



2018 Cycle 2 CATCH Implementation & Planning Grants Call for Proposals

Release Date: December 1, 2017 | Application Deadline: January 31, 2018, 2:00 p.m. CST

The Community Access to Child Health (CATCH) Program is a national initiative of the American Academy of Pediatrics (AAP) that supports pediatricians to collaborate within their communities to advance the health of all children. Through the CATCH Program, pediatricians are empowered to identify promising practices that work in their individual communities.

CATCH supports innovative pediatrician-led health projects in the initial stages of developing and implementing community-based child health initiatives. Grants of up to \$10,000 are awarded on a competitive basis annually. By serving as a clearinghouse for these community projects, the CATCH Program provides mentorship, tools and models for replication locally, regionally, and nationally and has served to inform the development of child health policy.

Special Funding Opportunities for Planning and Implementation Projects

CATCH is pleased to partner with the National Dairy Council to support pediatricians to conduct community-based projects that advance child health and well-being.

National Dairy Council (NDC) is interested in promoting all healthy foods, *including dairy foods*, and healthy communities for the food insecure population (41 million Americans including 13 million children). NDC has partnered with CATCH to support planning and implementation projects that focus on developing solutions for the health and well-being of children ages 2-18 impacted by food insecurity. Funds are available to fund up to four projects that work with a variety of community partners such as food banks/pantries, schools and community resources, including but not limited to local farmer's markets, when food insecurity is identified in their communities.

Assistance with proposal development is available

The deadline for requesting technical assistance is January 15, 2018.

- Applicants are strongly encouraged to contact their [Chapter CATCH Facilitator](#) with questions about proposal development or to discuss ideas for a CATCH Implementation or Planning Grant project. Application and budget reviews also are available from CATCH staff at catch@aap.org.
- For descriptions of previously awarded CATCH grants from 2007 to present visit our [Community Pediatrics Funded Projects List](#).
- Please note that CATCH grant selection criteria may change from year to year. Contact your Chapter CATCH Facilitator or CATCH staff before modeling your proposal on a past grant.

ELIGIBILITY AND SELECTION CRITERIA

- General pediatricians, pediatric medical subspecialists, pediatric surgical subspecialists, and fellowship trainees from the United States and its territories are eligible.
- National and Chapter AAP memberships must be current before grant funds can be disbursed.
- Priority is given to pediatricians that have not previously received a CATCH grant or have not received a CATCH grant within the last 5 years. Former grantees are encouraged to apply, although current CATCH grant projects must be completed prior to submitting another application.
- Applications are peer-reviewed by AAP District and Chapter CATCH Facilitators.

Implementation Grant

Up to \$10,000 is awarded to individual pediatricians and fellowship trainees for the *initial implementation* or *to pilot* innovative, community-based initiatives that increase children's access to medical homes*, immunization services, or specific health services not otherwise available.

Prerequisites and Priorities

- Project is for the initial phase of implementation (pilot or new program).
- Project includes plans for community partnerships.
- Budget reflects project timeline and activities.
- Project activities will increase children's access to a medical home or specific health services not otherwise available as well as assess insurance and immunization status.
- Methods for measurement of project goals and objectives described.

Priority will be given to projects that:

- Assess children's medical home* status and connects children who previously had none to a medical home*
- Increase access to needed health services not otherwise available
- Predominantly serve a population known to be underserved or with demonstrated health disparities
- Assess children's health insurance and immunization status and connects them with available resources
- Address an important need and grant activities are likely to achieve the stated goals
- Are led by a practicing community-based pediatrician who plays a significant role in the project
- Include broad-based community partnerships
- Include plans for achievable sustainability beyond the grant period
- Demonstrate creativity or innovation

Planning Grant

Up to \$10,000 is awarded to individual pediatricians and fellowship trainees *to plan* innovative, community-based initiatives that increase children's access to medical homes*, immunization services, or specific health services not otherwise available.

Prerequisites and Priorities

- Project is for planning activities only.
- Project includes plans for community partnerships.
- Budget reflects project timeline and activities.
- Planning activities will increase children's access to a medical home or specific health services not otherwise available as well as assess insurance and immunization status.
- Methods for measurement of project goals and objectives described.

