time for refreshments and socialization during the sessions helps to promote cohesion.

Training

The March of Dimes will provide **CenteringPregnancy®** training at no cost for staff of selected sites. Applicants must guarantee that staff will attend training if their site is selected to participate in this project. The application must include a list of staff who should receive training.

Who Should Attend?

A core group of staff from your agency should attend. This includes at least one person from each of your service groups: nursing, providers, medical assistants, case workers, clerks/front desk personnel, administration, health educators and support services such as social work and nutrition. The more involved your staff is in the planning process, the better the outcome.

Final decisions regarding training participants will be made after site selection. Training is conducted by **CenteringPregnancy®** staff. Training takes approximately 2 days. Locations will be determined after sites are selected so that they are based on convenience for sites and cost efficiency.

Eligibility to Submit Applications

The Colorado Chapter of the March of Dimes encourages all ***incorporated Colorado nonprofit 501 (c) (3) agencies, for-profit organizations, and governmental agencies*** to apply that can ensure the following essential prenatal care elements of the program are part of their project:

- Health assessment occurs within the group space.
- The group is conducted in a circle.
- Group size (8 to 12 women) is optimal to promote the process.
- The composition of the group is stable, but not rigid.
- There is stability of group leadership.

March of Dimes chapter grants do not fund individuals or scientific research projects.

For information about research grants funded by the March of Dimes national office, please refer to the March of Dimes Web site at www.marchofdimes.com or e-mail the Office of Research and Grants Administration at researchgrants@marchofdimes.com

- A facilitative leadership style is used.
- Each session has an overall plan.
- Attention is given to the core content, although emphasis may vary.
- Women are involved in self-care activities.
- Group conduct honors the contribution of each member.
- Opportunity for socialization within the group is provided.
- There is on-going evaluation of outcomes.

All applications must address the March of Dimes mission of improving the health of babies by preventing birth defects, premature births and infant mortality and be focused on the following priority area:

Implementing the CenteringPregnancy® model of group prenatal care for Colorado's pregnant women

This proposal process creates opportunities for:

- Organizations with **established** CenteringPregnancy® programs **to enhance** the interventions offered;
- Organizations with **established** CenteringPregnancy® programs **to expand** the interventions offered; and
- Organizations **without established** CenteringPregnancy® programs with demonstrated readiness to begin offering the program.

If you are an established CenteringPregnancy® program, with a certification from the Centering Healthcare Institute (CHI), please read Section II for specific information.

Section I

(For organizations that are not certified by Centering Healthcare Institute)

Basic Requirements of Selected Applicants

- Full organization's commitment to the goals, objectives, process, evaluation and reporting requirements of this initiative (sample cover letter provided in the application materials);
- Signed Cooperative Agreement (to be provided upon acceptance of application);
- Commitment to participate in the CenteringPregnancy® training to become a certified program;
- Financial commitment to the project:

| | |
|------------------------------|---------|
| Initial Readiness Assessment | \$2,900 |
| CHI Membership (annual dues) | \$ 250 |
| Site Approval (year II) | \$4,000 |

Note: These fees are paid directly to the Centering Healthcare Institute (CHI)

Commitment to Participants by the Colorado Chapter of the March of Dimes

- Training for staff members of selected sites;
- CenteringPregnancy® materials;
- Grant funds for such expenses as travel to training, non-CHI materials/supplies, and extra staff support (e.g., data entry);
- Project evaluator contact; and
- Publicity.

Section II

(For organizations certified by the Centering Healthcare Institute)

Basic Requirements of Selected Applicants

- Full organization's commitment to the goals, objectives, process, evaluation and reporting requirements of this initiative (sample cover letter provided in the application materials);
- Signed Cooperative Agreement (to be provided upon acceptance of application);
- Financial commitment to the project:

| | |
|--|-------------------|
| CHI Membership (annual dues) | \$ 250 |
| Other CHI approval expenses over 2 years | Less than \$7,000 |

Note: These fees are paid directly to the Centering Healthcare Institute (CHI).

Commitment to Participants by the Colorado Chapter of the March of Dimes

- CenteringPregnancy® materials;
- Grant funds for such expenses as non-CHI materials/supplies and extra staff support;
- Project evaluator contract; and
- Publicity

Goal and Objectives of this Initiative

Goal: Reduce the number of Colorado preterm births

(Preterm birth occurs before 37 completed weeks of gestation.)

Objectives:

Increase the number of women participating in the CenteringPregnancy® prenatal care program;

Increase the number of Colorado organizations trained and certified in the CenteringPregnancy® program;

Contribute to the evidence based knowledge of the effectiveness and limitation of the CenteringPregnancy® model.

Selection Process

The process of selecting organizations will be conducted by March of Dimes volunteers. **Applicants must disclose any conflict of interest due to representation by their organization on the Colorado March of Dimes Program Services Committee.** The volunteers will use the following criteria to evaluate the merits of each proposal:

- Distribution of resources into each of the three Colorado divisions.
 - Service to ethnic, racial and geographic disparities.
 - Ability to demonstrate efficiency (per unit cost of service).
 - Maximizing the number of participants served.
- (All applicants must ensure capability to serve a minimum of 50 participants.)

The goal of this initiative is to reduce the number of Colorado preterm births. To that end, organizations will be selected based on the merits of their proposal as it addresses the previously described elements and convinces the reviewers about the ability of the applicant organization to provide CenteringPregnancy® with high rates of healthy, full-term births.

Project Evaluation

March of Dimes is conducting a comprehensive evaluation of all **CenteringPregnancy®** projects. Grantees must participate in the evaluation and cooperate with project evaluators. A letter of support on your organization's letterhead that includes concurrence with the evaluation component must be submitted with the grant application. (Please use the form letter available in the application packet. Do not modify this form). **Your application will not be considered without this cover letter of support.**

Grantee organizations that require IRB approval of the evaluation component of the project are responsible for the submission of the application. Evaluators will contact grantees immediately after notification of funding to discuss the evaluation process. **The IRB application process should begin promptly after first contact with evaluators and prior to attending training.**

Uniform evaluation tools and a single database for collecting information from all sites will be utilized so that the data will be consistent and comparable. If selected, applicants must agree to track and report outcomes as needed for the database. All participating sites will be expected to use the required forms and enter data into this database monthly.

Components of the evaluation will include:

- Number of participants served
- Metrics regarding program implementation
- Preterm birth rates
- Late preterm birth rates
- Infant birth weight
- Participants' (expectant mothers) quality of life measures
 - Adequate body mass index
 - Smoking cessation

2010 Selection Schedule

| | |
|------------------------------|---------------------------------|
| Applications Due | November 20, 2009 |
| Sites Selection Notification | January 8, 2010 |
| Project Year | March 15, 2010 – March 12, 2011 |

Although this initiative is an opportunity for a three- year partnership, funding beyond 2010 is contingent upon successful, measured progress of meeting required project objectives during the current year and upon the availability of March of Dimes funds.

Implementation Timeline

After attending the March of Dimes sponsored **CenteringPregnancy®** training, all selected sites must submit a timeline for implementation to the March of Dimes within 30 days. March of Dimes staff and **CenteringPregnancy®** staff will be available to provide technical assistance for all sites as soon as they are selected.

Publicity and Visibility

Selected sites will be required to work with the March of Dimes to publicize the project. This will include working with the March of Dimes staff to promote public knowledge of the project. This may involve public speaking, media presentations, and printed materials.

Additionally, sites will be required to maintain March of Dimes visibility with the project. For example, sites must purchase and display March of Dimes posters and use March of Dimes educational materials. Sites must give MOD gift bags to participants that include inexpensive gifts and materials selected by the Colorado Chapter of the March of Dimes. A March of Dimes banner must be hung in the group meeting room and a framed poster identifying the clinic as a project site must be hung in the lobby or waiting area.



Colorado Chapter
Community Grants Program

2010 Request for Applications
for
March of Dimes - CenteringPregnancy® Initiative

APPLICATION INSTRUCTIONS

The application must comply with all guidelines or it will not be reviewed.

- Applications must be no longer than 10 double-spaced pages (excluding forms).
- Font size must be at least 12 point and margins must be at least 1-inch.
- Proposals must contain all of the required components in the correct order.
- Original authorized signatures must appear on all required forms on submitted hard copy.
- All information requested under each of the required components must be provided within the application narrative, observing page limitations.
- Attachments may not be included.
- Submission requirements:

Applications must be submitted by email to smatthews@marchofdimes.com by **4:00 pm, November 20, 2009** as a **SINGLE Word document file**.

Signatures are not needed on the electronic document.

And

Applications must be submitted as a hard copy to the address below, including the originally signed cover page, cover letter, and budget form, by **4:00 pm, November 25, 2009**.

