Fundraising Ideas for EMS and First Responders
Civic Resources Focused on Community Service

In communities across the country, there are local organizations chartered to help strengthen education and services within the community. In addition to donating funds, goods and services, these groups may welcome a presentation on cardiac arrest, AEDs or other emergency response concerns. Most common of these organizations are:

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<thead>
<tr>
<th>AARP</th>
<th>Knights of Columbus</th>
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<tbody>
<tr>
<td>American Legion</td>
<td>Lions Club</td>
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<tr>
<td>Boy Scouts of America</td>
<td>Moose</td>
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<tr>
<td>Girl Scouts of America</td>
<td>NAACP</td>
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<tr>
<td>Elks</td>
<td>Rotary International</td>
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<tr>
<td>Freemasons</td>
<td>United Way</td>
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<tr>
<td>Jaycees</td>
<td>YMCA</td>
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<tr>
<td>Junior League</td>
<td>YWCA</td>
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<td>Kiwanis</td>
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In addition to these groups, locally based corporations and businesses (many of which have existing corporate grant programs often focusing exclusively on the geographic area of their operations) can be a source of financial assistance.

Also, don’t rule out the effectiveness of bake sales, walk-a-thons, auctions and raffles in your pursuit to raise funds in support of SCA awareness. These events may seem small in scale but are actually responsible for many AEDs placed across the country.

Asking for money and applying for grants is no easy task. To help guide you through the process, check out grant request resources and tips available at:

The Foundation Center
1627 K St., NW, 3rd Floor
Washington, DC 20006
http://foundationcenter.org

www.suddencardiacarrest.org
Private Foundations

Private foundations have longstanding history of providing grants for general health initiatives and specific cardiovascular-related outreach efforts. Some of the major private donors include:

- David & Lucile Packard Foundation: www.packfound.org
- Pew Charitable Trusts: www.pewtrusts.org

The McKesson Foundation

**Funding Available:** The majority of grants range from $5,000 to $25,000, although amounts can vary widely. **Eligibility:** The Foundation supports health-related, social, educational, civic, and cultural projects primarily focused on youth and located in the San Francisco Bay Area. To receive funding, an organization must be tax-exempt under Section 501(c)(3). **Priority:** The Foundation seeks to enhance the health and quality of life in communities where McKesson HBOC Inc., operates and its employees live. Our emphasis is focused on youth, especially health services for under-served populations, educational enrichment, recreation and youth development activities. The Foundation also funds emergency services for children and families, and a variety of social, educational, and cultural programs. **Deadline:** N/A. **Information:** Marcia Argyris, VP, Community Relations and President, McKesson HBOC Foundation, One Post Street, San Francisco, CA 94101.

Milagro Foundation

**Funding Available:** Funding typically ranges from $2,500-$10,000 with an absolute upper limit of $25,000. **Eligibility:** The Milagro foundation partners with the nonprofit community to serve the needs of children and youth in the areas of the arts, education and health. Started in 1998 by Deborah and Carlos Santata, the foundation supports grassroots, community-based, tax exempt organizations in the San Francisco Bay area, the United States and the countries touched by the music of Santana. **Priority:** Projects which help children and youths lead healthy lives through education and prevention. **Deadline:** Grant applications are accepted continuously. **Information:** www.milagrofoundation.org.
Public Safety Foundation of America

**Funding Available:** $3 million. **Priority:** Planning and Coordinating Proposals to determine how to best implement wireless 911 location technology for a single PSAP or a county, region or state. PSAP Equipment and Technology upgrades to make the PSAP capable of receiving and utilizing information on wireless Phase II calls. Strategic Deployment Initiatives for programs designated at a high level to address implementation challenges. Education Proposals to educate public safety agencies and other stakeholder groups about the importance of implementing wireless location technologies. **Eligibility:** Public safety and non-profit organizations in the U.S. are eligible to apply for the grants. **Deadline:** Round 2 Pre-applications are due June 6, applications are due July 3. Round 3 Pre-application by September 5, 2003 Grant application submitted by October 3, 2003. Round 4 Pre-application by December 5, 2003 Grant application submitted by January 2, 2004. **Information:** Public Safety Foundation of America, 1-888-APCO911, [www.psfa.us](http://www.psfa.us).

Ahmanson Foundation

**Funding Available:** Maximum Amount: $1,850,000.00, Minimum Amount: $300.00, Average Amount: $25,000.00. **Priority:** The Ahmanson Foundation provides funding for higher and other education, the arts and humanities, medicine and health, and a broad range of social welfare programs, including youth organizations. Fund Subject(s) include: Community health education, Community programs, Health care, Public education, and Social services. **Eligibility:** Community based organizations and IRS 501 (c)(3) Organizations located in Los Angeles, CA. Southern CA. **Deadline:** No deadlines. **Information:** Lee Wolcott, Managing Director, 9215 Wilshire Blvd., Beverly Hills, CA 90210, (310) 278-0770.

Albertson's Inc.:  

**Funding Available:** $3 million. **Eligibility:** Nonprofits, including those with a focus on health and education. Community-based organizations in: Arizona, Arkansas, California, Colorado, Florida, Idaho, Iowa, Kansas, Louisiana, Mississippi, Missouri, Montana, Nebraska, Nevada, New Mexico, Oklahoma, Oregon, South Dakota, Tennessee, Texas, Utah, Washington, and Wyoming. **Priority:** Programs that meet a community need, have volunteer support, serve large groups of people, have long-term effects, and community-wide support. **Deadline:** None. **Information:** Send requests to Corporate Treasurer, Albertson's Inc., P.O. Box 20, Boise, ID 83726; (208) 395-5949.
California Wellness Foundation

Funding Available: Maximum Amount: $110,000.00, Minimum Amount: $5,000.00.
Priority: The California Wellness Foundation's General Grants Program provides organizations with the opportunity to pursue innovative projects in the field of health promotion and disease prevention, with special emphasis upon provision of direct services. The Foundation's priority funding areas include community health; population health improvement; teenage pregnancy prevention; violence prevention; and work and health. Respectively, projects within these priority areas should: promote healthy lifestyles with emphasis upon changing behaviors, risk factors, or social and physical environments relevant to health; encourage development of integrated systems of health service delivery; focus on primary and secondary prevention of teen pregnancy and the special healthcare concerns of pregnant and parenting teens and their families; promote violence prevention; and provide programs and services that improve the health status of California workers and their families through health promotion. Eligibility: California. National organizations providing services in California are also considered. Occasionally, grants will be made to projects that are national in scope where benefits to California can be clearly demonstrated. Deadlines: No deadlines. Information: Joan Hurley, Grants Administrator, 6320 Canoga Ave., Ste. 1700, Woodland Hills, CA 91367-7111, (818) 593-6600, (818) 593-6614 - FAX.