Priority will be given to projects that:

- Lead to a program that assesses children's medical home* status and connects children who previously had none to a medical home*
- Lead to a program that increases access to needed health services not otherwise available
- Predominantly serve a population known to be underserved or with demonstrated health disparities
- Include plans to assess children's health insurance and immunization status and connects them with available resources
- Address an important need and grant activities are likely to achieve the stated goals
- Are led by a practicing community-based pediatrician who plays a significant role in the project
- Aim to develop broad-based community partnerships
- Include plans for achievable sustainability beyond the grant period
- Demonstrate creativity or innovation

*What is a medical home? A medical home is not a building, house, or hospital, but rather an approach to providing comprehensive primary care. A medical home is defined as primary care that is accessible, continuous, comprehensive, family centered, coordinated, compassionate, and culturally effective. In a medical home, a pediatric clinician works in partnership with the family/patient to assure that all of the medical and nonmedical needs of the patient are met. Through this partnership, the pediatric clinician can help the family/patient access and coordinate specialty care, educational services, out-of-home care, family support, and other public and private community services that are important to the overall health of the child/youth and family.

AAP Medical Home Resources: www.aap.org/medicalhome

National Center for Medical Home Implementation: www.medicalhomeinfo.org

USE OF GRANT FUNDS AND BUDGET GUIDELINES

Please note: Some of the funds that support CATCH grants may be subject to [Sunshine Act](#) reporting. Please check with your institution, if applicable, on any relevant policy. Should this apply to your grant, we will notify you when grant payment is being made. For clarification, email catch@aap.org

1. Budget must clearly support the goals and timeline outlined in your application.
2. Budget must include a complete description of each activity and expense.
3. All budget line items must include a formula.
4. Do not group multiple activities in one line item: sample budget follows guidelines.

CATCH Implementation and Planning Grants do not support:

- Internal practice or clinic enhancement
- Programs for practice or clinic patients only
- Outreach to practice or clinic patients only
- Payment for individual clinical encounters
- Physician or pediatric resident medical training
- Research projects not associated with a community-based project and community partnerships
- **Planning Grants:** cannot support the implementation or piloting of programs, or start-up funds for implementation

Unallowable Expenses

- Supplemental funding to previously awarded grants
- Supplemental funding for existing program activities
- Physicians' or dentists' salaries, fees, stipends or honoraria
- Indirect costs/administrative overhead/fiscal agent fees/payroll taxes/fringe benefits
- Building or office construction and related activities
- Capital equipment and computer hardware/software (While a precise definition of capital equipment is not provided because final determinations will be made in the context of the overall proposal, generally capital equipment is considered to be durable items of significant cost that will last beyond the length of the grant project and which will not be used by children/families who participate in the project. For example, CATCH cannot fund computer hardware/software, electronics, cellular telephones, or furniture/office equipment).
- Medical equipment, medical supplies, or pharmaceuticals (Exception: select supplies for oral health projects; eg, fluoride varnish, sealants, and select disposable dental supplies)
- Professional development (educational or training activities)
- Conference registration fees or support
- Educational materials for residents or medical students
- Educational materials for target population except when related to project activities, such as focus groups
- Health fairs or 1-day events, such as fitness runs or booths at community events or conferences
- Literature reviews
- Speaker fees or speaker travel reimbursement

FISCAL AGENT: Grantees must appoint a tax-exempt fiscal agent once they receive their award notification to avoid personal tax liability. Per federal tax law, individuals would be responsible for the taxes on unexpended funds at year-end. Individuals would also be responsible for the taxes on expended funds for which an expense report had not been submitted at year-end. The institution or organization that acts as fiscal agent is not the grantee or co-grantee.

BUDGET DEVELOPMENT

This table provides a list of budget categories, expenses and the maximum allowance for each category.

Activity Description This list of activities is not comprehensive.	Include description and formula for all expenses.	Maximum Allowance
Personnel <ul style="list-style-type: none"> • Community asset mapping • Design and production of needs assessment survey • Outreach • Care coordination • Survey translation • Data analysis • Grant writing • Project coordination/administration 	\$ per hour x number of hours Describe staff person, activities, and responsibilities.	\$7,000
Meetings <ul style="list-style-type: none"> • Focus groups • Planning/collaboration • Task force • Advisory board meetings 	Meals, beverages, staff transportation, and meeting materials	\$2,000
Participant (parents, caregivers, children) Expenses <ul style="list-style-type: none"> • Child care • Transportation • Incentives 	Specify	\$4,000
Resources, Equipment, & Educational Materials <ul style="list-style-type: none"> • Support program activities 	Specify	\$4,000
Promotion/Supplies <ul style="list-style-type: none"> • Flyers, posters, mailings, media • Printing • Telephone • Consumable office supplies 	Specify	\$2,000
Technology Development <ul style="list-style-type: none"> • Web site • Mobile application 	Specify	\$3,500
Other program expenses <ul style="list-style-type: none"> • Activities that are not listed above 	Specify	TBD based on need
TOTAL MAXIMUM ALLOWANCE \$10,000		
If your budget includes salaries, please justify by relating each staff position to a specific outcome.		

