



Rural Older Adults Mini-Grant Request for Proposal (RFP)

The Association of Oregon Community Mental Health Programs (AOCMHP), with funding from the Oregon Health Authority (OHA), is offering one-time grants of \$8,000 to \$15,000 to support social engagement among isolated rural and remote older adults. This project seeks to increase social connection and decrease isolation for a suicide-safer Oregon. Activities that build a sense of connectedness may differ. When planning, we encourage creativity in proposals to match the unique needs of the community.

While the focus is on rural and remote communities, organizations in urban counties can apply as long as the **focus of your proposal** impacts rural and remote communities. Rural, as defined by the Oregon Office of Rural Health, is any geographic area in Oregon ten or more miles from the centroid of a population center of 40,000 people or more. Remote (a term used as a placeholder for frontier), is any county with six or fewer people per square mile. To review a map of rural or remote communities in Oregon, see these two maps ([static map](#), [zoom map](#)).

Organizations that can apply include county, municipal, and non-profits (501 c3 status) including Community Mental Health Programs, Certified Community Behavioral Health Clinics, Area Agencies on Aging, Aging and Disability Resource Connection, Community Based Organizations, and Tribal elder programs. Community-based grassroots organizations can apply provided that they have a fiscal sponsor. Fiscal sponsors are a non-profit organization who provide fiduciary oversight, financial management, and other administrative services to the organization leading or coordinating the project. Collaborating with various organizations is encouraged.

While it is not a requirement to focus on any specific population within rural and remote older adults, we will give extra points in our review process to projects that specifically support the marginalized populations within rural and remote older adults, including, but not limited to:

- Service Member, Veteran, and Family (SMVF)
- Black, Indigenous, and People of Color (BIPOC)
- Lesbian, Gay, Bisexual, Transgender, Queer/Questioning, Intersex, Asexual, Two-Spirit (LGBTQIA2S+)
- Immigrants/refugees

Please answer if you already received ROAM funding. If your organization received ROAM funding in the previous cycle, explain how additional funding would enhance, expand, or maintain the program?



Informational webinar	Application due	Applicants informed of award	Funding Distributed	Project Timeline
Feb. 1 st from 10-11 am PST (registration link)	Feb. 16 th , 2024	March 15 th , 2024	March 19 th , 2024	March 19 th to Sept. 13 th , 2024

Please complete the following questions:

1. Name of Lead Organization:

Lead Organization: Name of Contact: Email Address and Phone of Contact: Type of Organization (CBO, County, Healthcare, or other):
--

2. Fiscal Sponsor (if needed):

Name: Address: Email and Phone:

3. Single Point of Contact for this Proposal:

Name: Phone Number: Email Address: Mailing Address:
--

4. What rural or remote region(s) will the project serve? (City, county, multiple counties, local coalitions, other)

--

5. Are there specific older adult populations you plan to reach (including, but not limited to, SMVF, BIPOC, LGBTQIA2S+, Immigrants/refugees, etc.)?

--

6. What is your organization's experience connecting to rural or remote older adults along with any specific populations mentioned in Question 5? How will you engage with this population?

--



7. Describe the broad purpose or goal of the project here. How will this funding support reducing social isolation within the population(s) of focus?

[Empty text box for project purpose]

8. Below are some protective factors that increase wellness, promote positive health outcomes, and prevent suicide. Which of these factors does the project seek to increase? (Check all that apply.)

<input type="checkbox"/> Social connection	<input type="checkbox"/> Spirituality
<input type="checkbox"/> Family support	<input type="checkbox"/> Sense of hopefulness
<input type="checkbox"/> Effective, accessible behavioral healthcare	<input type="checkbox"/> Civic engagement
<input type="checkbox"/> Community connectedness	<input type="checkbox"/> Volunteerism
<input type="checkbox"/> Purposefulness in life	<input type="checkbox"/> Other: _____
<input type="checkbox"/> Strong coping skills	

9. Explain how your project will impact the protective factors indicated in question 8.

[Empty text box for impact explanation]

10. Outline the project activities, timeframe to completion, lead staff, and any supporting staff or partners.

Project Activity	Timeframe to Complete <i>(ex: Sept – Nov)</i>	Lead Staff	Supporting Staff or Partners
<i>Sample activity: Develop community survey</i>	<i>Sept – October 2023</i>	<i>Jo</i>	<i>Local Public Health Office</i>

11. What aspects of the proposed activities are sensitive to the culture of the community(ies) to be served? Refer to any populations mentioned in question 5.

[Empty text box for cultural sensitivity]



12. What are the expected results of this project? Describe any planned or potential strategies to measure how the project successfully increased protective factors identified in question 8? **Note that awarded projects will have access to project evaluators to develop an individualized evaluation plan.*

13. Who are the community partners involved in this project? *(Check and specify all that apply.)*

- Suicide prevention organization: _____ Faith community: _____
- Local government: _____ Other: _____
- Community organization: _____

14. Outline the projected budget for your project below (supplies, technology, paid time/salary, overhead, etc.). Office renovations or capital investments are not allowed. Overhead cannot be more than 10% of the total budget:

Total amount of funding needed for project: _____

Amount of mini-grant funding requested (\$8,000 - \$15,000): _____

If you have additional funding sources for these activities, please explain. Indicate if the additional fundings are proposed, in process, or already awarded:

15. What follow-up or ongoing work will this project need? As this is a one-time mini-grant, how will you address any ongoing or follow-up work that emerges from this project?

**Mini-grant recipients will attend monthly virtual awardee meetings. Meetings will hold space for further updates and implementation information, evaluation process descriptions and support, time for awardee*



questions, opportunities to build statewide connections, share mutual support, and some professional development related to social connection with rural older adults.

***Evaluation support will be provided throughout the award period. After being awarded, mini-grant recipients can meet with project evaluators to build or adjust evaluation plans. The goal of this project is to have minimal reporting requirements, which mainly include a brief report of the dates and types of activities conducted and number of participants. Awardees will also have access to paper and/or online link to an anonymous satisfaction web survey for participants. Survey results will be analyzed by OHA-contracted grant evaluators and shared with you, OHA, and the CDC for planning purposes.*

Completed applications, questions, or concerns should be sent to Tim Glascock (tglascock@aocmhp.org).