The Chartwell Charitable Foundation

Funding Available: In 2001, the foundation awarded $11 million for 167 grants, with roughly two-thirds of the grants going to Southern California. Priority: The foundation gives grants to hospitals and other health-care organizations, with an emphasis on helping children. Eligibility: Giving is restricted to Southern California and New York. Deadline: Deadlines are rolling. Send a letter outlining needs first. Information: Chartwell Charitable Foundation, 1999 Avenue of the Stars, Suite 3050, Los Angelos, CA 90067, 301-556-7600

The Community Collaboration Fund

Funding Available: Grants range from $30,000-$35,000, with statewide, regional and multi-site projects receiving up to $100,000. Priority: The Fund makes grants to non-profit organizations to expand rural telemedicine equipment, purchase and install telemedicine and telecommunications equipment and develop health network Web sites. Eligibility: Non-profits in California. Deadline: Call for deadline info. Information: Nelson Holl, 707-829-5626; Cassandra Malry, 323-857-0526.
Walt Disney Company Foundation

**Funding Available:** In 2000, grants totaled $5.2 million. **Priority:** The foundation invests in youth and child welfare agencies, health-care organizations, and hospitals. Funds support general operations and program development, annual and capital campaigns. **Eligibility:** Non-profits in Florida and California. **Deadline:** Initial letters or proposals are accepted continuously. The board makes grant decisions each summer. **Information:** Tillie Baptie, 818-560-1006.

Johnson & Johnson Community Health Care Program

**Funding Available:** Non-profit organizations selected by the Community Health Care Program will receive a competitive $150,000, non-renewable two-year grant ($75,000 per year). **Priority:** The primary goal of the Johnson & Johnson Community Health Care Program is to support community-based health initiatives offering quality health care services to medically under-served populations. The program is fully underwritten by the Johnson & Johnson Family of Company funds. The main objective of the Johnson & Johnson Community Health Care Program is to enhance access to health care among medically under-served patients by supporting the nation's safety-net of community-based health centers and providers: Providing grants to community based non-profit organizations that propose creative and effective ways of improving access to health care services. Considering the special needs of individuals at high risk for medical under-service particularly programs that support quality of care for women and children. Assisting organizations to develop a broad-based public and private support network. **Eligibility:** Funding during the 2003 Community Health Care Grant Cycle will be made available to qualified community based health care organizations; located in and providing direct service to the following geographic areas only: New Jersey (all areas), New York (all areas), Pennsylvania (all areas), San Angelo, TX, San Francisco, CA, and Washington, DC. **Deadline:** N/A. **Information:** www.jhsph.edu/johnsonandjohnson.

John D. and Catherine T. MacArthur Foundation

**Funding Available:** Most grants are expected to be $5000-$15,000. **Priority:** The foundation has several priority areas. One of which is child abuse. Support is given for child abuse prevention programs and to provide necessary services for victims of child abuse and their families. **Eligibility:** Proposals will be considered in the above general areas or for special project areas established by the Board. Proposals will only be accepted from Los Angeles and San Diego counties of California. **Deadlines:** Grant proposals received by March 15 will be considered for decision/funding in June. Grant proposals received by September 15 will be considered for decision/funding in December. **Information:** Write or e-mail the Foundation at: Jane D. McCarthy, President, McCarthy Family Foundation, P. O. Box 27389, San Diego, CA 92198-1389, familyfdn@aol.com.
Nevada Community Foundation

**Funding Available:** Maximum Amount: $75,000.00, Minimum Amount: $100.00.  
**Priority:** The Nevada Community Foundation is a non-profit corporation that distributes funds to charitable organizations in Nevada. The Foundation supports services for youth, women, minorities, immigrants, the economically disadvantaged, and the homeless. HIV/AIDS organizations, such as Aid for AIDS of Nevada, and AIDS research are also supported. **Eligibility:** Applicants must be non-profit or public entities located in Nevada. Applicant organizations must be governed by either a voluntary board of directors, a publicly elected body, or a board duly appointed by a publicly elected official or officials. **Deadline:** No deadlines. **Information:** Jennifer Charlton, Development Officer, 1660 E. Flamingo Rd., Las Vegas, NV 89119, (702) 892-2326, (702) 734-8504 - FAX.

Child Care Playground Safety Initiative

**Funding Available:** $5 million. **Priority:** The David and Lucile Packard Foundation in Los Altos, California, has announced a two-year, $5 million initiative to upgrade 169 playgrounds in San Mateo, Santa Clara, Santa Cruz, and Monterey counties. The new Child Care Playground Safety Initiative also will provide training and technical assistance materials to all 1,051 licensed child-care centers in the four counties. In 2000, the state of California mandated new safety standards for licensed child-care centers, giving playground operators until January 2003 to implement them. However, the state did not make adequate funds available for repairs, upgrades, and costs related to bringing playgrounds up to code. The initiative attempts to address the funding shortfall by offering technical assistance and financial resources to upgrade playgrounds in the four counties. **Eligibility:** San Mateo, Santa Clara, Santa Cruz, and Monterey Counties in California. **Deadline:** N/A. **Information:** The David and Lucille Packard Foundation, 300 Second Street, Suite 200, Los Altos, CA 94022, 650-948-7658, inquiries@packfound.org.

QUALCOMM Corporate Giving Program

**Funding Available:** N/A. **Eligibility:** Non-profits in communities in which our employees work and live. **Priority:** QUALCOMM is dedicated to being a valued corporate citizen and good neighbor by providing cash donations of 1-2% of pre-tax profits each year to the communities in which our employees work and live. In addition to cash donations, QUALCOMM contributes to the community through donations of computers and electronic equipment, information technology consulting and services, and the time and talents of our diverse employee base. QUALCOMM donates to organizations in three major categories: Math and Science Education, Health and Human Services, Arts and Culture. **Deadline:** Requests to QUALCOMM are accepted year-round, and are reviewed in the middle of each month by the QUALCOMM Corporate Giving Committee. Proposals received by the second Monday of the month will be reviewed that month. Proposals received after the second Monday of the month will be reviewed in the following month's cycle. All proposals will be answered in writing within three weeks following the mid-month Corporate Giving Committee
review. Information: QUALCOMM Corporate Giving (L-733 C), 5775 Morehouse Drive, San Diego, CA 92121, Fax: 858-651-3255, E-mail: giving@qualcomm.com, Corporate Giving Hotline: (858) 651-3200, http://www.qualcomm.com/community.

Charles Schwab Corporation Foundation

Funding Available: Maximum Amount: $5,000.00, Minimum Amount: $500.00. Priority: The Charles Schwab Corporation Foundation gives general operating and restricted program grants to organizations in the following categories: K-12 education; health and human service programs that serve youth, underserved populations, and respond to current community needs; arts organizations and cultural institutions that provide educational and community-based programs; organizations in which Schwab employees are actively involved as volunteers; and environmental, conservation, and civic issues. The Foundation has supported HIV/AIDS projects in the past. Eligibility: San Francisco Bay Area, CA, and other areas where Charles Schwab Corporation has offices are given priority for Foundation funding. Grants to state or national organizations will be considered only if programs directly serve the above communities. Deadline: No deadlines. Information: Karen Ens, Community Relations, 101 Montgomery St., 26th Fl., San Francisco, CA 94104, 415-627-8415.