Sample CATCH Implementation Grant Budget

Activity	Description and Formula	\$ Amount
<u>Personnel</u>		
Outreach to community programs	Contacting community programs to determine suitability for inclusion in the program. 30 hrs@\$15/hr	450
Project coordinator	Recruitment of patients in the ED (must be bilingual Spanish); entering patient details into text messaging platform; disseminating information regarding the program; assessing follow up at the Adolescent Health Center/Dental/Mental Health/Optometry. 8 hrs/wk x 25 wks@ \$15/hr	3000
Evaluation/Data analysis	Flat rate \$1000	1000
Translation of text messages into Spanish	Translating text messages into Spanish and ensuring there are 160 characters (standard text message length). 30 hrs at \$15/hr	450
<u>Meetings</u>		
Focus group meetings with youth for feasibility of the texting program by those patients enrolled	Food for 3 meetings @ \$100/meeting	300
<u>Participant Expenses</u>		
Participant incentives	6 youth per meeting x 3 meetings 18 gift cards @\$25 ea	450
<u>Promotion/Supplies</u>		
Flyers for the ED	Flyers to be distributed within the ED informing patients about the program. 1,500 flyers @ \$0.25 each	375
Office supplies/telephone usage	Consumable office supplies, as needed @\$250	250
<u>Technology</u>		
Text Messaging	Developing the content and creating the text messages for the program; ensuring that the text messages are delivered appropriately; carrying out follow up for all patients in the program. Estimated @\$1,725	1725
	TOTAL	8,000
TOTAL MAXIMUM ALLOWANCE \$10,000		

Sample CATCH Planning Grant Budget

Activity Description	Description and Formula	\$ Amount
<u>Personnel</u>		
Community asset mapping	\$37.50/hr x 40 hrs = \$1,500	1500
Translation	Surveys, tools, flyers: \$30/hr x 35 hrs	1050
Administrative assistant	Clerical support, meeting preparation, maintain project goals checklist, collect meeting sign-in sheets, accounting support: \$15/hr x 150 hrs	2250
Data analysis	\$30/hr x 6 hrs	180
<u>Meetings</u>		
Collaboration/planning meetings with community partners and project staff	4 meetings x \$200 per meeting for food, beverage, materials for 10 participants	800
Focus group meetings to identify barriers to health care	4 meetings x \$100 per meeting for food and beverage for 10 participants	400
<u>Participant Expenses</u>		
Participant travel to/from focus group meetings	40 bus passes @\$5.00 each	200
Child care during focus group meetings	\$60 x 4 meetings	240
Focus group incentives	\$25 gift cards x 40 participants	1000
TOTAL		7,620
TOTAL MAXIMUM ALLOWANCE \$10,000		

APPLICATION PROCEDURES

- Applications must be submitted [online](#).
- Attachments to applications are optional and not scored.

Attachments may not be used to respond to or supplement responses to questions contained within the application.

- Maximum four 1-page attachments; for example, minutes or agendas from community meetings; flyers; letters of support, especially from AAP state chapters and current or future community partners. Each attachment must include the applicant's full name.

KEY DATES AND DEADLINES

January 15, 2018

You may request assistance with proposal development from either your [Chapter CATCH Facilitator](#) or CATCH staff at catch@aap.org up until this date.

January 31, 2015, 2 p.m. CST

Application deadline.

By May 1, 2018

Applicants receive e-mail notice of funding decisions.

By August 1, 2018

Submit signed award documents; projects are 12-month in length and may begin upon receipt of funds.

REPORTING PROCEDURES

Grant funds will be disbursed in one installment at the start of the project. A final report including financial reporting will be due 30 days after the 12-month completion date, or extended completion date. One 6-month extension is allowed.

PUBLICITY

The AAP may include information about your project in its program evaluations, publications, and promotional and technical assistance materials. In addition, descriptions of CATCH grant-funded projects are posted on the AAP Community Pediatrics [Funded Projects List](#).

The CATCH Program is made possible through the support of Pfizer, Inc, with additional support from various AAP sections and councils and individual donations through the AAP Friends of Children Fund.

On behalf of the children, the CATCH Program thanks its financial supporters, community partners, District and Chapter CATCH Facilitators, AAP chapters, AAP staff, the AAP membership, and most importantly its pediatrician CATCHers.

American Academy of Pediatrics

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