



COMMUNITY GRANT GUIDELINES

Introduction

Improving oral health for communities and residents of Arizona, particularly the underserved, is the mission of the Delta Dental of Arizona Foundation. Since 1997, the Foundation has focused resources across the state of Arizona promoting oral health and preventing dental disease in children and youth up to age 19.

Oral health is integral to general health and well being: This theme was brought to national attention in 2000 by the Surgeon General in a seminal report titled, “Oral Health in America”. A healthy mouth is important at the earliest ages and throughout a person’s life as a predictor of well-being and longevity. Good oral health hygiene and practices can significantly reduce and prevent disease in later life.

Despite prior national focus on this issue, childhood cavities remain the number one childhood disease, five times more common than asthma and hay fever. In 2007, the Centers for Disease Control and Prevention reported that tooth decay among pre-school age students has increased from 24% to 28% in just a five year period. National statistics estimate more than 52 million hours of school lost because of dental problems.

However, prevention pays off. If all children and adolescents received appropriate amounts of fluoride and had dental sealants applied to chewing teeth surfaces, most dental decay could be prevented. Disease prevention offers a more than 5 to 1 return on investment according to a national report in 2008, “Prevention for a Healthier America”.

Children in Arizona show significant levels of dental decay and limited access to adequate dental services. Children from low-income families are more than twice as likely to have caries (cavities) as other children and less likely to get treatment. Well above the national average, Arizona children suffer from tooth pain, decay, and abscesses that effect their speech and language development, impair their learning, decrease their attention in school, and increase absenteeism. Promoting good oral health practices, increasing access to dental services, particularly evidence-based prevention strategies is the goal of the Delta Dental of Arizona Foundation Community Grants Program.

Community Grants Overview

Delta Dental of Arizona Foundation Community Grants Program is designed to support communities and organizations statewide that focus on oral health promotion and dental disease prevention programs serving children and youth (prenatal programs through age 18). The Program is funded through efforts by the Foundation to raise awareness and funds from the general community, businesses, and employees. The Foundation will consider grant requests from organizations in Arizona that have certified 501(c)(3) tax-exempt status from the IRS and are in good standing with the Arizona Corporation Commission. The Foundation funds

public schools, federally recognized Indian tribes and their component agencies, and can make grants to governmental entities. Faith based organizations that are registered charities or incorporated not-for-profits, are eligible to apply for Delta Dental of Arizona Foundation funding provided the program or project is not religious in nature. The Foundation does not fund religious activities.

Funding Areas for Community Grants Program

I. Increased access to preventive dental health services

Organizations can apply for grants ranging from \$1,000 to \$15,000 for support of programs providing direct prevention services, oral health instruction, screenings, exams, education and/or training.

II. Support for local community-based groups, coalitions and partnerships in communities addressing local oral health projects

These grants can cover staffing and other costs for local, collaborative groups/coalitions offering oral health community activities.

Examples of eligible programs may include:

- Programs serving pregnant mothers specific to their oral hygiene
- Programs providing oral health instruction and services to parents/caregivers for infant dental care
- Programs increasing knowledge, awareness and/or screening youth for oral cancer
- Programs improving the oral health literacy of underserved populations and communities
- Fluoride varnish programs
- Innovative strategies for reaching uninsured children (ages 18 and under)
- Support for community health workers providing oral health instruction, education and screenings
- Programs offering oral health instruction, education and training

In general, Delta Dental of Arizona Foundation favors grant requests that incorporate some or all of the following elements:

What We Fund

- Programs serving underserved, uninsured Arizona children and youth (prenatal programs through age 18)
- Organizations demonstrating operational and financial stability
- Organizations not incorporated but using a fiscal agent
- Programs actively collaborating when appropriate among organizations, schools, dental and/or healthcare providers
- Programs demonstrating inclusion of diverse groups and cultural issues
- Programs demonstrating and reporting measurable outcomes

What We Decline

- Funding individuals as applicants
- Sponsoring or attending conferences

- Supporting religious organizations for religious purposes
- Reduction of organizational debt
- Direct lobbying or influencing of elections
- Unnecessary duplication of existing services
- Fundraising campaigns and expenses

Grant Cycle Timeline:

October 2009	Grant Cycle open to applicants
December 10, 2009	Grant Applications due to Delta Dental of AZ Foundation
January 2010	Grant applications reviewed, recommended and approved
February 2010	Grants Awards announced

Grant Range: \$1,000 to \$15,000

Please submit one copy of your funding request and required attachments **by email and one copy by mail postmarked no later than 5:00 pm Thursday, December 10, 2009**. Late applications will not be accepted. Applications should be sent to Jennifer Blair, Grants and Development Coordinator, Delta Dental of Arizona Foundation (jblair@deltadentalaz.com and 5656 West Talavi Blvd., Glendale, AZ 85306.)

