



## Resuscitation Quality Improvement – Grant Handbook for Public Safety First Responders

# RQI Grant Handbook for Public Safety First Responders

A guide to identifying and applying for grants for 911 and prehospital agencies

The purpose of this manual is to assist your agency in finding funding sources and applying for grants.

Disclaimer: This handbook is intended as a guide to assist your agency in sourcing, applying for and managing grants.

This is a guide only, and not intended to replace local and agency procurement laws in your jurisdiction.





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### Why Grants?

**Grants are an excellent way to fund programs that your agency may not have the ability to fund. Many agencies shy away from grant writing because they do not have an experienced grant writer on staff, or access to one. Applying to and managing grants can be intimidating, but it is a myth that they are always difficult and time consuming. Most grants that could help fund a program like RQI are accessible, manageable and extremely effective ways to improve the level of service in a community.**

### Types of Grants

#### Federal/State

Federal and state grants are common for larger programs, or programs that are carried out over multiple years. Generally speaking, these grants are on longer cycles, and funding is not typically immediately available. For example, applications open in the spring, awards are announced in the fall and funding does not become available until spring the following year. Many agencies that deal with federal or state grant must plan ahead, sometimes by 1–2 years – especially if your agency is on a biennial budget system.

#### Private/Community

There are many entities (both local and national) that provide funding for programs. Most large companies have foundations with grant programs for various types of initiatives, it just takes some research to find one that meets your needs.

Private and community grants vary in their grant funding cycles. Funding opportunities may be quarterly, annual or rolling.

A community foundation is a grantmaking foundation that pools resources of local businesses and families to fund projects with local impact. Most communities have a community foundation. Some are tailored to serve specific communities – say a religious minority community. Most are geared toward geographic communities. They are funded by family endowments and companies that believe in supporting community groups. There are more than 750 community foundations across the nation. Community foundations are usually run by a board of directors who make funding decisions.

Another advantage of a community foundation is that they can assist you in fundraising. They have the ability to act as your fiscal sponsor, which means they are the nonprofit either doing fundraising on your behalf or managing funds you raise. This is usually at the cost of a small percentage of your fundraising efforts and pays for their staff time to manage the funds and the accounts. Fundraising is a good alternative if your community is invested in your project. You can do community fundraising such as a 5K run or an auction, or you can ask the community foundation to work with their donors to fundraise within the families or companies that gift to their open grants. It is recommended that you communicate with your agency's legal and fiscal departments before engaging in any fundraising efforts. This will keep you out of trouble with any local or state laws.

#### Corporate Giving

Most communities have companies or large corporations that operate within their geographic region. Many of these companies are willing to fund programs or equipment. This type of giving requires you to develop a relationship with someone at the company. Often your own employees have connections to company leadership. Make an appointment with the CEO and have a discussion about whether they are willing and able to help. Sometimes the company will donate to the cause outright. Other times they will recruit their employees to make a fundraising effort and then pool those efforts to donate to a cause.



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### Starting the process

#### Before starting the grant process, consider strategic partnerships...

For example, a strategic partnership memorialized through an interlocal agreement may make a communications center eligible for grants. This is due to the lack of classification for 911 centers – are they fire, are they EMS? Are they both or neither – depends on how your communications center is structured. If you are multidiscipline, this can benefit you.

#### What a grant can and cannot do for your agency

Grants can fund a project for a certain period. They cannot do so in perpetuity. It is the expectation that once the grant period expires, the agency will have the ability to fund their project through their normal budgeting channels if they want to continue the program. There are exceptions to this. For example, a grantmaker may see the exceptional benefit of the program and opt to extend the program for additional years.

Grants cannot pay for other programs or equipment at your center outside of what the approved grant application states. It is not a line item that can be shifted to make other purchases or cover staffing shortages.

#### Preparing to apply for grants

##### Identifying the project

The first stage is to identify your project and have as much information on hand as possible. For RQI programs, that includes a quote for services. You should research the number of cardiac arrest calls (including suspected or confirmed cardiac arrests) and your area survival rates (if available) and gather any information related to those calls. Generally, you should have a minimum of 3 years' worth of data. Five years is preferable so you can identify trends.