Union Pacific Foundation


Weingart Foundation

Funding Available: N/A. Priority: "Credible" non-profits serving children and youth can get help from the foundation for specific projects and capital costs. Weingart expects applicants to show they are getting substantial financial support from other sources. Eligibility: The foundation makes grants in the Southern California counties of Kern, Los Angeles, Orange, Riverside, San Bernardino, Santa Barbara and Ventura. Non-profits in San Diego and Imperial counties can call the related Weingart-Proce Fund, which is administered by the San Diego Foundation. Deadline: N/A. Information: Weingart Foundation, www.weingartfdn.org, 619-235-2300.
Government Funding Sources

Information about municipal, state and federal grants can be found on the following:

- FEMA/United States Fire Administration: [www.usfa.fema.gov/grants](http://www.usfa.fema.gov/grants)
- Catalog of Federal Domestic Assistance: [www.cfda.gov](http://www.cfda.gov)

U.S. Department of Justice – Primary Program for Law Enforcement


Monitor annual funding opportunities on this Web page!

AEDs

Edward Byrne Memorial Justice Assistance Grant (JAG) Formula Program: Local Solicitation

Catalog of Federal Domestic Assistance (CFDA) #16.804 (for information on Recovery Act funding available through 2011) and #16.738 (for the regular non-Recovery Act funding). The 2010 Recovery Act grant application deadline has passed; however, monitor the Web site for funding available under CFDA #16.738. You can go to CFDA.gov to review the full intent of the legislation behind each of these grant funding opportunities.

Funding Cycle: Winter and Spring (annually)

Specifics: The Edward Byrne Memorial Justice Assistance Grant (JAG) Formula Program is the primary provider of federal criminal justice funding to state and local jurisdictions. JAG funds support all components of the criminal justice system, from multijurisdictional drug and gang task forces to crime prevention and domestic violence programs, courts, corrections, treatment, and justice information-sharing initiatives. JAG-funded projects may address crime through the provision of services directly to individuals and/or communities and by improving the effectiveness and efficiency of criminal justice systems, processes, and procedures.
How a Formula Grant Works and Eligible Applicants: The Bureau of Justice Statistics (BJS) calculates, for each state and territory, a minimum base allocation which, based on the statutory JAG formula, can be enhanced by (1) the state’s share of the national population and (2) the state’s share of the country’s Part 1 violent crime statistics. Once the state funding is calculated, 60% of the allocation is awarded to the state and 40% to eligible units of local government. States also have a variable percentage of the allocation that is required to “pass through” to units of local government. This amount, also calculated by BJS, is based on each state’s crime expenditures. In addition, the formula calculates direct allocations for local governments within each state, based on their share of the total violent crime reported within the state. Local governments that are entitled to at least $10,000 awards may apply directly to Bureau of Justice Assistance for Local JAG grants.

Allowable Activities Include Equipment Purchases: JAG funds may be used for state and local initiatives, technical assistance, training, personnel, equipment, supplies, contractual support, information systems for criminal justice, and criminal justice–related research and evaluation activities that will improve or enhance:

- Law enforcement programs
- Prosecution and court programs
- Prevention and education programs
- Corrections and community corrections programs
- Drug treatment and enforcement programs
- Planning, evaluation, and technology improvement programs
- Crime victim and witness programs (other than compensation)

Tip for Incorporating AEDs into Your Allowable Activities: No JAG funds may be expended outside of the JAG purpose areas. Even within the purpose areas, however, JAG funds may not be used directly or indirectly for security enhancements or equipment for nongovernmental entities not engaged in criminal justice or public safety. Nor may JAG funds be used directly or indirectly to provide for any of the following matters unless the Bureau of Justice Assistance (BJA) certifies that extraordinary and exigent circumstances exist, making them essential to the maintenance of public safety and good order:

- Vehicles (excluding police cruisers), vessels (excluding police boats), or aircraft (excluding police helicopters)
- Luxury items
- Real estate
- Construction projects (other than penal or correctional institutions)
- Any similar matters

The sole purpose for applying for JAG funds should not be for the acquisition of AEDs. However, you can add AEDs when you request funds for your main programs that fall under the Allowable Activities. Implementing a program in any one of these areas requires materials, supplies, and equipment. Adding AEDs to your program’s needs and including
them under the Equipment line item in your budget summary and narrative is allowable. Don’t miss this annual opportunity to apply for JAG funding; it is a definite recurring funding source for purchasing AEDs for your law enforcement agency.

**What Happened to the Local Law Enforcement Block Grants Under JAG?** The JAG Program allows states, tribes, and local governments to support a broad range of activities to prevent and control crime based on their own local needs and conditions. JAG blends the previous Byrne Formula and Local Law Enforcement Block Grant Programs to provide agencies with the flexibility to prioritize and place justice funds where they are needed most.

**How to Contact BJA:** It’s a good idea to contact BJA and get on their notification list for the annual funding cycles. Here is their contact information:

**Bureau of Justice Assistance**
810 Seventh Street NW, Fourth Floor
Washington, DC 20531
Phone: 202-616-6500
Toll-free: 1-866-859-2687
Fax: 202-305-1367
Online email form:
http://bja.ncjrs.gov/app/contactus/contactus.aspx

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**U.S. Department of Justice – Other Programs to Track**

**Grant Program: Weed and Seed Grant Program**
Look up Catalog of Federal Domestic Assistance (CFDA) #16.595 (www.cfda.gov) to review the full intent of the legislation behind this grant funding opportunity.

**Second Chance Act Adult and Juvenile Offender Reentry Demonstration Projects - CFDA #16.812**

The Second Chance Act will help ensure the transition individuals make from prison, jail, or juvenile residential facilities to the community is a safe and successful process. Applicants are limited to state and local government agencies and federally recognized Indian tribes. Applicants must adhere to all of the eligibility and funding requirements of the Second Chance Act. In order to be eligible to apply for funding, the jurisdiction preparing the application must have developed a reentry strategic plan, which includes a detailed implementation schedule as well as extensive evidence of collaboration with key public and
private stakeholders. Applicants must also have established a Reentry Task Force comprised of specific justice system and community representation.

**Note:** Remember, you’ll need to work with your Agency’s community partners (Social Services, Healthcare, Schools, Human Services Providers) to plan and write a comprehensive grant-specific program that just happens to include the need for AEDs in all areas where law enforcement personnel will interact with a high risk public—including juveniles.

The next program is a competition that your state agency must apply for; however, once these funds are in your state, you can contact your Department of Justice agency to inquire about their re-granting process and how your agency can be a partner in regional or local services. If your state does re-grant these funds, you’ll need to check with the state-level contact to make sure that equipment is an allowable cost since the state can deviate from the federal guidelines for allowable costs.

**Title II Formula Grants Program – CFDA #16.540**

This program supports state and local efforts in planning, establishing, operating, coordinating, and evaluating projects directly or through grants and contracts with public and private agencies for the development of more effective education, training, research, prevention, diversion, treatment, and rehabilitation programs in the area of juvenile delinquency and programs to improve the juvenile justice system. The grant awards to states are for three years.

