PURPOSE:
To provide grants up to $1,000 for the development, strengthening, or evaluation of URMC and community health improvement partnerships for research, education, intervention, or service. In general, Mini-Grants can be used to support URMC Community Partnerships to:

- Initiate new research or program partnerships between URMC and community partner(s).
- Help sustain ongoing community efforts in periods of transition (e.g., between grant funding).
- Help existing partnerships grow to the next level (e.g., adding research activities to an ongoing community service project).

The Mini-Grants are one-time grants awarded on a quarterly basis and limited to one community project each year per partnership. The intention is to fund a wide range of projects. Funds awarded must be used within six months of the award date. If funds are not used within this time frame, the awardee will lose rights to any remaining unspent funds and no extensions will be granted. Grantees are eligible to reapply for a Mini-Grant one year after the end date of their previous Mini-Grant application. These awards should not be used to replace funds already allocated or available in funded grants, or to support personnel expenses. Funds will be distributed on a reimbursement basis when either a signed Employee Expense Report (F-3) with original receipts or a Request for Payment (F-4) with an invoice is sent to the Center for Community Health & Prevention within 30 days of expenditure. Reimbursement will be made within 21 days of receipt.

DEFINITION OF COMMUNITY:
For the purposes of the Mini-Grant Program, “community” refers to community members; persons affected by a condition/issue being addressed or studied; and other key community stakeholders, including community-based health practitioners.

EXAMPLES OF FUND SUPPORTED WORK:
- Development of a research or intervention program.
- Development of plans/proposals to obtain additional resources from other funding agencies.
- Provision of technical assistance or educational activities to develop partnership (e.g., grant writing, information sharing).
- Creation of plans, procedures, policies, or purpose statements that will facilitate or strengthen the partnership development (e.g., mission statement, action plans).
- Dissemination of best practices, information, and “how to” documents for projects.

EXAMPLES OF COVERED FUND EXPENSES:
- Research-Related Expenses (e.g., research questionnaires)
- Focus Group Expenses (e.g., transcription, facilitation, transportation/parking fees, child care for participants’ children, non-cash incentives*)
- Meeting Space Rental
- Refreshments for Meetings*
- Materials and Supplies

*NOTE: Cash incentives are not permitted under the Mini-Grant Program. If your budget includes incentives for program or research participants, gift cards are allowed. If your budget includes food/refreshments, no more than $400 per grant award will be allowed for this line item.

ELIGIBLE APPLICANTS: Faculty, staff, and advanced trainees (post-docs, residents, etc.) at the University of Rochester Medical Center and Community Partners associated with a community-based 501(c)(3) organization are eligible to apply. Grant applicants must be part of a community-URMC partnership that serves the Rochester/Monroe County/Finger Lakes region.
APPLICATION INSTRUCTIONS

All applications must be complete and should be submitted to the Center for Community Health & Prevention (CenterforCommunityHealth@URMC.Rochester.edu), which is the preferred method of submission. If email is not possible, applications can be submitted by interdepartmental mail to Box 614, or by first class mail to Center for Community Health & Prevention, 46 Prince Street, Suite 1001, Rochester, NY 14607.

Applications must be accompanied by two (2) letters or e-mails of support as follows:

- **URMC Applications from Staff**
  - Letters or e-mails should be provided by the Program Director and the lead community agency.

- **URMC Applications from Faculty/Advanced Trainees**
  - Letters or e-mails should be provided by the Department Chair and the lead community agency.

- **Community Partner Applications from Agency**
  - Letters or e-mails should be provided by the agency Director and by URMC Partner Program Director or Department Chair (see guidelines above).

**PAGE LIMIT:** A total of three (3) pages, including a two-page, single-spaced narrative and cover sheet using Times New Roman 12 point font or comparable font size.

**TIME FRAME:** Applications should indicate a specific time frame in which the funds will be used (within six months of award date) even if the project is ongoing.

**DEADLINE:** Applications are accepted on a quarterly basis by noon on the following dates:
- May 14
- August 13
- November 12

**REVIEW:** Estimated time for review of submitted applications is three weeks.

Funding announcements will ordinarily be made within four to five weeks following the application submission deadline.

**NOTE:** All sections of the application must be thoroughly completed. Incomplete applications will result in a delay. Applicants submitting incomplete applications will be invited to make revisions and resubmit application(s) for review in the next quarterly funding cycle.