##### Stakeholders

It is important to involve your stakeholders in the process of starting and funding this program. The first place to start is your medical director for your agency (if you have one). If you have a board of directors, approach your board and work with them to determine their support of the project. RQI can assist you with providing the information and data needed to take to your stakeholders. Determine if the board can fit the project into your annual budget and a timeline for that funding. If not, ask if it is possible to do a mid-year budget adjustment to fund the program.

After you have gauged the board or executive level interest, the next conversations should be with the Fire/EMS jurisdictions you serve. Their out of hospital cardiac arrest (OHCA) outcomes are directly tied to your performance as telecommunicators and chances are, they want to be a part of this program. They may also have a funding source or have the ability to fund through their budget. They may already use the RQI Prehospital Healthcare Provider solutions and are familiar with our objectives. If not, RQI can provide information on the EMS solutions offered, and your agencies can join forces to find funding solutions that will increase the survival rates in your community. If they are not available or ready to join forces, these contacts may have ideas of where you can find funding, so make sure to ask. Sometimes a referral to another contact is all you will need to find the right person.

If your communications center has a fiscal unit or your agency is part of a larger organization, you need to communicate with your fiscal office. This is extremely important, as they will be in charge of seeking reimbursement and managing other aspects of the grant. Failure to do this can cause serious problems, so make sure you work with your fiscal staff.

##### Research

Now it's time to find possible funding sources. Start with internet searches and conversations with friends and colleagues to find local community foundations.

Don't shy away from grants that require "in-kind" contributions. If your agency can put up a percentage of funds for the in-kind contribution, great! However, there are other ways to contribute that grantmakers will accept, including your staff time managing the grant. If the application doesn't specify what the in-kind contribution will be, call and ask. If they will accept staff time in the program as in-kind, you will need to have estimates on what that looks like. Generally speaking, it means the person managing the grant's time prorated out over the estimation of the amount of work it will take to manage the grant and the RQI program. The reason some grantmakers will accept this is that it saves them from funding administrative time and that funding can be used for another grant.





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### Information Gathering

It is important to gather information about your agency and your statistics before you begin your grant applications. Prepare documents with the following information:

- Geographic area you serve, including populations, special populations and census data. You can find census data at [www.census.gov](http://www.census.gov).
- How many cardiac arrest 911 calls your agency has taken in the past 12 months (or longer). It is preferable to know how many are confirmed vs unconfirmed.
- Survival rates, if available (your EMS agency should be tracking this information). You can also check with your hospital system or medical director to find this information if it is tracked.

## Grant Applications

Once you have identified grants that may be available and gathered information, you are ready to work on your application.

Read the application outline very carefully. A simple error could render your hard work invalid, with the grantmaker discarding or rejecting your application. Some grantmakers simply require a letter from your agency. Others require a detailed application form. Make sure you understand the rules before you start. Some grants even require a specific font or format be used. Don't be intimidated by this, the grantmaker simply wants consistency as they will be reviewing a lot of applications.

### Application forms

Read the form carefully before you begin. Make sure you have all of the information handy that they are requiring. Make a list of any questions you may have about the application itself and go through their application guide to find the answers. Only then should you contact the grantmaker to answer a question. If the information is easily found in their guide and you are calling or emailing them those questions, it does not look favorable for your agency. It is also best to contact them once, not multiple times to ask questions.

### Letter applications

If no guidance is given in the content of the letter, it is recommended that you write a concise document that is easy to read and tells a story. Imagine being the board of a foundation and reading hundreds of pitch letters. Your letter should be engaging, concise and informative. There is a delicate balance of writing an engaging letter with enough information and going over the top and writing too long of a letter. See an example letter on Page 6.

Your letter should be a high level overview (not a dissertation) and should include:

- |                                       |   |
|---------------------------------------|---|
| • A short story outlining the “why”   | • Performance measurements                |
| • The need/problem that needs solving | • The goals and objectives of the program |
| • The solution                        | • A call for action                       |
| • The cost of the program             |   |

If the grantmaker requires additional information you should provide everything they have asked for. Some may require a brief introduction letter as described above and then if they are considering your program, request an executive summary or specific documents. You should always have this information ready because even if you don't need it for the grant process, you will need it during the grant management phase. You should be able to justify your needs in a concise manner. You should also have already planned a method for evaluating the effectiveness of the program and be able to communicate the method to the grantmaker.

### Cover Letters

If the application requires a cover letter, it should be a concise summary of what is listed in the “letter application” section. See an example letter on Page 7.



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### RQI prepared/standard language

Due to the technical requirements of grants, it is recommended you use the prepared language provided by RQI. This is to avoid making promises or statements about the program that may not be part of the services we provide. Anything written on your application your agency is locked into. It is important to ensure that your agency is not making promises that cannot be delivered or your agency may be required to pay back funding.

### Finalizing your application

When finalizing your application, it is important to have another set of eyes check it for errors. Proofread and double check all requested information is there and correct. Review the rules of the grant and ensure your agency can abide by those rules.

### Grant management overview

Congratulations, you've received a grant! As part of the notification process, you should have received a letter outlining what you have been granted along with any reporting requirements. Depending on the grant source this can be a simple letter with very little information or requirements, or it may be a large document outlining in fine detail what you need to do.

Review all information very carefully. If you received partial funding (this is rare) your agency will need to decide if that funding will be accepted and how you will finance the remainder. Your agency has the option to reject partial funding.

Some grants will be simple gifts and require no further action at all. Most grants will require some sort of reporting, whether it is minimal or more involved. Generally speaking, you can expect to be required to provide a short quarterly report and an end of year report. At the end of the grant term and the end of the project, you may be required to provide a final report. Once you know the details of what will need to be provided, set up a process to ensure that data is collected regularly so that you are not scrambling to provide data on a due date. Submitting late reports can cause funding to be withdrawn or cause your agency to have to repay the funding.

Some information requests you will need to prepare for

- Amount currently spent
- Number of learners who have gone through the program (or parts of the program) and identifying what those parts are
- Statistical evidence of the program outputs
- Anecdotal evidence of how the program is working
- How the program is being received by stakeholders (your dispatchers, your EMS partners etc.)
- Issues you have encountered in carrying out program goals, and solutions being employed to rectify those issues.

If details on what the reporting needs to look like were provided, make sure that you provide the information exactly as detailed. If the grantmaker did not provide guidance on what that needs to look like, you can submit the information in any format. It is important to remember that the grantmaker is someone that you want to impress and your information should be provided in a manner that is visually pleasing and makes sense. The benefit to “making it pretty” is that you can report this information to your stakeholders. Providing this message to media can promote your use of the program and the positive outcomes your community has seen from being part of it.

#### **Records Retention**

Depending on who funded your grant, you may have records retention requirements. Your funding application or letter should have the details of these requirements. These requirements are separate from any records retention requirements your state may have. Make sure you retain all records as outlined by the grantmaker *and* your state.

#### **Changes to scope of work**

The scope of work is what you have promised to do as an agency and what the grantmaker has promised to provide. But what if something changes after the grant period has begun? Many grants have provisions for unforeseen issues and may allow a change in scope of work. It is very important that all changes are in writing and agreed upon by both parties.



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### Debarment

It is extremely important to communicate with your grantmaker if any issues arise. Do not withhold information from the grantmaker. Often, they will work with you, assist with revising deadlines or extend a due date. They cannot do this if they don't know you need help. By withholding information, you are risking funding being pulled completely, forced repayment or worse: Suspension or Debarment.

Suspension is when an agency is under review and blocked from receiving grants for a period of time – usually months. Debarment is when a grantmaker puts your agency on a list blocking you from receiving a grant. Most of the time this happens only when there has been an egregious breach of trust, a crime has been committed, or the terms of the grant were not fulfilled. The seriousness of debarment is far reaching in implications. If your agency is a large agency (say part of a county office), being debarred means that the entire county is also barred from accessing grants. Debarment can last years and your agency name will be published on a Federal Debarment list. Persons involved in criminal activities such as fraud will be investigated and can be charged with crimes. Make sure your agency follows all rules and has processes in place to prevent fraud.

