



R-COOL-Health Scrubs Camp Grant - Year 14

Funding Period (November 4, 2022 – April 30, 2023)

PROJECT DESCRIPTION:

The Rural Collaborative Opportunities for Occupational Learning in Health (R-COOL-Health) Scrubs Camp is an exciting program, supported by the Center for Rural Health (CRH) at the University of North Dakota School of Medicine & Health Sciences, focused on rural students in grades 5-12. The overall purpose of the program is to increase awareness, interest, and understanding of health careers available in rural North Dakota through creative and interactive activities.

PROJECT DETAIL:

Eligible Applicants: Rural North Dakota (for the purposes of this program, rural is defined as any geographic area beyond the cities of Minot, Bismarck/Mandan, Grand Forks, and Fargo/West Fargo) K-12 schools and healthcare facilities such as hospitals, clinics, community health centers, long-term care facilities, and public health units.

Required Partners: Applicants ARE REQUIRED to actively involve each of the following: 1) local/regional K-12 school system(s); 2) healthcare entity/facilities (i.e. hospital, clinic, long-term care facility, Emergency Medical Services/ambulance squadron, local public health unit, etc.); 3) local economic development and/or local job development authority or similar entity.

Suggested Partners: Local colleges, technical schools, and extension agencies/centers.

Target Audience: Rural students in grades 5-12. Applicant may select which grade(s) they will focus on.

Applications will be considered nonresponsive to guidelines and not eligible for selection if they propose: A career fair format (i.e. students have minimal (less than 20 minutes) exposure to career presentations); to hold a camp after April 30, 2023; focus on only one type of health career; or a camp less than five hours long.

Funds Available: Up to \$25,000 will be made available to support the planning and implementation activities of Scrubs Camps. Funding will be awarded on a tiered system based on the number of previous years a camp has been awarded with a Scrubs Camp grant, with a maximum of \$2,500 per award. Funds will be provided on a cost-based reimbursement basis - you will need to submit an invoice on your letterhead and receipts (or copies) for allowable expenditures associated with the camp. To be considered for funding, the grant application must be received by the deadline (late submissions will only be awarded if extra funding is available), comply with all of the grant components, and, if previous grant awards were received, how those funds were utilized will be considered. Scrubs t-shirts for participants may be awarded to communities not receiving grant dollars based on funding availability (value of approximately \$4/shirt).

# of previous years the grant was received	Percent Awarded*	Dollars Awarded*
0-1	100%	Up to \$2,500
2-4	60%	Up to \$1,500
5-7	35%	Up to \$875
8+	20%	Up to \$500

*Funding will be awarded to the camps that meet all of the award criteria and have received the least amount of funding in the past up until the \$25,000 has been expended.

IMPORTANT DATES

September 8, 2022
1:00-1:30 pm Central

Technical assistance Zoom meeting for interested applicants
Zoom link: <https://und.zoom.us/j/96680702531>
Dial-in: +1 312 626 6799; Meeting ID: 966 8070 2531

October 20, 2022

Proposals must be received by using the online system by 4:00 pm Central
Submit proposal at <https://tinyurl.com/Yr14ScrubsCamp>

November 1, 2022

Notification of awards

November 15, 2022
10:00-10:30 am Central

Required grant recipient informational Zoom meeting
Zoom link: <https://und.zoom.us/j/97600314852>
Dial-in: +1 312 626 6799; Meeting ID: 976 0031 4852

November 22, 2022

Date and location of camp must be submitted to CRH

April 30, 2023

Camp must be completed and funds expended

*****Requests for reimbursement and all additional required materials (see online checklist) must be received within three weeks from the date the camp is held.*****

Timeline: All camps must be held between November 1, 2022 and April 30, 2023. Please be mindful of the North Dakota weather when planning your camp. For example, if you frequently have challenges with spring flooding, it is suggested you avoid scheduling the camp during that time and be prepared with a back-up date prior to April 30.

