



GET ACTIVE! MINI-GRANT PROGRAM

Sponsored by the Governor's Advisory Council on Physical Fitness and Sports

The Governor's Advisory Council on Physical Fitness and Sports is pleased to announce the 2010-11 GET ACTIVE! Mini-Grant Program. The Council's mission is to improve the quality of life for all Pennsylvanians by providing leadership that promotes physically active lifestyles and links families, communities, schools, worksites, health care and media. This grant is focused on supporting new physical activity initiatives or increasing current and/or additional physical activity programming. Programs and resources supported through this grant must create an environmental, policy and/or systems change and be sustained once the grant process is completed. Up to 20 grants may be awarded at up to \$3,000 each.

Enclosed is the "GET ACTIVE!" Mini-Grant application form and other related materials needed to be considered for funding through this program for the Governor's Advisory Council on Physical Fitness and Sports. **The applications must be postmarked by Friday, September 15, 2010.** No applications will be accepted after this date.

A broad range of activities/supplies are eligible, as long as they support the purposes of introducing or increasing physical activity opportunities or amounts of physical activity in a specific setting. **Proposals demonstrating program sustainability contributing to systems or policy changes with measurable outcomes or increase in physical activity will be given first priority.** You can find examples of evidence based programs in the Guide to Community Preventive Services www.thecommunityguide.org. The Guide to Community Preventive Services is a free resource to help you choose programs and policies to improve health and prevent disease in your community. Monies from the grant can be used for the following items:

- Planned physical activity programs that might need equipment, such as: exergaming (technology-based games), exercise balls, jump ropes, scooters, bikes, bike racks, basketball hoops/nets, volleyball nets, etc.;
- Social support networks such as exercise or walking groups to encourage behavior change;
- Community/school gardens;
- Policies that will instill and/or provide opportunities and access for physical activity at events or in various settings
- Programs that will increase the number of people who will participate in physical activity

Successful grantees will be notified after December 1, 2010. All grant awards **must be** expended and activities implemented by June 30, 2011 and final reports completed and submitted by July 30, 2011.

Please read the enclosed materials carefully before completing your application. We look forward to your participation and challenging Pennsylvania to Get Active! If you have any questions or concerns, please contact Jessica Zilka at jzilka@state.pa.us.

2009-10 GET ACTIVE! MINI-GRANT PROGRAM

- A. Purpose:** The Pennsylvania Governor's Advisory Council on Physical Fitness and Sports (Council) has been appointed to be a proactive force to work towards improving the health of all Pennsylvanians. Recent research has supported the role of regular physical activity in reducing the risks of obesity, cardiovascular disease, asthma, unhealthy addictions, certain types of cancers, diabetes, and injury associated with physical inactivity. Regular physical activity has also been associated with improved musculoskeletal health, academic achievement, and stress reduction. According the 2008 Behavioral Risk Factor Surveillance System (BRFSS), 26% of Pennsylvania adults responded that they had not engaged in any leisure time physical activity in the past month. The goal of the Council is to assist and support the efforts of local, regional and state efforts within the Commonwealth to increase the physical activity of all Pennsylvanians thereby helping them derive the benefits that are associated with becoming, and remaining, physically active for a lifetime.

Community-based physical activity interventions designed to promote more active lifestyles among adults are cost-effective in reducing heart disease, stroke, colorectal and breast cancers, and type 2 diabetes according to a study by the Centers for Disease Control and Prevention with support from the Robert Wood Johnson Foundation. Using a rigorous economic model developed to assess the cost-effectiveness of community-based physical activity interventions, the study found these interventions to be cost-effective, reducing new cases of many chronic diseases and improving quality of life. Researchers found that community-based physical activity programs appeared to reduce new cases of disease by: 5-15 cases per 100,000 people for colon cancer; 15-58 cases per 100,000 for breast cancer; 59-207 cases per 100,000 for type 2 diabetes, and 140-476 cases per 100,000 for heart disease.¹

The goals of the Council support the Health and Human Services guidelines for daily physical activity for youth and adults, as well as the 2010 National Health Objectives of decreasing the number of adults not engaging in any leisure time physical activity and increasing the proportion of adolescents who engage in moderate physical activity for at least 30 minutes per day 5 to 7 days per week.

¹ Larissa Roux, Michael Pratt, Tammy O. Tengs. Et al. [Cost Effectiveness of Community-Based Physical Activity Interventions](#), American Journal of Preventive Medicine pages 578-588

- B. Eligibility Requirements:** Eligible applicants are Pennsylvania non-profit organizations, schools, worksites, foundations, or community-based agencies with a Federal Tax ID number. Individuals may not apply.