**Note:** At least 66% of Title II funds (unless waived by the State agency) must be expended:

A. Through programs of units of local government or combinations thereof, to the extent such programs are consistent with the State plan;

B. Through programs of local private agencies, to the extent such programs are consistent with the State plan, except that direct funding of any local private agency by a State shall be permitted only if such agency requests such funding after it has applied for and been denied funding by any unit of local government or combination thereof; and

C. To provide funds for programs of Indian tribes that perform law enforcement functions (as determined by the Secretary of the Interior).
Funding

Department of Health and Human Services – Health Resources and Services Administration

Web site: http://ruralhealth.hrsa.gov/funding/aed.htm

Grant Program: Rural Access to Emergency Devices Grant Program

Funding Cycle: In the past, grants have been awarded annually and were made for up to two years. Monies have severely decreased since 2008. Monitor this program closely for 2010 (and beyond) funding availability.

Specifics: The Office of Rural Health Policy's Rural Access to Emergency Devices (RAED) Grant Program provides funding to rural communities to purchase automated external defibrillators (AEDs) and provide training in their use and maintenance. The legislation that created this program states that awards will be made to community partnerships. These partnerships are defined as a consortium of first responders (e.g., EMS, law enforcement, and fire departments) and local for-profit and nonprofit entities that may include, but are not limited to, long-term care facilities, rural health clinics, community health centers, post offices, libraries and other civic centers, athletic facilities, senior citizen and day care facilities, faith-based organizations, and schools without AEDs. An applicant must be part of a statewide, regional, or multicity county consortium or rural community organization applying as a community partnership. Funding preference is given to those community partnerships that are statewide in scope. Each community partnership must have a designated lead applicant as the grantee of record and to act as the fiscal agent for the partnership. To qualify as a statewide community partnership, all eligible counties do not have to be included. However, a state-level office must be the lead applicant. State Emergency Medical Services Offices and State Offices of Rural Health are encouraged to apply as lead applicant.

How to Know if Your Location Qualifies: The Office of Rural Health Policy has issued a new list of areas eligible for Rural Health Grant Programs based on 2000 Census data. You can check your geographic location by reviewing this document:


Tip: If your Department is located in a rural community, use this Web site to find the rural health contact in your state:

http://ruralhealth.hrsa.gov/funding/50sorh.htm

States That are Current Rural Access to Emergency Devices Grantees:
Alaska, Arizona, Delaware, Florida, Iowa, Illinois, Louisiana, New Jersey, Nevada, Pennsylvania, Texas and Utah

Contact your State Department of Public Health to inquire about the re-granting process!
Grant Program: Public Access Defibrillation Demonstration Projects (PADDPs)

Funding Cycle: In the past, grants have been awarded annually and were made for up to three years. *Monitor this program closely for 2010 (and beyond) funding availability.*

Specifics: The Office of Rural Health Policy's (ORHP) PADDP grant program will fund applications that propose to develop and implement innovative, comprehensive, community-based public access defibrillation demonstration projects that: (1) provide cardiopulmonary resuscitation and automated external defibrillation to cardiac arrest victims in **unique settings**; (2) provide training to community members in cardiopulmonary resuscitation and automated external defibrillation; and (3) **maximize community access** to automated external defibrillators (AEDs). The purpose of this grant program is to: “(1) purchase AEDs that have been approved, or cleared for marketing by the Food and Drug Administration; (2) provide basic life training in automated external defibrillator usage through nationally recognized courses; (3) provide information to community members about the public access defibrillation demonstration project to be funded with the grant; (4) provide information to local emergency medical services (EMS) systems regarding the placement of AEDs in the unique settings; and (5) further develop strategies to improve access to AEDs in public places.” To be eligible to receive a grant under this announcement, the applicant must be a political subdivision of a State, a federally recognized Native American Tribe, or a Tribal organization. Applicants are encouraged to form collaborative partnerships that will ensure maximum benefit to the limited funding available through this competition. Though the applicant organization must be a political subdivision of a State, a federally recognized Native American Tribe, or a Tribal organization, **partnerships may be composed of emergency response entities such as training facilities, local emergency responders, fire and rescue departments, police, community hospitals, and non-profit entities and for-profit entities concerned about cardiac arrest survival rates.** Statewide and multistate partnerships do not need to include all counties in the State.
U.S. Department of Health and Human Services – Office of Preparedness and Emergency Operations (OPEO)


Grant Program: Hospital Preparedness Program (HPP)

Funding Cycle: In the past, grants have been awarded annually and were made for up to three years. Monitor this program closely for 2010 (and beyond) continuation grant funding availability.

Specifics: The Hospital Preparedness Program (HPP) enhances the ability of hospitals and health care systems to prepare for and respond to bioterrorism and other public health emergencies. Current program priority areas include interoperable communication systems, bed tracking, personnel management, fatality management planning and hospital evacuation planning. During the past five years HPP funds have also improved bed and personnel surge capacity, decontamination capabilities, isolation capacity, pharmaceutical supplies, training, education, drills and exercises. Hospitals, outpatient facilities, health centers, poison control centers, EMS and other healthcare partners work with the appropriate state or local health department to acquire funding and develop healthcare system preparedness through this program. Funding is distributed directly to the Health Department of the State or political subdivision of a State (cities and counties are considered political subdivisions of States).

Tip: When you write about medical equipment stockpile needs and outcomes, it’s critical to include the need for and plans to acquire and incorporate defibrillators into your surge capacity language.

Agency: U.S. Department of Education – Office of Safe and Drug Free Schools

Web site: http://www2.ed.gov/programs/dvpemergencyresponse/applicant.html

Grant Program: Readiness and Emergency Management for Schools (REMS)
Funding Cycle: In the past, grants have been awarded annually and were made for up to two years. The 2010 grant application was in February. Monitor this program closely for 2010 (and beyond) funding availability.

Specifics: The REMS grant program provides funds to Local Education Agencies (LEAs) to establish an emergency management process that focuses on reviewing and strengthening emergency management plans, within the framework of the four phases of emergency management (Prevention-Mitigation, Preparedness, Response, and Recovery). The program also provides resources to LEAs to provide training for staff on emergency management procedures and requires that LEAs develop comprehensive all-hazards emergency management plans in collaboration with community partners including local law enforcement; public safety, public health, and mental health agencies; and local government.

Can districts use grant funds to buy safety and security equipment? Yes. Applicants may propose to use a small portion of these funds to buy safety and security equipment and technology. However, applicants that propose in their application to use these funds primarily to buy safety and security equipment will NOT score highly on their application, and will decrease their chances of receiving funds. The selection criteria for this competition call for a comprehensive, systematic, coordinated improvement of emergency management plans, and applications that mainly request funds for technology and equipment will not meet those criteria.

Tip: Propose a program that just happens to need public access AEDs throughout your school campus!
State Agencies with Grant Funding Programs for Public Access AEDs

California Office of the Attorney General

Tobacco Settlement Fund


The State of California’s Tobacco Settlement funds are a result of a settlement in November of 1998 between state attorney generals and US tobacco companies. The State receives 50% of the revenues and counties receive 50% of the revenue. Payments will be made to state and local governments for 25 years. In the Tobacco Control Program the funding serves to fill the funding gaps both for the prevention/education services and the stop smoking services for pregnant women. Not only does the funding provide stop smoking services to the general population, it also is the **sole source of funding** providing those services to the general population.