There is a sample proposal, Memorandum of Agreement (MOA), agenda, and line-item budget provided as examples on the [R-COOL-Health Scrubs Camp webpage](#).

Proposal Format Details: The full proposal will be submitted online through Qualtrics. ***You will need to upload, as attachments, all of your MOAs, your agenda, and your line-item budget when you complete the online submission.*** MOAs may be scanned and submitted as one document (recommended) or uploaded individually. If you are uploading them individually and have more than four MOUs to upload, you will need to email additional ones to brittany.dryburgh@und.edu.

Submission of Proposals: Proposals must be submitted (not in-process) by **4:00 pm Central on October 20, 2022**. Only proposals submitted through the online system will be accepted. [Submit your proposal](#).

Proposal Review Process: Proposals will be reviewed by a panel selected by CRH.

APPLICATION GUIDELINES:

Special consideration will be given to applicants that:

- Are applying for the first time
- Work collaboratively with schools and healthcare facilities in surrounding areas (i.e. regional approaches)
- Demonstrate a solid planning process
- Demonstrate creative and interactive activities
- Include a variety of healthcare careers

To apply, interested parties must submit the following:

(Note: When using proposals from previous years, it is advised to carefully review dates/numbers/partners, program details, etc.)

1) Camp/Organization Information:

- Lead organization's name and primary contact person's information*
- Site coordinator's contact information (if different from primary contact)*
- List of collaborative organizations and facilities
- Communities involved (ex: if multiple communities attend one school, list all communities, not just the name of the school or the town where the school is located)
- Legislative districts of the communities involved in the camp
- Date of camp, start and end times
- Physical location/address of camp (if known)
- Amount being requested through grant

**Contact information includes the following: full name, title, organization name, mailing address, email address, and phone number.*

PROPOSAL COMPONENTS:

2) Project Description: *(all of the following items are required to be submitted for funding consideration)*

- a. The goal(s) of the Scrubs Camp
- b. Projected number of students that will participate
- c. Grade(s) targeted
- d. Describe how the Scrubs Camp will be promoted and any selection process for participants (if applicable) or if it will be full grades attending
Note: Each Scrubs Camp will be required to include the CRH logo and Scrubs Camp penguin graphic on all promotional materials
- e. Describe the collaborating organizations and their roles and commitment to the Scrubs Camp. The applicant must identify a minimum of one entity from each of the following:
Local/number of schools in a region – strongly encourage collaboration across a region
Healthcare facilities (hospital, clinic, long-term care facility, etc.)
Local economic development and/or local job development authorities
Other partners (optional)
***A signed MOA (use the template provided online at <https://ruralhealth.und.edu/projects/scrubs-program/camps>) with each partner delineating their contribution and roles is required to be uploaded to submit with your grant application.* You must use the online template MOA and customize it to fit your camp's needs.**
- f. Describe if the initiative being applied for is new or an expansion of a current project
- g. Using the Scrubs Camp agenda (sample online) that you have created, describe how you plan to engage the students in your camp. Describe the *innovative and interactive* activities that will be used to make your Scrubs Camp unique and exciting for students. Scrubs Camps must be multi-professional. The camp must be a minimum of five hours long. Please include five minutes at the beginning of the camp in the timeline/schedule so that the CRH staff can share a brief overview of the CRH programs
- h. Describe how you will engage and/or inform parents regarding health career opportunities available to their children (i.e. PTO/PTA presentations, handouts, brochure, and/or a separate parent session prior to or during the camp)
- i. Describe the process and criteria you will use to solicit and select the appropriate speakers
- j. If applicable, include lessons learned from past Scrubs Camps or other health career related activities

3) Budget and Budget Narrative *(see example in sample proposal – the costs listed are just examples, please do not use these numbers as references for your budget)*

Provide a line-item budget (*upload as attachment as part of your proposal submission*) and explain in the narrative (budget narrative) how the funds (maximum of \$2,500) will be used. Include in-kind funds in your budget. If you include miscellaneous expenses, include explanation of what will be included in that line-item.