Eligible applicants include, but are not limited to:

- Educational providers
- Community groups/coalitions
- Employers/businesses
- Social/human service agencies
- Professional associations
- Local governments
- Faith-based Organizations
- Community health centers

Eligible Categories: Please include which category you are applying under.

- School-based
- Organizations serving individuals with disabilities
- Worksites
- Seniors
- Community-based Organizations

- C. Application Timeline: Completed applications must be postmarked by September 15, 2010. Applications will be reviewed and successful grantees will be notified after December 1, 2010. All grant efforts must be implemented by June 30, 2011, and a report must be received by July 30, 2011.**
- D. Award Determination:** All funding decisions are contingent upon the availability of allocated Preventive Health and Health Services Block Grant (PHHSBG) funds and the Department of Health approval. Applications are scored by a review panel using a 10 point rating scale. The 5 rating factors are: Project Sustainability (3 pts); Resources leveraged and Partnership Building (2 pts); Applied evidence-base, such as www.thecommunityguide.org (2 pts); and Evaluation/measureable outcomes (3pts). **If you have received a GetActive! Mini grant award in the past, you are not eligible to apply.**
- E. Notification of Award:** All awarded applicants will be notified in writing via email sent to the email address you provide in the application. In order to do business with the Commonwealth of Pennsylvania, providers are required to have a Central Vendor Management Unit (CVMU) number. Applicants who do not have a CVMU number may register at www.vendorregistration.state.pa.us. All questions regarding registration should be directed to the Vendor Data Management Unit at 717-346-2676 (Harrisburg area) or 877-435-7363 (toll free). Awards cannot be paid unless the organization has a CVMU number.
- F. Eligible Costs:** An applicant may be awarded an amount up to \$3,000 per application. Funded activities are those that would not be usual and customary standard operating expenses. To be considered eligible, activities must protect the safety of the participants and the Department must be relieved of any liability.

G. Ineligible Costs: The following costs are **not** eligible for reimbursement under the PHHSBG:

1. Administrative/indirect costs including travel, staff training expenses or food purchases;
2. New construction or capital expenses;
3. Staffing for existing services;
4. Direct cash payment to recipients of services;
5. Purchases/Activities that **indirectly** impact physical activity;
6. Purchase of laptops/computers/television/DVD players, etc.;
7. Construction improvement to state parks
8. Playground equipment
9. Spending not otherwise in compliance with the provisions and limitations of the PHHSBG.

H. Mini-Grant On-site Review: Grantees may receive an on-site visit from a local Governor's Advisory Council on Physical Fitness and Sports member or Pennsylvania Department of Health staff. The results of the visit will be communicated to the Division of Nutrition & Physical Activity at the Department for review, data collection and advocacy purposes.



GET ACTIVE! MINI-GRANT APPLICATION PROCESS

Submit one original and five copies of a 2-5 page typewritten narrative that describes the proposed physical activity initiative(s). This narrative should include:

Applicant's mission and primary activities

- Project Objectives (link to mission statement, sustainability, resources leveraged, partnership building, evidence-based studies, etc.);
- Target population(s) – including anticipated number of people reached;
- Proposed activity(s);
- Evaluation methods – use evidence-based evaluation techniques to demonstrate a measureable outcome(s)

Appendix A is provided as a template for writing the mini-grant application. Please follow this template application. You may use the titles in bold in your application. Also be sure to submit the budget on your letterhead, in the attached format, signed and dated.

Complete and submit proposed budget using the following template on official company letterhead. An authorized official who can bind the applicant and organization to the provisions of the proposal **must sign and date** the Budget Appendix B.

AWARDING OF MINI-GRANT

Approved applicants will invoice the Department of Health for all monies used for application expenses listed on the budget at the end of their grant period. Advance payment will not be made.

- If you have received a GetActive! Mini grant in the past you are not eligible to apply.
- A summary report of funded activities, including an assessment of its impact, evaluation results, at least two photos of activity, and a success story must be completed by July 30, 2011.
- Recipient must obtain a CVM number to receive mini-grant award (see section E on page 3 of the application).

Applications should be mailed to:

Jessica Zilka
 Bureau of Health Promotion and Risk Reduction
 PA Department of Health
 625 Forster Street
 10th Floor Health and Welfare Building
 Harrisburg, PA 17120

* Email and faxed applications will not be accepted

Applicants are encouraged to visit the Department's web page (www.health.state.pa.us) and search Physical Activity Program, then Governor's Council Mini-grant for additional information and links to informative websites.