Each unit of local government (Counties have this funding in California) makes grants at their own discretion. For example, in Shasta County, the following grantees received funding to purchase AEDs:

- The American Red Cross received $4,827.67 to purchase AED training equipment and trained 853 students.
- The City of Redding Recreation Department received $3,750 to purchase two AEDs and provide training to over 500 individuals.
- The Happy Valley Fire District received $13,947.69 to purchase AEDs and train over 500 individuals.

**Tip:** Whether you are located in California or another state, call your Attorney General’s office and your County’s Tobacco Fund Administration Office to inquire about using funds from the Tobacco Settlement Fund to purchase public access AEDs.

**States with Legislation Requiring AEDs in Public Access Domains**

Web site to Track Legislation and Funding (if available):

**Nevada** - School districts in a county whose population is 100,000 or more shall ensure that at least one AED is placed in a central location at each high school within the district.
Template

AED Grant Proposal

The target population for this grant proposal is the 907,574 residents of Honolulu County, Hawaii (U.S. Census, 2008 update). Approximately, 15.4% of residents are medically fragile and require some form of nursing home, adult foster, homebound, or respite care. The Sheriff’s Department is called first because the patient in need of immediate transport is often combative and family members seem to accelerate the medical crisis situation. Since our units are already on patrol and can respond quickly, deputies often arrive on the scene before EMS personnel. Often, the patient is so worked up with anxiety and fear, cardiac arrest is in the process and there is no time to wait for the County’s EMS unit to arrive. Alarmingly, Honolulu County deputies cannot wait to begin administering CPR; more alarmingly, our deputies do not have AEDs in their units. Therefore, without any type of protective barrier or electronic life saving device, mouth-to-mouth CPR is started. In the past year alone, 87 responses involved manual CPR; in 20 cases, the patient had AIDS/HIV or herpes simplex or reactivated tuberculosis. In the past three years, 246 responses involved manual CPR; in 49 cases patients had communicable diseases. Yes, our deputies forged ahead putting their own health in harm’s way.

For the past five years, the County experienced one budget cut after another. County offices are now open four days per week instead of five days. Overtime for all deputies has been eliminated. Most recently, the County started requiring all of its employees to contribute to the cost of their health care coverage. Vehicles for the Sheriff’s Department are over 10 years old and constantly in maintenance. Budget line items for equipment have long been eliminated from the Department’s budget. This means there are no internal funds to purchase any of the critically needed equipment including AEDs. For 48 squad cars, there are two ten-year-old AEDs that are outdated and often malfunction (sparking or failing to turn on). It is essential that the Department equip its squad cars with one AED each. The cost for each one is $1,600. We need 48 at a total cost of $76,800. Sadly, the County Commissioners won’t even allow the Sheriff to plead his case before the Finance Committee because of all of the lingering and crippling budget deficit issues.

Service Issues: Honolulu is located in Honolulu County, Hawaii. The Police Department is under the jurisdiction of the Township. According to the U.S. Census Bureau (2007), there are 4,567 residents. Some 12% of residents are between the ages of birth and 5 years old; 6% are ages 6 to 18 years old; 24% are ages 19 to 44 years old; 40% are ages 45 to 64 years old; and 18% are over the age of 65 years old. According to the American Heart Association (study released in 2009), about 34% of people who experience a coronary attack in a given year die from it. The average age for a first attack is 66 for men and 70 for women; people in their 20s and 30s suffer attacks too. The risk of a heart attack climbs for men after age 45 and for women after age 55. The risk is even higher for Hispanics and Blacks. Heart attacks occur roughly every 35 seconds in the United States, and most occur in the morning, a time when the platelets in the blood are especially "sticky" and prone to form clots. Survival odds for people who have had a heart attack keep getting better thanks to advances in
diagnosis, medication, and lifesaving technology. Last year we responded to 94 incidences of cardiac arrests while performing normal law enforcement duties. Regretfully, only 52 of the victims survived. This survival rate is in itself a miracle since the Police Department has no AEDs in squad cars and must call in and wait on an EMS unit from an adjacent county (47 miles away) for cardiac arrest calls. The risk for our officers who must administer manual CPR is high given today’s myriad transmittable disease concerns. Grant funds will enable the County Sheriff’s Department to purchase 48 HeartStart FRx Defibrillators manufactured by Philips Healthcare. The HeartStart FRx offers on-demand CPR Coaching to help the stressed user recall their training. Calm, clear voice instructions are precisely timed to the responder’s actions, guiding the responder every step of the way. At just 3.5 pounds, it is among the smallest and lightest defibrillators.

Capabilities and Features:

• Simplify the rescue of a child with the Infant/Child key. Unique in the industry, the Infant/child key turns the HeartStart FRx into a pediatric defibrillator, tailoring the voice instructions and therapy to the needs of a child. That means just one pad set works for adults, children, and infants, simplifying a stressful rescue.

• Rugged. Designed for real-world use, the HeartStart FRx was built to surpass rigorous testing requirements: jetting water, crushing loads up to 500 pounds and a one-meter drop onto concrete.

• Ready when needed. Every HeartStart FRx goes through a 120 point test before it leaves the factory. On the job, the HeartStart FRx automatically conducts self-tests every single day, not just weekly. It performs over 85 different tests in all. Even the pads are tested for readiness.

• Effective. The electric medicine delivered by the HeartStart FRx is the world leader in automated external defibrillators (AEDs), with more than 40 studies on its effectiveness. Philips’ high-current/low energy therapy ensures a potent defibrillation dose, while at the same time, minimizing side effects that are harmful to a fragile heart. So the HeartStart FRx can deliver its most powerful therapy from the very first shock. There’s no need to hold back.

• Make the most of CPR. Recent studies have shown that CPR is even more vital to survival than previously realized. Yet its benefits dissipate in seconds. Delivering a shock quickly after chest compressions is critical. The HeartStart FRx’s Quick Shock feature delivers therapy in just 8 seconds (typical) after chest compressions. Other devices can take 2 or 3 times that, reducing the likelihood of shock success, and potentially, survival.

• Give your early defibrillation program the best chance for success. With HeartStart Essentials AED Services, Philips experts can draw on a wealth of experience to help you get your program started on the right foot, with pre-implementation consulting and site assessments. We can help manage your everyday needs, including medical direction from a licensed physician, AED/CPR training, web-based program management, and case management software.
The purchase will be used to fully equip 48 Sheriff’s Department squad cars bringing the Department to full AED capacity. The grant funding will alleviate the problem of outdated AEDs and a limited supply of life-saving equipment.

It’s critical that our deputies begin life-saving efforts first and then notify EMS once the patient is stabilized. Deputies are typically in their zones, well-dispersed and only minutes away from a 911 call to provide immediate help. This is a priority as cardiac patients have a four-minute window from the time of cardiac arrest until brain cells begin to die. Defibrillators in every squad car will allow deputies to start using life-saving treatment on arrival at the scene. In addition, AEDs will reduce the risk of transmission of communicable diseases which is a public health risk when manual CPR is administered.