The line-item budget lists costs associated with the proposed budget. The budget narrative is where you describe in detail how the funds requested for each line item will be spent and how the amount was determined. Use your best judgment when projecting expenses.

Allowable Expenses

Site coordinator for program (up to \$1000)
Transportation
Supplies/session expenses
Food – *healthy* food choices must be selected.
Duplicating
Advertising

Non-allowable Expenses

Payment to a higher education institution
Bricks and mortar
Computers/laptops/LCDs
Indirect costs
Door prizes
Facility equipment (ex. exercise equipment)
Additional shirts - *Scrubs t-shirts will be provided at no cost to the grantee**

All Scrubs Camps are required to provide a Scrubs shirt to each participant which must be distributed in time to be worn during the camp. You may also provide Scrubs shirts to presenters/volunteers/camp staff. The lead applicant will submit the number and sizes to CRH who will order, purchase, and arrange for delivery the morning of the camp (or they may be picked up from CRH by the grantee prior to the camp). The required order form (posted on the website) must be received **no later than 3 weeks prior to the date of the camp.*

4) Sustainability

Grants are considered seed funding. Please describe the plan for supporting future Scrubs Camps in your community if and when the R-COOL-Health Scrubs Camp grant funds are not available or are reduced.

5) Evaluation/tracking

Each Scrubs Camp is required to submit the following completed forms and final report within three weeks following the camp (*please confirm that you will complete and submit the required forms/information and final report in your grant application by the required deadlines*):

1. Typed roster of participants and contact information using the required spreadsheet (online). All information must be completed
2. R-COOL-Health Scrubs Camp Student Evaluation Forms: Sections A and C on the sample evaluation must be asked on each camp's evaluations in the format that is shown or funding will not be awarded. Part B may be customized to fit your camp
3. R-COOL-Health Scrubs Camp Presenter Evaluation Forms
4. Photo/Video waivers: (If there are any students who are not to be photographed/recorded, notify the onsite CRH staff immediately prior to the start of the camp so that they are aware of who to avoid in photos/videos).
5. Online final report

Reporting Requirements: A final online report is required to be completed and received by CRH within 3 weeks following the date of the Scrubs Camp.

**Please Note* Reimbursement will be processed upon receipt of all required documents. Incomplete reporting, documentation of expenses, etc. will result in delay/cancellation of reimbursement. Be sure to check the website to make sure you are using the most current forms, as changes are made periodically.*

ADDITIONAL INFORMATION:

The following resources will be available online (http://ruralhealth.und.edu/projects/scrubs-program/forms_doc) for site coordinators:

- Site Coordinator Guide
- Site Coordinator Checklist
- Student Participant Roster Form
- Scrubs Order Form
- Sample Agenda
- Sample Confidentiality Agreement Form
- Photo-Waiver Form
- Student Application Form
- Student Evaluation Form Grades 5-6
- Student Evaluation Form Grades 7-12
- Document Header
- Penguin Graphic
- CRH logo
- Promotional Poster Template
- Health Careers Flyer 5-12
- Health Careers Brochure for Parents
- Sample Parent Letter
- Job Shadowing Application Form
- Reasons for Collecting Contact Information
- Presenter Evaluation
- Sample Presenter Information Form
- Presenter Q & A

Year 14 Best Scrubs Camp Award: All camps will be considered for the annual “Best Scrubs Camp Award” to be presented in June at the annual Dakota Conference on Rural and Public Health. At least one CRH staff person will be attending each camp. The awardee will be selected, by CRH staff, based on the following: most innovative, well-coordinated, hands-on, fun, and engaging activities with students. Additional criteria that will be considered are community partner involvement and support of the camp.