Appendix A

GET ACTIVE! Mini-grant Application

Priority will be given to proposals demonstrating program sustainability contributing to systems, environmental and policy changes supporting increased physical activity, using evidenced-based programming.

Applicant's mission and primary activities

(Write this section as "introducing" your group or organization to the review panel)

- A short, concise paragraph of the group or organization's mission and physical activity related activities.
- Include current physical activity or wellness initiative outcome data, if available.

Project Objectives

(What is the desired outcome(s) of the proposed physical activity initiative?)

- State overall objectives of the grant project.
- Describe how each activity will support the Council's mission and give rationale for the selection of the activity (Include resources leveraged, partnership building, etc.)
- Provide evidence-based studies on the method/program you wish to use, such as those recommended by www.thecommunityguide.org

Target population

(Which audience(s) will the grant proposal directly or indirectly target)

- Include the rationale and reach for your selection, including how the activities are designed to address any population health disparities, such as race/ethnic target groups, low socioeconomic groups and/or specific population groups such as a person with disabilities.

Planned Program(s)

(Explanation of proposed activity and sustainability)

- List and describe in detail each activity, purchase, education, effort, training, etc.
- Include documentation of each line item on the proposed budget.
- Describe how you plan to implement and sustain the activity.
- Describe how this activity supports the Council's mission to improve the quality of life for all Pennsylvanians by providing leadership that promotes physically active lifestyles and links families, communities, schools, health care and media. The mini-grant funds are to facilitate a means for organizations to move towards making all Pennsylvanians healthier and more physically active.
- Describe the system, policy and/or environmental change expected to occur as a result of your activities.
- Include any planned media exposure. Media activities can promote physical activity, as well as your activity.

Evaluation methods

All applications are required to include an evaluation component. Proposals without an evaluation component will not be scored.

(This section should address the measurement of outcomes from proposed activities. How will you measure the achievement of project objectives?)

- Describe the method(s) in which you will evaluate your grant activity(s) according to the project objectives.
- Identify expected outcomes of each activity.
- Determine expected degree or amount of policy, system or environmental change and sustainability.
- Measure outcomes against grant expectations and pre-grant level(s).
- Determine pre and post knowledge levels of education efforts.
- **It is required to report the numbers of individuals who will directly or indirectly benefit from this grant's services and materials.**

Appendix BGET ACTIVE! Mini-grant Application
Proposed Budget**Applicant Information:**

- ♦ Name of Applicant Agency: _____
 - ♦ Mailing Address: _____

 - ♦ Federal ID #: _____
 - ♦ Organization name as listed in the CVMU: – see above for details (if different from above name) _____
 - ♦ CVMU #: _____
 - ♦ Applications Category: (please select one)
 - School-based
 - Organizations serving individuals with disabilities
 - Worksites
 - Seniors
 - Community-based Organizations
 - ♦ County(ies) where activities will take place _____

 - ♦ Are you receiving additional funds for this project? _____
If so, please name source: _____
 - ♦ Contact Person _____
 - ♦ Telephone Number (____) _____ Fax Number (____) _____
 - ♦ E-mail Address _____
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Itemized Budget for 2010-2011
(Put breakdown on official company letterhead)

| Staff | | | |
|------------------------|--------------------|------------------------|-------------------|
| Staff Personnel | Hourly Rate | Number of Hours | Total Cost |
| | | | |
| | | | |
| | | | |
| | | | |

| Materials, Teaching tools, Supplies | | | |
|--|--------------------|---------------|-------------------|
| Item | Cost (each) | Number | Total Cost |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

| Equipment | | | |
|------------------|--------------------|---------------|-------------------|
| Item | Cost (each) | Number | Total Cost |
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

| Grand Total | | | |
|-------------------------------|--|--|-----------|
| *Not to exceed \$3,000 | | | \$ |

Please submit one original of this Appendix and one budget on official company letterhead, and one copy of any price quotes, estimates, catalog samples, or any other proof of cost for every item or piece of equipment requested for purchase associated with this application.

I agree to the terms of this application, including the commitment to abide by all Preventative Health and Human Services Block Grant provisions, and to supply the Department with information about physical activity initiatives and all who have benefited from the services and materials purchased, even if this means supplying the information after receiving the mini-grant.

Authorized Signature and Date:

Printed Name and Title:
