

Helpful Hints for Filling out Office of Oral Health (OOH) FY 2017 Oral Disease & Injury Prevention Program Grant Application

General Tips for Filling out the Application

- Applications are expected to be filled out completely and thoughtfully. If required information is left blank, it will be returned to you.
 - Please see below for guidelines to complete the RFA
 - If you need further clarification or require assistance, please do not hesitate to contact us by emailing dhmh.ugaoralhealth@maryland.gov.

Differences between the Oral Disease & Injury Prevention RFA and the Dental Sealant RFA

- Based on the nationwide emphasis on Dental Sealants as an evidence-based practice in prevention, the OOH has apportioned a certain percentage of funding that has previously been awarded to oral disease and injury prevention programs, and dedicated that funding specifically to dental sealant programs.
- If a LHD will not be conducting dental sealant programs, it only needs to complete the Oral Disease & Injury Prevention RFA. (Note: If any sealants are done at the health department clinic, they would be reported on the Oral Disease and Injury reporting form.)
- If an LHD is conducting ONLY a dental sealant program (either a renewal of an existing program or a pilot this year), it only needs to fill out the dental sealant RFA.
 - Those applying for renewals will need to be aware that there will be new data collection and reporting requirements.
- If an LHD plans to conduct both dental sealant and other programs, it needs to fill out both RFAs.
 - If awarded funding, funds and expenses will need to be tracked separately; instructions will be made available for each.

Section I. Program Description

Section I – This section focuses on the programs description and evaluation measures. When writing the narrative and descriptions in these sections, here are some useful guidelines to keep in mind:

A. Project Narrative and Funding

- Include a thorough description of your current program.
 - Who does it target?
 - How will the program be evaluated?
 - What is the annual anticipated reach?

- Include supporting data for best practices from previous years (if applicable).
- Provide a description of your project, including partnerships with organizations, the scope of the proposed initiative, and what activities the funding will support, including:
 - Infrastructure
 - Supplies
 - Salaries, etc.

Applications may be returned if values in “Annual Anticipated Reach” column are unrealistic or do not relate to programs indicated in earlier sections (i.e. do not include an estimate for oral cancer screenings if you only plan to visit schools for fluoride varnish applications).

- Table 1 – Children Clinical
 - “Number of Patients Seen” (children) – the number of child patients seen (unduplicated) in any of your clinics.
 - “Number of Clinical Visits” (children) – the number of child clinical visits (can mean multiple visits within the year per unduplicated patient).
- Table 2 – Off-Site Component (School-Based/Linked/Mobile) (Other than sealants)
 - All of the items refer to the total number of children since it is not always possible to determine whether a child was previously seen.
 - Only looking at patients, not visits, since off-site activities are more difficult to categorize.
- Table 3 – Adult Clinical
 - “Number of Patients Seen” (adults) – the number of adult patients seen (unduplicated) in any of your clinics.
 - “Number of Clinical Visits” (adults) – the number of adult clinical visits (can mean multiple visits within the year per unduplicated patient).
- Table 4 – Oral Cancer
 - Total number of oral cancer screenings anticipated for the year.
 - Total number of oral cancer referrals for biopsy for the year.

The following hints are for new programs that do not have existing data to calculate estimates for number of services rendered in schools:

- Identify the school
- Determine the population at the school
- Note the number of permission slips returned to receive services (if applicable)
- Determine the number of providers that will be visiting the school
 - What types of services will be provided in the schools?
- Number of days planned at each school

Note: Data from all programs (including those funded by other sources) will need to be provided in the quarterly reports to meet State Stat requirements.

2. Please indicate what organizations will be participating within the scope of the proposed initiative and what activities the funding will support.

Section II: Budget and Application Submission

- Indicate what activities the funding will support
- See attached Budget Instructions to complete Budget Form.
- See attached Budget Narrative Guidelines to complete the Budget Narrative Template.
- NOTE: In your e-mail's subject line, please reference "Your county name and FY 2017 Oral Health Application."

Additional Questions

- Can funds be used for travel to out-of-state meetings?
No, grants are exclusively intended to assist local programs in providing direct education, prevention, and treatment services to constituents.

Attachments

- Title I Schools