Direct questions to: Center for Rural Health, University of North Dakota School of Medicine & Health Sciences
Brittany Dryburgh, Project Coordinator, (701) 777-8002, brittany.dryburgh@und.edu.

EXAMPLE BUDGET SPREADSHEET/BUDGET NARRATIVE

Budget Narrative

The budget shows that our grant request (\$2,014) is less than the allowable amount (\$2,500) because of the generosity of the partners involved and the in-kind contributions.

1. **Transportation:** We plan to use two mini-buses for transportation of the students. The two bus drivers will receive a stipend of \$100 each plus an estimated \$20 (5.5 gallons x \$3.59/gallon of fuel) to pay for the gas to transport the students between the hospital, nursing home, clinic, and school.
2. **Food for students and helpers:** We are requesting reimbursement for the morning and afternoon snack and noon lunch. All food purchased will be healthy choices – apples and peanut butter for a morning snack, carrots and hummus for an afternoon snack, and a sandwich, baked chips, pasta salad, and milk for lunch. Water will be provided at both snacks. The morning snack will be \$64 (\$2 per student x 32 students/helpers), lunch will be cost \$192 (\$6 per student x 32 students/helpers), and the afternoon snack will be \$64 (\$2 per student x 32 students/helpers).
3. **Coordinator:** The coordinator will be given the allowable amount for planning, coordinating, supervising, and travel. This amount will be split amongst two people that will be working together to coordinate the camp to assist in the payment of their salaries. The \$1,000 will pay for 100 hours of the coordinator's time (100 hours x \$10/hour).
4. **Supplies:** Supplies will include an estimated 2 boxes of gloves (small and medium) at \$5 each totaling \$10; 2 boxes (16 sets/box) blood pressure and thermometer supplies at \$15 each, totaling \$30; 2 boxes (16 sets/box) glucose testing supplies at \$25 each, totaling \$50; disability supplies, such as 14 blindfolds (\$2/each totaling \$28), 8 rolls of tape (8 rolls at \$6/each totaling \$48), 2 cans of liquid thickener (\$12/can totaling \$24) for a total of \$100; as well as miscellaneous supplies that the speakers might request for an estimated \$100. We estimate the total to be \$290 for supplies bought through the grant. X-rays, lab slides, emergency supplies with the ambulance, canes, walkers, wheelchairs, and needle-less syringes will be provided through in-kind donations from the hospital, clinic, and long-term care facilities for a total estimated value of \$800. All of the speakers have donated their time for an estimated \$500.
5. **Other expenses** will be student folders (\$2/folder x 28 students totaling \$56); copies (\$550 pages at 0.10/copy totaling \$55); postage (\$0.55/stamp x 55 mailings for presenter agreements, thank yous, invites to presenters, students, and helpers; 1 box envelopes at \$2.75 totaling \$33); and advertising (estimated at \$40 for newspaper ad at a discounted rate). Each student will receive a folder with the flyer and other health professions information in it (professions booklet, Scrubs brochures, Career Cluster document). It will also include information on how students can sign up to job shadow at our local facilities. An ad will be put in the community papers in the area to let people know that this event is occurring and bring attention to the need for healthcare professionals. The Chamber and school newsletters, as well as the newspaper and radio, will do some publicity for us. Postage will be used for sending presenter agreements, mailing bills, and communicating with schools.

In-kind contributions will include the ambulance, all career speakers' time, and the rooms used at the hospital, nursing home, clinic, and school.

The total budget request is for \$2,014.00, with the total cost of the camp projected to be \$3,314.00. A conservative in-kind calculation is \$1300.