Questions? Contact Jennifer Blair at 602-588-3922 or jblair@deltadentalaz.com

**Grant Application Questions
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**Delta Dental of Arizona Foundation
2009 Competitive Grants Process**

Application Deadline: Thursday, December 10, 2009 at 5:00pm

Application Summary

Organization Name:

Contact name, title:

Phone number:

Mailing address:

Email address for this application:

Amount requested from Delta Dental of Arizona Foundation:

Total budget for the proposed plan:

Has your organization received funding from the Foundation in the past? If yes, when, how much and what was the funding used for:

Please provide a brief one paragraph summary describing how the proposed Delta Dental funds will be used by your organization.

Please address the following questions in narrative form not to exceed **three** numbered pages.

1. Briefly summarize the organization's mission, history and goals.
2. What is the geographic area that will be served by this grant? Please describe the specific population to be impacted by the grant, including how many individuals will be served.
3. Briefly highlight some of the organization's major client/patient outcomes to date.
4. Explain how the proposal meets the Delta Dental Foundation of Arizona's funding criteria of improving oral health for Arizona's underserved and uninsured populations.
5. Describe the proposed plan and explain how it is connected to the mission and operations of the organization.
6. Summarize the goals and activities to be supported by the grant and include a brief bulleted project timeline including beginning and ending dates.
7. Describe the organization's relationship with other similar community efforts (if there are any) and how the organization is coordinating with other agencies.
8. Briefly state how the organization will evaluate the results of the plan.
9. Include the following attachments:

- An organizational operating budget for the current fiscal year (please identify the month that your Fiscal Year begins, a separate spreadsheet is acceptable)
- A project specific budget with budget narrative (please use the format at the end of this application)
- A copy of the organization's 501c3 letter of determination
- A current list of the Board of Directors with title and affiliations

10. If you operate a dental clinic or satellite dental site, please respond to the following questions on a separate sheet of paper. **These questions are only for dental clinics or satellite sites.** You may submit four pages total (rather than three) in order to have ample space to respond to the following questions.

- How do you determine eligibility for the individuals you serve?
- What practice management software is currently used?
- What is the age of the dental equipment used for this program?
- Are equipment maintenance plans in place for the dental program?
- Please provide a binder confirming your malpractice insurance, Directors and Officers insurance, and property and liability insurance.
- How many dental staff are employed and what level of credentialing do they have?
- How many operatories are available? How many are routinely used?
- What percentage of the patient population are children and youth?
- What sources of revenue support the operations of the clinic? Please list your five largest funders.

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Project Budget

A. Revenue	B. Actual 2009	C. Projected 2010 Other Funders	D. Delta Dental of AZ Foundation's Portion of Budget
Delta Dental of Arizona Foundation Grant	0	0	0
Gov. Funding – City	0	0	0
Gov. Funding – County	0	0	0
Gov. Funding – State	0	0	0
Gov. Funding – Federal	0	0	0
Contributions/Donations	0	0	0
Special Events/Fundraising	0	0	0
Legacies/Bequests	0	0	0
Foundation and Corporate Support-	0	0	0
Public Support	0	0	0
Program Service Fees and Reimbursements	0	0	0
Investment Income	0	0	0
In-Kind Support	0	0	0
Other Income	0	0	0
Total	0	0	0

A. Expense	B. Actual 2009	C. Projected 2010 Other Funders	D. Delta Dental AZ Foundation's Portion of Budget
Salaries	0	0	0
Employee Benefits and Taxes	0	0	0
Employee Education and Training	0	0	0
Professional Fees and Contracts	0	0	0
Specific Assistance for Individuals	0	0	0
Communications (phone, fax, modem, postage)	0	0	0
Supplies:	0	0	0
Occupancy (rent, utilities, building & grounds	0	0	0
Advertising/Printing and Publications	0	0	0
Travel/Meetings/Conferences	0	0	0
Membership Dues/Support to Affiliate Org.	0	0	0
Evaluation	0	0	0
Non-Payroll Insurance	0	0	0
In-Kind Expense	0	0	0
Other Expenses-	0	0	0
Total	0	0	0

If you have any additional comments regarding the project budget, please include them on an additional sheet of paper that is not part of your narrative (100 words or less).