### Recipient monitoring

The grantmaker usually reserves the right to inspect your records at any time. This is called “recipient monitoring.” If your grant was made through a pass-through agency (rare) it is called “sub-recipient monitoring.” Depending on the grantmaker, this may be just a regular part of doing business to request to inspect records once or twice a year. For others, it may never happen or will only happen if they suspect there is misuse of the funds or some other issue. Sometimes part of their monitoring process will require a site visit where they will watch the program in action and review your records in person. Don't let this process stress you out. It is a normal practice and helps prevent problems before they can start.

### Closing out the grant

At the end of the grant period, you will need to close out the grant project (even if your RQI program is continuing or being funded another way in future years). This will include your final report to the grantmaker. It is recommended you save all documents related to the grant including:

- Original application
- Award letter
- Scope of work
- All reports
- Copies of emails
- Copies of any changes to the agreement
- Any media coverage including copies of videos, newspaper articles etc.
- All financial documents related to the work including receipts, quotes, payment statements etc.

Package this information together in a logical manner and store it according to the retention rules for *both* the grant and your state retention rules. You may need this information during an audit by your state auditor. Yes, your grants are auditable just like your agency's regular finances.

## Conclusion

Grant sourcing and funding can be a fun and satisfying process. Even if you are not funded, these conversations can get the ball rolling for other ways of funding programs internally. Don't get discouraged by the process. RQI Partners is committed to assisting your agency with saving more lives. Any questions can be directed to your RQI Impact Manager and we will work with you on this process.



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### ADDENDUM A-5

#### – Sample Grant Application Letter –

Smith Foundation  
1234 Main Street  
Bellevue, WA 98008

Dear Foundation Board,

Please accept this letter as our application and request for funding to implement the RQI-T program in our 911 dispatch center.

In 2017, **XX** number of citizens in our community died of Cardiac Arrest. On June 10, 2016 beloved football coach Robert Wilson suffered a cardiac arrest at Smith Valley High School. Unfortunately, the fact that he was in cardiac arrest wasn't recognized quickly enough, and bystanders on scene did not know CPR. Coach Wilson died that evening at the hospital. The unfortunate and sobering statistics are that less than 10% of people survive this catastrophic event. As a 911 dispatch center, we have the ability to change these outcomes. Cardiac arrest calls are less than 2% of our communications center calls – yet they are the most important.

**A patient has only 600 seconds to reverse death and our dispatchers own that entire 600 seconds nearly every time.**

Through thorough research, we have identified a program that will give our 911 dispatchers the tools to help improve these outcomes. The RQI program is a partnership between the American Heart Association and Laerdal Medical. In the past, 911 dispatchers have only been given basic training in identifying cardiac arrest and working with callers to overcome obstacles in providing CPR along with recertification every 2 years. We have found this results in skills decay and dispatchers not feeling confident in directing callers to perform CPR. RQI has created an innovative program that resolves these issues. RQIT is quarterly learning accompanied by 30 minute simulations practice by skilled coaches. Their competency based and credentials our dispatchers quarterly based on competence. We have worked with RQI and identified we need **XX** dollars to fund this program in our community for 2 years.

**RQI uses low dose-high frequency learning to help dispatchers become competent AND confident in their skills.**

**How do they do that?**

During the initial phase of implementation, RQI will run quality assurance on up to 50 of our previous cardiac arrest calls. Their staff will use a state of the art scoring system to determine where deficiencies exist within our agency. The Telecommunicators will then take an in depth introductory electronic learning module. The module is interactive and teaches Telecommunicators how to quickly identify cardiac arrest, overcome barriers and give high quality Telephone CPR instructions. After learners have completed this phase, they will be scheduled for a simulation with an RQI Coach. Coaches work with the learners to simulate a cardiac arrest 911 call. Once the simulation is complete, the learner and coach debrief the simulation and work together to identify areas of improvement, if needed. If the learner does not pass the simulation with an 80%, another simulation will be practiced until the learner grasps the concepts of the learning and can pass the simulation and earn their credential. Practice is continued as long as necessary until the learner has met the objectives for that quarter. As the program moves forward, all cardiac arrest 911 calls are scored by RQI staff and feedback provided to the learners and the agency.