Budget Spreadsheet:

EXPENSES	GRANT FUNDS	IN-KIND CONTRIBUTIONS
1. Transportation		
Driver Stipends (\$100 x 2)	\$200.00	
Fuel	\$20.00	
Ambulance		\$100.00
2. Food for Students and Helpers		
AM snacks (\$2 x 32)	\$64.00	
Lunch (\$6 x 32)	\$192.00	
PM Snacks (\$2 x 32)	\$64.00	
3. Site Coordinator		
Plan, coordinate, travel, supervision	\$1,000.00	
4. Supplies/Program Expenses		
Gloves	\$10.00	
Glucose Testing	\$50.00	
Lab Slides		\$100.00
Blood Pressure Kits and Thermometers	\$30.00	\$300.00
Career Speakers (\$25 x 20)		\$500.00
Radiology/X-ray Supplies		\$100.00
Disability Equipment	\$100.00	\$100.00
Misc. Supplies	\$100.00	
5. Communications		
Student Folders (\$2 x 28)	\$56.00	
Postage	\$33.00	
Copies	\$55.00	
Newspaper and Radio	\$40.00	\$100.00
Subtotal	\$2,014.00	\$1,300.00
Total		\$3,314.00

*NOTE: These numbers are just samples. Please research to find what the cost of items for your specific camp would be.

SAMPLE

MEMORANDUM OF AGREEMENT BETWEEN

[Name of your facility]

AND

[Partner's Name]

1. PURPOSE: The purpose of this Memorandum of Agreement (MOA) is to formalize an agreement between the [Name of Your Facility] and the [Partner's Name] to form a partnership to hold an R-COOL-Health Scrubs Camp. The areas of responsibility and relationships presented herein provide the concept under which the program will be executed.

2. MUTUAL INTEREST OF THE PARTIES: This Scrubs Camp is of mutual interest to the parties because it is educationally beneficial for the students attending the camp to learn about different health professions, duties associated with each profession, and required educational requirements.

3. RESPONSIBILITIES OF THE PARTIES: *The following paragraphs identify responsibilities of the organizations involved:*

a. *The [Name of Your Facility] Responsibilities*

[Name of Your Facility] shall provide [Partner's Name] with goods and/or services in accordance with the purpose, terms, and conditions of this MOA and implementing arrangements, as appropriate. Specifically, [Name of Your Facility] will provide the following services and/or goods.

- 1) Coordinate and facilitate the Scrubs Camp logistics, including transportation, evaluation, facility use, etc.
- 2) Provide educational and interactive activities for the student participants
- 3) Provide snacks and lunch for the participants, speakers, and volunteers
- 4) Reimburse presenters for the expenses associated with their presentations as long as receipts are submitted to the [Your facility] finance department within 10 days of the camp's conclusion; or order supplies for the presenter if supply order is submitted to the Scrubs Camp Coordinator a minimum of 30 days prior to the camp
- 5) Provide facility space for the Scrubs Camp
- 6) Supervise the students at the camp
- 7) Submit all required documentation to the Center for Rural Health at the conclusion of the camp per the grant requirements

b. *The [Partner's Name] Responsibilities*

- 1) Provide advertisement for the Scrubs Camp in the [Name of local newspaper]
- 2) Promote the Scrubs Camp through donation of door prizes to be given out during the camp
- 3) Provide a speaker for the Radiology Tech session of the Scrubs Camp

4. DISPUTE RESOLUTION: In the event of a dispute between the parties, [Partner's Name] and [Name of Your Facility] agree to use best efforts to resolve the dispute in an informal fashion through consultation and communication, or other forms of non-binding alternative dispute resolution mutually acceptable to all parties.

5. **EFFECTIVE DATE:** This agreement becomes effective upon the date of the last approving signature and will remain in effect until April 30, 2022.

6. **ACCEPTANCE OF AGREEMENT:**

[Your Facility Representative Name]
[Your Facility Representative Title]
[Your Facility Mailing Address, City, State, ZIP]

DATE

[Partner Representative Name]
[Partner Representative Title]
[Partner Mailing Address, City, State, ZIP]

DATE

THIS IS JUST A SAMPLE – YOU MUST CUSTOMIZE THE ONLINE TEMPLATE MOA TO WORK FOR YOUR SPECIFIC CAMP!