The Department has multiple levels of community, regional and state-level law enforcement and other partners. Officer training and administrative oversight is provided the Arizona Department of Public Services. We are also the lead agency in the County’s Immigration and Customs Enforcement (ICE) Unit. ICE brings together 14 municipal law enforcement agencies for joint operations, planning, and resource sharing. In addition, our Department assigns training officers as instructors for the regional Calvin B. Klein Training Academy in Prescott Valley. Deputies also help patrol campuses at six county school districts that have a total of 3,295 students enrolled. Collaborative efforts have included participating in the Junior Police Academy Program, Public Safety Day, Police/Fire Fundraising Basketball Tournaments, and assisting the Sheriff’s Auxiliary (spouses of officers who volunteer to raise funds for the Department) in selling raffle tickets and raising over $5,000 annually for bulletproof vests and in-car video cameras.

According to recent research (Law Enforcement Newsletter, 2010), 85.6% of law enforcement agencies with an AED program believe it has been one of the main reasons for improving their Department’s image among the public they serve. Research findings support the benefits for the residents and the communities that our Department serves:

- Cities that equip police with automated external defibrillators (AEDs) are finding that people who suffer sudden cardiac arrest have a better chance of surviving (Health-Net, 2010).
- Ability to cut response time to sudden cardiac arrest victims by almost three minutes. More than 95 percent of these people die because life-saving defibrillators arrive on the scene too late, if at all. Medical experts say those statistics could be improved if more law enforcement personnel, including sheriff deputies, state troopers, correctional officers, treasury police, and SWAT teams were trained to recognize and respond in a timely manner with cardiopulmonary resuscitation (CPR) and to use AEDs (American Heart Association, 2010).

Our community and regional partners benefit from our Department’s ability to meet and exceed its ability to protect and serve its residents. The goodwill generated by having functional and reliable life-saving equipment in every squad car will result in an improved community-wide image for the Department and its partners.
The County’s Board of Commissioners has been working aggressively to reduce operational costs for non-essential services. The Finance Committee has recommended cutting non-essential services from five days per week to three (Tuesday-Wednesday-Thursday). In addition, rather than being laid off, County workers have agreed to forego a cost of living salary increase for the next three years. These two moves will eventually save the County $2.4 million next year; however, this cost savings will be used to reduce the deficit. In future years, with prudent spending and careful financial monitoring, the County expects to be operating without a deficit. After a public hearing on Departmental expenditures and equipment purchasing needs, the County Board of Commissioners have agreed that equipping the Department with life-saving equipment, like AEDs, is essential for public safety.

This show of support for the Department was further strengthened when one of our deputies responded to a call to one of our longest serving County Commissioner’s home. The Commissioner’s mother-in-law (80-year old medically fragile female) was in full cardiac arrest. While the Commissioner and his wife stood by, our Deputy started manual CPR. After witnessing this fateful event (resulting in death), the need for AEDs suddenly become more important for incorporating into future budget line items.
Sample

Sample Grant Template
Public Access Defibrillation

Who is your target population (fragile, elderly, community-at-large, etc.) that you cannot serve efficiently and effectively now because of the shortage or absence of AEDs?

What are the demographics of your target population (age ranges, total population for each age range, gender, ethnicity, limited English-speaking, hearing impaired, visually impaired, and homebound, etc.)?

What barriers (service issues) have you encountered in trying to serve your target population?

How many times in the past year—and for the three previous years—have there been cardiac arrests in public access domains where a bystander had to administer CPR manually while waiting for your local EMS unit to arrive? What were the risks to the persons administering and receiving CPR?

The target population for this grant proposal is the 22,563 public school children in 47 schools, 1,458 teachers, and 497 support staff of the Moore County, Georgia (Moore County Intermediate School District (2009) Moore County Educational Directory 2009-10). Middle school children comprise 19.6% (4,469) of enrollment; 35.5% (8,087) of students are in high school. Approximately, 7.8% (1,775) of students require special education services. The nine middle schools and the nine high schools each have an average of 4 sports teams with cheerleader squads. There are an average of four school-sponsored or school-approved events (including athletics) per school on site each week. There are also school-sponsored athletic events on sites other than a school facility. A recent Harvard study (March, 2010) showed that about 2% of students have heart problems, usually undetected. Extrapolated, that means as many as 452 of the students could have a potentially life-threatening heart conditions. In addition, it has been shown that athletics increase the likelihood of cardiac events. It is imperative to have AED equipment available and trained personal to operate it. Three years ago, there were 3 life-threatening incidents at athletic events. In the last year, there were two cardiac events at games. Fortunately, each time, the Sheriff’s department arrived before the EMS personnel with the basic tools to sustain the life of the victims. However, this year, because of the extreme County budget cuts, officers are much less likely to be available. It is imperative that each school have at least one AED and at least one staff member who is trained to use it.
The narrative must answer the following questions about funding problems:

- Why can’t you use internal funds to purchase AEDs?
- What is happening with your budget (cuts, layoffs, etc.) because of the local, regional, state, and national economies?
- If you now have AEDs, how old are they and are they in need of replacement? What is the total cost to replace the equipment and how is this cost a barrier to purchasing new equipment?
- If you are purchasing critically needed equipment for the first time, why don’t you already have it? What type of equipment is needed (detailed listing) and what is the cost per unit? Also include the total cost for all needed equipment.

For the past five years, the County experienced one budget cut after another. As a result, the City Parks and Recreation Department offices are now only open four days per week instead of five days. Three park maintenance staff positions were eliminated and overtime for all park employees has been eliminated. Most recently, the County started requiring all of its employees to contribute to the cost of their health care coverage. Vehicles for the City Parks and Recreation Department are over 7 years old and their heavy use means that several are constantly in maintenance. Budget line items for equipment have long been eliminated from the Department’s budget. This means there are no internal funds to purchase any of the critically needed equipment, including AEDs. To cover 3 county parks, 5 picnic grounds, and the county fairgrounds (which contain several buildings for community use) there is only one ten-year-old AED that is outdated and often malfunctions (sparking or failing to turn on). Cuts in the Sheriff’s department mean that officers can no longer be relied on to appear as first responders. It is essential that the Department equip its own 6 vehicles with one AED each. The cost for each one is $1,600. We need 6 at a total cost of $9,600. Sadly, the County Commissioners won’t even allow the Parks and Recreation Manager to plead her case before the Finance Committee because of all of the lingering and crippling budget deficit issues.

Here’s a sample paragraph of how to incorporate convincing statistics into gloom, doom, drama, and trauma-oriented narrative language:

**Service Issues:** Chadwick Township is located in Monroe County, Michigan. The Monroe County Hospital is under the jurisdiction of the Township. According to the U.S. Census Bureau (2007), there are 4,567 residents. Some 12% of residents are between the ages of birth and 5 years old; 6% are ages 6 to 18 years old; 24% are ages 19 to 44 years old; 40% are ages 45 to 64 years old; and 18% are over the age of 65 years old. According to the
Grant funds will enable the Buena Vista Community Hospital to purchase 18 HeartStart FRx Defibrillators manufactured by Philips Healthcare and install them in 18 hospital departments. The HeartStart FRx offers on-demand CPR Coaching to help the stressed user recall their training. Calm, clear voice instructions are precisely timed to the responder’s actions, guiding the responder every step of the way. At just 3.5 pounds, it is among the smallest and lightest defibrillators.