Scott Matthews
Director of Program Services
March of Dimes Colorado Chapter
1325 South Colorado Blvd., Suite B-508
Denver, Colorado 80222

- Faxed applications will not be accepted.
- Applications not received by the stated due date and time will not be reviewed.
- Applications that do not comply with the above criteria will not be reviewed.

If you have questions regarding the March of Dimes Colorado Chapter grants application, please contact **Scott Matthews at 303-305-1218 or smatthews@marchofdimes.com**.

APPLICATION FORMAT

All applications **must include** the following required components, addressing each bullet point listed. Send any requests for assistance to smatthews@marchofdimes.com. **The application must be submitted as hard copy and as a SINGLE Word document in the following order:**

I. REQUIRED FORMS

Cover Sheet

- Complete the cover sheet provided by the March of Dimes.
- Obtain two required signatures.

Cover Letter of Support

A letter of support on your organization's letterhead regarding commitment to the goals, objectives, process and reporting requirements must be submitted with the grant application. (Please use the form letter, without modification, provided in the application materials.)

Budget Form

The CenteringPregnancy® model of group prenatal care requires specific items to support implementation. Each site selected to participate in the March of Dimes CenteringPregnancy® initiative will be required to use certain items to support the educational needs of the project and to ensure consistency in identification and implementation. The majority of these materials will be supplied to you without purchases by your organization. Please use the attached budget sheet to identify additional items needed by your site. You may request up to \$5,000 from the March of Dimes Colorado Chapter to pay for approved expenses.

II. PROJECT NARRATIVE *(Not to exceed 10 double-spaced pages)*

Please provide concise responses to each section listed on the narrative form.

APPLICATION SUBMISSION CHECKLIST

The following checklist is provided to ensure that the application is complete and ready for submission. If you have questions regarding the Colorado Chapter Grants Application, please contact Scott Matthews, Director of Program Services, at 303-305-1218 or send an email to smatthews@marchofdimes.com.

- The entire application (including forms and all attachments) is saved to a computer as a SINGLE Word document.
- The application narrative is 10 pages or less.
- The font size is at least 12 pt, the margins are 1-inch and the document is double-spaced.
- All required components are included in the following order for this application.
 - Cover Sheet
 - Cover Letter of Support
 - Budget Form
 - The amount requested is within the allowable range and the requested line items are within allowable cost items.
 - Budget totals have been checked for accuracy
 - Narrative
- The computerized file version of this proposal is presented in the required component sequence and is ready to be emailed to the March of Dimes addresses as identified in this Request for Applications.
- The application has been printed as a hard copy and the appropriate signatures have been obtained.
- The hard copy with signatures is in the packet to be sent to the March of Dimes address identified in this Request for Applications.
- The application will be received at the March of Dimes by the deadline.



**Colorado Chapter
Chapter Community Grants Program
APPLICATION COVER SHEET**

Applicant Organization _____

Mailing Address _____

Contact Name _____

Phone/Fax _____

E-mail _____

Community or multiple communities to be served: _____

Approximately how many unduplicated individuals will be served during the grant year? _____

List the race/ethnicity of the *majority* of individuals served (if applicable): _____

Is your organization certified as a CenteringPregnancy® program by the Centering Healthcare Institute?
 Yes No

The proposal addresses the following funding priority:

Implementing the CenteringPregnancy® model of group prenatal care for Colorado’s pregnant women.

Total grant amount requested: \$ _____

Checks should be made out to: _____

_____/____/____ _____
Signature - Primary Staff Person Date Type Name and Title

_____/____/____ _____
Signature - Executive Director Date Type Name and Title

COVER LETTER OF SUPPORT

(please print on your organization's letterhead)

March of Dimes – Colorado Chapter
Community Grants Program
1325 South Colorado Blvd., Suite B508
Denver, Colorado 80222

(insert date)

Dear Community Grants Program:

This letter is to verify that our organization (name of applicant organization) completely supports this application to partner with the Colorado Chapter of the March of Dimes to further improve birth outcomes, increase prenatal care and improve the quality of prenatal education for pregnant women in Colorado.

The administration, medical providers and allied staff understand and support the concept of CenteringPregnancy® and are committed to implementing and expanding its availability to our patients. We are invested in improving the collective knowledge base regarding the effectiveness and limitations of the CenteringPregnancy® program. Therefore, we are willing and capable of providing monthly data reports as will be required to conduct the evaluation of this initiative.

Although this initiative is an opportunity for a three-year partnership, our organization accepts that funding beyond 2010 is contingent upon successful, measured progress of meeting required project objectives during the current year and upon the availability of March of Dimes funding.