If you have any content questions regarding the Community Health Mini-Grant Program, please contact Indrani Singh via email at (Indrani_Singh@URMC.Rochester.edu) or call (585) 224-3057. For process questions, please email CenterforCommunityHealth@URMC.Rochester.edu or call (585) 224-3050.

**GRANT REVIEW PROCESS**

A Review Committee comprised of three members - including two URMC faculty or staff and one member from the community - will review each application. Reviewers will complete a rating sheet for each application that includes both a numeric rating and comment section. Funding decisions made are based on the rating sheets and availability of funding.

Applications are judged on the following project activity criteria:

- Contributes to URMC-Community Partnership(s)
- Consistent with the purpose of the Mini-Grant Program
- Able to support the achievement of the project’s purpose
- Budget is complete and reasonable to meet the project’s goals and is within funding guidelines
- Supports and contributes to the partnership’s long term goals
- URMC-Community Partners related to the project are clearly identified

Applicants awarded funding will be notified via an Award Letter. Those who are not funded will receive reviewer letters with suggestions for strengthening future applications.
| **NAME OF APPLICANT:** | |
| **TITLE/POSITION:** | |
| **URMC DEPARTMENT OR COMMUNITY AGENCY NAME:** | |
| **NAME OF PROJECT:** | |
| **AMOUNT REQUESTED:** | |
| **PROJECT DATES:** | |
| **IS YOUR AGENCY a 501(c)(3) (for community applicants only):** | Yes | No |
| **DATES FUNDS WILL BE USED:** | |
| If awarded a grant, I will allow my project to be posted on the Center for Community Health & Prevention Website | Yes | No |
| **NAME OF DEPARTMENT CHAIR (for URMC Faculty/Advanced Trainee Applicants):** | |
| **NAME OF PROGRAM DIRECTOR (for URMC Staff Applicants):** | |
| **NAME of AGENCY DIRECTOR (for Community Applicants):** | |
| **List all Community/URMC Partners and contact information (email addresses and phone numbers):** | |

**GRANT PROJECT OBJECTIVES:**

**OVERALL /LONG TERM GOAL OF THE COMMUNITY-URMC PARTNERSHIP:**

**PARTNERSHIP RELATIONSHIP DESCRIPTION (Briefly explain the roles and responsibilities of all partners along with the frequency and type of contact among the partners. Include how this grant might further promote/strengthen future URMC Community Partnerships):**
**Grant Activities Description** (List the specific activities to be supported by this Mini-Grant and the rationale for how it will contribute to URMC Community Partnership goals and objectives):

**Outcomes** (Describe the result to stem from this partnership effort, the anticipated outcomes of the grant’s activities, and how the success of this project will be measured):

**Guiding Principles for Community-Engaged Research (for URMC applicants only)** (The attached Guiding Principles list has been developed by the URMC Community Advisory Council and applies also to non-research projects. Briefly explain how these principles are incorporated into this project and how this will contribute to the sustainability of the partnership and success of this project):

**Budget** (Provide a brief budget narrative and itemized budget with the budget itself on a separate page):
UNIVERSITY OF ROCHESTER MEDICAL CENTER (URMC)
COMMUNITY ADVISORY BOARD

GUIDING PRINCIPLES FOR COMMUNITY-ENGAGED RESEARCH
APPROVED SEPTEMBER 2008

• Long-Term Engagement
  Research investigators work through existing partnerships in the community when such partnerships exist. The level of partnership corresponds to each project’s level of community interaction and impact.

• Mutual Benefit
  Increased knowledge improves the health of the community and benefits both the community and the researchers/URMC.

• Mutual Respect
  Researchers and community members work together with humility, candor and mutual respect for expertise and cultural differences.

• Shared Findings
  Research findings are shared with community partners and stakeholders.

• Enhanced Community Capacity
  Members of the “target community” for the research project are hired and trained to help build and enhance community assets, where possible and appropriate.

• Shared Responsibility
  All partners (URMC and Community Partners) have obligations towards the project and the community.

• Evidence-Based
  The best available evidence guides research relationships between URMC and the community, and best efforts are made to evaluate each project.

• Collaborative from start to finish*
  There is collaborative and equitable engagement of all partners in all key phases of the research including:

  ➢ Identification of Target Population
  ➢ Research Objectives,
  ➢ Project Organization
  ➢ Interpretation of Data

• Responsive to community priorities and perspectives*
  Community-Based Participatory Research addresses the health needs, interests, and priorities established by the community. Health is addressed from both individual and ecological perspectives (i.e. considering social, economic, cultural, and policy contexts).

*These guidelines apply specifically to Community-Based Participatory Research.