Here is a short sample paragraph:

American Heart Association (study released in 2009), about 34% of people who experience a coronary attack in a given year die from it. While the average age for a first attack is 66 for men and 70 for women, people in their 20s and 30s suffer attacks too. The risk of a heart attack climbs for men after age 45 and for women after age 55. The risk is even higher for Hispanics and Blacks. Heart attacks occur roughly every 35 seconds in the United States, and most occur in the morning, a time when the platelets in the blood are especially “sticky” and prone to form clots. Survival odds for people who have had a heart attack keep getting better thanks to advances in diagnosis, medication, and lifesaving technology. Last year there were over 125 incidences of cardiac arrests in county residents. Regretfully, only 84 of the victims survived. This survival rate is in itself a miracle since the hospital has only a single 10-year-old AED in the emergency room.

Capabilities and Features:

**Simplifies the rescue of a child with the Infant/Child key.** Unique in the industry, the Infant/Child key turns the HeartStart FRx into a pediatric defibrillator, tailoring the voice instructions and therapy to the needs of a child. That means just one pad set works for adults, children, and infants, simplifying a stressful rescue.

**Rugged.** Designed for real-world use, the HeartStart FRx was built to surpass rigorous testing requirements: jetting water, crushing loads up to 500 pounds and a one-meter drop onto concrete.

**Ready when needed.** Every HeartStart FRx goes through a 120-point test before it leaves the factory. On the job, the HeartStart FRx automatically conducts self-tests every single day, not just weekly. It performs over 85 different tests in all. Even the pads are tested for readiness.

**Effective.** The electric medicine delivered by the HeartStart FRx is the world leader in automated external defibrillators (AEDs), with more than 40 studies on its effectiveness. Philips’ high-current/low energy therapy ensures a potent defibrillation dose, while at the
same time, minimizing side effects that are harmful to a fragile heart. So the HeartStart FRx can deliver its most powerful therapy from the very first shock. There’s no need to hold back.

**Makes the most of CPR.** Recent studies have shown that CPR is even more vital to survival than previously realized.¹²³⁴ Yet its benefits dissipate in seconds. Delivering a shock quickly after chest compressions is critical. The HeartStart FRx’s Quick Shock feature delivers therapy in just 8 seconds (typical) after chest compressions. Other devices can take 2 or 3 times that, reducing the likelihood of shock success, and potentially, survival.

**Gives your early defibrillation program the best chance for success.** With HeartStart Essentials AED Services, Philips experts can draw on a wealth of experience to help you get your program started on the right foot, with pre-implementation consulting and site assessments. We can help manage your everyday needs, including medical direction from a licensed physician, AED/CPR training, Web-based program management, and case management software.

**Footnotes:**

The purchase will be used to fully equip 18 hospital departments to have access to AEDs in high-risk areas where patients are treated or tested. The grant funding will alleviate the problem of outdated AEDs and a limited supply of life-saving equipment throughout the hospital.

The narrative must answer the following questions about how the new equipment will be used:

👩‍⚕️ How will you use the AEDs to increase your responding staff members’ CPR capability prior to the EMS unit’s arrival?  
👩‍⚕️ How will you use the equipment to decrease the chance of a public health incident when manual CPR must be performed?
It’s critical that our staff begins life-saving efforts first and then notifies EMS once the patient is stabilized. The two trained staff members typically work in different areas of the college campus and can be quickly summoned to be first responders. This is a priority as cardiac patients have a four-minute window from the time of cardiac arrest until brain cells begin to die. Defibrillators in every building will allow staff to get to the scene and start using live-saving treatment without having to lose time by bringing equipment with them. In addition, AEDs will reduce the risk of transmission of communicable diseases, which is a public health risk when manual CPR is administered.

Description of the Cost-Benefit for the Possible Grant Award

- What partnerships and collaborative efforts will this project initiate or support?
- How will awarding this grant benefit the members of your organization, region, or community?
- What steps have you taken to keep the cost down while adequately addressing the problem or risk?

Partnerships and Collaborative Efforts

The narrative must answer the following questions about your organization’s partnerships and collaborative efforts:

확 Who are your community, regional, and state-level public access entities (hospitals, airports, ports, parks, schools, universities and colleges, public government buildings, etc.) and other partners (units of government; fundraising auxiliary arms of your police department; social and human services organizations; community colleges and universities; foundations; corporations and mom and pop businesses; membership organizations, including chambers of commerce; and volunteers)?

확 What types of collaborative efforts has your organization been involved in?

확 What activities has each partner been involved in (projects, special events, fundraising, contributions, etc.)?
Here is a short sample paragraph:

The Department has multiple levels of community and regional agency involvement. We partner closely with law enforcement to police the recreation areas. We train jointly with local administrative departments and law enforcement as first responders. We are the lead agency in the 10-day-long County Fair, which requires coordination of law enforcement, community organizations, vendors, and state fair representatives. Two years ago we developed a volunteer program that collects trash and removes graffiti once a month in all the parks and recreation areas administered by the Department. That same volunteer program has helped to alleviate the extreme staff shortage. A by-product of the volunteer program is that there has been a decrease in the amount of vandalism.

**Benefits of the Grant Award For Your Stakeholders**

The narrative must answer the following questions about the benefits of the pending grant award to your stakeholders:

- What are the benefits to the residents that you serve?
- What are the benefits to the communities that you serve?
- What are the benefits to your community partners?

Heart attack (acute myocardial infarction or AMI) outcome is often chosen as one of the first indicators to be reported when evaluating a hospital because heart attacks are important, common, and deadly. Hospitals use the outcome statistic to evaluate and improve care. Insurance companies and other providers use outcome as a gauge of what hospitals are best to contract with. Patients also use reports of outcome to make their decisions. Every year approximately 40,000 heart attack patients are admitted to 400 state hospitals. More than 5,000 of these persons die.

In 2000, introducing AEDs to hospitals was a novel idea (Critical Care Nurse. 2005; 25: 25-33). Since then, hospitals have continued to acquire AEDs as an aid to timely and efficient treatment. There is a 6% to 9% early mortality from heart attack for those who survive long enough to reach the hospital. Careful monitoring and efficient cardiac care are still necessary once the patient reaches the hospital. Our community and regional residents benefit from our hospital’s ability to meet and exceed its ability to serve its residents. The goodwill generated by having functional and reliable life-saving equipment in every patient unit will result in an improved community-wide image for the Hospital and its providers.
Steps Taken to Reduce Costs and Address the Problem

The narrative must answer the following question about the measures your organization will take to reduce costs and address the problem:

What steps are your administrators or governing body taking to cut operational costs and allocate more funding in the future for critically needed equipment?