Sincerely,

Signature - Executive Director

Signature - Project Manager



**Colorado Chapter Grants Program
Budget Request Form
Budget Year: 2010**

Instructions:

- Please list each line item that you for which you are requesting funds
- Provide detail and justification as required
- Please round figures to nearest dollar and check totals
- Ensure that required signatures and dates are provided on this form.

Budget Items

A. Staffing

(Concisely describe the duties and tasks to be performed)

Hourly rate: _____ Total number of hours: _____

Total Staffing Budget Request: \$_____

B. Expendable Supplies

(Materials in addition to those provided through CHI)

| Item | Per Unit Cost | Quantity | Total Cost |
|-------|---------------|----------|------------|
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |

Total Expendable Supply Budget Request: \$_____



Colorado Chapter Grants Program
Budget Request Form
Budget Year: 2010

Page 2

C. Other Expenses

(Include any other expenses needed to implement your project)

| Item | Per Unit Cost | Quantity | Total Cost |
|-------|---------------|----------|------------|
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |
| _____ | _____ | _____ | _____ |

Total of Other Expense Budget Request: \$ _____

GRAND TOTAL (A+B+C): \$ _____

PLEASE NOTE: The total budget request cannot exceed \$5,000.

 Signature – Executive Director

 Signature – Director of Operations

Date: _____

Date: _____

PROJECT NARRATIVE *(Not to exceed 10 double-spaced pages)*

- A. Conduct an assessment of the limitations and opportunities with the current model of prenatal care implemented in your clinic. Describe the methods used in the assessment. Which of the following areas were identified as limitations? Please explain each one you identify.

Patients initiating prenatal care after the first trimester.

- Patients missing prenatal appointments or related services (i.e. ultrasounds, lab).
- Patients smoking during pregnancy.
- Patients using alcohol during pregnancy.
- Patients using drugs during pregnancy.
- Patients experiencing domestic violence during pregnancy.
- Pregnant mothers under the age of 20.
- Lack of time and/or resources for prenatal education.
- High rates of premature birth and/or low birth weight.

- B. Will your patients embrace a group model of prenatal care? How do you know this? Will you make the group model optional or will it be your primary method of prenatal care?
- C. Group prenatal care requires a room sufficient in size to seat 16-20 people in an open circle (no more than 12 expectant mothers should be in a group, but support persons may attend). The group meeting space does not have to be located inside the clinic. Space at a hospital, community center or other partnering organization could be used. Do you have adequate meeting space for this program? Please describe.
- D. Group prenatal care includes an education component that requires the use of specific materials. See the attached budget sheet for details. Do you have available audio/visual equipment to support this activity? Please explain.
- E. Do you have the basic medical equipment needed to implement group prenatal care? Please explain.
- F. How will the group prenatal care model be integrated into your clinic setting? Which patients will be able to participate? Will there be any difference between services offered to Medicaid patients and private paying patients?
- G. What percentage of patients in your practice use Medicaid as their source of health insurance? What percentage is uninsured? What percentage is low-income?
- H. What is the age distribution and ethnicity of clients in your practice?
- I. How many new obstetric patients are enrolled each month? How many deliveries/month will be impacted by the group prenatal care model?

- J. How many patients do you intend to enroll in CenteringPregnancy® (keeping in mind the ideal number of expectant mothers is 8 to 12 per group)?
- K. Will childcare be a barrier to participating in group prenatal care for your patients? If it is a barrier, how will you address it? (In order to participate in the group, the mothers must not be distracted by the presence of children.)
- L. Will language be a barrier to participating in group prenatal care for your patients? If it is a barrier, how will you address it?
- M. The CenteringPregnancy® model recommends that each selected site establish a core planning committee that will be formally trained. Staff positions to be considered are a provider, an administrator, a nurse manager, a front desk clerk and a social worker or case manager. Which staff members from your clinic will be trained on the CenteringPregnancy® model of group prenatal care? Explain the role of each person in the CenteringPregnancy® project. Will each of these people commit to attending the same training session provided by the March of Dimes?
- N. Please provide a list of the names, degrees, and positions for those members of your staff that you believe should receive training.
- O. If selected, how will you maintain March of Dimes involvement and visibility with this project long-term?
- P. All CenteringPregnancy® grantees are expected to participate in an evaluation of the project conducted by March of Dimes evaluators. Does your organization require IRB approval for this? If so, describe your plan for attaining IRB approval.