In order to measure outcomes, RQI will run quality assurance on up to 50 of our previous cardiac arrest calls. Their staff will use a state of the art scoring system to determine where deficiencies exist within our agency. The scoring results are analyzed and compared to the American Heart Association recommendations. The scoring model is built on these recommendations and include key performance indicators such as time it takes to identify cardiac arrest and whether complete TCPR instructions were given to the caller. Baseline analytics are provided to our agency and our staff will determine the performance goals using that information. As the program progresses, the Telecommunicators will be scored on all simulations and real cardiac arrest 911 calls to measure improvement.

**Our goal is to see improved cardiac arrest outcomes by 10% each year in our community for a total of 20% in 2 years.**

We are confident that the community will see the value in this program and we hope to carry this program well beyond the initial 2 year period. We need your help to bring this program to our community and save lives.

*Thank you for your consideration.*

Sincerely,

Name  
Title



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### ADDENDUM A-4

#### – Sample Cover Letter –

September 1, 2019

Briggs Foundation  
1234 Main Street  
Grand, WA 98202

Dear Foundation Board,

In 2018, John Smith was found in cardiac arrest by his wife. She called 911 and our dispatchers were able to recognize cardiac arrest and provide lifesaving telephone CPR instructions. John survived, but he is the exception to the rule. The American Heart Association estimates in the United States only 10% of cardiac arrest victims survive, with 9% of those patients leaving the hospital with decent neurological function. Survival rates vary across the nation and in Grand County, data shows that only about 16% survive.

**Together with our EMS system, we are working to improve those rates and we need your help to save lives in our community.**

The American Heart Association and Laerdal Medical have partnered to create an innovative program called RQI, “Resuscitation Quality Improvement”. This quality improvement program that has been available in the hospital setting for many years and is now focusing on the pre-hospital setting. Research has identified that a cardiac arrest patient has only 600 seconds before death is irreversible. **We know that 911 dispatchers in our community own that entire 600 seconds.**

What most people don’t know is that 911 dispatchers are trained in medical dispatch and only maintain CPR certification once every 2 years. Cardiac arrest calls are only 2% of the calls our center takes, but they are the most important call we take. Research has identified that skills decay quickly after training and without regular competency-based training, our dispatchers are less likely to identify cardiac arrest quickly and less likely to provide high quality CPR instructions to callers.

Our community and our Telecommunicators deserves better. The RQI program will provide our Telecommunicators with quarterly learning modules partnered with simulation exercises. The learning will build their skills problem solving, triaging and deductive reasoning. Like our counterparts in EMS, who splint a lot of legs that aren’t broken to maintain their skills at splinting, our Telecommunicators will become competent, confident, and credentialed in handling cardiac arrest calls, which will save lives.

**Please join us in better serving our community and partner with us to save lives by granting funds to pay for this program.**

We are requesting \$XXXX dollars to fund the program for 2 years. Attached you will find more information about RQI and why their program is a good fit for our organization.

Sincerely,

Name  
Title





## Programs that Strengthen the Entire Chain of Survival

RQI clinical quality improvement programs focus on advancing resuscitation competence and quality, while creating educational and logistical efficiency, and simplifying compliance with accreditation and credentialing standards.

### DEDICATED PREHOSPITAL PROGRAMS



Programs built on the foundation of the Resuscitation Academy's expertise and success in increasing OHCA survival rates and the proven RQI methodology of verified competence and mastery learning.



**Cardiac Arrest  
System Assessment**



**RQI  
Telecommunicator**



**RQI Prehospital  
Healthcare Provider**



**RQI Teams**

We're here to help you on your journey to verified CPR competence.  
Learn more by visiting [RQIPartners.com/prehospital](https://www.RQIPartners.com/prehospital).