Here is a short sample paragraph:

The County’s Board of Commissioners has been working aggressively to reduce operational costs for non-essential services. The Finance Committee has recommended cutting non-essential services from five days per week to three (Tuesday-Wednesday-Thursday). In addition, rather than being laid off, County workers have agreed to forego a cost of living salary increase for the next three years. These two moves will eventually save the County $2.4 million next year; however, this cost savings will be used to reduce the deficit. In future years, with prudent spending and careful financial monitoring, the County expects to be operating without a deficit. After a public hearing on Departmental expenditures and equipment purchasing needs, the County Board of Commissioners have agreed that equipping the City Parks and Recreation Department with life-saving equipment, like AEDs, is essential for public safety. This show of support for the Department was further strengthened when one of our park staff responded to a complaint of chest pain while one of our longest serving County Commissioners was fishing at the county reservoir. Actually, the Commissioner’s 80-year old father-in-law was in full cardiac arrest. While the Commissioner and his wife stood by, the Park Ranger started manual CPR. After witnessing this fateful event (resulting in death), the need for AEDs suddenly become more important for incorporating into future budget line items.

NOTE: This may be your last chance to convince potential funders of the worthiness of your grant request! Don’t be afraid to add an actual event where your staff had no AEDS and the outcome resulted in the loss of a life.
Viewing a Grant Proposal for Public Access AEDs

**Wisconsin State University:** Wisconsin State University has provided an excellent example of a grant proposal written by their Public Safety Department requesting funds for AEDs. While the products requested were not Philips Healthcare brand, the proposal language and format is a starting point for those who are new to grant writing. The Web site for the sample proposal is:


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Getting a Copy of a Funded Federal Grant Application for AEDs

Finding Internet links for federal grant applications requesting AEDs that have been funded is like looking for needles in a haystack—little, if any, return for your time. However, you can write a letter to any federal agency (like the agencies listed in the Funding Resources section of this Toolkit) and request copies of funded grant applications. The key to being successful in this endeavor and expecting a timely response from the federal agencies is that you must cite the Freedom of Information Act (FOIA) in your letter. This link will give you more information about how to make a request using the FOIA:


When you make a FOIA request, you must describe the records that you seek as clearly and specifically as possible and comply with the agency’s regulations for making requests. If the agency cannot identify and locate records that you have requested with a reasonable amount of effort, it will not be able to assist you. All federal agencies strive to handle all FOIA requests in a customer-friendly fashion, in accordance with the FOIA.

Here is an example:
To: U.S. Department of Health and Human Services – Health Resources and Services Administration

From: Harry Smith, Director, Boscobel Area Hospital – Boscobel, Wisconsin (our mailing address is at the top of this letter)

Regarding: Freedom of Information Act Request

Request: Under the Freedom of Information Act and on behalf of Boscobel Area Hospital, I am requesting one copy each of at least three recent federal grants funded under the Public Access Defibrillation Demonstration Project Grant Program. The CFDA for this Grant Program is 93.259. If there is a charge for print copies, please contact me as soon as possible to arrange for payment of any fee. Please mail the grant application examples to:

Harry Smith, Director
Boscobel Area Hospital
1290 N. Calumet Street
Boscobel, Wisconsin 99999

I can be reached at 555-555-1212 or by email at hsmith@BAH.org

Thank you, in advance, for expediting this Freedom of Information Act request.

Note: Under the FOIA, federal agencies are generally required to respond to your request within 20 working days of receipt (excluding Saturdays, Sundays, and federal holidays). If you have not received a response by the end of that time (allowing for mailing time), you may contact the agency to ask about the status of your request. Agencies often need more time to find the records, examine them, possibly consult with other agencies or components within the same agency, decide whether to disclose all of the information requested, and prepare the records for release to you. Agencies may extend this 20-day period for up to 10 more working days, with written notice to you.
Hints, Tips, and Tricks for Fast Fundraising

Get the school administration involved. The more involvement from the school, the more fun and successful the fund raising event will be!

Get the students excited!!!

• Encourage students to customize their personal page, adding images and themes.

• Set a “Goal Date”, the date by which the school wants to acquire the first/additional AED. If you do, this will be met with some kind of reward.

• Have an assembly to raise awareness. Explain cardiac arrest and about AEDs as well as how the fundraiser is going to work.

• Show YouTube videos in class to raise awareness.

• Show “How to use” videos:

• Have classes compete against each other as “teams”. Top however many classes get rewards.

• Have individuals compete against each other and award prizes for top participants.

• Ask other companies for sponsorships to support prizes/rewards.

Create an actual event to center the fundraising around. This can be a walk-a-thon, read-a-thon, healthy-eating-a-thon, or any other event. This can combine the school’s educational and health goals with safety measures. Students can get pledges based on the number of miles they walk, pages they read, or vegetables they eat, etc.
Reward Ideas

Free:

• Recess time
• “free time”
• Extra credit
• Water-balloon fight
• Game day/hour
• Movie day

Top-earning student gets to be principal for the day

Fun assembly:
• Play/skit/show
• Teacher/student dance-off
• Teacher vs students basketball game

Not Free:

• Sticker chart: ie. For every dollar you raise, put a sticker on the chart. After the chart is full, you get a reward (this would be a good visual for younger kids)

• Prize box: this would create a sense of urgency as the box would be filled with different kinds of prizes, and the first person to reach their goal would get the best pick.

• T-shirts
• Unique/cool/colorful pencils/pens/notebooks
• Pizza party
• Ice cream/ice cream cake party
• Gift certificates
• Carnival day
• Field trip or individual tickets
• Nintendo Wii
• Nintendo DS
• Play station

• X-box
• Game boy
• Limo ride
• Hypnotist
• Bikes
• Video games
• Computer games
• Remote-control toy car/truck
• DVD’s
• Mp3 player/iPod
• Dunking tank for teacher/principal
Sudden Cardiac Arrest claims an estimated 325,000 lives each year in the United States, more than breast cancer, prostate cancer, hand guns, automobile accidents and household fires combined. Every two minutes, another life is lost. The Sudden Cardiac Arrest Association was founded to change these alarming statistics. Our mission is to prevent loss of life from SCA. Through your generosity and support, we can succeed.

Donate Online
To access our secure online form to make a donation with a credit card, visit our website at www.suddencardiacarrest.org

All transactions conducted on our website are encrypted using a secure server to protect your privacy.

Donate by Mail
If you wish to mail a donation to the SCAA, make your check payable to the Sudden Cardiac Arrest Association, and mail it to:

Sudden Cardiac Arrest Association
1250 Connecticut Ave NW Ste. 800
Washington, DC 20036

If you would like to make a donation to one of SCAA's chapters or affiliates, please visit the chapters/affiliates page of our website.

Matching Gift Information
Many companies have matching gift programs to encourage employees to donate to charitable organizations. Most of these programs match your contribution dollar for dollar and some will even double or triple the amount of your gift. If your employer has a matching gift program, SCAA will help you facilitate the paperwork.

Estate Planning - Legacies
Remember SCAA in your will. Bequests are greatly appreciated. For more information, please contact SCAA at 866-972-SCAA (7222).

The Sudden Cardiac Arrest Association is a 501(c)3 nonprofit charity. Your donation is tax deductible to the full extent of the law.